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HEALTH MANAGEMENT AT THE REGIONAL LEVEL: MULTIVARIABLE PERFORMANCE ASSESSMENT

Abstract. *This article provides an analysis of areas for improving the state policy bases in public health services. The purpose of the research is to substantiate and develop systematized regulatory support for the structural-functional care model for children in particular regions. The authors systematized the legislative acts on the health technologies introduction in the structural-functional model. To achieve the study goal, the authors used a systematic approach to provide quantitative and qualitative analysis of the organization and optimization of medical-social justification of the structural-functional model; bibliosemantic – for the analysis of national and international experience in providing medical care to patients; epidemiological – to determine the levels, structure and dynamics of morbidity and prevalence of pathology in childhood; statistical – for collecting, processing and analyzing received information. The article presented the authors' development on regulatory support for the structural-functional medical model components for children. Besides, special attention was paid to the improvement of health technologies in regional health care systems. The authors identified areas for implementing the legislative initiative to improve the regulatory support for medical care provision. This paper provides the author's regulatory support of structural-functional medical model's components toward children with bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system. The authors emphasized the improvement of health technologies in regional health care systems. To improve the area of legislative and regulatory support, the study identified the directions for implementing the legislative initiative. Based on the study results, the authors proposed considering 7 legislative acts of Ukraine on improving the normative-legal provision of components of the structural-functional model. The obtained results could further assess their impact on implementing health technologies at the regional, municipal and family levels.*

Keywords: public health, regulatory support, structural-functional model, children medical assistance.

Introduction. Systematization of scientific treatizes devoted to analyzing the approaches in solving organizational and methodological problems in the healthcare system indicates the need for their structural and logical systematization and generalization. Therefore, it enables reasonable development of the structural-functional model of medical assistance to 0-3 years-children with bronchopulmonary dysplasia and senior children with a high risk of dysplastic pathology of the bronchopulmonary system (Shipko, 2016). The relevance of this development is caused by the existing socio-medical significance of the

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preservation of health problem, especially for preterm newborn infants with underweight or low weight and with high levels of disability or disease incidence (Bilovol and Shipko, 2016; Shipko, 2016). In this paper's frame, the authors presented the processed regulations on implementing healthcare technologies in the structural-functional model (Demikhov et al., 2020).

The purpose of the research is to justify and develop a classified set of regulatory support of the structural-functional medical care model for children with bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system, in particular regarding the introduction of health technologies in the structural-functional model.

Literature Review. The post-Soviet legacy in the form of free health care, referral for treatment and rehabilitation in sanatoriums, prophylactics and resorts at public expense, the payment of "hospital" money led to the leveling of personal responsibility for their health and behavior, carelessness to their health. The authors agree with N. Nyzhnyk that the state policy in health care requires the formation of new mechanisms for regulating the industry at the state, regional and local levels. Besides, at the present stage of the industry's development, the importance of a regional approach and active action by territorial authorities is growing (Bilovol & Shipko, 2016). Along with this, the problem of transformation of the health care system also requires a change of old paradigms (theoretical orientation of human activity and disease) – new ones (ethical orientation of human activity and health and health potential management), as well as specific ways and technologies of healthy development. lifestyle (Shipko, 2016). The standing commissions of the regional councils on health, childhood and motherhood now face the need to improve the health of the population and reform the health care system following today's requirements.

An urgent issue of social medicine is considering possible risk factors for bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system in children to introduce a standardized procedure for predicting these diseases. The development and rapid flow of information on the pathogenetic aspects of these diseases highlight the need to develop and improve medical and organizational support and adaptation (reorganization) of existing models of care, which from the standpoint of preventive approach can be implemented by introducing screening technologies and prediction algorithms.

The authors of the works (Bogachov et al., 2020; Dzwigol & Dzwigoł-Barosz, 2018; Kharazishvili et al., 2020; Kwilinski et al., 2019; Lakhno et al., 2018; Lyulyov et al., 2020; Pajak et al., 2016) investigated system approaches in the organization of various scales of activity and models of effective functioning.

Methodology and research methods. The study realization provides the bibliosemantic analysis of scientific treatises, investigation on socio-medical problems in healthcare delivery, analysis of the unsolved medical-organizational issues and justifying the research directions. Methodological tools of the research were as follows: system approach for quantitative and qualitative analysis of the organization and optimization of medical and social justification of the structural and functional model of medical care for patients with bronchopulmonary dysplasia; bibliosemantic analysis to study and analyze data from the scientific databases on domestic and foreign experience in providing medical care to patients with bronchopulmonary dysplasia; epidemiological approach to determine the levels, structure and dynamics of incidence rate and prevalence of dysplastic pathology of the respiratory system in childhood, to identify risk factors; statistical methods for collecting, processing and analyzing received data.

It stands to mention these materials and methods are set out in preceding published articles. In turn, the current article aims to characterize the directions for improving the national policy principles in healthcare.

Results. Considering regional and ecological differences, in particular of the Dnipropetrovsk region and improve the conditions of socio-economic risk compensation to the population living in the area of monitoring nuclear facilities, the draft of Ukrainian Law №1395 dated 11.12.2014 «On Amendments to Certain Laws of Ukraine concerning Improving the Conditions for Socio-Economic Compensation of the Risk to the Population Living in Surveillance Zones» was justified and submitted to the Verkhovna Rada of Ukraine. Following Article 3 of the Ukrainian Constitution, a person, his/her life and health, honour and

dignity, inviolability and security are recognized as the highest social value in Ukraine. Therefore, according to the legislative provisions of Ukrainian Law № 3995-VI dated 08.02.1995 «On using nuclear energy and radiation safety», the population living on territories with nuclear facilities are entitled to socio-economic compensation risk from the activities of these facilities, which is carried out at the expense of the proceeds of the fee for socio-economic risk compensation.

Besides, Ukrainian Law №1565-VI «On Amendments to Certain Laws of Ukraine concerning Regulation of Social Protection of the Population Living in Surveillance Zones of Enterprises of Uranium Ore Mining, Nuclear Installations and Facilities Intended for Radioactive Waste Management», there was introduced fee to socio-economic risk compensation of the population living in the surveillance zone. Following the provisions of Article 12-2 of Ukrainian Law «On using Nuclear Energy and Radiation Safety» fee to socio-economic risk compensation for the population living in surveillance, zones are sent in the form of a subvention from the special fund of the Ukrainian government budget to regional, district, city councils of monofunctional cities.

Following the mentioned above Law, it is proposed to increase the socio-economic risk compensation amount (from 1% to 2%) for the population living in the surveillance zone and to provide the most vulnerable categories of the population (children, disabled and retired) with health insurance and quality medical care.

Moreover, this Law expands the concept of «socio-economic risk compensation for the population living in surveillance zones» with health insurance for children and the disabled. Therefore, the law's adoption would help create more intensive development of health insurance at the regional level, providing health insurance to the most vulnerable segments of the population (children, the disabled and other categories) providing access to the latter to quality medical care.

The structural-functional model's target population (Table 1) provides health insurance to children, giving access to quality medical assistance and improving risk compensation conditions to the structural-functional model's target population considering the regional environmental situation.

It stands to mention that three current laws of Ukraine and the regulations of the central executive body on health care (the relevant decree of the Ministry of Health of Ukraine approved the Calendar of preventive vaccinations) define the different lists of infectious diseases with mandatory preventive vaccinations. Thus, Ukrainian Law «On Population Protection from Infectious Diseases» (Article 12) and «On Ensuring Sanitary and Epidemic Welfare for Population» (Article 27) define 6 infectious diseases against which vaccination is mandatory: tuberculosis, poliomyelitis, diphtheria, pertussis, tetanus and measles). In turn, Ukrainian Law «On approving the National program on immunoprophylaxis and population protection from infectious diseases for 2009-2015» and Calendar of preventive vaccinations define 10 preventive vaccinations as follows tuberculosis, poliomyelitis, diphtheria, pertussis, tetanus, measles, hepatitis B, hemophilic infection, rubella and mumps). However, the mentioned above acts don't consider the formation features of children's immune status with bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system at their development stages.

Therefore, considering the peculiarities of immunoprophylaxis of children with bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system, as well as the previous ban on children without appropriate vaccinations, the authors initiated in justifying Ukrainian Law №1729 «On amendments to certain laws on population protection from infectious diseases» submitted to the Verkhovna Rada of Ukraine on 14.01.2014.

It provides the improvements of the legal framework (substantiated and submitted the law) in the field of immunoprophylaxis based on introducing a systematic and comprehensive approach to vaccination, strengthening the rights defence and legitimate children interests in health and education, including children with bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system lifts. According to the Calendar, it is proposed to remove the ban on attending the recreation, preschool and school facilities for children without preventive vaccinations. That is important for the individualization of immunoprophylaxis of the target population of the structural-functional model.

Table 1. The author's regulatory support of structural-functional medical model's components toward children with bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system: at regional healthcare system improvement

No of Legislative Act	Data	Title of the Legislative Law	General purposes achieving in the healthcare system	Specific purpose achieving in the structural-functional model
1395	11.12.2014	On Amendments to Certain Laws of Ukraine concerning Improving the Conditions for Socio-Economic Compensation of the Risk to the Population Living in Surveillance Zones	strengthening social protection in surveillance zones; arranging of conditions for developing insurance medicine at the regional level; expanding the concept of socio-economic compensation of the risk to the population living in surveillance zones	providing children with health insurance assuring access to quality medical assistance; improving the risk compensation conditions of the target population of the structural-functional model considering the regional-environmental situation
1729	14.01.2015	On Amendments to Certain Laws on Population Protection from Infectious Diseases	the improvements of the legal framework in the field of immunoprophylaxis; introducing a systematic and comprehensive approach to vaccination; strengthening the rights defence and legitimate children interests in health and education	removing the ban on attending the recreation, preschool and school facilities for children without preventive vaccinations, which is important for the individualization of immunoprophylaxis of the target population of the structural-functional model
2309 a-d	10.12.2015	On the Adopting as a Basis of the Draft Law on Amendments to Certain Legislative Acts on Improving the Legislation on Health Care (1337-VIII)	arrangement of conditions for the system enhancement of public and municipal health care facilities; reforming the health care system to create a network of health care facilities in Ukraine with sufficient independence level to provide effective and timely medical care	proving the guarantee that the fund balance of the current year could be used to finance the renewal of the material and technical base, which is essential for the target contingent of the structural and functional model
5134-1	04.10.2016	On Amendments to Certain Legislative Acts Concerning the System of Central Executive Bodies	introduction of a practical and economic risk-oriented approach in the implementation of public supervision	regulating the implementation of functions for monitoring regional and environmental factors, which is crucial for the target population of the structural-functional model
4472	19.04.2016	On the Modification of Ukrainian Law of Ukraine «About the State budget of Ukraine for 2016» [16]	directing additional revenues to local budgets and certain social expenditures financing	increasing the medical subvention amount from the state budget to local budgets to maintenance of primary activities
4119	19.02.2016	On the Statement by the Verkhovna Rada of Ukraine on the WHO Framework Convention on Tobacco Control (1087-VIII)	discharge Ukraine's liability toward further implementing the WHO Framework Convention provisions on Tobacco Control and its guidelines toward reducing the smoking expansion and tobacco-related mortality	decreasing the level of smoking expansion by the target population of the structural-functional model to provide a smoking-free environment
4355	31.03.2016	On Amendments to Certain Ukrainian Legislative Acts on the Authorities Expansion of Local Self-Government Bodies	support for the voluntary association of territorial communities to perform the capable local self-government bodies to fulfill their powers under control	deregulation over the regional-environmental state emphasizing health at the community level

Sources: developed by the authors.

Legislative Act №4355 dated 31.03.2016 «On Amendments to Certain Ukrainian Legislative Acts on the authorities expansion of Local Self-Government Bodies» provides support for the voluntary association of territorial communities to perform the capable local self-government bodies to fulfil their powers under control deregulation over the regional-environmental state emphasizing health at the community level. In turn, it would allow developing population health at the regional level.

Notably, the circumstance encouraging the rapid and comprehensive improvement of sanitary legislation is the authorities' change of executive bodies and the impossibility to implement a government decree on optimizing the system of central executive bodies without legislative regulation of their authorities.

Besides, the Government Action Program provides a new public health system and the relevant law. Herewith, this task should be addressed through the improvement and modernization of sanitary legislation and Ukrainian Law «On Ensuring Sanitary and Epidemic Welfare for Population». It worth mentioning that this law is an important integral component of public health legislation, especially in implementing two of ten public health functions viz as monitoring and response to health hazards and emergencies; health protection, including safety and security of the living environment, labour conditions, food safety and others). Draft legislation №5434-1 dated 04.10.2016 «On Amendments to Certain Legislative Acts Concerning the System of Central Executive Bodies» regulates the performance of functions related to the monitoring of regional-environmental factors. In turn, that specifies the target contingent of the structural-functional model.

Besides, the effective response to the processes at stages of reforming health care in Ukraine required the legislative act commencement on the financial provision of the system, including increasing the medical subvention amount from the state budget to local budgets to maintenance of primary activities (Legislative act №4472 dated 19.04.2016).

Moreover, it is essential to discharge Ukraine's liability toward further implementing the WHO Framework Convention provisions on Tobacco Control and its guidelines toward reducing the smoking expansion and tobacco-related mortality. The mentioned above is realized in Legislative Act №4119 dated 19.02.2016 «On the Statement by the Verkhovna Rada of Ukraine on the WHO Framework Convention on Tobacco Control (Law №1087-VIII) ».

Notably, the WHO Framework Convention on Tobacco Control is the first international treaty involving more than 180 countries where more than 90% of the world's population lives. Over the past decade, the WHO Framework Convention on Tobacco Control is considered an efficient protection public health instrument. Thus, it allowed Parties to advance in the control of smoking. It is worth emphasizing that in the fight against tobacco for the human right to health, Ukraine demonstrated considerable progress by stopping the tobacco epidemic in the country. In Ukraine, the first and basic law on tobacco control, «On measures to prevent and reduce the use of tobacco products and their harmful effects on public health» was adopted in 2005. Since the WHO Framework Convention on Tobacco Control's ratification, Ukraine has amended legislation that saved lots of lives. This amending influenced the attitude towards tobacco and smoking: most of the tobacco advertising, sponsorship and marketing have disappeared, new rules for labelling cigarette packaging have been introduced, most jobs have become «smokeless», and cigarette prices have dropped significantly due to rising excise duty.

According to the latest WHO report on the global tobacco epidemic, in 2006, Ukraine succeeded by moving from fourth place on smoking expansion to the top-thirty. In turn, in the year of the WHO Framework Convention on Tobacco Control ratification, more than 37% of Ukrainians were daily smokers. Herewith, recent studies showed reducing the adult smoker amount to 24% in Ukraine. It could be assumed that these and other preventive measures decreased the incidence of asthma, coronary heart disease, upper respiratory tract diseases, etc.

Therefore, the mentioned above indicated the effectiveness of implemented measures in the health care sector. According to statistical data, over the past 8 years, the Ukrainian State Budget has received

9 times more revenue from excise tax increases (from 2.5 billion UAH in 2007 to 22.2 billion UAH in 2015). Simultaneously, there are no expenditures from the state budget for tobacco control programs in previous years. Notably, in Ukraine, smokers pay the excise tax on cigarettes, but no tobacco corporations.

However, it worth to emphasize that smocking is still a threat in Ukraine. In 2010, researchers at Oxford University estimated Ukraine's losses from tobacco use at 63,000 deaths each year. Notably, in 2015, the smoking expansion level did not decrease because of the lack of tobacco control measures. Besides, the control over the implementation of anti-tobacco legislation remains weak, and the influence of tobacco corporations on the government is strong. Most anti-tobacco proposals and activities are initiated and implemented by NGOs, and tobacco control activities are funded by international donors. Tobacco smoking is a socio-medical problem that continues to be relevant in medical research. It stands to mention that it increases the risk of dysplastic pathology of the bronchopulmonary system in children of smoking parents. Thus, it remains a prognostic factor and a significant indicator of prevention programs' effectiveness to reduce the risk of bronchopulmonary dysplasia and premature birth and the birth of low birth weight children.

Prospects for further research on the issue of socio-medical efficiency of regulatory and legal support of the structural-functional model components are related to assessing their impact on the implementation of health technologies at the regional, municipal and family levels.

Conclusions. This paper provides the author's regulatory support of structural-functional medical model's components toward children with bronchopulmonary dysplasia and dysplastic pathology of the bronchopulmonary system. The authors emphasized the improvement of health technologies in regional health care systems. The study identified the directions for implementing the legislative initiative. Furthermore, it was substantiated seven legislative acts of Ukraine, which were submitted for consideration. Therefore, it is expected to improve the normative and legal support of the structural-functional model's components.

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Менеджмент охорони здоров'я на регіональному рівні: багатоваріантна оцінка ефективності

Стаття присвячена аналізу напрямків удосконалення засад державної політики у сфері охорони здоров'я. Метою статті є обґрунтування та розроблення систематизованого комплексу нормативно-правового забезпечення структурно-функціональної моделі медичної допомоги дітям. У статті систематизовано нормативно-правові акти щодо запровадження охороноздоровчих технологій в структурно-функціональній моделі медичної допомоги. Для досягнення поставленої мети у роботі застосовано системний підхід для кількісного і якісного аналізу організації та оптимізації медико-соціального обґрунтування структурно-функціональної моделі; бібліосемантичний – для аналізу вітчизняного та закордонного досвіду надання медичної допомоги хворим з бронхолегеневою дисплазією; епідеміологічний – для визначення рівнів, структури і динаміки захворюваності та поширеності диспластикозалежної патології респіраторної системи у дитячому віці; статистичний – для збору, обробки та аналізу отриманої інформації.

У статті автори представили власну розробку нормативно-правового забезпечення компонентів структурно-функціональної моделі допомоги дітям з бронхолегеневою дисплазією та диспластикозалежною патологією бронхолегеневої системи. При цьому особливу увагу було приділено удосконаленню охоронооздоровчих технологій в регіональних системах охорони здоров'я. Для вдосконалення законодавчого та нормативно-правового забезпечення щодо надання медичної допомоги автори визначили напрямки реалізації законодавчої ініціативи. За результатами дослідження запропоновано до розгляду 7 законодавчих актів України щодо удосконалення нормативно-правового забезпечення компонентів структурно-функціональної моделі. Отримані результати дослідження щодо проблематики соціально-медичної ефективності нормативно-правового забезпечення компонентів структурно-функціональної моделі можуть бути використані для подальшої оцінки їх впливу на впровадження охоронооздоровчих технологій на регіональному, комунальному та сімейному рівнях.

Ключові слова: громадське здоров'я, нормативно-правове забезпечення, структурно-функціональна модель, медична допомога дитячому населенню.

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