



Croce Rossa Italiana
Organizzazione di Volontariato

Mid Term Report Italian Red Cross

Resolution 3 – Time to act: Tackling epidemics and pandemics together

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Sede legale: Via Toscana, 12 - 00187 Roma
C.F. e P.IVA 13669721006

Mid-term Report Italian Red Cross

Resolution 3 – Time to act: Tackling epidemics and pandemics together

Elements of the resolutions implemented

Collaboration with Italian Ministry of Health and its territorial branches to implement the following resolution points:

- Invites States to enable and facilitate Movement components, in accordance with their mandates and capacities and with international law, to contribute to a predictable and coordinated approach to epidemics and pandemics, including effective international cooperation and coordination, and engagement with and support to affected communities;
- Encourages States to include National Societies, according to their mandate, capacities and as humanitarian auxiliaries to their public authorities, in national disease prevention and control and multisectoral preparedness and response frameworks and, where possible, to provide funding in support of their role in this regard;
- encourages National Societies to offer support to their public authorities, as appropriate, in their State's efforts to strengthen core capacities as part of obligations to comply with the IHR, ensuring that special provisions are effectively in place for the efficient and expedited delivery of a public health response for affected populations during crisis situations, coordinating with other local and international organizations and focusing, in particular, on building early warning and rapid response capacity in hard-to-reach, vulnerable, underserved and high-risk communities with due attention to the varied needs of girls, boys, men and women
- emphasizes the need for promotion of active community engagement in outbreak prevention, preparedness and response, based on a multi-sectoral, multi-hazard and whole-of-society approach, and encourages States and National Societies to build on evidence-based approaches to community-centric outbreak prevention, detection and response;
- reiterates the importance of prioritizing and investing in prevention and preparedness as well as providing catalytic funding to support early action, including by National Societies;
- reiterates also the importance of mobilizing resources and building capacities to enable developing countries and their National Societies to respond to the epidemic and pandemic threats;

Examples / Good practices

1. Seroprevalence Survey

During the survey, the Italian Red Cross and the Ministry of Health worked in synergy to complete the Seroprevalence study. The Italian Red Cross has implemented the survey, involving its staff and volunteers to investigate and estimate the size and extent of the infection in the population and describe its frequency in relation to specific factors such as sex, age, region of origin, economic activity. The information and aggregated data collected helped the national authorities to understand how many people in our country had developed antibodies to the Covid-19, during the first phase of the pandemic, also used for scientific studies and comparative analysis with other European countries.

2. Temporary volunteering for health workers in areas affected by the pandemic

During the first wave of the Covid-19 pandemic, health professionals were the most affected by the disease. Some areas of the country, particularly northern Italy, suffered from a shortage of health personnel.

The Italian Red Cross, in support of the National Health System, has activated physicians and nurses as temporary volunteers. Medical Doctors, nurses, and support personnel, including ItRC temporary volunteers, ensured their availability of work and travel to those affected areas according to National Health System needs.

3. Telemedicine Service

Bergamo Health Authority has suffered heavy damage due to the first wave of the pandemic, in particular regarding the general medicine service causing problems for people requiring drug prescriptions, information and home visits for suspected covid-19 infection. Through a pool of voluntary and temporary voluntary doctors, the Italian Red Cross has provided telematic support to the population, in full synergy with the healthcare company of reference.

Describe the impact on the implementation of this resolution

The close collaboration between the Italian Red Cross and the Italian Government has brought several results:

- The improvement of relations between the two entities, strengthening the auxiliary role of Italian Red Cross;
- The adoption of new strategies to cope with emerging needs;
- Direct support for the vulnerable people, who have benefited from several services delivered by the ItRC;

- The strengthening of the structure of the Italian Red Cross in the response to health emergencies;
- Increase in donations
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Partners on the implementation

- Presidency of the Council of Ministers
- Ministry of Health
- NHS local branches
- Department of Civil Protection
- Regions
- Donors

Examples / Good practices

The Italian Red Cross has been one of the first National Society in Europe to deliver medicine and food to people in quarantine and enhance the ambulance service to cope with the growing number of infected people.

In addition, Italian Red Cross supports citizen particularly vulnerable to the disease, such as the elderly or the immunocompromised, by providing them with basic necessities such as food and medicines directly at hand, medical transport and health care.

The Italian Red Cross is actively procuring specialized materials and vehicles such as ambulances, high biocontainment stretchers and Personal Protective Equipment (PPE), as well as training its volunteers, citizens, users and patients, employees on the correct use of PPE.

Through the DG-Sante project, ItRC was able to contribute to the reduction of morbidity of the novel coronavirus (COVID-19) outbreak by slowing the transmission in the Country, preventing further spread by scaling up COVID-19 testing capacity in Italy. In particular, ItRC was able to set up and manage 12 testing facilities across metropolitan cities in northern Italy (Milan, Genova, Turin, Venice), in the centre Italy (Bologna, Florence, Rome) and southern Italy (Palermo, Reggio Calabria, Bari, Naples, Cagliari) performing an average rate of 3.000 antigenic tests per day.

All the testing facilities were set up nearby train stations, considered as the most strategic location to reach out vulnerable groups living in precarious conditions, as well as the most

suitable places to maximize the impact of the project. A flexible and scalable approach to human resources mobilization allowed facilities to manage staff and volunteers according to the weekly needs and to guarantee the correct coverage of service according to the epidemiological scenario and/or new measures requested by national, regional or local authorities. A dedicated data management software improved the project team capacity to carry out data collection and analysis aimed at supporting the operations.

In coordination with ItRC National Response Center (which handles the toll-free-number) a dedicated customer care/information point was launched to provide detailed information to the general public about opening hours and general information of the service (for instance free access to everyone and no medical prescription needed).

Furthermore, the ItRC has launched a pilot project “Elderly people and Covid-19”, in collaboration with IFRC and home care facilities, to improve skills and knowledge of home care professionals and ItRC volunteers, as well as the elderly people, on new technologies and methods to address loneliness and low confidence and to cope with isolation, loneliness, and improve measures of self-protection. The project helped caregivers in regaining trust in home care facilities thanks to the active connection with family members and home care staff.

Impact on the implementation of this resolution

The Italian Government issued and approved a series of regulations to implement urgent measures against Covid-19 spread which, from a health point of view, led to a substantial increase in financing, in order to meet health needs. Furthermore, through the National Emergency Fund, the purchase of specifically directed plants and equipment to the care of COVID-19 patients, such as assisted ventilation systems in intensive care units, and ordered the requisition of health facilities has been financed.

In addition to this, the Italian Red Cross has signed numerous agreements with the Ministry of Health and the Health Authorities in order to jointly draw up a response plan for the vaccination campaign. Today, over 1 million vaccines (1.196.550) have been carried out by ItRC in Lazio Region and about 40.000 were carried out by the ItRC volunteers in Termoli, initially in the field hospital and subsequently in the hub. Over 600 doctors and nurses were recruited.

From the beginning of the emergency until the end of July, the Italian Red Cross carried out about 1.000 hours of highly biocontainment transport and provided over 10.000 emergency transports. Over 50 ambulances were distributed through the local committees. Over 200 local committees have guaranteed logistic and sanitary support during the pandemic.

ItRC built up and further developed the existing testing capacities in Italy, supporting the National Public Health System by performing about 500.000 antigenic tests across the Country from mid-April to the end of September 2021. An aggregate amount of 1,438 volunteers and health professionals have been trained to take samples and to perform tests in each of the 12 testing facilities.

Partners on the implementation

Departmente of Civil Protection
Ministry of Health
Regions
Health Authorities
IFRC

The DG-Sante project was funded by the European Commission in partnership with IFRC. ItRC was supported by the National Train Company (owned by the Italian Ministry of Infrastructures and Sustainable Mobility) which provided the main sites to carry out screening activities as well as security services for each testing facility.

Challenges during the implementation

ItRC experienced a shortage of healthcare professionals for screening activities in the 12 testing facilities, especially during the summer months, in conjunction with an increased testing demand related to the introduction of Covid-19 Green Certificate regulation. Due to different procedures across Italian regions for positive case management, the additional workload for ItRC staff and Volunteers was needed. This included specific measures for people with residency in a region or country other than the one where the test was performed or people in vulnerable conditions (such as homeless and undocumented people).

Furthermore, ItRC had to face time-consuming administrative procedures in order to release the Covid-19 Green Certificate (requiring ItRC to perform additional registration and data entry activities);