# ANNEX II: TERMS OF REFERENCE

ANNEX II: TERMS OF REFERENCE	1
1. BACKGROUND INFORMATION	2
2. OBJECTIVE, PURPOSE & EXPECTED RESULTS	4
3. ASSUMPTIONS & RISKS	
4. SCOPE OF THE WORK	5
5. LOGISTICS AND TIMING	
6. REQUIREMENTS	6
7. REPORTS	
8 MONITORING AND EVALUATION	

#### 1. BACKGROUND INFORMATION

# 1.1. Beneficiary country

Republic of Serbia

## 1.2. Contracting Authority

Municipality Ćićevac, ul. Karadjordjeva 106, 37210 Ćićevac

### 1.3. Country background

Reform of the social protection system in Serbia (RS) is based on the process of its decentralization. Central government authorities have developed measures and programs to support local governments to better and more efficiently plan and fund services to citizens in social need, development of CSOs that provide social services, development of quality standards etc. Decentralization of social protection should contribute to the development of diverse and cost-effective services in the close environment of users, in a way that is most appropriate to their needs. **Mapping of social services in the jurisdiction of local governments in Serbia**, (2013), ordered by the Serbian Government, has shown that the development of social protection services at the local level is **still going relatively slowly**, with great difficulties, especially in the area of **standards development and financing**. Among the sources of financing of social protection services at local level, the most important are local budgetary funds (70%), then donor funds (16%), funds from the national budget (11%) and users' participation (3%).

This process is very threatened by the outbreak of the global economic crisis in 2008. By most parameters, Serbia is now among the least developed and the poorest European countries and few with exceptionally high percentage of people at risk of poverty or social exclusion (41% of the population in 2014, Eurostat). The need for social protection of the population is very big and goes far beyond resources that the central and local governments allocate for these purposes. Local budgets are the most important for financing but still insufficient to meet the needs of the community, so local governments are forced to look for alternative ways of funding services while ensuring their long-term sustainability.

**Depopulation and aging** are very present in RS. Poor economic situation, long lasting transition, decreased birth rate and decades of migrations from villages to cities and abroad have led to a decrease of population, especially in small settlements and rural areas. **Census 2011 data** has shown that number of elderly citizens (65+) is 17,39% of total population but the aging of the population will intensify in the future and it is expected that this percentage is going to be at least 22% by 2030.

In 2011 the National Assembly of Serbia adopted the **Law on Social Protection**. There is defined that local governments ensure the realization of activities in the field of social protection by establishing the institution or by entrusting the realization of these activities to other legal entities and individuals. Each local government must determine measures and activities for the incentives and development of existing and new social protection services. Among adopted secondary legislation, the most important are Regulations on Closer Conditions and Standards for Providing Services of Social Protection and Regulations on Licensing Social Protection Organizations. The system of licensing social protection organizations and professional workers, established in these regulations, aims to improve and standardize the quality of social protection in Serbia.

The Employment and Social Reform Programme (ESRP), adopted in May 2016 by the Serbian Government, in part Policy reform oriented towards smart, sustainable and inclusive

growth clearly focuses on social protection services, their sustainment, expected challenges. However, ESRP also suggest recommendation to be implemented in the fu

#### 1.4. Current situation in the sector

Analysis of the problems to be addressed by the project. The Municipality Cićevac is situated in the geographical centre of the RS. It has dominant rural character and the third level of development (classification by Regulation on Establishing a Single List of Regional Development and Local Self-government Units in RS for 2014 - underdeveloped local governments whose level of development in the range of 60-80% of the national average). According to data from Census 2011, total number of citizens residing in the municipality is 9,476, out of whom 1,929 are over 65 years old (20.35%) so municipality Cicevac is considered to have very old population (the average age is 44.2 years, compared to the national level of 42.2 years). About one third of citizens are residing in elderly households and do not have family members or relatives that would take care about them, but are left to themselves. Municipality spends substantial funds for social protection (21,775,000 RSD or 8,22% of the local budget in 2015), but mostly to the payment of the rights of the local population in social protection (over 50% of the allocated budget funds for social protection). Until now, the municipality has not developed any sustainable social protection services. Since 2011, the municipality have occasionally organized home care service for the children and youth with disabilities and home care service for the elderly, but their sustainability was not ensured because the municipality relied on financing by donors.

The Municipal Parliament has adopted the **Development Strategy for the Social Protection for the period of 2011-2016**. The municipality has defined **the values** underlying the social protection of its population: the availability of social services for all citizens, equality in the realization of rights and the use of services, participation and responsibility of the user of services, the continuity of social protection, pluralism of services and service providers, the best interest of users and the life in the natural environment. As the priority to improve the social and living conditions of marginalized groups are highlighted ensuring the sustainability of existing and establishment of new services, as well as information and education of marginalized groups. Municipal **Decision on Social Protection from 2011** defines seven social protection services for which realization the municipality has jurisdiction, including home care for the elderly as one of them.

The Municipal Parliament has adopted the **Strategy for Sustainable Development for the period of 2013-2022**. There is defined Strategic Direction No. 2: Provide and improve social development with aim to strengthen local social capital by improving education and culture, as well as strengthen social inclusion and promote healthy lifestyles in the local community through the improvement of health and social care. In the field of social development, the Strategic objective No. 2.1. - Improving the health and social care, with specific objectives No. 2.1.1 - Strengthening social inclusion in the local community and 2.1.2 - Improving social protection services

# 1.5. Related programmes and other donor activities

The education, employment and social policies sector received around EUR 425 million of international donor assistance, including nearly EUR 180 million of IPA assistance, over the period 2007-13. IPA supported various activities, including integration of internally displaced persons, provision of community based social services, social inclusion of vulnerable groups, including housing solutions for Roma. Other donors, especially the World Bank, EIB, UN organisations, Austria, Germany, Italy, Netherlands, Spain, Sweden, Switzerland, the UK and Norway have supported reforms in this sector. The Norwegian government supported the

improvement of regulatory mechanisms in social welfare. The World Bank's Delivery of Improved Local Services programme, worth \$46.4 million, aimed at increasing the capacity of institutional actors and beneficiaries to improve access to health, education and social protection services in a decentralising environment, while improving the efficiency, equity and quality of local delivery. Through the Regional Programme on 'Social Protection and the Prevention of Human Trafficking', Germany has been supporting the development of integrated social services since 2011. The social inclusion of vulnerable groups is promoted both by this programme and the project to 'Strengthen the Structures for Youth Empowerment and Participation'.

The Social Innovation Fund of the Ministry of Labour and Social Policy which has been in operation since 2003 with the support from CARDS programme funds has also provided support to the establishment of the Community based care.

Specific projects such as: "Social Inclusion" from IPA 2008 and, "Support for deinstitutionalisation and social inclusion of persons with mental disability and mental illness" from IPA 2011, aimed specifically at supporting the inclusion of particular vulnerable groups.

IPA 2012 Social Development sector fiche amounting to 28,200,000 EUR aimed at promoting further socio-economic development in Serbia based on higher levels of employment, more educated and employable labour force and enhanced social inclusion of people from disadvantaged groups, with a particular emphasis on the Roma.

IPA 2013 Social Development sector fiche amounting to 26,500,000 EUR of which this Project is a part aims at contributing to smart, sustainable and inclusive growth for the Republic of Serbia by building a more knowledgeable and skilled labour force, improving social protection policies and promoting the social inclusion of vulnerable populations, enabling greater opportunities for a better standard of living in alignment with the targets set forth by the Europe 2020 Strategy.

#### 2. OBJECTIVE, PURPOSE & EXPECTED RESULTS

#### 2.1. Overall objective

The overall objective of the project of which this contract will be to contribute to promotion of the social inclusion of vulnerable and disadvantaged groups through the provision of sustainable community-based social services at the local level.

### 2.2. Purpose

The purpose of the project is improvement and strengthening the social protection services in the municipality of Ćićevac through establishing of sustained home care service for adult persons with disabilities and the elderly, in line with national standards and regulations.

#### 2.3. Results to be achieved by the Contractor

The purposes of this contract is to providing of the home care service who shall contribute to the fulfilment of the expected result no. 4: Home care service for the elderly launched.

#### 3. ASSUMPTIONS & RISKS

#### 3.1. Assumptions underlying the project

Assumptions underlying the project include unstable political and economic situation in the municipality Ćićevac.

#### 3.2. Risks

The most important risks are follows: willingness and interest of users' to pay participation for the received service, interest of potential service providers for applying, and failure to adopt regulations regarding strategic and normative frameworks by the local authorities.

#### 4. SCOPE OF THE WORK

#### 4.1. General

#### 4.1.1. Description of the assignment

The provider of home care service should carry out home care service during 14 months within the project implementation. Provision of services have to be in accordance with national legislation and standards. The service provider must have a valid license for the work in the field of social protection issued by the Ministry of labor, employment, veterans and disability protection of RS. During the contract period the service provider must employ a minimum of 10 home care proffesionals (''gerontodomacice'') who will directly provide the service for a minimum of 45 users

#### 4.1.2. Geographical area to be covered

Municipality of Ćićevac, Republic of Serbia

#### 4.1.3. Target groups

TG1: Persons with disabilities and the elderly residents of municipality Cicevac who will receive home care service (45 persons); TG2: Unemployed persons to be educated, licensed and employed as home care professionals (10 persons); TG3: Management and employees of municipal administration, public institutions and civil sector engaged in social protection sector (15 persons);

#### 4.1.4. Specific work

The contractor will have to prepare all necessary prerequisites for starting the service in the first 45 days of the contract. It is necessary to conduct the selection of 10 home care professionals ("gerontodomaćice"), which will then be educated under a licensed program and obtain the necessary license to provide home care service to the users, in accordance with national regulations.

The contractor will have to secure all the equipment necessary for providing the service, in accordance with the regulations.

In the process of the selection of users (user applications, determining the rights to the service, etc.) the service provider will work closely with the Centre for Social Work Ćićevac, Municipality Ćićevac and with the project team. The service provider will organize expert

monitoring of the service and regularly report the contracting authority and the project team. During the project, a specially selected contractor will carry out monitoring of human rights, co-operate with the service provider and a report the contracting authority and the project.

The contractor should provide bicycles for all home care professionals, and also to pay additional travel expenses when necessary, in accordance with weather conditions, geographical distribution of service users and other specific needs.

During the providing of the service contractor may help to users to pay required participation which has to be paid to the municipal bank account.

The contractor will have to provide home care service to the users for 14 months.

In performing the aforementioned tasks the Consultant will work under the direct supervision of the Project Manager.

### 4.2. Project management

#### 4.2.1. Responsible body

The Contracting Authority for this contract is Municipality Ćićevac.

## 4.2.2. Management structure

The Contractor will report to the project manager.

## 4.2.3. Facilities to be provided by the Contracting Authority and/or other parties

N/A

#### 5. LOGISTICS AND TIMING

#### 5.1. Location

Municipality Ćićevac, Republic of Serbia

#### 5.2. Start date & Period of implementation of tasks

The intended start date is 01.12.2017 and the period of implementation of the contract will be up to 05.02.2019. Please see Articles 4 and 5 of the Special Conditions for the actual start date and period of implementation.

#### 6. REQUIREMENTS

### 6.1. Staff

Note that contractor should provide direct service providers ("gerontodomaćice") who acquired a certificate of successful completion of training at an accredited program to work on providing home care service. If direct service providers do not have a valid certificate, they have to obtain within timeframe prescribed by the Law on Social Protection.

#### 6.1.1. Key experts

N/A

#### 6.1.2. Other experts, support staff & backstopping

N/A

#### 6.2. Office accommodation

N/A

#### 6.3. Facilities to be provided by the Contractor

The Contractor shall ensure that staff are adequately supported and equipped. In particular it must ensure that there is sufficient administrative, secretarial and interpreting provision to enable staff to concentrate on their primary responsibilities. It must also transfer funds as necessary to support their work under the contract and to ensure that its employees are paid regularly and in a timely fashion.

# 6.4. Equipment

No equipment is to be purchased on behalf of the Contracting Authority / beneficiary country as part of this service contract or transferred to the Contracting Authority / beneficiary country at the end of this contract. Any equipment related to this contract which is to be acquired by the beneficiary country must be purchased by means of a separate supply tender procedure.

#### 7. REPORTS

#### 7.1. Reporting requirements

The Contractor will submit the following reports in English in one original and one copy:

- **Draft final report** of maximum 5 pages (main text, excluding annexes). This report shall be submitted no later than one month before the end of the period of implementation of tasks.
- Final report with the same specifications as the draft final report, incorporating any comments received from the parties on the draft report. The deadline for sending the final report is 15 days after receipt of comments on the draft final report. The report shall contain a sufficiently detailed description of the different options to support an informed decision on approval. The detailed analyses underpinning the recommendations will be presented in annexes to the main report. The final report must be provided along with the corresponding invoice.

# 7.2. Submission and approval of reports

The report referred to above must be submitted to the project manager identified in the contract. The project manager is responsible for approving the reports.

# 8. MONITORING AND EVALUATION

# 8.1. Definition of indicators

The performance of the Contractor will be monitored against project objectives and activities set in the Terms of Reference, in the Organization and Methodology.

# 8.2. Special requirements

N/A