Foreword

ata provided by this Sixth Report shows important progress in the extension of screening programmes in Italy. This positive trend rewards the effort of all those who co-operated towards this goal: institutions (Ministry of Health, CCM, regional governments), operators, scientific societies. Nevertheless, the final goal has not been reached yet. Screening programmes were included among the Essential Levels of Assistance in 2001: yet, about one third of the target population is still not covered by cytological screening programmes, one fifth is not covered by mammography screening, and more than half is not covered by colorectal screening. A specific agreement between national and regional governments in 2006 stated that by the end of 2007 all programmes that had begun before June 2003 should reach 90% coverage (invitations), while 50% was the target for more recent programmes. Quite a few Regions have yet to fulfil this requirement.

It is clear that a greater effort is needed, but a better definition of actions is also required. Parliament, with the 2007 Finance Law, and the Ministry of Health, with the 2007-2009 National Screening Plan, defined a three-year plan which, while maintaining national coherence, is aimed at special interventions in the Southern Regions, where the delay in screening extension is most evident, based on the following elements:

• common goal as to extension, quality and compliance;

• central action for some crucial service and support functions: data recording system, training, research, communication;

• working methodology based on the sharing of best regional practices and rigorous planning, for Regions that benefit from special interventions for their inadequacy; • special interventions in the Southern Regions and Islands, with special funds allocated to provide a chance for better analysis of critical areas and for defining specific corrective actions. Among common goals I want to stress the relevance given to screening programme quality, by defining common performance quality indicators, useful for central control, local planning, and single programme managing.

The special attention given to screening in recent years (first with Law 138 in 2004, now with the new 2007-2009 National Screening Plan) has taught another lesson: screening programmes are complex procedures, requiring a complex assistance profile at multiple levels, such as organisation, compliance, and evaluation of technical-professional quality. The challenge of implementing high quality programmes for the whole target population cannot be faced without accepting the need for a common project to be agreed on by all actors: society with all its institutional bodies and associations, scientific societies of professionals involved in screening, mass media, the health system as a whole and its branches. We must realise, for example, that screening programmes cannot be effective unless the whole prevention offer is reengineered for the same health goals and for the same population.

We must also minimise the confusion of messages the target population receives: a new understanding of possible common goals must be promoted, as well as co-operation with professional societies, advocacy associations and mass media, based on clear rules.

Overall, we all must realise that there are many subjects we must co-operate with, and many parallel actions to be taken in order to reach the health goals of screening programmes with completeness and equity. For such a purpose it

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is also necessary to understand that we must act as a "system" and that in this governance perspective we must redefine our roles and develop common relationships.

A relevant component of the "system" is the fact that screenings are a fundamental part of the National Prevention Plan, which contributed to the positive overall results reached by the Regions. The Prevention Plan has been a very important experience, with favourable and useful outcomes. It has been a shared common methodology to promote prevention in Italy (on thirteen different lines of action) from several points of view: innovative goals, resource investment, alliances between several institutions and scientific partners, project-based working methodology based on efficacy evidence, training, coordination, evaluation, allocation of resources based on achieved results.

Therefore, the importance of screening programmes was confirmed upon definition of the renewed Plan: screenings contribute to the Plan as they have quantitative health goals, they are based on interdisciplinary work, they implement working protocols, and they manage complex data systems. This new integration, in a broader framework of prevention, opens up new validation scenarios and prospects of integration with traditional public health professions (which thus far have not been always able to or interested in contributing to screening programme implementation).

In this scenario, the crucial role of the National Centre for Screening Monitoring (Osservatorio Nazionale Screening, ONS) is confirmed, acting as a network of best regional experiences in screening. Considering the present situation, we hope to see the active involvement of other regional centres, as a sign of new growing entities, but also as an opportunity of strengthening the ONS. This is important, as a further growth of the ONS is closely linked with the growth of its role, which is crucial in the technical-professional setting, as the ONS becomes more and more involved in providing technical support to other subjects: the Regions, the clinical scientific societies, other health system organisations, associations and other subjects, depending on the growth power we will be able to develop as a "system".

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