



# 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

June 2021



## Roman Rodyna UPHC Director General

To my mind, the main words of 2020 and 2021 were "adaptability" and "support" highlighting two values that have set priorities for us - both in personal and professional life. As citizens, and especially as representatives of the public health institution, we have become more attentive to the pieces of advice we give, to the information we disseminate, to the initiatives we support. At the same time, the Public Health Center of Ukraine (UPHC) began working with international advisors and launching more information campaigns.

Being the UPHC head of the department for organisation of epidemiological surveillance until February 2021, I was determined to strengthen international cooperation and to adapt international experience in the field of epidemiological surveillance. In particular, the Project "Support to Ukraine in Developing a Modern Public Health System" became the reliable partner of the UPHC in organising a series of training modules on epidemiological surveillance for medical workers, family doctors, infectious disease specialists, epidemiologists and laboratory workers. A new training on influenza surveillance for laboratory centers and health care departments is currently being prepared with the Project assistance.

Notably, the Communication Center for vaccination against COVID-19 under the auspices of the UPHC was established, and thereby Project is currently supporting its several activities. The Center is a platform bringing together UNICEF, WHO and other Ukrainian and international partners. The main task of the Communication Center is to develop and disseminate information materials on the pandemic, its consequences and risks. One of the Project goals is to support the dissemination of information about the COVID-19 pandemic, and together with our partners we hope to reach a larger audience and convey important key messages about vaccination and treatment of COVID-19 to the Ukrainian public more effectively.

A valuable contribution of the Project during the pandemic was the translation of the European communication experience related to COVID-19: recommendations, guidelines, positive examples. Additionally, the project contributed to the elaboration of the UPHC communication strategy by analysing the current communication model and suggesting the ways to improve it.

It is significant to note the Project's grave support to the creation of institutional frameworks for the development of blood services, namely the creation of a competent authority in the field of blood transfusion, the creation of the National Transfusion Center, managed by the state institution "Ukrainian centre for transplant coordination". The process of preparing the IT solutions for the national blood donor registry is ongoing. Currently, the Project experts are working on a national voluntary non-remunerated blood donation communication campaign, as well as cooperating with the Ministry of Health working group on blood safety and assisting in development of legal acts to the new law on blood safety, which was adopted last year.

As the Director General of the Public Health Center of Ukraine, I anticipate our close and effective cooperation with the Project "Support to Ukraine in Developing a Modern Public Health System". I am convinced that there are many plans ahead and numerous opportunities to make them a reality. Accumulating our joint efforts is crucial and fundamental for the modern public health system nowadays.

## Capacity and Training Needs Assessment of Regional Public Health Institutions was finalised



Pic 1. Distribution of the survey participants by public health organizations

The capacity and training needs assessment (CTNA) was conducted between June and November 2020 by the Project experts Dejan Ostojic, Markiyan Datsyshyn, Oksana Artemchuk and Svitlana Pkhidenko. It focused on administrative and financial data, institutional capacity and training needs assessment (TNA) of human resources (HR) in surveyed regional Public Health institutions (rPHCs). This survey aimed to provide recommendations on the capacity building process and the development of relevant training modules for the workforce of Ukrainian public health institutions dedicated to financial, administrative and HR issues.

In total, 341 health care professionals, financial, HR/management departments from 50 Ukrainian public health institutions participated in the assessment. The list of respondents included: 25 regional laboratory centers of the MOH; 22 regional public health centers, and 3 laboratory centers of MoH on transport.

Based on the key findings of the survey, the Project experts provided the rPHCs representatives with recommendations to strengthen their capacities and to perform more effectively.

Hence, in terms of management and leadership, it was suggested to work intensively on improvement of the vertical and horizontal communication and cooperation across the public health system, especially, engaging MoH to establish a clear link between public health policy, strategic plans, operational plans and work plans. Another significant step was the support of UPHC in involving regional PH institutions in networking with PH institutions in other countries, especially those from EU member states, which can be a platform for exchange of experiences, joint research, implementation of some regional projects or any other kind of cooperation that would contribute in building their institutional and HR capacities.

Those regional PH institutions that neither established a PR department or a press service unit, nor developed a plan for strategic relations with external stakeholders should put this on their priority list, including elaboration of a long-term advocacy strategy that would be helpful in strengthening the relations with external stakeholders.

The priority in the HR policy domain should be the improvement of the staffing process and making

rPHCs prestigious and competitive workplaces to stay. This can be achieved by implementing long-term strategic HR plans, containing retention policies and measures with a primary focus on the payment system (competitive allowance) and incentives (possibility of professional development, benefits and rewards).

The following training needs were defined according to the assessment:

✦ For senior managers: policy analysis and development; strategic management/planning; operational management/planning.

✦ For chief accountants/economists/finance: policy-based budgeting; financial management/planning; costing; budgeting; strategic management/planning; operational management/planning; monitoring and evaluation.

✦ For HR manager/chief staff inspector/HR professionals: training and professional development; conflict management; communication at work; stress management; job analysis, job design and job description; staffing.

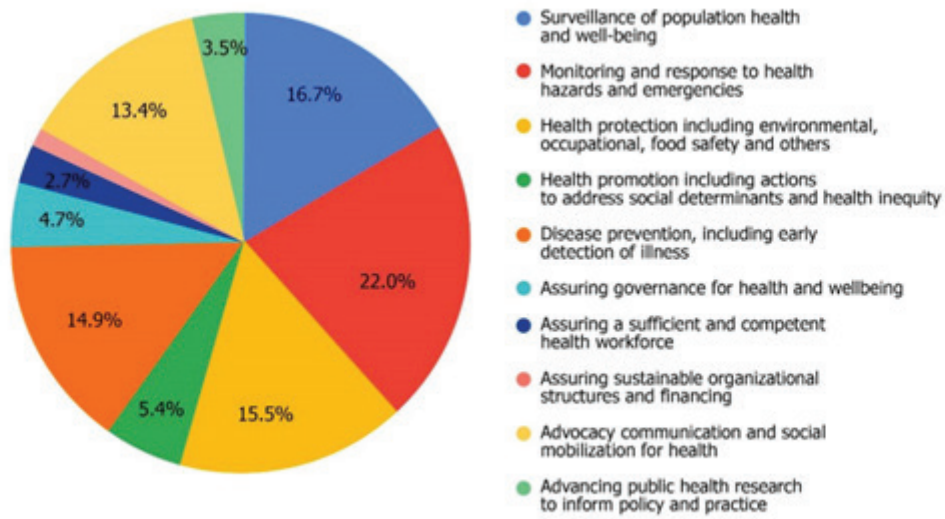
In the meantime, a set of training expectations were collected from the health care professionals' personnel of the rPHCs and laboratory centers to strengthen their capacity in essential public health operational functions (EPHOs); science and practice; health security; health promotion, partnership and collaboration; communication, culture and advocacy components:

1. To develop the continuous professional development (Training) plan for public health professionals that will include several training topics stated in the survey (epidemiological surveillance of communicable and non-communicable diseases and assessment of key public health indicators; prevention and control of non-communicable diseases, health promotion, nutrition and food safety) reflecting a component devoted to development and implementation of public health programs including planning, monitoring, and evaluation;

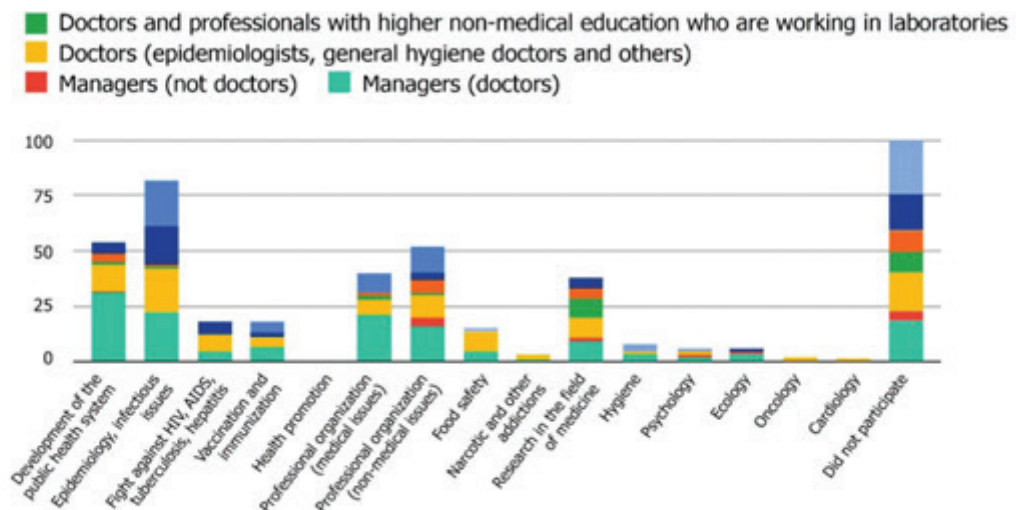
2. Develop and adapt training modules in collective leadership and effective communication for public health professionals and the public health context.

3. Develop or revise an existing course on "Research methods: quantitative, qualitative and mixed methods

and related biostatistics". The work in this direction could be done in collaboration with universities.



Pic 2. Distribution of essential public health operational function (EPHOs) by all respondents



Pic 3. Training courses visited by public health staff of different groups of positions during the last three years



# Project team discussed the key activities and cooperation priorities on blood safety with the former Deputy Minister for International Cooperation and European Integration

On April 16, the Project team participated in the meeting led by the deputy minister for International Cooperation and European Integration Ihor Ivashchenko. The implementation of the law "On safety and quality of donor blood and components" and the project support of this process were notably highlighted during the meeting. It is worth mentioning that the project is working on the basis of the agreement between EU delegation and Ukrainian government so there are already predefined activities that the project needs to implement.

In terms of cooperation, the recent project activities, dedicated to blood safety, were discussed:

1. Legal approximation. The Project experts contributed to the development of the new law on blood safety that was approved last year. Currently, the project is supporting the elaboration of secondary legislation. This process is expected to last until the end of this year. The project is supporting the MoH working group on blood safety and 24 different drafts of resolutions and regulations were drafted, reviewed, or commented and more than 30 meetings were held.

2. Structure of blood transfusion system. In the framework of these activities, MoH relies on the Project experts' assistance for the establishment of a Competent Authority in the area of blood transfusion. This includes the development of its functions, responsibilities, and staffing requirements. Currently, the State service on Medicines and Drugs Control is designated to act as the Blood Competent Authority. The National Transfusion Center (NTC) which is to be established, will be the coordination body for all activities of blood transfusion establishments

on behalf of MoH. Additionally, there is the National Transfusion Committee which is an advisory body of MoH responsible for developing guidelines, orders, resolutions, and discussion of challenges. The Project provided the description of duties and responsibilities of the Committee.

3. To ensure the availability of blood and safety of blood donors, the project is assisting with the establishment of the National donor registry in collaboration with the National Health Service of Ukraine (NHSU), MoH and the experts on information technology. This activity is supposed to result in the development of the electronic list of all blood donors to make it accessible to blood centres. The project is also supporting the shift from paid donation to voluntary donation according to EU principles. The national voluntary non-remunerated blood donation communication campaign is being prepared together with several partners to ease the shift from the current blood donation system to the new one among the population of Ukraine.

4. The capacity building activities for personnel in the blood transfusion field involve international experts to organise online-events in the area of blood transfusion with specific emphasis on response to COVID-19 impact on blood transfusion. There are several aspects to be covered, including, but not limited to, donor selection criteria, raising awareness on best ways to protect staff and donors from infection. In addition, the project is also making sure that all EU and international guidelines on COVID-19, convalescent plasma are available in Ukrainian for the stakeholders.

# The policy brief on international legal practice and experiences in taxation of unhealthy products was developed

Taxation of unhealthy products can be part of a solution to increase permanent health care expenditures because in addition to raising revenues, taxing unhealthy foods and beverages is an effective means of influencing what people eat and improving population health. Therefore, in many countries there is an increasing interest in levying taxes on unhealthy products to achieve public health goals, which are commonly labelled as health taxes.

Given that such a legal base is not currently introduced in Ukraine yet, the document prepared by the Project experts Dejan Ostojic and Markiyan Datsyshyn as the response to the MOH request, will form a basis for development of the Draft Law of Ukraine on Taxation of Food Products with Excess Salt, Sugar and Saturated Fats. Their research and analyses were significant in terms of providing insights into how the taxes can:

- Reduce consumption of targeted products and related harms;
- Generate revenues for health objectives and distribute the tax burden across income groups in an efficient and equitable manner;
- Be made politically sustainable.

Examples of several countries have been elaborated in this policy brief, including Denmark, Hungary, Mexico, the Philippines, Portugal, and the United States.

According to the project experts' findings, health taxes can be imposed on products high in caffeine or products that had been subjected to intensive processing, such as processed meat. For non-alcoholic beverages, the most common targets of taxes are SSBs (sugar-sweetened beverages), which can include soft drinks or soda, other sugar-added juices, and isotonic, but it can also include milk-based products (e.g. milk desserts) or full fat or high-sugar milk.

The policy brief highlights that small taxes are likely to yield substantial revenue but are unlikely to positively affect health outcomes. High taxes are likely to have a direct impact on at-risk populations but are less likely to be politically palatable or sustainable. Overall, there is considerable evidence that high tax rates (for example, those that raise the unit price by 20% or more) on beverages are likely to have a positive impact on health behaviours and outcomes. The evidence is similar for taxes targeting unhealthy foods, though there are a smaller number of studies and the taxes in question were often more complicated for implementation and monitoring of the effects.

The survey stresses that taxes relevant to health do not have to be framed or designed as exclusively health or revenue measures. Moreover, reduced consumption and higher revenues can be sustained over the long term by ensuring taxes are simple to implement administratively. The report is currently under the MoH review.

## Erika Wichro

Austrian Medical Doctor  
and International Public  
Health Expert, Project  
Senior non-key expert  
in epidemiology

AFTER HAVING REVIEWED THE STRATEGIES FOR VACCINATION IN EU COUNTRIES, WHAT WERE YOUR MAIN FINDINGS? DID YOU DEFINE ANY DIFFERENCES IN THE IMPLEMENTATION OF THE STRATEGIES IN VARIOUS COUNTRIES/REGIONS?

The European Centre of Disease Prevention and Control is an agency of the European Union. In its technical report on "Objectives of vaccination strategies against COVID-19" published on April 23, 2021, the ECDC addresses public health authorities in the European Union/European Economic Area (EEA) and EU/EEA National Immunisation Technical Advisory Groups (NITAGs). The ECDC highlights that rapid deployment of vaccines against COVID-19 may enable non-pharmaceutical interventions (NPI) – such as wearing of masks in public spaces - to be eased, depending on the local situations. It also emphasises that efficient and effective vaccination strategies should be directed by explicit objectives. These objectives include the setting and prioritisation of clear and measurable goals for COVID-19 vaccination strategies as vital. The ECDC describes the four potential goals of COVID-19 vaccination, which entail reduction of pressure on the healthcare system; reduction of overall COVID-19 severity and mortality; and re-opening of society; and disease elimination. This is anticipated through the implementation of the above. Clearly defined and measurable goals for vaccination against COVID-19 enable to adapt country-specific strategies accordingly. This is critically important in times of uncertainty and high expectation and can be conducted in a step-by-step approach, with provides the flexibility to adapt to unforeseen changes.



WHAT KIND OF COVID-19 VACCINES HAVE BEEN AUTHORISED FOR PUBLIC USE IN THE EU/EEA COUNTRIES AS PER MAY 2021? ARE THERE ANY VACCINES STILL UNDER REVIEW OR DEVELOPMENT?

The European Medicines Agency (EMA) authorised the following COVID-19 vaccines for use in the European Union:

- Comirnaty; \* COVID-19 Vaccine Moderna;
- Vaxzevria (previously COVID-19 Vaccine AstraZeneca);
- COVID-19 Vaccine Janssen.

Under current rolling review are the following COVID-19 vaccines:

- CVnCoV;
- NVX-CoV2373;
- Sputnik V (Gam-COVID-Vac);
- COVID-19 Vaccine (Vero Cell) Inactivated.

The EMA also provides the regular updates on the COVID-19 vaccines on their homepage.

# Interview

Age-based and risk groups<sup>1</sup>-based prioritisation to vaccinate against COVID-19 will help to decrease deaths and severe morbidity among those who are vulnerable due to underlying medical conditions and other contributing factors. Apart from accurate data for evidence-based decision-making, also further research and studies monitoring vaccine effectiveness and impact are essential to ensure the utmost benefits of vaccination for all targeted groups. The ECDC emphasises that vaccination goals may require a culturally adapted approach. Contextual implications should also be considered, as countries vary concerning epidemiological developments, healthcare system conditions, and resource availability. It is the responsibility of the concerned national authorities to ensure country-specific vaccination goals and plans are implemented accordingly to sustainably contain the COVID-19 pandemic. Having the above mentioned four goals in mind, countries are focusing primarily on the vaccination of vulnerable groups (including elderly, healthcare workers, risk groups and marginalized groups). To progress with vaccination and to reach an anticipated level of herd immunity, a well-functioning and sufficient supply of COVID-19 vaccines is necessary. Reaching herd immunity in a society would demand the inclusion and coverage of children and adherence of highly mobile population and hard to reach communities.

## WHAT ADVANTAGES OF THE EU COUNTRIES VACCINATION STRATEGIES COULD UKRAINIAN AUTHORITIES CONSIDER?

Utilizing existing functioning systems and indicators for disease surveillance, reporting and vaccination strategies implementation, the ECDC provides technical support and monitoring to concerned authorities. This includes a platform for cross-country experience sharing, joint studies and research projects, and regional trend analysis of disease / COVID-19 developments. Similar, utilising EMA may provide the benefits of an existing system on vaccine conditional marketing authorisation and pharmacovigilance study results. Furthermore, identified lessons learned and best practices may serve as additional guidance for countries.

## WHAT ARE THE ECDC AND WHO MAIN RECOMMENDATIONS FOR VACCINATION OF THE PERSONS RECOVERED FROM COVID-19?

WHO and ECDC currently recommend people who recovered from COVID-19 to receive one dose of COVID-19 vaccine after six to eight months because it is assumed that they have developed some natural post-disease immunity. According to the general vaccination practice, the earliest possible time to administer COVID-19 vaccines post-infection is three weeks after complete clinical recovery or two negative PCR tests, if asymptomatic. There is also discussion what type of vaccine is to be used, how to measure and standardise immune response, and how emerging VOCs might impact the vaccination of those recovered from COVID-19, and the capabilities amongst EU/EEA countries.

## WHAT IS THE "GREEN PASS"? WHAT ARE REQUIREMENTS AND THE PROCEDURE TO GET IT? DOES IT ALLOW TO FACILITATE THE SAFE FREE MOVEMENT OF CITIZENS WITHIN THE EU COUNTRIES ONLY OR BEYOND?

The European Commission is in the process of rolling out the digital green certificate or "Green Pass" very soon to facilitate the safe and free movement of citizens within the EU during the COVID-19 pandemic. This digital green certificate will be valid in all EU Member States and contains three conditions for the benefit of less strict measures. These three conditions are COVID-19 vaccinated, a negative test result, and / or COVID-19 recovered. As per the EC, national authorities are in charge of issuing the certificate. It could be issued for example by hospitals, test centres, or health authorities. For convenience, the digital version can be stored on a mobile device. Citizens may also request a paper version. Both will have a QR code that contains essential information, as well as a digital seal to ensure the authentic certificate. As per the EC the digital certificate is intended to facilitate free movement inside the EU. It will not be a pre-condition to free movement, which is a fundamental right in the EU. The Digital Green Certificate can also prove the results of testing, which is often required under applicable



public health restrictions. The EC sees the certificate as an opportunity for Member States to adjust the existing restrictions on public health grounds, which may help to facilitate travel cross-border.

It is worth mentioning that the “three conditions” – namely COVID-19 vaccinated, a negative test result and / or COVID-19 recovered might serve also within respected countries as measures, depending on the currently used non-pharmaceutical interventions.

In this context, considering a step-by-step release of interventions and restrictions does depend on the local/-regional situations. For areas with variants of concern (VOCs) and high-risk transmissibility, more strict measures for international travel may be considered and implemented or released as deemed necessary.

The EC website is the most relevant source of information on any update in this field before planning a trip.

## Interview



### Tetiana Skapa

State expert of the expert group on NCDs surveillance of Public Health and disease prevention Directorate

ONE OF THE RECENT PUBLIC HEALTH DIRECTORATE PROJECTS IS THE CABMIN RESOLUTION DEVELOPMENT ON SCHOOL NUTRITION. WHAT ARE THE FURTHER STEPS IN THIS DIRECTION?

The demand on updating the requirements for nutrition is based on the results of the “Health and behavioural orientations of student youth” survey (HBSC – Ukrainian Institute for social research – with the support of UNICEF, 2018), a study on the nutrition of Ukrainian children (Association of Nutritionists of Ukraine and IPSOS, 2019). The elaboration on the

draft resolution of the Cabinet of Ministers of Ukraine dated 24.03.2021 N° 305 'On approval of norms and the Procedure for catering in educational institutions and children's health and recreation facilities' has lasted for almost six months due to the complexity of this document. Additionally, the joint draft development implied coordinating the requirements with numerous stakeholders related to the organization of children's nutrition in organised groups.

There are new approaches and opportunities to organise meals in an educational institution or children's health and recreation institution which are introduced in the document, taking into account

institutions' capabilities and needs. New dietary standards have been established, considering the best world practices and recommendations of the World Health Organization on the principles of a healthy diet. However, the work on this is not complete. We are currently collaborating with chefs, nutritionists and technologists to develop a four-week menu for the respective season of the year, which will be recommended for use in establishments. The first draft of such a menu has already been published for discussion on the official website of the Ministry of Health.

### IN YOUR OPINION, WHAT APPROACH CAN BE APPLIED TO RAISE THE SCHOOL CHILDREN'S AWARENESS OF A HEALTHY DIET?

No change happens quickly without resistance. If the child is accustomed to eating so-called "junk food", a variety of snacks with a high content of salt, sugar and fat instead of fresh vegetables and fruits, sweet sodas instead of milk r, sausages instead of meat and fish, rapid changes should not be expected. Additionally, to change eating behaviour takes time and reliable, accessible and interesting information on the culture of healthy diet and the harm to health caused by poor nutrition.

For changes to happen more quickly, information about the benefits of healthy eating should be accessible through various communication channels, including the educational programs for kids, starting at preschool age. After having acquired the skills of healthy nutrition in preschool, children are anticipated to enter primary school with well-formed eating habits that need to be constantly maintained and developed. For this reason, the educational process in this area should be continuous.

### THE NATIONWIDE STEPS SURVEY ON THE RISK OF NCD FACTORS WAS CONDUCTED FOR THE FIRST TIME INITIATED BY MOH OF UKRAINE IN 2019. IN BRIEF, WHAT WERE THE GOALS, TASKS AND STAGES OF THE SURVEY? HOW DID THE SURVEY INTERIM RESULTS IMPACT THE DETERMINATION OF DIRECTORATE'S PRIORITIES IN NCDS EPISURVEILLANCE?

NCDs are a relative cause of premature deaths (before the age of 70) in Ukraine, accounting for 91% of all deaths. Among the four most common NCDs, the main death causes are cardiovascular diseases (65.8% of all deaths from all causes in 2012; 67.0% in

2017) and types of cancer (14.0% in 2012; 13.6 % - in 2017). Data collecting on the factors contributing to NCDs exacerbation is a crucial step for drafting and implementing the proper policies.

Therefore, the STEPS study is significant, taking into account that its goal was to obtain representative national data on the breadth of major behavioural and biological risk factors for NCDs among the adult population aged 18 to 69 in Ukraine.

The study was conducted between February and December 2019, and included face-to-face interviews using questionnaires, physical measurements and biochemical testing.

The data obtained ensures the introduction of the regulatory changes guided by the Directorate. Another significant step is enabling the future monitoring of trends and progress in the prevention and control of NCDs and risk factors.

### THE DIRECTORATE COOPERATES WITH THE PROJECT "SUPPORT TO UKRAINE IN THE DEVELOPMENT OF A MODERN PUBLIC HEALTH SYSTEM". WHICH OF THE PLANNED ACTIVITIES BETWEEN THE PROJECT AND THE DIRECTORATE IN THE FRAMEWORK OF NCD PREVENTION HAVE ALREADY TAKEN PLACE? WHAT IS UNDER DEVELOPMENT? WHAT RESULTS OF THIS COLLABORATION WOULD YOU EMPHASISE?

With the Project assistance, active work is currently underway to implement the objectives of the National Action Plan on NCDs to achieve the global goals of sustainable development, approved by the order N° 530-r of 26.07.2020 of the Cabinet of Ministers. Thus, the Project experts continue to work on draft orders of the Ministry of Health "On approval of information requirements related to the suitability of food for consumption by vegetarians and vegans", and "On approval of information requirements on possible or accidental presence in food of substances or products causing allergic reactions or intolerance". This work will bring the legislation of Ukraine closer to the legislation of the European Union and will contribute to the fulfilment of the undertaken obligations.

### THE PROJECT TEAM HAS RECENTLY REVIEWED A NUMBER OF REGULATIONS AND INTERNATIONAL GUIDELINES ON THE TAXATION OF FOOD AND BEVERAGES WITH EXCESS SALT, SUGAR, SATURATED FATS AND OTHER SUBSTANCES. OBVIOUSLY, THERE ARE NO TAX REGULATION DOCUMENTS OF FOOD PRODUCTS WITH EXCESS SALT, SUGAR AND

SATURATED FATS DEVELOPED IN UKRAINE YET. COULD YOU PLEASE DESCRIBE THE MECHANISM OF DRAFTING SUCH A DRAFT LAW OR RESOLUTION AND WHAT ARE THE INTERMEDIATE RESULTS?

indeed, the directorate intends to address the changes to the legislation on the taxation of food and beverages with excess salt and sugar. therefore, a meeting with the project experts took place. currently, we expect the project to get the analysis of international experience done and to receive recommendations on how to implement such regulations in ukraine.

WHAT OTHER ACTIVITIES ARE ABOUT TO BE LAUNCHED WITH THE PROJECT SUPPORT?

Thanks to the Project "Support to Ukraine in the developing of a modern public health system" the Directorate has more capacity for implementing measures aimed at minimising the risk factors of NCDs, which will result in the improvement of the general health of the population, impact the quality and duration of life.

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.



Finnish institute for health and welfare



Ukraine, Kyiv, 41 Yaroslavska Str.