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Author:	ANAAO-SNR		

ITALIAN NATIONAL REPORT

SUMMARY

- Medical Malpractice in Italy
- 2018 Healthcare Funds & Economy
- National Collective Labour Agreement

Medical Malpractice in Italy

We are facing, at the moment, the consequences of law n. 24/2017, on liability of healthcare professionals. Indeed, according to the new law, in case of medical malpractice following imperfection, the healthcare professionals will avoid liability if the plaintiffs will not be able to demonstrate that the physicians didn't act in accordance with the recommended guidelines published under law; in the absence of these guidelines the professional should adhere to principles of good practice. Moreover, law n. 24/2017 states that the healthcare facility will be liable in contract for the doctor's negligent or fraudulent behaviour. Conversely, the reform makes clear that practitioners can be sued as to civil liability, with the ensuing consequences regarding burden of proof and statutes of limitation. As regards limitation, a contractual action must be brought within 10 years, while an action under tort must be brought within 5 years. Another significant innovation contained in Law n. 24/2017 is represented by the creation of an Ombudsman for Health, to whom recipients of medical care can address their complaints. It is also expected that new regional Authorities -aimed to manage healthcare risks and patient safety- will be created to collect data about medical malpractice and related litigation, to identify appropriate measures to prevent and manage healthcare risks and to train healthcare professionals.

2018 Healthcare Funds & Economy

Italian financial budget 2017-2020 was approved since April 2017. In 2018, healthcare specific budget is about 113 billion euros (6.5-6.7% GDP). Accordingly, the estimates, for next three years, show a budget trend falling down to 6.3-6.4% in 2020. Healthcare fund is indeed strictly connected to the GDP, but although it is estimated increased 1,5%, Italian Government has not the will to invest more money in the public healthcare sector. Moreover, in our country, we are still facing prolonged austerity measures at the expense of public servants in the public sector. People are not taking care anymore of their health condition, especially in the some of the southern regions, because of economic constraints with consequent reduction of their life expectancy. It's interesting to highlight -on more time again- OECD analysis, about Italian healthcare system, showing a significant increase of out-of-pocket expense (36 billion in 2016), the need of improving long term care as well as prevention's activities.

National Collective Labour Agreement

After 10 years' time waiting we were finally supposed to discuss a new collective agreement for the period 2016-2018: our goals should have included new possibilities of careers, increased meritocracy, clinical safety, and guarantee of contract rules' application without interpretation. Unfortunately, despite general political elections took place last march 4, we are still missing a new government, thus we believe that, at the moment, no contract will be discussed and everything will be postponed to the period 2019-2022.

ANAAO – SNR FASSID Joint Report.