Abstract
**The Need for Hospital/Community Integration in Italy**

**Francesco Lombardi, MD, Riabilitazione Intensiva, Ospedale di Correggio (RE), Italy**

The recovery from coma is a process that requires several interventions (rehabilitation, nursing, social services, educative and re-employment interventions). The integration of interventions is the most important factor to obtain good outcomes (1), so it is a crucial issue in the organization of effective services for adult disabled people.

In the 1996, the Trauma Association of Parma (Italy) suggested to the social services of Parma an hospital/community integration project. The project proved to be problematic because of frequent changes in the social services organization at that time.

Fortunately in the following years new laws and documents, about social policy in adult disabled people, have emphasized the general absence of services, the big dishomogeneity from north and south italian regions, the big burden that family of disabled people are bearing nearly always, and the need to build up an integration between hospital and community interventions (2, 3, 4, 5).

The Italian political solution, with regard to services integration process, is to subdivide the territory into Districts, which have two principal aims: to assess the social and health population needs, and to commit hospital and social services to support that problems (6). Every District has got to develop a multidisciplinary staff to build knowledge about adult disability needs and territorial hospital/community services.

Now, the hospital/community integration process is possible, but it will be realized only if acute and post-acute Rehabilitation Centers will be ready to organize themselves into integrated networks with territorial social services and if Directors of Districts will manage the process with attention and firmness.

References:

2) Italian Law 5 February 1992, n° 104.
3) Italian Law 21 May 1998, n° 162.
5) National Conference about Handicap Policy