

Background and objectives

Both the actions of PNRR Mission 6 and DM 77/2022, containing the service standards and the reform of territorial care and which the Italian Regions will be committed to implementing over the next 5 years, place the possibilities offered by the digitization of regional health systems.

However, this innovation process poses the problem of the so-called "digital exclusion", well highlighted during the COVID-19 pandemic.

However, the digital divide risks adding up to social inequality: social inequality is one of the main factors of the digital divide and at the same time the digital divide is one of the increasingly significant factors in the development and increase of social inequality, especially if it is combined with the territorial inequality, which favors the impoverishment of conditions of growth and autonomy and, therefore, of social inequality.

It is therefore important that personnel committed to guaranteeing access to care, assistance and health promotion services for the whole population - including fragile people and immigrants - develop the skills and abilities useful both to work effectively within new care and assistance settings (telemonitoring, teleconsultation, televisits, etc.) and to ensure that the new integrated and digitally supported health services are inclusive of the entire resident population on the national territory.

It is therefore proposed to carry out a process of co-creation of the transversal skills that health care personnel will have to acquire in order to guarantee inclusive digital healthcare.

Materials and methods

The evaluation was carried out through field and study activities.

The European, national and regional reference documents were analyzed and meetings were attended on the products/results of certain platforms regarding telemedicine services for the local health authority, also analyzing and re-elaborating existing company services and procedures.

Short questionnaires have been designed regarding the necessary skills identified, in order to obtain inclusive remote care, and the professional roles to be included, in order to receive concrete feedback from all the actors most involved in these activities, thus submitting it to mostly company users dedicated to this.

Results

The results obtained from the analysis of the data and of the feedback received and processed at the end of the survey administration, will be used in specific workshops to identify and discuss the threshold skills and promote key roles, thus addressing them to the training managers of the healthcare companies and the regions, to responsible for the digital health services of the regions and healthcare companies, responsible for hospital-territorial integration and social-health integration, as well as doctors, psychologists, nurses, physiotherapists, professional educators, social workers, cultural mediators and technical personnel involved in digital health services.

Conclusions

It is suggested to expand this preliminary study, extending the survey to the identified professional roles and allowing the effective co-creation of the related soft skills.

Bibliography

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