



**PUBLIC
HEALTH
CENTER**

STRATEGIC DEVELOPMENT PLAN

for 2026–2028

Kyiv
1/1/2026

INTRODUCTION

This Strategic Plan provides guidance for the State Institution “Public Health Center of the Ministry of Health of Ukraine” for 2026–2028. It was developed during the full-scale war—amid intense shelling of Kyiv, constant uncertainty, and high pressure on the healthcare system. These conditions directly shaped the document’s priorities, approaches, and focus.

We recognize that the transition to the post-war period, whenever and in whatever form it may come, will require rethinking certain tasks and decisions. Therefore, this Strategic Plan was conceived from the outset as a flexible tool, not a rigid framework, but a basis for adapting to changes in the environment and the needs of the country.

I believe it is essential that this document reflects collaborative effort. In November 2025, we convened a two-day intensive strategic dialogue with leads from all PHC departments, enabling an open exchange on experiences, challenges, uncertainties, and expectations. The breadth of perspectives and professional standpoints strengthened the plan’s practicality and balance.

I sincerely thank everyone who contributed to this work for their openness and thoughtful engagement in shaping

the future of PHC. Special appreciation is extended to Expertise France for its consistent and systematic support to PHC, particularly in organizing and facilitating the strategic session that laid the foundation for this document. I also thank Viktor Artemenko for his strong facilitation of the process and his confidence in its success.

The Strategic Plan is guided by several key principles. First, PHC operates on the basis of data, evidence, and professional expertise. Second, the Plan recognizes the interconnected nature of decisions and underscores that effective partnerships with state institutions, regional and local authorities, communities, academia, and international organizations are integral to achieving strategic objectives. Finally, PHC acknowledges the need for continuous organizational improvement, including strengthening management practices, streamlining processes, investing in staff development, and expanding the use of digital solutions.

The next phase is the implementation of this Strategic Plan. It is intended to serve as a foundation for decision-making, supporting organizational focus in challenging circumstances while remaining open to review and adjustment as conditions evolve.

Volodymyr Kurpita

UPHC Director General



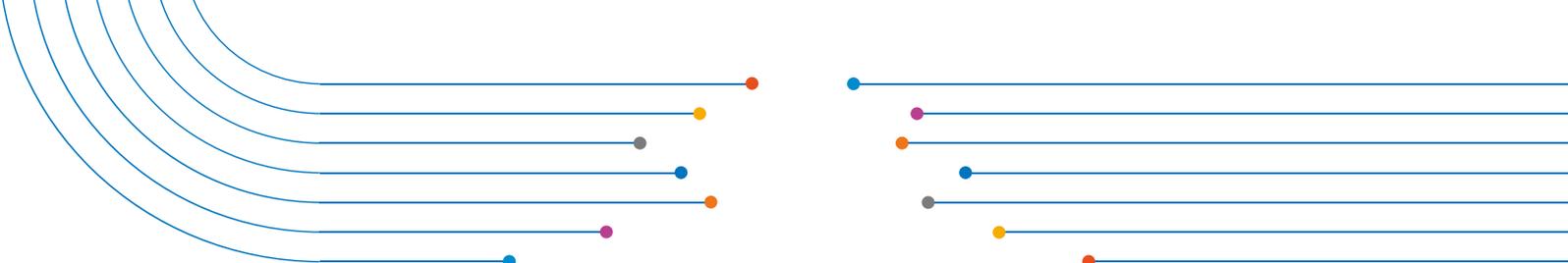


TABLE OF CONTENTS

STRATEGIC GOAL 1. Ensure the collection and analysis of data, scenario forecasting, and their use for decision-making in the field of public health	5
1.1 Improvement and digitization of the processes for data collection, processing, and monitoring	6
1.2 Developing analytics and forecasting, along with strengthening their research and scientific support	7
1.3 Strengthening the surveillance system for infectious and non-infectious diseases	8
1.4 Proactive health risk management	9
STRATEGIC GOAL 2. Strengthen national capacities for prevention, preparedness, and response to public health emergencies	10
2.1 Developing capacity for prevention, preparedness, and response to public health emergencies	11
2.2 Managing infectious disease control programs and addressing the burden of non-communicable diseases	12
2.3 Developing and strengthening the public health laboratory network	14
2.4 Enhancement of processes for stock management, pharmaceutical management, humanitarian aid, and emergency expenditures	15
STRATEGIC GOAL 3. Develop partnerships to promote health and build trust in the public health system	17
3.1 Developing international cooperation	18
3.2 Improving interaction with national partners	19
3.3 Organizational and methodological partnership with regional CDCs	20
3.4 Establishing partnerships with communities to implement key public health programs	21
STRATEGIC GOAL 4. Enhance systems, structures, processes, and skilled personnel to create an adaptive and sustainable management model ...	22
4.1 Implementation of a strategic management and decision-making framework driven by data and ongoing progress monitoring assessments	23
4.2 Standardization and integration of internal processes for the efficient daily operation of PHC	24
4.3 Creating a sustainable system to attract, adapt, develop, and retain staff	25
4.4 Developing a unified digital ecosystem for PHC to enhance management, improve data accessibility, and ensure process transparency	27



STRATEGIC GOAL 1

Enhance data collection, analysis, and scenario forecasting to inform public health decision-making

During 2026–2028, the Public Health Center of the Ministry of Health of Ukraine (PHC) will further develop and sustain a comprehensive system for collecting, processing, and analyzing data on population health, risk factors and threats, ensuring the systematic use of these data to inform management decisions and policy recommendations for government authorities, partners, and society. This strategic goal consolidates PHC's role as the analytical core of the public health system, providing solutions grounded in high-quality data, analytical insights, forecasts, and scenarios.

To this end, PHC will strengthen its data infrastructure by maintaining public health information systems, updating reporting forms, and aligning data structures, definitions, and reporting standards with international and EU requirements. At the national and regional levels, respective standard operating procedures will be defined and formally adopted to clearly assign roles and accountability for data collection, submission, validation, and quality control, including specified data elements, reporting timelines, and verification mechanisms. PHC will work to ensure that these procedures are institutionalized as part of routine public health operations, rather than activated only in response to crises or outbreaks.

At the same time, PHC will develop its analytical and research capabilities. PHC will progressively transition from de-

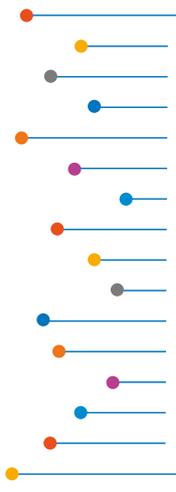
scriptive reporting to systematic trend analysis, scenario modeling, forecasting, and impact assessment of management decisions. PHC will support the Ministry of Health and other public authorities by providing timely, interpreted, and decision-oriented analytical outputs.

Aligned with public health priorities, PHC will collaborate with international organizations, donors, universities, and scientific institutions to jointly plan, coordinate, and implement research activities based on clearly defined roles and areas of expertise.

A special focus will be placed on establishing a structured and integrated approach to the surveillance and monitoring of risk factors, including biological, environmental, occupational, and behavioral determinants, as well as cross-border threats. PHC will be responsible for ensuring continuous and systematic data collection and analysis, and for establishing regular and formalized information exchange mechanisms with the national eHealth system, Ukraine's regional CDCs, state authorities, and other public health actors. This will also include the systematic use of data and analytical outputs from WHO, ECDC, the US CDC, and other relevant international partners. Together, these efforts will enable Ukraine to assess public health risks within an international context and strengthen timely preparedness and response to public health emergencies.

PHC will systematically transform data into clear, actionable, and user-oriented analytical products tailored to different audiences. These will include regular analytical reports for the Government, the National Security and Defense Council, and other central authorities; dashboards and visualizations for regional stakeholders; analytical briefs and evi-

dence-based recommendations for partners; and risk communication materials for the public and the media. The format and language of these products will be adapted to user needs, enabling effective use of data for strategic planning, resource allocation, and informed decision-making.



PHC will strengthen **analytical and evidence-based communication** in public health by systematically conveying data, analytical findings, and forecasts to key target audiences. This will include preparing regular **analytical reviews, visualizations, and dashboards containing priority indicators**, as well as **providing expert input to government authorities, the media, and the public**. Special attention will be given to clearly articulating how data and analysis affect executive decision-making, including the communication explaining current uncertainties and limitations, and how these are taken into account when formulating recommendations. This approach will promote transparency and build confidence in public health decisions.

1.1. Strengthening and digitization of data collection, management, and monitoring

Public health executive decisions must be based on complete, reliable, and timely data. PHC will establish and maintain a coordinated national framework for data governance and statistics, ensuring that information is collected, validated, and shared in accordance with clearly defined and standardized requirements. Particular focus will be placed on upgrading reporting forms to meet to the needs of the health system and align with international standards while enabling structured data exchange among the Ministry of Health, Ukraine's regional CDCs, and other public authorities.

PHC will play a central role in establishing consistent approaches to monitoring national public health programs and assessing their effectiveness. Regular topical analytical reports will be produced using consolidated national and regional data. In addition, a defined set of indica-

tors and analytical tools will be introduced to assess the quality, comprehensiveness, and timeliness of regional data, thereby strengthening confidence in analytical outputs and supporting evidence-informed decision-making.

A further priority will be the reassessment of the role of health statistics within the health system architecture. PHC will review and streamline reporting forms, clarify roles, responsibilities, and data flows between health statistics, the eHealth system, and epidemiological surveillance systems, and ensure preparedness for the stage-by-stage conceptual and technical integration of statistical data with eHealth. Strengthening the analytical competencies across the workforce, together with the provision of methodological guidance on information security and personal data protection, will remain constant priorities.

Key results

- A unified framework for the collection and monitoring of public health data has been established, with clearly defined roles, data formats, and reporting schedules at both national and regional levels.
- The health statistics system has been modernized and streamlined; the set of reporting forms has been updated and aligned with the eHealth and epidemiological surveillance systems.
- Preparations for the phased integration of health statistics with the eHealth have been completed, including aligned methodological approaches, technical solutions, and data quality requirements.
- PHC analytical capacity has been strengthened, enabling regular evaluation of the effectiveness, coherence, and outcomes of state public health programs.
- Regular, secure, and structured data exchange mechanisms with WHO, ECDC, the US CDC, and other international organizations have been established.

1.2. Development of analytical and forecasting capacity, supported by strengthened research and scientific foundations

Routine data alone are insufficient to support effective public health decision-making. There is a growing need for advanced analytical methods, applied research, forecasting, and scenario modeling. PHC will identify, prioritize, and regularly review key research and analytical areas within its own programs and those of key stakeholders, taking into account national public health challenges as well as relevant European research and innovation frameworks. Particular attention will be given to aligning research priorities and methodologies with EU strategic objectives, including surveillance, preparedness for health threats, mental health, inequalities in access to health services, and health literacy. PHC management will promote an environment within the organization that supports innovation and the systematic strengthening of analytical and research capacity.

In parallel, PHC will strengthen its role as a national coordinating body and strategic partner in EU public health initiatives, including EU4Health and related research and innovation programs. PHC will maintain and expand cooperation with research institutions, universities, think tanks, and international organizations, positioning itself as a national platform for joint research initiatives and the mobilization of external funding.

Key results

- PHC maintains a comprehensive medium-term research plan, subject to annual review, which directs analytical activities, research priorities, and efforts to mobilize external funding.
- Insights generated through analytics, forecasting, and research are systematically incorporated into management decision-making, program development, and analytical outputs prepared for the Ministry of Health and other public authorities.
- PHC acts as a national coordinating body for EU research and analytical initiatives in public health, leveraging established partnerships with Ukrainian and international organizations and its experience in coordinating and implementing joint projects.

1.3.Strengthening the surveillance system for communicable and non-communicable diseases

PHC will further develop epidemiological surveillance as a comprehensive and integrated national system, underpinned by a modern regulatory and methodological framework. The system will be supported by a skilled and competent workforce, digital solutions for data collection, analysis, and visualization, and a functional and sustainable laboratory network.

PHC will lead and coordinate the development of the surveillance system through structured cross-sectoral collaboration with public health stakeholders, health care providers, and relevant public health services within the security and defense sectors. Particular attention will be given to the development, regular updating, and practical implementation of clear methodological guidance and standard operating procedures. In addition, PHC will provide analytical support and expert advice tailored to the needs of particular

regions, which are critical to the effective functioning of regional epidemiological surveillance.

PHC will ensure the implementation, maintenance, and further development of the Electronic Surveillance System (ESS), optimizing data collection processes and information exchange, and aligning datasets between the ESS and the eHealth to enhance data completeness, quality, and analytical value. Surveillance of non-communicable diseases will be organized through dedicated arrangements, applying standardized approaches to data collection, analysis, and interpretation, with due consideration of risk factors and broader health determinants. Continuous capacity development in epidemiological surveillance, data analysis, and digital tools will remain a core, cross-cutting element of these activities, strengthening the public health system's institutional capacity and resilience.

Key results

- An integrated national surveillance framework for communicable and non-communicable diseases has been established, formalized through regulatory and methodological documents, and endorsed by key public health stakeholders.
- The resilience of the surveillance system has been significantly strengthened through the restoration and modernization of critical infrastructure, the scaled adoption of digital solutions, and the systematic reinforcement of workforce capacity, reflecting regional needs and addressing emerging public health risks.
- The operational functionality of the Electronic Surveillance System has been achieved, including coordinated datasets, integration with the eHealth and laboratory information systems, and measurable improvements in the quality, completeness, and timeliness of epidemiological data.
- The institutional and workforce capacity of Ukraine's regional CDCs has been strengthened through sustained methodological support, continuous capacity development, and enhanced analytical competencies

1.4. Proactive health risk management

PHC will support evidence-informed management of public health risks through systematic identification, assessment, and analysis of health risk factors. PHC will coordinate intersectoral strategic risk assessments at the national level and support regions in implementing regular operational risk assessments.

PHC will serve as the coordinating and analytical authority for evaluating the impact of priority risk factors with set reference values. Core tasks will include consolidating data collected at different intervals, analyzing them, and developing national-level risk assessments and forward-looking forecasts. Analytical efforts will place particular emphasis

on assessing radiation exposure and related health risks, monitoring and analyzing radon concentrations in residential and non-residential buildings, and strengthening national capacity to assess carcinogenic health risks to the population.

PHC will provide methodological guidance and integrate analytical inputs from multiple data holders, particularly regarding air, water, and soil quality. Special attention will be given to improving the assessment of occupational exposures and production-related factors affecting occupational health, and to developing scientifically grounded recommendations for employers, regulators, and other relevant authorities.

Key results

- Systematic analytical support for priority health risk factors and exposures has been established, including the development of scientifically substantiated recommendations to mitigate identified risks.
- PHC functions as the national analytical integrator of data on population health risk factors, ensuring coherent interpretation across sectors and data sources.
- Automated mechanisms for the retrieval and regular updating of data from national and sectoral information systems have been introduced, enabling their routine analytical use for risk assessment and decision-making.



STRATEGIC GOAL 2

Strengthen national capacities for prevention, preparedness, and response to public health emergency

As part of this strategic goal, PHC will establish a coordinated national system for prevention, anticipation, preparedness, and response to public health threats. This system will address both emergencies, including infectious disease outbreaks, technological incidents, military-related risks, and cross-border threats, as well as longer-term systemic public health challenges, such as HIV, tuberculosis, viral

hepatitis, antimicrobial resistance, and mental health conditions. PHC will work to integrate infectious disease prevention and control activities within a single operational framework, encompassing immunization program coordination, laboratory network functions, civil protection mechanisms, and medical countermeasures.

PHC will develop a systematic, crisis- and risk-oriented communication approach as an integrated component of the public health prevention, preparedness, and response system. This includes **preparation and regular updating of messages for common emergency scenarios, informing the public about risks, available services, and recommended actions, and communicating promptly during disease outbreaks or other threats.** PHC will work with government authorities, the media, local communities, and partners to spread messages that are consistent, clear, and evidence-based, helping **reduce misinformation and encourage informed public behavior during crises.**

The emergency preparedness and response system will be based on clearly defined interaction protocols, operational algorithms, and an explicit allocation of roles and responsibilities among the entities of the Unified State System

of Civil Protection. PHC will support the operational readiness of functional subsystems responsible for sanitary, epidemiological, and medical protection of the population, ensuring that they are practical, interoperable, and

capable of rapid activation during a crisis. PHC will coordinate preparedness and response activities with security and defense authorities, emergency medical services, local governments, and international partners. Particular attention will be given to the management and continuation of supplies of medicines, medical devices, and humanitarian resources to sustain essential prevention and treatment services and enable rapid transition to emergency response mode.

The control of socially significant infectious diseases will be approached as a continuous, integrated process in which

prevention, case finding, treatment, and linkage to care are mutually reinforcing. PHC will strengthen strategies for pre- and post-exposure prophylaxis, engagement with key and vulnerable populations, and the integration of services provided by community-based and faith-based organizations and health care providers into coordinated patient pathways. In parallel, system-wide strategies to address antimicrobial resistance will be advanced to protect population health. In addition, efforts will focus on strengthening mental health and addiction prevention capacity, with emphasis on early identification, intersectoral cooperation, and the integra-

2.1. Developing capacity for prevention, preparedness, and response to public health emergencies

The public health emergency preparedness system is underpinned by continuous assessment of potential threats and timely access to relevant up-to-date data. PHC will oversee the systematic collection, consolidation, and interpretation of information on public health risks, including those associated with high-risk facilities and potentially hazardous sites. PHC will also develop and apply analytical tools and models that enable a rapid transition from routine monitoring to emergency response, thereby supporting early detection of emergencies and mitigating their potential impact on population health.

Within the Unified State System of Civil Protection, PHC will support the Ministry of Health in coordinating the activities of management bodies and their subordinate civil protection forces within the functional subsystem responsible for sanitary and epidemiological protection of the population. The response system will address the full spectrum of public health threats, rang-

ing from local infectious disease outbreaks to interregional and international events, including chemical, biological, radiological, and nuclear threats. Particular attention will be given to implementing the International Health Regulations, especially regarding cross-border threats, intersectoral coordination, and the role of PHC as the national IHR focal point. Digital solutions will support rapid notification, information exchange, analytical assessment, outbreak forecasting, and management decision-making during emergencies.

Enhancing response capacity will require systematic workforce development and continuous strengthening of interagency coordination mechanisms. PHC will strengthen the analytical and executive capacity of the Emergency Operation Center through organizing and participating in the interagency command-staff and functional exercises involving Ukraine's regional CDCs, the State Emergency Service, and emergency medical services. These exercises will

simulate responses to biological, chemical, radiological, and other public health threats, in line with approved response plans and protocols. The systematic after-action reviews will become a core component of PHC activi-

ties, enabling the evaluation of response effectiveness, the identification of operational gaps, and the informed revision of preparedness plans, protocols, and standard operating procedures.

Key results

- Human and organizational capacity for public health preparedness and emergency response has been established and is sustainably maintained, ensuring effective response across emergencies of varying scale and complexity.
- A coherent system of response algorithms and operational protocols has been introduced, developed on the basis of risk and threat assessments, and aligned with the IHR requirements.
- A structured mechanism for regular interagency emergency response exercises has been institutionalized and systematically implemented. These exercises are conducted jointly by PHC, the State Emergency Service of Ukraine, and regional CDCs, in line with approved response plans, and support testing, maintenance, and strengthening of the public health system's operational readiness during a crisis.
- A digitalized system for rapid notification and information exchange between PHC and other response actors has been established, enabling timely coordination and response during public health emergencies.

2.2. Managing infectious disease control programs and addressing the burden of selected non-communicable diseases

Within this strategic area, PHC will provide expert, analytical, and coordination support for the implementation of key national public health programs, particularly in immunization; prevention and control of HIV, tuberculosis, viral hepatitis, and selected non-communicable diseases; antimicrobial resistance; and other national public health priorities. PHC will apply a unified program management framework, encompassing data collection and analysis, evaluation of intervention effectiveness, and the formulation of evidence-based recommendations for program and policy adjustment.

PHC will support the implementation and monitoring of the State Strategy on HIV/AIDS, Tuberculosis, and Viral Hepatitis Response, based on systematic analysis across the whole service continuum, from screening, testing, and diagnosis to treatment outcomes and linkage to care. Particular attention will be given to assessing the effectiveness of prevention interventions, including pre- and post-exposure prophylaxis, and to identifying the most effective models for case finding and early diagnosis.

A dedicated functional area will provide analytical and coordination support for the implementation of national policy on antimicrobial resistance, considering international commitments and initiatives, as well as the One Health approach, with the objective of preserving the effectiveness of antimicrobial therapies and protecting population health.

A core component of this area will be the management of the national immunization program, within which PHC will provide methodological and analytical support for implementing the Strategy for the Development of Immunoprophylaxis and Protection of the Population from Vaccine-Preventable Infectious Diseases until 2030, based on the National Vaccination Schedule. This will include the systematic analysis of vaccination coverage, identification of immunity gaps among population groups, and assessment of risks related to vaccine-preventable diseases.

In addition, PHC will contribute to reducing the burden of selected non-communicable diseases, including cardiovascular diseases, cancer, chronic respiratory diseases, diabetes, and mental health conditions. An integrated analytical framework will be developed, drawing on data on morbidity, mortality, and the prevalence of key behavioral and social risk factors, including psychoactive substance use. Based on these data, PHC will prepare analytical reports, forecasts, and recommendations to support prevention strategies, harm-reduction initiatives, health promotion efforts, and regulatory measures to increase life expectancy and improve quality of life.

Key results

- A unified program management information framework has been implemented within the public health sector, supporting coordinated planning, monitoring, and evaluation of national public health programs.
- Systematic analytical and technical support for the implementation of the State Strategy on HIV/AIDS, Tuberculosis, and Viral Hepatitis Response has been ensured, including end-to-end monitoring across the service continuum and the use of data to support timely response and evidence-informed decision-making.
- Analytical and coordination support for the implementation of the national policy on antimicrobial resistance has been strengthened, in alignment with international initiatives and the One Health approach.
- Methodological and analytical support for the national immunization program has been enhanced, enabling effective use of data for needs assessment, program planning, and risk and demand communication.
- Modern methodological approaches to support health promotion programs aimed at reducing the burden of non-communicable diseases have been developed and applied.

2.3. Developing and strengthening the public health laboratory network

The public health laboratory network is a core component of epidemiological surveillance, health risk assessment, preparedness and response to public health threats. PHC will strengthen and sustain the reference functions of its laboratories and provide methodological, organizational, and coordination support to ensure standardized approaches, interoperability, and effective coordination across the national laboratory network.

Laboratories will perform regular and targeted testing in accordance with established programs, supporting the assessment of priority infectious diseases and environmental health factors. The operation of the network will be guided by a continuous cycle of risk assessment, laboratory testing, and updated risk evaluation, providing a robust evidence base for management and policy decisions.

In emergencies, the laboratory network will be capable of rapid transition to enhanced operational modes, adapted to the nature and scale of the threat. Approved emergency response plans and business continuity arrangements will guide the maintenance of laboratory performance, quality, and safety under conditions of increased demand and operational stress.

Ensuring the quality, reliability, and comparability of laboratory results will remain a strategic priority. PHC will support the development and continuous improvement of quality management systems, particularly for laboratories accredited under ISO 15189 and ISO 17025, act as a national reference point for the organization of external quality assessment schemes, and promote participation in international laboratory networks, programs, and collaborative projects. In parallel, laboratory infrastructure and equipment will be progressively modernized, and compliance with standard operating procedures will be systematically reinforced.

Further development of the laboratory network will focus on digitalization, innovation, and workforce development. PHC will introduce and expand laboratory information systems to improve the recording, exchange, integration, and analysis of laboratory data, strengthen human resource capacity, and broaden the scope of laboratory testing in line with national public health priorities. A distinct strategic priority will be the development of sequencing and bioinformatics capacity as essential elements of modern epidemiological surveillance and effective response to biological threats.

Key results

- A functional national public health laboratory network is in place, operating under standardized methodologies and supporting epidemiological surveillance, health risk assessment, and emergency response at national and regional levels.
- Sustainable laboratory capacity has been ensured, including the operation and continuous improvement of quality management systems aligned with ISO 15189 and ISO 17025 standards.

- The laboratory network is capable of operating in both regular and high-capacity modes, supported by approved emergency response plans and business continuity arrangements.
- Laboratory information systems have been implemented and operationalized, enabling efficient recording, exchange, integration, and analysis of laboratory data across the public health system.
- National capacity in pathogen sequencing and bioinformatics has been established and strengthened, supporting advanced epidemic surveillance and effective response to biological threats.

2.4. Strengthening systems for stock management, pharmaceutical management, humanitarian assistance, and emergency expenditure

PHC will support coordinated, aligned planning of needs, procurement, and the distribution or redistribution of medicines and health products for priority public health programs, taking into account clinical requirements, epidemiological trends, and regional variations.

Pharmaceutical management will be underpinned by the systematic collection and analysis of data from state information systems, health care providers, and Ukraine's regional CDCs, enabling timely adjustments to supply volumes, mitigation of risks related to shortages or overstocking, and the rational and efficient use of resources.

In the area of humanitarian assistance, PHC will support and oversee the delivery acceptance, registration, accounting, and logistical coordination of

medicines, health products, and equipment provided by international donors and philanthropic organizations. PHC will work in close cooperation with the Ministry of Health and the State Enterprise "Medical Procurement of Ukraine" to strengthen information systems, ensuring transparency, traceability, timeliness, and appropriate targeting of supplies, particularly emergencies and crises.

A strategic priority will be the gradual transition of relevant programs to sustainable public financing mechanisms. PHC will apply medium- and long-term planning approaches that take into account the projected needs of public health programs, procurement and budget cycles, shelf life, and requirements for public budget planning and execution.

Key results

- A systematic mechanism for forecasting and regularly updating demand for medicines and health products has been established, supporting budget planning and procurement processes of authorized bodies within the Ministry of Health system.
- An integrated inventory management information system has been implemented and operationalized, enabling evidence-based management

- decisions through visualization of needs, supplies, and stock levels of medicines and health products by public health program, region, and funding source, and reducing the risk of supply disruptions.
- Timely and efficient distribution of medicines and health products for priority public health programs has been ensured, supported by regular data analysis to minimize shortages and overstocking.
- Processes for the coordination of distribution and redistribution of humanitarian assistance have been streamlined through simplified procedures and strengthened interagency cooperation.
- PHC has established a dedicated humanitarian assistance unit, encompassing planning, registration, and accounting of supplies, logistical coordination, and engagement with donors.



STRATEGIC GOAL 3

Strengthen partnerships to advance health promotion and reinforce trust in the public health system

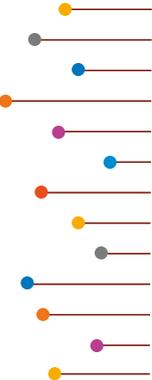
PHC will strengthen and expand partnerships to enhance the effectiveness of public health programs and reinforce trust in the public health system. Progress under this strategic goal will be reflected in greater confidence in public health guidance and preventive recommendations, as well as more effective collaboration with government institutions, professional associations, civil society, charitable foundations, and international partners. Acting as a national collaborative platform, PHC will bring together analytical capacity, technical expertise, and coordination functions to achieve measurable improvements in population health, including in the context of war-related challenges and post-war recovery.

International partnerships will contribute to strengthening national public health capacity through structured knowledge exchange, access to specialized technical expertise, shared use of data and analytical methods, and participation in joint initiatives and projects. Outputs of such cooperation will be systematically translated into national practice, supporting the adoption of modern public health standards, workforce development, and the align-

ment of national policies and programs with EU and global frameworks.

At the regional and local levels, partnerships will focus on health promotion and disease prevention, with particular emphasis on non-communicable diseases, HIV, tuberculosis, and addiction-related harms. PHC will promote the use of innovative, blended financing approaches that combine state, local, and partner resources to support sustainable interventions. Regional CDCs will serve as PHC's key partners at the regional level, contributing to joint planning, methodological support, and the implementation of coordinated prevention and health promotion activities tailored to community needs.

In addition, PHC will develop and maintain structured partnerships with key stakeholders across governmental and non-governmental sectors, including health care, security, research, and education. Through formal coordination mechanisms, joint planning processes, and regular data exchange, PHC will support coherent inter-institutional action, reduce duplication of efforts, and enhance synergies across the public health system.



This strategic goal recognizes communication as a core enabling function for partnership development and intersectoral collaboration in public health. PHC will strengthen **transparent and regular information exchange with government authorities, professional associations, civil society, and international partners** on program objectives, implementation approaches, and results. Structured partnership and communication formats will support coordinated decision-making, reduce duplication of effort, and help build trust and shared accountability among participants in the public health system.

3.1. Strengthening international cooperation

PHC will systematically strengthen international cooperation to support Ukraine's integration into the EU and global public health frameworks. This cooperation will include active participation in international networks, expert platforms, and working groups; structured exchange of data, methodologies, and best practices; and the presentation of Ukraine's public health experience, challenges, and lessons learned at the international level. A dedicated focus will be placed on European integration, including the gradual alignment of public health processes, systems, and standards with EU requirements, as well as joint efforts to adapt EU approaches and models to the Ukrainian national context.

International cooperation will primarily aim to strengthen national public health capacity through targeted technical assistance and the implementation of joint projects. In partnership with international organizations, PHC will support the development of epidemiological

surveillance, preparedness, and response systems and strengthen laboratory capacity, analytical tools, and workforce competencies. Cooperation will also extend to disease prevention and control programs, with particular emphasis on piloting innovative solutions that are difficult to finance exclusively through state resources, taking into account the impacts of war, post-war recovery, and service adaptation needs.

An additional priority will be strengthening coordination of international technical assistance in public health. PHC will support aligning partner initiatives with identified system needs by establishing transparent mechanisms for coordination, prioritization, and synchronization of projects. International assistance will be aligned with national public health objectives, strategic planning documents, and system development priorities, thereby enhancing its effectiveness, coherence, and long-term sustainability.

Key results

- A coordinated mechanism for the management of international technical assistance in public health has been established, ensuring the prioritization, alignment, and synchronization of international projects with national objectives and system needs.
- Participation in the international public health networks and initiatives has been strengthened, with PHC contributing as a reliable technical partner and national focal point for engagement with international organizations within its mandate.
- International public health programs and projects implemented with PHC's participation are aligned with national strategic priorities and PHC's institutional mandate, supporting coherent system development.
- PHC has enhanced its institutional and human resource capacity to ensure sustainable development.

3.2. Improving interaction with national partners

An effective public health system relies on structured collaboration among key national institutions, each contributing statutory authority, data, resources, or technical expertise. PHC will support and facilitate coordination among national partners across the health, security, defense, regulatory, and research sectors through joint planning processes, structured data exchange, and aligned strategic approaches, contributing to a coherent and coordinated framework for public health management.

Regular institutional communication, joint planning arrangements, and agreed interaction protocols will support reducing overlapping functions, clarifying roles and responsibilities, and delivering consistent guidance to regions and health care providers. In the context of preparedness and response, this will involve

operation in accordance with jointly developed scenarios and contingency arrangements across the security, defense, civil protection, and health sectors. For prevention and treatment programs, it will require coordinated use of data, planning instruments, and priorities among PHC, NHSU, regional CDCs, regional health authorities, procurement entities, and health care facilities.

Partnerships with research and higher education institutions and civil society will strengthen the public health system's analytical, research, and expert capacity. Such cooperation will support the uptake of modern methodologies, expand the national evidence base, and accelerate the translation of evidence into management decisions, policies, and operational practice, in line with national needs and contextual realities.

Key results

- Structured and regular information exchange between PHC and key national partners has been established, supporting coherent planning and coordinated action.
- Roles, responsibilities, and interaction protocols among involved institutions have been formally defined and agreed upon, reducing duplication of functions and institutional overlap.
- A formal mechanism for integrating expert, scientific, and intersectoral inputs into the planning and implementation of public health policies has been strengthened, supporting evidence-informed and coordinated decision-making.

3.3. Institutional partnership with regional CDCs

PHC will strengthen structured cooperation with Ukraine's regional CDCs as key actors at the regional public health system. PHC will serve as the national expert and methodological center, responsible for developing unified approaches, standards, and analytical frameworks, while regional CDCs will apply and operationalize these approaches at the regional and local levels, in cooperation with public authorities, health care providers, and communities.

PHC expert and methodological support to regional CDCs will focus on priority public health areas and on the development of analytical capacity and workforce competencies. This will include preparing and regularly updating methodological guidance, analytical tools,

training materials, and regulatory improvement proposals, ensuring consistency and coherence in national public health practice.

PHC and regional CDCs will maintain regular collaboration through structured data exchange, joint situation analysis, and systematic feedback mechanisms related to the implementation of operational public health functions and state programs. Based on information and analysis provided by regional CDCs, PHC will identify needs for additional expert input, methodological support, or targeted capacity-building activities, thereby supporting continuous system improvement and responsiveness to regional needs.

Key results

- Technical guidance for regional CDCs in priority public health areas has been developed and operationalized.
- Structured bilateral exchange of data and analytical outputs between PHC and regional CDCs has been established, supporting the refinement of national programs and the strengthening of regional analytical and operational capacity.
- The capacity of regional CDCs to implement public health programs and projects is strengthened, including their ability to apply national methodologies and analytical frameworks in regional practice.

3.4. Partnering with communities to advance health promotion and prevention

PHC will strengthen partnerships with communities, recognizing them as key actors in health promotion and disease prevention at the local level. Communities provide the primary setting for shaping health-related behaviors, improving uptake of preventive interventions, including immunization, supporting screening for and early detection of health risks, and reducing barriers to access to health services. PHC will engage communities not as implementers of isolated activities, but as co-designers and partners in the development, adaptation, and testing of health promotion strategies that reflect local needs, context, and available resources.

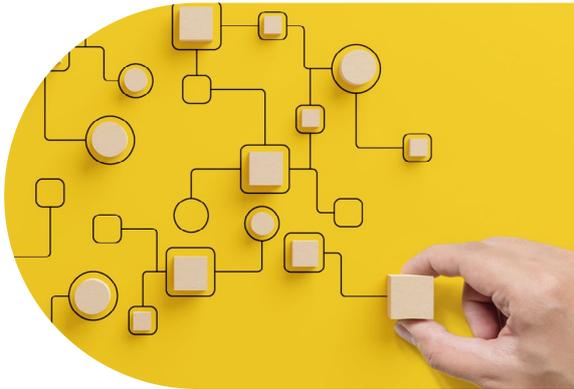
Within this area, PHC will pilot community-based models for health promotion and prevention, with a focus on behavioral and environmental risk factors. Ac-

tivities may include methodological support for local planning, implementation, and evaluation of health promotion initiatives; the development of practical tools and guidance for community action; and the initiation of pilot grants or applied research projects to test innovative approaches.

Particular emphasis will be placed on systematic learning from pilot initiatives and the scaling of effective practices. PHC will analyze implementation experience, formulate evidence-based recommendations, and integrate validated community-based models into national guidelines, programs, and methodological frameworks, with the objective of progressively strengthening communities' roles in health promotion and prevention.

Key results

- Pilot partnership models with communities for health promotion and prevention have been launched, supporting the implementation of community-level interventions.
- Communities have received structured methodological and analytical support, delivered in cooperation with regional CDCs, to support the planning, implementation, and evaluation of health promotion and prevention initiatives.
- Effective community-based practices have been systematically documented and translated into methodological guidance, enabling their scaling and adaptation across regions.



STRATEGIC GOAL 4

Enhance systems, organizational structures, processes, and workforce capacity to enable an adaptive and sustainable management model

PHC will develop as a sustainable, well-governed, and adaptive organization, capable of operating effectively in conditions of uncertainty, protracted crisis, and systemic change. This strategic goal defines internal governance and management principles aimed at ensuring transparency in decision-making, attracting and retaining qualified personnel, and systematically applying digital solutions. A key indicator of success will be the transition from reliance on individual effort to a structured management system characterized by clearly defined roles, transparent processes, and predictable, measurable results.

The organizational structure will progressively align with PHC's strategic objectives, mandate, and functional responsibilities, ensuring flexibility to address emerging challenges while maintaining clear accountability and distribution of responsibilities. Management practices will emphasize results-oriented planning, systematic use of performance indicators and data, and regular management reviews to assess progress, identify risks and bottlenecks, and adjust strategies and resource allocation accordingly.

PHC will strengthen **internal communication** as a core managerial function supporting organizational change and operational effectiveness. Internal communication will ensure **timely, clear, and structured information flows to staff regarding planned and ongoing changes, their implications for daily operations, and the roles and responsibilities of teams and individuals**. Management will use regular, structured communication formats, including **progress briefings, management and team meetings, decision rationales, and formal feedback mechanisms**. Effective internal communication will also serve as a foundation for a management culture based on transparency, accountability, and staff engagement. By ensuring that employees understand the objectives, rationale, and expected outcomes of organizational changes, PHC will promote active participation in planning and implementation processes, strengthen shared ownership of results, and support consistent and informed decision-making across the organization.

PHC will establish an integrated management system encompassing strategic planning, monitoring and evaluation, internal control, and quality assurance. This system will be supported by clearly defined standard operating procedures, documented business processes, and coordinated interaction between organizational units. The role of managers will be strengthened, with particular emphasis on team leads' accountability for achieving results, managing risks, and ensuring timely identification and resolution of operational issues.

PHC human resource management cycle, including recruitment, onboarding, professional development, and performance management, will focus on building a competent, motivated, and resilient workforce. The organization will maintain its commitment to transparent working conditions, professional growth opportunities, safe and supportive working environments, and the devel-

opment of leadership competencies among managers. Particular attention will be given to staff well-being, motivation, and inclusion, with consideration for the needs of different generations, veterans, and individuals with diverse professional and life experiences.

Special attention will be devoted to optimizing internal processes and strengthening interdepartmental collaboration. PHC will further institutionalize a project-based approach, joint planning mechanisms, and coordination between administrative and program functions, ensuring that internal support services enable rather than constrain core public health activities. In parallel, PHC will continue developing its digital infrastructure by implementing unified tools for process and performance management and establishing clear rules for information access, data protection, and cybersecurity.

4.1. Establishing and promoting a data-driven strategic management and decision-making framework with continuous performance monitoring.

PHC will establish a sustainable strategic management system in which the Strategic Plan informs day-to-day decision-making, rather than functioning as a formal reference document. The Strategic Plan will serve as an operational framework for setting priorities, allocating resources, forming teams, and managing organizational change, thereby serving as a practical management tool for PHC leadership and Team Leads.

The organizational structure and management practices will be progressively aligned with PHC strategic priorities, mandate, and functional responsibilities, ensuring a clear allocation of roles and accountability while maintaining sufficient flexibility to respond to emerging challenges and expanded functions. PHC will promote a re-

sults-oriented management culture, grounded in clearly defined objectives, performance indicators, and data-informed decision-making extending beyond the execution of routine tasks. Regular progress and performance reviews will be institutionalized to assess achievements, identify deviations from planned targets, and initiate timely corrective actions.

Information derived from monitoring the implementation of programs and projects, together with financial and human resource data and analytical outputs produced by functional units, will be systematically used to assess performance, support evidence-based executive decisions, and ensure ongoing adjustment of activities and resource allocation.

Key results

- PHC development strategy has been approved and is in place with clearly defined goals, deliverables, and performance indicators.
- PHC organizational structure has been aligned with the Strategic Plan supporting effective implementation of strategic priorities.
- A regular cycle of strategic progress reviews has been established to adjust priorities, allocate resources, and refine implementation approaches.

4.2. Standardization and integration of internal processes to support efficient day-to-day operation

This section underscores the importance of coordinated day-to-day functioning across PHC departments, guided by common rules, procedures, and operational approaches. A key objective is to transition from fragmented, unit-based operations to an integrated operating model in which initiatives, projects, and routine activities are jointly planned and coordinated. To support this shift, early joint planning arrangements and regular coordination meetings will be institutionalized to clarify roles, responsibilities, resource requirements, realistic timelines, and expected results at the outset of each initiative.

A project-based approach will serve as the core operational model within PHC, emphasizing results orientation, transparent planning of time, human, and financial resources, and more balanced workload distribution throughout the year. This approach will help reduce reliance on ad hoc decisions, limit staff overload, and mitigate risks arising from uncoordinated actions.

Administrative and operational units will function as internal support services for PHC program activities. Internal policies, procedures, and business processes will be documented, harmonized, and regularly reviewed to ensure their practicality, efficiency, and relevance. Particular attention will be given to clear, well-defined rules for internal interactions, including approval workflows, communication channels, and responsibilities at each stage of work.

The standardization of internal processes will involve developing, implementing, and routinely using standard operating procedures and process maps for key management and operational functions, including planning, implementation, reporting, and internal control. This will reduce the risk of errors, prevent duplication of effort, and decrease dependence on individual staff members, thereby improving operational predictability and organizational resilience, including during staff turnover. In parallel, PHC will continue to foster a culture of shared responsibility, in which effective interdepartmental coordination becomes standard practice rather than an exception.

Key results

- Core internal processes, including administrative, financial, human resources, and project-related processes, have been documented and endorsed, ensuring their coordination across departments and effective integration into day-to-day operations.
- Standard operating procedures and process maps for key day-to-day operations have been refined and applied to routine practice.
- A project-oriented approach has been institutionalized and is operational, with clearly defined roles, responsibilities, resources, timelines, and performance monitoring milestones for key initiatives and activities.
- Sustainable internal coordination mechanisms have been established, including early joint planning, regular coordination meetings, and standard operating procedures for interdepartmental interaction.
- Team Leads are systematically engaged in planning, monitoring, and risk management, coordinating activities across departments and using structured consultation mechanisms to reach aligned decisions.
- PHC's internal policies have been reviewed and updated to ensure consistency with operational practice and actual implementation processes.
- Management competencies of Team Leads have been strengthened through targeted development in project management, leadership, and risk-based management.

4.3. Strengthening a sustainable human resource management system to recruit, develop, and retain staff

The PHC workforce is a core institutional asset for fulfilling its mandate and achieving strategic objectives. PHC will apply a systematic, forward-looking approach to human resource management, taking into account wartime conditions, diverse professional and generational expectations, and the specific needs of veterans. Key priorities will include forecasting workforce needs, attracting qualified professionals, building effective and resilient teams, ensuring uninterrupted operation through appropriate role coverage and, where required, interchangeability.

Particular attention will be given to the onboarding and adaptation of new staff members. PHC will strengthen structured onboarding mechanisms to support timely integration into roles, a clear understanding of organizational processes and expectations, and early engagement with teams, while reducing the risks of professional burnout and premature turnover. Managerial accountability for the quality and effectiveness of onboarding will be clearly defined and embedded in management responsibilities.

Staff development will be treated as a continuous management process. Team Leads will regularly assess competency and training needs, develop and update individual development plans, and adjust them in response to evolving organizational priorities and operational demands. Workforce development will focus on both core management competencies and specialized professional skills required for public health functions.

Staff retention will be achieved through transparent remuneration arrangements, appropriate social guarantees, opportunities for professional growth, and safe and favorable working conditions. Training and professional development will be integral components of the retention strategy, complemented by motivation and recognition mechanisms to strengthen professional engagement, well-being, and organizational resilience.

Key results

- Human resource management cycle from recruitment and onboarding to performance evaluation and retention has been reviewed and updated to reflect wartime conditions and the needs of veterans.
- A structured onboarding system has been strengthened with defined stages, support tools, and clearly assigned managerial responsibilities to support new employees during their initial period of employment.
- A systematic review of training and competency needs has been institutionalized, supporting the continuous development and adjustment of individual professional development plans.
- Employee satisfaction is regularly assessed, and the findings are used to improve working conditions, management practices, and human resource policies.

4.4. Strengthening digital systems to support management, data access, and transparency

PHC will develop a unified digital ecosystem to support effective management, planning, and performance monitoring. Core managerial and operational processes will be enabled by digital tools, with data systematically embedded as a foundation for decision-making. The primary objective is the transition to a coordinated digital model that ensures consistent data storage, accessibility, quality, and use across the organization.

Digital solutions will be introduced in a gradual and pragmatic manner, prioritizing tangible improvements to day-to-day operations. Process digitalization will aim to reduce administrative burden, improve transparency of approvals and workflows, accelerate information exchange, and strengthen

coordination between departments. Requests for new digital tools or data solutions will originate from PHC departments but will be designed and implemented within a unified architecture, in line with an agreed institutional development roadmap.

Particular attention will be given to data governance and digital security. This will include defining core data sets for executive and programing functions, assigning clear responsibilities for data quality and maintenance, and establishing rules for access, use, and accountability. The development of the PHC digital ecosystem will be guided by information security requirements, personal data protection standards, and considerations for interoperability with other government information systems.

Key results

- A unified digital architecture for PHC has been established, defining principles and approaches for data storage, access, exchange, and use across all departments.
- Priority sets of executive and programing data have been identified and operationalized, with clear accountability assigned for data quality, timeliness, and use in management decision-making.
- Digital tools supporting core internal processes have been introduced and are in routine use.
- Consistent rules governing access, information security, and data protection, including personal data, have been established in line with applicable standards.
- Interoperability between PHC digital systems and other government information platforms has been achieved, where appropriate, to support public health functions.



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