



SUPPORT TO UKRAINE FOR DEVELOPING A MODERN PUBLIC HEALTH SYSTEM

A project funded by the European Union and implemented by a consortium consisting of GFA Consulting Group GmbH, Hamburg, and the Finnish Institute for Health and Welfare, Helsinki. The project supports consolidation and empowerment of the Public Health Centre of the Ministry of Health of Ukraine (UPHC) and supports the establishment of a modern blood safety system in Ukraine.

Project Newsletter
September 2022



Taras Ostapchuk, Acting Deputy Director, Public Health Center of Ukraine

During all the 6 years since its establishment, the Public Health Center of the Ministry of Health of Ukraine has been paying special attention to research in the field of public health. Being the leader in public health communication, the UPHC team sticks to evidence-based and fact-checking approach. For this reason, the development of a laboratory network is one of the UPHC priorities as the coordinator for the regional Centers for Disease Control and Prevention.

The role of a laboratory network became even more significant with the beginning of the COVID-19 pandemic, as laboratory diagnostics and monitoring of

the disease trajectory was carried out (and continues to be done) by the specialists from the UPHC national reference laboratory as well as from the network of regional laboratories of all forms of ownership. This data for Ukraine is further published in the media resources of the Public Health Center, Ministry of Health and in daily news. At the same time, the second reference laboratory for the diagnosis of tuberculosis, bacteriological, parasitological and especially dangerous pathogens is also fully operational, since other diseases did not disappear during the COVID-19 pandemic. And even during the full-scale invasion of Ukraine by the Russian Federation, the laboratory teams continue to diagnose, prevent infectious and non-infectious diseases, monitor environmental factors and investigate disease outbreaks.

The project team is continuously improving the operation of the laboratory network. Since the beginning of cooperation with the Project "Support to Ukraine for Developing a Modern Public Health System" in 2020, we have jointly conducted an analysis of the entire system in view of the best European practices, and we are currently developing a plan

to build the country's capacity for enhancing quality laboratory testing and disease reporting in Ukraine. This is one of the essential elements that contributes to the public health reform. With the help of international project experts, and in accordance with WHO recommendations, we have conducted a gap analysis of the regulatory framework and the actual work of laboratories in the regions; gained an understanding how to organise the work in a more efficient way and identified needs for diagnostic research in Ukraine.

Improvement of the technical background and training of employees is a significant part of system development. Joint analytical work with project specialists helped to identify the areas of growth for the staff of the public health laboratory network, and made us realise that a National Working Group on Laboratory Affairs should be established in Ukraine, together with a policy regulating the activity and further development of the laboratory sector.

Strengthening PHC communication: PHC portfolio, Communication strategy and Training modules on communication for healthcare professionals

The communication component has always been a significant part of the UPHC and Project cooperation, given that communication in public health is a strong tool for promoting reforms and implementing behavior change messages. In 2019-2020, Project experts conducted a profound communication capacity analysis of UPHC and the regional PHCs (regional Centers for Disease Control and Prevention - since 2021), and as a result – were defining areas for professional growth and creating a basis for learning curricula of the communication personnel.

Thus, the set of trainings in communication that were developed and delivered back in 2020, had a good response and strong demand due to the fact that the regional public health institutions underwent a restructuring process. Therefore, the project communication experts facilitated new training sessions for 25 rCDCs communication unit professionals in July-August 2022.

Last year, the development of the UPHC communication strategy was defined as one of the priorities of the Project and UPHC collaboration. The strategy aims at improving the efficiency of UPHC's activities and develop a system for collecting, analysing, preparing, and disseminating information of public importance to form a stable positive image of the Centre in society

and among public health experts as the principal and most reliable source of information on public health matters. Considering numerous crisis situations and challenges that the public health institutions faced and would face in upcoming months and years, the strategy is a tool to create a systemic, resilient, and consistent interaction with the target audiences, which conforms to the main directions of the Centre's activity and will also facilitate achievement of the strategic goals of the organisation. Therefore, starting December 2021, the Project team in cooperation with the UPHC communication department was actively working on Strategy development, and now the guiding document is on the Leadership approval stage. Based on the experience gained during the UPHC strategy elaboration, the communication department is equipped with tools to facilitate the creation of the communication strategy guidelines for the regional CDCs.

Along with the strategy - the comprehensive guideline and communication policy – the Project has also contributed to the development of UPHC activities portfolio – the presentation of the main areas of competence and UPHC plans and achievements, which is under finalisation.

Scaling up laboratories: best practices to consider in the Ukrainian context

The laboratory network development is one of the priorities of the UPHC and Project cooperation. Over the last 2 years, the activity on the laboratory network revision and upgrade was supported by a number of experts' recommendations on how to implement best international practices in Ukrainian context. These revisions were based on reflecting on differences between the regulatory framework and regional practices on one hand (network administration, target structure, quality of services, etc.) and on the good international examples on the other hand.

The Project experts assisted UPHC with analysing the current laboratory network capacities according to ExpandNet and WHO methodologies with nine strategy development steps that include:

- ✦ planning actions to increase the scalability of the innovation;
- ✦ increasing the capacity of the user organization to implement scaling-up;
- ✦ assessing the environment and planning actions to increase the potential for scaling-up success;
- ✦ increasing the capacity of the resource team to support scaling up;
- ✦ making strategic choices to support vertical scaling up (institutionalization);
- ✦ making strategic choices to support horizontal scaling up (expansion/replication);
- ✦ determining the role of diversification;
- ✦ planning actions to address spontaneous scaling up;
- ✦ finalising the scaling-up strategy and identifying next steps.

As a result, one of the recommendations was to establish a body to govern, coordinate, manage and facilitate the scaling-up of the laboratory network on the national level. Another significant upgrade needed is a clear laboratory network vision that will be a next step to developing the policy, its endorsement and stronger advocacy.

Reorganisation of the laboratory network could be one topic for scaling-up process. Implementing the "hub-and-spoke" organisational model in the regions could contribute to increased effectivity and efficacy of the system. That would require modifications in financing to increase transparency, to promote initiatives, to improve quality of services. Secure funding and monitoring and evaluation tools are one of the key elements for implementing innovations. Improving quality of services and increasing international comparability would require scaling-up of existing network of reference laboratories, too. Finally, moving towards diseases related to the environment would scale-up the scope of services and contribute to increased surveillance of environmental hazards and noncommunicable diseases.

ДЯКУЄМО

ВСІМ ДОНОРАМ ТА ПРАЦІВНИКАМ
СИСТЕМИ КРОВІ УКРАЇНИ



The World Blood Donor Day celebrations on June 14, 2022, were not promoted in Ukraine due to the security reasons caused by the unprovoked, unjustified, and brutal attack on Ukraine on 24 February 2022. The blood donor recruitment approach changed completely in the first months of war and was aimed at blood reserve formation, considering that the number of volunteers willing to donate blood, doubled in February and March 2022 and donors needed to be scheduled carefully to ensure donors' safety and balance of amounts donated against exact needs.

Yet, the Project ensured continuous communication with the Ministry of Health (MOH) and Ukrainian center for Transplant Coordination (UTCC) regarding the promotion campaign for voluntary non-remunerated blood donation. Although it was not possible to conduct any offline activities in recognition of the World Blood

Donor Day, the MOH, UTCC, blood donor recruitment organisation DonorUA and the Project team made sure to recognise and appreciate, via digital means, the colossal input and heroism of professionals working at different blood centers who have still been working amidst explosions and close to the frontlines, as well as, blood donors who showed the real Ukrainian spirit of courage and voluntarism; who kept donating blood in spite of all dangers and consequently saved many lives.

Together with partners, we created a digital video campaign to [say "Thank you"](#) on behalf of all the Ukrainians for the significant contribution of the blood donors and regional blood units, highlighting the WHO message that donorship is about solidarity, and this is one of the key elements of Ukraine's resistance.

Interview



Susanne Schardt, Senior international non-key expert in HIV treatment, care and support & Opioid Agonist Therapy

IN JUNE 2022, THE PROJECT TEAM LAUNCHED THE WEBSITE TREATMENT4UKRAINE.COM, AIMED AT ASSISTING UKRAINIANS FORCED TO LEAVE UKRAINE DUE TO THE WAR WITH INFORMATION ON THE HIV, TB, HEPATITIS TREATMENT AND OAT ABROAD. PLEASE DESCRIBE WHAT WAS YOUR ROLE AND TASK WITHIN THIS INFORMATION CAMPAIGN AND WHAT COUNTRIES WERE UNDER YOUR AREA OF RESPONSIBILITY?

I was involved in drawing up questions for the questionnaire – especially on HIV and OAT. The countries under my responsibility were the German speaking countries Germany, Austria, Switzerland, and Liechtenstein.

WHAT WERE YOUR FINDINGS WHILE COLLECTING DATA IN GERMAN SPEAKING COUNTRIES AND WHAT PIECES OF INFORMATION WOULD YOU DEFINE AS EXTREMELY USEFUL FOR UKRAINIANS IN THE SITUATION UNFOLDED?

I was positively surprised by the wealth of official information that was already available online in most of the countries. General questions about accessing

the countries, getting registered and accessing health care were easy to answer and there is also information material available in Ukrainian. Specialized information for our target groups (people who need substitutional therapy, TB or hepatitis treatment and people living with HIV) was a bit more difficult to find, but the most useful information could be found through different channels and by speaking to experts in the various countries. We provide this information for two main target groups - those who know their status and are already on treatment and those who don't, but feel they need testing or screening to check their status. Thus, the most useful information was about the conditions for bringing your medication into the country and for receiving medication, if needed, in the country without much delay and cost

WAS IT EASY TO BROWSE FOR TREATMENT OPTIONS FOR UKRAINIAN CITIZENS? WHAT RANGE OF SERVICES WAS PRESENTED IN THE GERMAN SPEAKING COUNTRIES? ACCORDING TO YOU, DOES IT FULLY COVER THE NEEDS OF THE PEOPLE WHO NEED CURE AND PROTECTION IN THE EU STATE? WHAT ELSE COULD BE DONE TO ENSURE ACCESS FOR TREATMENT AND PROTECTION FOR THOSE

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WHO STAY IN GERMAN SPEAKING COUNTRIES WITHIN THE EU?

As stated above, general information about health care for Ukrainians was relatively easy to find and most of the time also available in different languages, including Ukrainian. Of course, information about the more common infections, including COVID-19, was more broadly available than the specialised information our target groups need. Since TB is known to be more common in Ukraine than in other European countries, many health authorities have reacted to this by offering free testing/screening right after the entry of Ukrainian citizens into their country. At the same time, specialists like the AIDS-help organisations had already put some specialised information about HIV,

HEP (hepatitis), OAT (opioid agonist treatment), PeP (post-exposure prophylaxis) and PreP (pre-exposure prophylaxis) on the Internet – also in Ukrainian. They were also very helpful in providing additional information for our website and have personnel and volunteers speaking different languages. I think, the most cumbersome hurdle to overcome in the new country is the language barrier. It would be very helpful if more organisations and private persons would volunteer for translation. But when it comes to issues like health – data protection and confidentiality between the patient and the doctor or social worker is equally important. I hope there will be a solution to overcome the language barrier without impeding this confidentiality.



Petro Okhrimenko, Project national expert for blood safety

PLEASE INTRODUCE YOURSELF, DESCRIBE YOUR PROFESSIONAL EXPERIENCE.

I am the head of the Transfusion Center at "Feofania" Clinical Hospital of the State Administration of Affairs for 10 years, transfusion specialist, and therapist with more than 21 years of medical experience in general and 12 years of work experience in the blood system. I was actively engaged in the Project's assessment of regional blood centers using the EuBIS tool (2019–2020) and hemovigilance (2022)

WHAT ARE THE MAIN GOALS OF THE NATIONAL BLOOD SYSTEM DEVELOPMENT AND HOW THEY WERE AFFECTED BY THE WAR?

In principle, the main goals of the development of the national blood system have not changed - to meet health care needs with sufficient quantities of safe and high-quality blood components. This has become the key task of the national blood system under the conditions of martial law, which directly impacts on provision of the various types of medical assistance to the civilian population, military personnel and employees of law enforcement agencies, and therefore – contributes to defence capability and state security.

During martial law, all efforts were aimed at ensuring sufficient volumes of procurement of donor blood and blood components, rational redistribution of available resources and stocks of donor blood and blood components, ensuring uninterrupted supply of donor blood and blood components to places of active consumption. One of the urgent priorities was the development and implementation of a model of the sequence of actions of blood system participants at all levels (hospital level where health care institutions provide transfusion services; regional level with blood system establishments; national level with National Transfusion Center) in view of any unforeseen donor blood shortage.

HOW DID THE DYNAMICS OF BLOOD DONATION CHANGE AFTER FULL SCALE INVASION AND HOW IS THE DONATION PROCESS ORGANISED UNDER THE CURRENT CIRCUMSTANCES?

Since the imposition of martial law, there has been a significant increase of the number of people wishing to become donors for the first time, as well as of donations from so-called reserve donors (they make 1-2 donations annually), who usually visit blood centers irregularly. Also, the number of donations from active donors who regularly donate blood and

its components (those who make 3 or more donations annually) has increased. As for the latter group, their activity was mostly limited only in view of observing healthy intervals between donations. A similar situation was observed in blood donation sphere during the Revolution of Dignity and the beginning of the war in eastern Ukraine in 2013–2016. Currently, our Transfusion centers receive sufficient blood donations from first-time donors and reserve donors. It is worth noting the high activity of donors who are internally displaced, who often come to donate in groups and families.

There is a minor decrease in the number of donations from active donors. I see the following factors as the main reasons:

- ← logistical problems – periodic difficulties with safe access of donors to donor centers due to the proximity of hostilities, the threat of sabotage, frequent air, missile and artillery attacks on the civilian sector, etc.
- ← internal displacement and emigration of the population caused by the war (the latter concerns women);
- ← recruitment of active donors to the Armed Forces of Ukraine or other law enforcement agencies.

HOW ARE THE SAFE BLOOD DONATION PROCESS AND TRANSFUSION SERVICES ENSURED DURING WARTIME?

Since the beginning of the war, as well as now, "Feofania" Clinical Hospital, for example, provides medical assistance to the civilian population and the military. The personal safety of donors is a priority. From the first days of the war, we tried to ensure the safety of donors visiting our Transfusion Center at the highest possible level by applying the following measures:

- ← ensuring the safety of donors during air alerts and the approach of active hostilities. Every time, during the alarm alerts, donors are accompanied by the staff to the shelters, which significantly slowed down the process of reception, medical

examination of donors, collection of donor blood and blood components; but donors accepted this with understanding and without critical complaints;

- ← safe transportation of donors was carried out with the involvement of volunteers, hospital employees, other donors and citizens;
- ← measures for the safety of processing and blood stocks: development and implementation of an additional set of measures aimed at ensuring the continuity of technological processes and preservation of the created stocks of blood components under the conditions of imminent hostilities and the threat of shelling and bombing, the threat of lack of centralised power supply, etc.;
- ← urgent provision of the necessary strategic stocks of consumables critical for procurement and processing of donor blood. It should be noted that the suppliers adhered to the position of social responsibility and, despite the difficulties of wartime, helped us to solve urgent strategic problems with consumables by providing the necessary medical products as humanitarian aid.

Sadly, the variable "awareness" of many first-time donors regarding the principles of operation of blood centers and the need for personal preparation before donation turned out to be a significant problem. Some of the donors came to the blood establishments unprepared in the excitement of the circumstances. Due to the lack of proper preparation, as well as the lack of sufficient quantities of medical kits used for the collection, testing and processing of donated blood and blood components, we had to ask donors to visit the Transfusion Center prepared on another day. To avoid conflict situations, we had to spend a significant part of our working time explaining the reasons for rejection of donations and the need for proper preparation before donation. Incidents also occurred during visits. For example, potential donors, having learned from messages in the mass media or social networks that blood establishments work around the clock (though the correct message was about

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ensuring the continuity of technological processes and the distribution of blood components for health care institutions, and not about donor reception hours) came to the Transfusion Center late in the evening or at night. Also, unpleasant complications arose thanks to “bad luck volunteers” from social networks, who unintentionally disseminated unverified or false information about the urgent need for blood donors, or the critical shortage of supplies of donor blood and blood components in blood centers. Despite their apparently good intentions, their actions greatly complicated the work of blood centers and led to numerous conflict situations.

In the area of transfusion care, given the situation when military operations were conducted on the suburbs of Kyiv and in the city, it was periodically necessary to apply the principles of the use of donor blood and blood components in conditions of mass influx of patients with massive blood loss. For example, when severely wounded patients with massive blood loss, without a known blood group, arrived through the reception department to the operating rooms “from the hospital cart”, we used the first dose of donor erythrocytes from the so-called “universal donor” O(I) Rh(-), and at the same time, the group and rhesus factor of such patients was determined to carry out the subsequent transfusions. In case of urgent need, “universal” fresh-frozen AB(IV) plasma was also used. The precious minutes saved by using this approach decreased morbidity rates among causality cases with low survival odds. The use of such an approach contributed to saving the lives of seriously wounded patients.

At the moment, when causality cases arrive in a planned manner (as of the beginning of August 2022), the clinic uses the classical principles of component therapy, taking into account the same blood group and rhesus factor of the patient.

It should be noted that during the period of active hostilities near Kyiv, the issues of forming sufficient emergency reserves of erythrocytes from the “universal donor” and the availability of a sufficient amount of quarantined “universal” fresh-frozen

plasma were quite acute.

HOW QUICKLY WAS IT POSSIBLE TO ADAPT THE STAFF OF BLOOD ESTABLISHMENTS TO NEW REALITIES?

There were significant difficulties in organising the smooth operation of the Transfusion Center in the first days of the full-scale war, during active hostilities and the course of the attempted siege of Kyiv. I think a similar situation was observed in most health care facilities in the city. Since the beginning of hostilities, some were forced to immediately evacuate their families and children from the war zone. For the first period of the war, the available personnel worked and lived in the hospital. Some of the staff were with their families and children until it was possible to evacuate them. Everyone worked around the clock, without days off. In a few weeks, when the situation near Kyiv began to improve, some of the employees were able to return – and it was possible to carry out a “rotation” of personnel. It should be noted that despite the difficult situation and significant psychological pressure of the first weeks of the war, the staff of the Transfusion Center was united and worked faithfully, supporting each other. I am very satisfied with their work.

WHAT KIND OF SUPPORT DO YOU EXPECT FROM THE EU FUNDED PROJECT “SUPPORT TO UKRAINE FOR DEVELOPING A MODERN PUBLIC HEALTH SYSTEM” IN TERMS OF EUROPEAN EXPERIENCE REGARDING THE REFORM OF THE BLOOD SAFETY SYSTEM?

The war has significantly changed the regular life but the urgent need to transform the existing blood system according to a European model remains relevant. It is probably more correct to say that the critical shortcomings and problems that existed in the last 2-3 decades have become extremely acute.

Regarding the support expected, in my opinion, it is essential to assist in the following areas:

- ← Further adaptation and implementation of an adequate communication campaign for blood donors recruitment and mobilisation to ensure a

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- stable flow of donors in peacetime, martial law and emergency situations;
- Support developing a system for scheduling and planning blood donation during martial law and emergency situations;
- Support the implementation of the developed model of the sequence of actions of blood system participants at all levels under conditions of shortage of donor blood and blood components;
- Training of staff of health care facilities and blood establishments to calculate the need for donor blood and blood components, manage reserves of donor blood and blood components;
- Training of doctors of health care facilities regarding the requirements to the clinical transfusion process, development of a short clinical guide for doctors on the proper use of donor blood and blood components.

This publication was produced with the financial support of the European Union. Its contents are the sole responsibility of the project "Support to Ukraine for Developing a Modern Public Health System" and do not necessarily reflect the views of the European Union.

The overall project's objective is to support the modernisation and development of a sustainable Public Health System that is able to ensure disease prevention and control standards in line with EU legislation, requirements, and practices. The project shall contribute to strengthening national leadership and capacity in Public Health policy programming and implementation. The project supports the consolidation and empowerment of the newly created Public Health Centre of Ukraine (UPHC) and supports the creation of a modern Blood Safety System in Ukraine.



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