



Public Health System Management

The foundation of the public health system was established in 1996 as a result of the reform of the state sanitary-epidemiological supervision system and as a result, 2 independent services were created: public health service and state sanitary supervision service. In 2007, the law on Public Health came into force, which is currently the foundation of the existing public health service in the country. At present, the public health Service in Georgia is represented by the following structural units at the central and municipal level:

- The National Center for Disease Control and Public Health (NCDC)
- 9 regional branches of the NCDC
- PH centers in 60 municipalities



These structures are closely interlinked and their work within the state and municipal programs is coordinated by the NCDC. Municipal centers are established by and subordinated to local governments. Although the NCDC, as the state programs implementing structure, provides technical and financial support to municipal services through epidemiological surveillance, immunization, TB, HIV/AIDS, and other public health state programs.

The main objective of the municipal centers is to support the health of the population of the particular municipality area by promoting state public health programs and to prevent diseases, in close cooperation with primary health care centers as well as other medical establishments

(hospitals, diagnostic laboratories, medical centers), governmental and civil society organizations.

Municipal public health centers implement the State Public Health programs in cooperation with the local primary health care centers. Public Health State programs and Regional Management Department at the NCDC plays an important role in coordinating activities of local (60) municipal public health centers (PHCs) of self-governing cities and districts in compliance with requirements of the state programs that aims at fulfillment of its obligations in the field of public health.

Key Findings

Several legislative acts were adopted in recent years following the endorsement of Public Health Law to ensure better infection control in Georgia, including rules and conditions of issuing permits and licensing for conducting medical activities; on accomplishment of better medical and prophylactic disinfection services; on collection, storage and neutralization of medical waste products; on sanitary norms for conducting activities on biological pathogens; on surveillance, prevention and control of nosocomial infections; on infection control while conducting esthetic and cosmetic activities in publicly important institutions/facilities; on disinfection and sterilization norms in medical, public health and public facilities; on transfusion, Decree of Government of Georgia on Adoption of the National Strategic Plan 2017-2020 on Fighting Antimicrobial Resistance etc. (New strategy is under elaboration).

WHO Regional Office for Europe conducted the Public Health Services Expert Mission to Georgia on May 8-10, 2017. Objectives of the mission were to study and evaluate current public health services in Georgia; to support the discussion and Brain-storm the vision of long-term development of public health in Georgia; and to find integrated solutions with the aim to strengthen public health services and capacities. In particular, Expert Mission aimed to assess the human resource capacity for public health, including education of public health professionals; Find the ways where and how to introduce changes in order to fully implement national strategies/programmes at the municipality level; Define institutions, procedures and mechanisms for enforcing key public health legislation etc.



Expert mission covered a vast technical area: studied arrangement of Georgian Public Health System and principles of its functioning, became acquainted with the procedures and mechanisms for drafting the public health legislation, discussed the human resource development issues etc. and identified recommendations for possible next steps: A paradigm shift towards prevention and health promotion was suggested at all levels of the health system, as well as to strengthen the efforts for establishing strong accountability structures and legislative mandate for public health outcomes (governance, finance &

legislation), enabling cross-sector leadership and stake-holder engagement for improved public health outcomes, building capacity of modern public health competencies in the health workforce, review the existing funding arrangements, discuss the options to establishment of a modern public health system, with appropriate authority at local level.

Recent Key achievements

- NCDC participated in several Coalition of Partners Expert Meetings on Strengthening Public Health Capacities and Services in Europe, organized by the WHO Regional Office for Europe. On the first meeting in January 30-31, 2017, Georgia presented the framework of the planned actions for the development of the public health system in Georgia, which envisages consistent and coordinated strengthening of the public health services in the country, focused on four enabling functions – human and financial resources for public health, organization and governance of public health services, and public health legislation. Draft of the concept for further development of public health has been developed based on EPHO 1-10;

- The list of possible municipal programs and the methodology for their elaboration and implementation have been developed. According to the new requirements, Public Health National Recommendation (Guideline) for further functioning of municipal PHCs, typical methodic provisions and job descriptions for public health workforce have been updated and approved on 20.07.2017 by the Order #01-163/O of the Minister of IDPs, Labour, Health and Social Affairs of Georgia. Order defines the responsibilities of the municipal public health centers. It also defines that the budget of the local municipalities should envisage funds for elaborating and implementing the municipal public health programs, based on epidemiological analysis in given municipality. These programs together with the State Healthcare programs should serve for improving the health of local population and has to be elaborated according to the 10 essential public health operations (EPHO), recommended by WHO Regional Office for Europe;
- Extended working meetings were held with participation of the State Representatives / Governors and staff members of local self-governing bodies, as well as municipal public health centers, which were devoted to the following issues: the roles and responsibilities of municipal centers; importance and promotion of Hepatitis C Elimination Program at local level; support for implementation of similar tandem testing etc;
- A pilot project has been launched in the Samegrelo-Zemo Svaneti region – to integrate tuberculosis, HIV/ hepatitis and hepatitis C into primary health care and develop a partnership for early detection of diseases. The project involved municipalities in the region, as well as individuals in the region (rural outpatient physician and nurse), and medical facilities. The project was implemented with the financial support of the Global Fund, the State Hepatitis C Program, from local governments; Measures to be taken at the local level to stop the measles epidemic; planning an immunization week; measures to increase influenza and flu vaccinations; improvement of material-technical capacities and financial stability, etc. The program was successfully expanded to all regions of Georgia;
- Adjara region was involved in the ZeroTB initiative;
- Hepatitis C micro-elimination program was implemented in several cities and villages of the regions, within the framework of which mass screening of the population was carried out by municipal public health centers and local family doctors. The identified positive patients were recommended to be included in the treatment;
- Brief descriptive information materials (“profile”) of all municipalities and accordingly, public health centers were prepared and published with the data of the population of the district, birth rate, budget, medical institutions, etc., which will be updated in stages;



- For the effective management of the COVID-19 pandemic in Georgia, the special short-term training courses were designed for public health workers. Under the support of the WHO, totally 54 public health and lab

specialists selected through the competition and designated for regional public health centers, were trained by the NCDC mentors prior to contracting on their job positions; through this support the staff (up to 200 persons) of Tbilisi City Hall and various private laboratories passed this training program as well for 3 month period.

- CDC Basic field epidemiology course (Frontline) for municipal public health specialists was conducted to enhance the COVID-19 response.

Challenges/Future Steps

- Improve the legislative basis of the public health management system;
- Harmonization of Public Health hygienic norms, standards, guidelines, with EU and other international standards;
- Increasing coordination role of public health specialists in solving local health care problems;
- Insufficient political support for public health programs in municipalities and increasing competencies of local governments in solving public health problems;
- Deficiency of appropriate competence and skills in local professional staff;
- Elaborating relevant regulations to define the duties, rights and functions of NCDC regional representatives, aiming in legitimation of organizational coordinative and administrative actions with regard to public health municipal centers of the local self-government bodies in the regions.
- Involve regional representatives in the planning and implementation process of the state programs, especially the State Health Promotion Program. Regulation of roles and accountability between regional structures and municipal public health centers.
- Promoting harmonization of hygienic norms and standards, with the WHO guidelines, EU and other international standards, in order to implement a unified policy on public health
- Promoting readiness for emergency situations and possible disasters; improving collaboration between the centers and developing emergency response plans and in order to reduce incidents during the response and recovery phases.



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