



PRO.M.I.S.
Programma Mattone Internazionale Salute

FIRST RSCN EVENT

Transforming the challenge of an ageing population into an opportunity.

The experience of the European Regions

23-24 march - Rome

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A) PMI e ProMIS: an Italian good practice

- Mattone Internazionale Project (PMI) – years: 2011-2016 (April)
- Mattone Internazionale Salute Programme (ProMIS) – institutionalized project (1[^] deadline: April the 30th 2019)



WHY THE PMI WAS BORN?

- ✓ The aim was to guarantee a permanent and qualified participation of Italy within European and International institutions and an appropriate participation in defining and implementing European policies processes while taking into account the challenges the European Health Systems are facing
- ✓ The importance of bringing the Italian Health System (SSN) in the framework of the wider European context in order to contribute both to the top-down and to the bottom up phase through a common position shared by the Italian Regions
- ✓ The need is to increasing the management efficiency and implementing the services quality by the **international debate** in order to contribute both to the top-down and to the bottom up phase through a common position shared by the Italian Regions



- ✓ The globalization of markets and research needs a global approach in order to face the health system issues
- ✓ The know-how promotion and the best practice dissemination are essential in the framework of decentralised cooperation concerning health issues
- ✓ The need to promote the Italian participation to the **European fundings** and the **International Agencies opportunities**

Its «mission» was to bringing the Health system and policies of the Italian regions in Europe and Europe in the Health systems of the Italian Regions



WHAT THE PMI HAVE DONE IN 5 YEARS?

- ✓ **Educational and information activities** addressed to Ministry organizations, Italian Regions, local social-health authorities, hospitals as well as other stakeholders involved in health topics, in order to **promote the dissemination of EU policies and opportunities to access EU financed programs in the framework of health, research and innovation** in the national territory.
- ✓ Implementation of specific mechanisms for the **promotion and participation of all qualified stakeholders to European and International health policies**



OUTCOMES OF THE PMI?

- ✓ It has been at the core of a system of partnerships and networks
- ✓ It promoted international research activities in the public health field
- ✓ It responded to the way of working at the basis of the EU planning
- ✓ It fostered the capacity building process
- ✓ It promoted the experimentation and implementation of new organizational models
- ✓ It involved the different actors of the National Healthcare System, while increasing their role within the institutional levels
- ✓ It allowed the dissemination of several methodologies concerning projects, the development of proposals for supra-regional interest and the dissemination of results
- ✓ It represented an innovative governance method for supra-regional interest, aimed at accessing the European direct and indirect funds



WHY THE PROMIS WAS BORN

The impact analysis of the whole activities showed the positive influence on the internationalisation of the National Healthcare System (SSN) policies. It also highlighted that their consolidation was necessary, notably through an **institutionalisation process, within a permanent structure.**

1. Constitution of a sub-group composed of representatives of Italian Regions / Autonomous Provinces which was appointed during the Health Committee session of 2015, march the 4th;
2. PMI extension within 2015, december the 31st;
3. Draft proposal in order to formally establish the PMI – document approved during the Health Committee session of 2015, July the 29th.



**So it was born the new Mattone Internazionale Salute Programme -
ProMIS:**

***THE NEW PROGRAMME IN SUPPORT OF THE ITALIAN REGIONAL
HEALTHCARE SYSTEMS
IN THE PARTICIPATION TO FUNDING PROGRAMMES TO EUROPEAN
NETWORK IN THE HEALTHCARE AND SOCIAL FIELD***



PROMIS ACTIVITIES (1):

<i>Activities</i>	<i>Description</i>
Priorities and programming analysis	Benchmarking of national, regional and local priorities; Drafting of the operational multiannual programme for the internationalization and the executive annual programme
Regional network coordination	Sharing priorities; Programming of activities; Monitoring
Cross-cutting activities in liaison with other policies	Analysis of common interests for European projects in the health sector; promotion of joint interventions /policies
Information and communications activities	Website/App; Newsletter; Database of financed projects; Infodays; Workshops; Events organized by the Regions according to their priorities; Activities aimed at facilitating the involvement of European experts/professionals

PROMIS ACTIVITIES(2):

<i>Activities</i>	<i>Description</i>
Support to the participation in the European processes	<p>Link between Permanent national/regional Representations based in Brussels, and with the European and International institutions</p> <p>Consultations</p> <p>Coordinated participation in networks, workshops and European initiatives in general</p>
Support to financing opportunities	<p>Workshops on project management activities, in collaboration with regional experts and ad hoc tutors</p>
Monitoring and evaluation	<p>Definition of indicators;</p> <p>Systematic registration of performances</p> <p>Reporting</p>

GLI ATTORI/GESTORI DEL PROMIS (2):

<i>Institutions</i>	<i>Description</i>
Health Commission – The Conference of the Regions and Autonomous Provinces	21 regional representatives (all Regions have a seat) appointed by the Regional Health Ministers
Ministry of Health	Cabinet office Directorate-General of food hygiene, safety and nutrition. Directorate-General of Communication and of European and International Relations. Directorate-General of research and innovation in Health Directorate-General of Health planning
Other stakeholders	Ministry of Labour; Ministry of Education, University and Research; National Agency for Health; Ministry of Cohesion; European Commission; etc.

B) PMI/ProMIS in the EIP-AHA framework



PMI: activities undertaken

- ✓ Promotion of comparison opportunities among the Italian Regions about themes regarding the active and healthy ageing
- ✓ Organization of workshops, conferences and promotion of European calls on the topics
- ✓ Connection with the communitarian institutions, granting the participation of a representative of the European Commission and/or the European networks to the specific events where the funding strategies and/or programs aimed at supporting projects on ageing are explained.
- ✓ **Develop of preparatory activities to help the Regions apply to the call for the Reference Sites and for the commitments, thus making the Italian Regions compete at their best with the other European Regions**



PMI: events organized

- ✓ **30.11.2012**  Rome – Workshop «*The role of the Regions in the future European Partnership for active and healthy ageing*»
- ✓ **07.01.2013**  Rome - Infoday «*European Health Programme (2008-2013) Call 2013*»
- ✓ **04.09.2013**  Bari – Workshop «*EIP on AHA Regional Awareness Event / Innovative Procurement*»
- ✓ **17.10.2014**  Rome – Workshop «*EIP-AHA Workshop on nutrition*»
- ✓ **27.10.2014**  Salerno - Workshop «*Using ICT for integrating health care*»
- ✓ **20.05.2015**  Rome – Workshop «*Frailty Management and optimization through EIP-AHA: early diagnosis, screening and frailty management*»
- ✓ **16.03.2016**  Rome – Infoday «*Call EIP-AHA 2016. Opportunities, experiences and outcomes reached by the Italian Reference Sites*»



ProMIS: activities

- **Activation of a national direction**(steering committee and operational plan)
- **Sharing of best practices and experiences** (database of governance actions)
- **Information and educational activities about the tools/instruments to activate regional, national and international pathways** (communications and instruments)
- **Regions support** for applying to European calls

ProMIS: tools

- **Informative Days** on active and healthy ageing issues
- **Thematic workshops** with the constitution of working groups
- **Website section** titled: «*Subproject for supporting the Italian Reference Sites on Ageing issue*»
- **Repository of commitments**, commitments list submitted by Italian Regions, in the framework of EIP-AHA I and II call
- **European projects Database**, European and International projects portfolio of Italian Regions, Social-Health authorities and IRCCS (Scientific Institute for Research, Hospitalisation and Health Care), funded by the 2007-2013 and 2014-2020 (*in progress*) programmings
- **List of the European calls section** where monitoring the funding opportunities
- **ProMIS News**: the monthly newsletter where finding European and Italian news, update information on European health policies, events and calls



Italian Regions awarded as Referent Sites

1° call – 2012

32 Reference Site In Europe

5 Reference Site in Italy

- 1 Campania
- 2 Emilia Romagna
- 3 Friuli Venezia Giulia
- 4 Liguria
- 5 Piedmont

2° call – 2016

74 Reference Site In Europe

12 Reference Site in Italy

- 1 Campania
- 2 Emilia Romagna
- 3 Friuli Venezia Giulia
- 4 Lazio
- 5 Liguria
- 6 Lombardia
- 7 Piedmont
- 8 Puglia
- 9 Autonomous Province of Trento
- 10 Province of Bergamo
- 11 Tuscany
- 12 Veneto



C) Presentation of the «EIP-AHA Italia» (document finalized last March the 15th 2017)

Objective: Showing the snapshot of the recent situation concerning the Italian RSs and their networking activities (ProMIS)

Timing: finalized

<http://www.promisalute.it/servizi/Menu/dinamica.aspx?idSezione=20209&idArea=21574&idCat=21574&ID=21574&TipoElemento=area>

Index: 1) goals and EIP-AHA action plan; 2) Italian scenario and presentation of Italian RSs; 3) EC instruments supporting the RSs; 4) The PMI and ProMIS support

Authors: RSs of the ProMIS network



D) Presentation of the «Organisation Methodology for the Italian Reference Sites» (still in draft)

Goal: investigating the Italian RSs' organisation systems in order to describe modalities, tools and managing structure for defining a «model» and evaluating its effectiveness in terms of quality and quantity

Timing: within the end of June

Indicative index: 1) organization; 2) strategies – programming and financial resources allocation; 3) instruments; 4) collaboration with EU and Italian RSs; 5) strengths and weaknesses; 6) challenges

Authors: RSs of the ProMIS network



DATA PREVIEW ...



	RS description / title
1	Federico II University Hospital – EIP-AHA, Campania Reference Site
2	Regione Emilia Romagna , regional agency for health and social care
3	Friuli Venezia Giulia Region
4	Department of Epidemiology, ASL Roma 1, Lazio Regional Health Service
5	Liguria Region
6	Lombardia Region
7	Wealth and Innovation against aging Frailties and Illnes (WI FI), Puglia Region
8	Piemonte Region
9	Toscana Reference Site
10	Autonomous Province of Trento
11	Arsenà.it - Veneto Region



Is there a Regional mandate / decree or other official document supporting the RS?		
1	Yes	Resolution n. 622/2012
2	Yes	2 Regional Decisions (DGRs 1109/2012 and 1656/2013)
3	Yes	Regional Law nr. 22, 2014
4	Yes	Waiting for approval of Decision Document of the Regional Government
5	Yes	Under preparation
6	Yes	2 Regional Decisions (DGRs X/5997/2016 and X/1042/2013)
7	Yes	Regional Resolution nr. 467/2016
8	Yes	Regional Decree n. 30-2567/2015
9	Yes	Under preparation
10	Yes	Under preparation
11	No	

Staff composition and personnel involved in RS

1	Under construction	Programming Manager, ProMIS Referent, person from regional ministry of ERDF, one person form Health System
2	Yes	Director of the regional agency and 3 persons of staff
3	Yes	Central Directorate for health, Area Science Park and Insititute Rittmeyer
4	Multidiscipl.	Medical doctors, biologists, pharmacists, statisticians, mathematicians and analysts, supported by librarians, IT experts and graphical and web-designers
5	Yes	Regional Sector for Strategic Development, Regional Health Agency, Hospital
6	Yes	Director of DG welfare and staff
7	Yes	Management skills related to Economic Development Reg. Dept., Health Reg. Dept., Reg. Health Agency and Innova Puglia
8	Yes	Member of the Reg. Health Directorate, IRES Piemonte, other Regional Departments and University
9	Yes	1 coordinator, 1 administrative support, 3 scientific advisors at regional level, a representative for each member of the RS
10		1 person as general coordinator, 1 person as scientific coordinator, a person as responsible of organizational secretary, 1 responsible for each action (12)
11	Yes	Arsenàl.it staff



Other offices supporting the RS underlining the training requirement needed		
1	Yes	Regional Division for health Innovation; 1 University; 1 school Medicine
2	NA	
3	NA	
4	Yes	The Regional Directorate for Health and Social Policies supports the RS
5	Yes	Regional Social Affairs Department, Environment Department, ICT Department
6	Yes	Lombardia informatica (public capital service company)
7	No	
8	Yes	Regional training services
9	Yes	Communication regional office, EU liaison office in Brussels
10	Yes	Department of Health and social solidarity, Innovation and Research Office, Social Service Policy, Division for European Affairs, EU Liaison Office in Bruxelles of the Autonomous Province of Trento, Bruno Kessler Foundation, Local Healthcare Company (APSS), University of Trento (DISI)
11	No	

What organisations represent the Quadruple Helix Model in the RS?

1	Public health, Campania Regional Health Authority, Education sector, Municipalities, Private stakeholders (NGO, industries)
2	University, organisation responsible for technology transfert, civil society
3	Regional Cluster in «Smart Health» (medical centre, local network of the National Technological Cluster for living Enviroments
4	Gov/Health/Care; Academic; Industry/Private; Civil Society
5	Regional Departments, Hospital, Academic, Research Polo, Chamber of commerce
6	Local Authorities, companies, universitiesm research centres, citizens and patients. Lombardia informatica
7	The RS applies strategies and management tools based on the model as well living labs
8	Gov/Health/Care, Academia, Industry, Civil Society
9	Gov/Health/Care; Academic; Industry/Private; Civil Society
10	Gov/Health/Care; Academic; Industry/Private; Civil Society
11	Universities, Research Centres, ICT providers, Citizens, Users associations



Indicate which Strategies have been developed for the RS

	Older Persons	target populations with a lifecourse approach	Innovation	Research and Development	Smart Specialisation	eHealth	Procurement /Innovative Procurement	Other
1	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
2	Yes	Yes	Yes	Yes	Yes	Yes	No	No
3	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
4	Yes	Yes	Partly	Yes	No	No	No	No
5	Yes	No	Yes	Yes	Yes	Yes	No	No
6	Yes	Yes	Yes	Yes	Yes	Yes	No	No
7	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
8	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
9	Yes	No	Yes	Yes	No	Yes	No	No
10	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
11	Yes	No	Yes	No	No	Yes	No	No

How does knowledge transfer take place within the RS?	
1	Focus groups (currently 6)
2	Programs research oriented
3	Through the Scientific and Technological Parks (Open Innovation System Project)
4	Regular meetings of the coordinating group
5	Dedicated workshop and meetings
6	Official Documents, guidelines
7	Setting up partnership between research centres and enterprises (ERDF found)
8	Meetings among stakeholders, public and/or technical event
9	Periodical meetings
10	Collaborative network (Community of practice theory)
11	Internal meetings and Arsenàl.it website

	Is there a “Living Lab” or other initiative for trialling and testing innovative solutions?
1	Yes (European Projects)
2	No
3	Yes (Community Lab)
4	No
5	No
6	Yes (evaluation achieved results)
7	Yes (Living Lab)
8	No
9	No
10	Yes (Living Lab)
11	Yes

Existence or not of ...			
	programming document / guidelines / official document	a coordination committee (how does it work?)	a scientific committee
1	Yes (in drafting)	Yes	Yes
2	No	Yes (under construction)	No
3	Yes RL 22/2014, ERDF&ESF oper. programmes	Yes	No
4	Yes	Yes (Through a network)	No
5	NA	Yes (Through a network)	Yes
6	Yes (Reg. Prevention plan and Reg. Chronicity and Frailty plan)	Yes	Yes
7	Yes (Smart Puglia 2020)	Yes (is being finalized)	Yes (is being finalized)
8	Yes (DGR «case della salute»)	No	No
9	No	Yes (Through a network)	Yes
10	Yes (in drafting)	Yes (Through a network)	Yes
11	No	Yes	No

Coordination methodology and practical tools

	Website	Meetings	Training events / workshops	Information events	Best practice exchange	Other	specific fund
1	Yes	Yes	Yes	Yes	Yes	No	In progress
2	Yes	Yes	Yes	Yes	Yes	No	No
3	NA	NA	NA	NA	NA	NA	Yes
4	Yes	Yes	No	No	Yes	No	No
5	No	Yes	Yes	Yes	Yes	No	No
6	No	Yes	Yes	Yes	Yes	No	No
7	NA	NA	NA	NA	NA	NA	Yes
8	Yes	Yes	Yes	Yes	Yes	Yes	No
9	Yes	Yes	Yes	No	Yes	No	No
10	Yes	Yes	Yes	Yes	Yes	No	Yes
11	Yes	Yes	Yes	No	Yes	No	No

Methodology of cooperation with other European RS				
	RSCN	Twinning	EU projects	Other
1	Yes	Yes	Yes	No
2	Yes	No	Yes	No
3	Yes	NA	Yes	No
4	Yes	Yes	No	No
5	Yes	Yes	Yes	No
6	Yes	No	Yes	No
7	NA	NA	NA	NA
8	Yes	Yes	Yes	No
9	Yes	Yes	No	No
10	Yes	Yes	No	No
11	Yes	No	Yes	No

By late June 2017 ...

