

TERMS OF REFERENCE FOR EXPERTS

Terms of reference for on-site activities and missions

Action code and partner country: *SOCIEUX 2023-09 KOSOVO¹*

Action title: *Professional expertise in developing legal framework on health insurance*

Partner institution: *Ministry of Health*

Activity number and title:

Activity # 1 – Revision of the Health Insurance Law toward Universal Health Coverage

Tentative dates of implementation and location:

- **Activity #1 - from April 24th to June 9th, 2023**
 - *Preparation phase: from April 24th to May 5th, 2023 (on-line)*
 - *On-site mission in Prishtina: from May 10th to May 19th (possible travel days on May 09th and May 20th)*
 - *On-line additional work (6 days): between May 22nd and June 3rd*
 - *Reporting phase: June 5th to June 9th (on-line)*

Expert positions and responsibilities (by activity):

- *Activity #1 : Expert #1 (principal) – Health insurance legislation*
- *Activity #1 : Expert #2 – Public health economy*

Workload:

Activity #1 - Expert #1 : Total_25_days (13 days at distance; 10 days onsite; 2 travel days)

Activity #1 - Expert #2 : Total_23_days (11 days at distance; and 10 days onsite; 2 travel days)

Call for experts' reference: **23-09/KSV/1/1** and **23-09/KSV/1/2**

Version - #: 2

☐ Draft

☒ Final

Date: *March 21st, 2023*

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Partnership led by



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¹ This designation is without prejudice to positions on status and is in line with UNSCR 1244/1999 and the ICJ Opinion on the Kosovo declaration of independence.

1 BACKGROUND INFORMATION

1.1 Country overview

Kosovo² is located in the Western Balkans in south-eastern Europe. It has a land area of 10 908 km² and a population density of 177 habitants/km². It is administratively divided into 38 municipalities. According to the World Bank estimations, the resident population is approximately 1.78 million, 28% of the population is under 14 years old and 10% are over 65. Life expectancy at birth in 2020 was 77.

In 1999, following a conflict between Serbia and Kosovo, the UN Security Council Resolution 1244 placed Kosovo under a transitional administration, the UN Interim Administration Mission in Kosovo, pending a determination of Kosovo's future status. An UN-led process began in late 2005 to determine Kosovo's final status. The 2006-07 negotiations ended without agreement between Belgrade and Pristina, though the UN issued a comprehensive report on Kosovo's final status that endorsed independence. On 17 February 2008, the Kosovo Assembly declared Kosovo independent. Demonstrating Kosovo's development into a sovereign, multi-ethnic, democratic country, the international community ended the period of Supervised Independence in 2012. Kosovo held its most recent national and municipal elections in 2021, ushering in a government led by the Self-Determination Movement's (VV) Albin KURTI, a former political prisoner who did not fight in the 1998-99 war. Serbia continues to reject Kosovo's independence, but the two countries agreed in April 2013 to normalize their relations through EU-facilitated talks, which produced several subsequent agreements the parties are implementing to varying degrees, though they have not yet reached a comprehensive normalization of relations. Kosovo has pursued bilateral recognitions and memberships in international organizations, moves that Serbia strongly opposes. Kosovo signed a Stabilization and Association Agreement with the EU in 2015, and the EU named Kosovo as among the six Western Balkan countries that will be able to join the organization once it meets the criteria to accede. The Stabilisation and Association Process (SAP) is the European policy framework for relations between the EU and the Western Balkan countries, all the way to their eventual accession to the Union. The EU-Kosovo Stabilisation and Association Agreement (SAA) has been in force since April 2016. A second phase of the European Reform Agenda was adopted in October 2021 to further guide the implementation of EU-related reforms under the SAA framework.

According to the World Bank (2022), Kosovo's economic growth in the past decade has outperformed its neighbours and has largely been inclusive. However, it has not been sufficient to provide enough formal jobs, particularly for women and youth, or to significantly reduce the country's high rates of unemployment. Kosovo's growth model relies heavily on remittances to fuel domestic consumption but has recently shifted to more investment- and export-driven growth. Kosovo's young population needs to be equipped with the skills demanded by a modern economy, and the most vulnerable of its citizens protected by well-targeted and effective social programs. Gender gaps in access to economic opportunities are another key challenge. Further actions are also needed to promote environmental sustainability, including the fulfilment of the EU's environmental acquis.

Kosovo's economy experienced a strong recovery in 2021, but global inflationary pressures interrupted Kosovo's boisterous recovery path. Real GDP growth is expected to decelerate to 3.1 percent in 2022, following a slowdown in investment and private consumption.

1.2 Sector situation

The state in Kosovo is the owner of all public health institutions which are organised into three levels:

- Primary health care with a network of family health centres;

² This designation is without prejudice to positions on status and is in line with UNSCR 1244/1999 and the ICJ Opinion on the Kosovo declaration of independence.

- Secondary care, with seven regional hospitals for in-patient care and specialist services, professional mental health services with nine community based mental health centres and nine integrated houses; and
- Tertiary care comprising the University Clinical Centre Kosovo (UCCCK), National Institute of Public Health with the Regional Institute for Public Health, Centre for Sports Medicine, Telemedicine Centre, Institute for Occupational Medicine, National Centre for Blood Transfusion and Dentistry University Clinical Centre.

According to the Kosovo Report 2022 from the European Commission, on public health policy, the quality of healthcare remains of concern. There was no progress on the introduction of a universal health coverage scheme, and public health information system is still not functional. Although several dozen doctors and over 200 nurses were hired, health workers continue to emigrate, which has a detrimental impact on the health system. New laws on health and on health insurance were adopted on 19 April 2022, along with other health sector. The 2022 health budget decreased by 14.6%, compared to 2021, though the primary healthcare budget was 1.5% higher than 2020, and the budget for hospital and university clinical services (129.7 million EUR) was 10 % higher than 2021. There was no progress on the health sector strategy. While access to basic healthcare is free, spending on diagnostic services and medications is not reimbursed and around 20 % of the population have very limited access to healthcare. The high out-of-pocket cost of health (about 40% of total medical costs) limits access for vulnerable groups, only about 65% of annual public health needs are covered by public spending, mostly on fixed costs. Kosovo still does not have a reliable methodology in place as to estimate medical expenses. According to the Economic Reform programme (ERP) 2023-2025³, Health sector analyses have shown that 18% of the population does not have the opportunity to receive health services as they live in extreme poverty. With the current way of health financing, the problem of access for these population categories cannot be addressed. Failure to implement the Law on Health Insurance and the lack of allocation of current resources will persist in failing to improve financial protection, where the barriers to the access of vulnerable groups will deepen.

The public health budget is insufficient and as a result, forces citizens/patients to cover the cost, primarily for medications and consumables (out-of-hospital medicaments), as well as for health services, in cases where these services are not provided in the public sector.

Based on the 2014 Law on Health Insurance and in view to set the universal health coverage in motion, the Ministry of Health created in 2017 the Health Insurance Fund to start the collection of premiums by the year 2019. Nevertheless, as pointed out by the Economic Reform Programme 2023-2025 in the reform measure n°20: *"Failure to implement the Law on Health Insurance and the lack of allocation of current resources will persist in failing to improve financial protection, where the barriers to access of vulnerable groups will deepen. [...] Strengthening the Health Insurance Fund is the key element in the process of reorganization of health financing, namely for the provision of stable and sufficient financial resources for the health sector by establishing a mandatory health insurance scheme."*

The National Government Program 2021- 2025 mentions that one of medium-term priorities is the "full operationalization of the health insurance system, including the necessary legislative framework, collection of premiums through the Insurance Fund and the health information system"⁴, in order to meet the obligations arising from mechanisms of EU accession within the scope of Chapter 28⁵.

³ Reform measure #20 "Ensuring sustainable financing in the health system", p.132 in <https://mf.rks-gov.net/desk/inc/media/1619B453-0328-4C3D-889F-CF262574AA11.pdf>

⁴ National Programme for Implementation of the Stabilisation and Association Agreement (NPISAA) 2021 – 2025, in [https://mei-ks.net/repository/docs/3%20PKZMSA%202021-2025%20\[miratuar%20nga%20Kuvendi\]%20ENG.pdf](https://mei-ks.net/repository/docs/3%20PKZMSA%202021-2025%20[miratuar%20nga%20Kuvendi]%20ENG.pdf), p. 225

⁵ **"Article 28 – Consumer and health protection:** The consumer protection acquis covers the safety of consumer goods as well as the protection of the economic interests of consumers in a number of specific sectors. Member States need to transpose the acquis into national law and to put in place independent administrative structures and enforcement powers which allow for effective market surveillance and enforcement of the acquis. Appropriate judicial and out-of-court dispute resolution mechanisms as well as consumer information and education and a role for consumer organisations should be ensured as well. In addition, this chapter covers specific binding rules in the area of public health.", in https://neighbourhood-enlargement.ec.europa.eu/enlargement-policy/conditions-membership/chapters-acquis_en

1.3 Role of partner institution in the sector

The Ministry of Health aims to establish universal access of the citizens and residents of the Republic of Kosovo to quality basic healthcare services in order to improve healthcare indicators and ensure financial protection against impoverishment due to high healthcare costs, by establishing and regulating the public health insurance system.

With the Law on Health Insurance ((N° 04/L-249) of April 2014⁶, the goal was to provide better quality of basic healthcare services and access to all the segments of the society.

This law is based on three pillars: (1) impartiality in access to health care, (2) qualitative and sufficient services and (3) protection from financial harm for the citizens of Kosovo. Coupled with the Law on Health from 2012⁷ (Law N°04/L-125), the Health Insurance Law from 2014 makes up the legal framework for the desired reform on the health sector which affects three main areas, namely (1) Kosovo Hospital University Clinical Services, (2) chambers of healthcare professionals and (3) a compulsory healthcare insurance scheme subsidized by obligatory insurance premiums and general taxes.

To set this policy in motion, the Ministry of Health created the Health Insurance Fund to start the collection of premiums by the year 2019.

The Health Insurance Fund has the following duties:

- applies policy for improvement of the health care status and financial risk protection of population established by the Ministry of Health,
- ensures realization of the rights of insured persons,
- organizes professional administration which enables efficient and effective application of rights and obligations for mandatory health insurance, proposed premiums, co-payments, co-insurance, deductibles and other financial means for mandatory health insurance for approval to the Government,
- ensures collection of financial means for mandatory health insurance in an efficient and transparent method, in compliance with this Law,
- determines terms of contracts with healthcare institutions for basic healthcare services including quality standards that should be fulfilled,
- negotiates and concludes contracts for provision of basic healthcare services, including conditions for provision and compensation of quality health care services leading to increased productivity and higher performance,
- implements effective and timely compensation of basic health care services provided by health care institutions and other tasks specified by law.

2 ACTION DESCRIPTION

2.1 Overall objective

☒ **Institutional capacities of employment, labour and social protection institutions are strengthened and reinforced.**

☐ Access to employment and social protection is expanded to poor and vulnerable groups.

☐ Awareness and knowledge on social protection and decent work is increased.

⁶ Law N° 04/L-249: https://cps.rks-gov.net/wp-content/uploads/2020/09/LAW_NO_04_L-249_ON_HEALTH_INSURANCE.pdf

⁷ Law N° 04/L-125 : https://cps.rks-gov.net/wp-content/uploads/2020/08/LAW_No_04_L-125_ON_HEALTH.pdf

2.2 Specific objectives (purpose)

- SO1: To approve the health insurance law in Kosovo
- SO2: To set up the Universal Health Coverage in Kosovo

2.3 Expected result

- R1: The draft of the Health Insurance Law is revised, and proposals of modification (if any) considered/included.

2.4 Final deliverables

- D1: A final version of the revised Health Insurance Law of 2014.
- D2: A brief analysis of the Health Insurance Law (2014) and the envisaged changes, including recommendations

3 METHODOLOGY

3.1 General methodology (of the action)

The Health Insurance Law is currently under revision by a working group constituted of 25 members representing the Ministry of Health, legal experts from the Prime Minister's Office, Health Insurance Fund, Ministry of Finance, Health Care institutions, Unions, Patient Association's, Medical Chambers and experts from the World Bank project.

The Government of Kosovo will approve the legislative amendments in June 2023.

The action 2023-09 will **support a hybrid peer-to-peer exchange for the concrete formulation of amendments to the text of the Law**, by the European public experts mobilized by SOCIEUX+ and the working group of the Ministry of Health.

3.2 Planned activities (work plan of the action)

The following activities are currently planned for the action:

- Activity 1 – Revision of the Health Insurance Law toward Universal Health Coverage

The present terms of reference cover the services expected for activities of the above work plan:

- **Activity #1. Revision of the Health Insurance Law toward Universal Health Coverage**

3.3 Inclusion of cross-cutting issues

SOCIEUX+ recognises the importance to include cross-cutting issues in social protection, labour and employment policies and systems. The following cross-cutting issues are duly taken into account:

- Gender equality;
- Good governance;
- Human rights (including rights of children, people living with disabilities, vulnerable groups and minorities); and,
- Social and economic inclusion of vulnerable groups.

4 ACTIVITIES DESCRIPTION

4.1 Tasks

Since every part of the Health Insurance Law of 2014 has an impact on each other, the entire Health Insurance Law of 2014 will be revised for amendments.

This mission will be organized in two times by the European public experts mobilized by SOCIEUX+ in collaboration with the Ministry of Health and the working group created for the revision of the law:

- during the first part of the activity, **on-site in Prishtina**, a series of workshops and meetings will be organized to jointly make proposals for revising the Law.
- Following the mission in Prishtina, **additional on-line consultations** will be implemented to finalize the amendments' proposals.

During the mission, while displaying EU models, the experts mobilized by SOCIEUX+ will design a methodology for facilitating peer-to-peer consultations, display EU models and animate all consultations of the working group together with the Ministry of Health. The specific modalities of this interaction will be detailed by experts ahead of their mission, into a methodological note jointly set with the Partner.

Actual inconsistencies and areas of future possible improvements in the norm will be also identified. This deliverable (D2) will be accompanying the amendments (D1) by establishing the rationale for them (why they have been formulated, and what they can bring in terms of change to the system).

Responsibilities:

- UE experts mobilized by SOCIEUX+:

The mission shall be implemented on site in Prishtina.

The principal expert will lead the mission onsite. He/she is responsible for the production of all deliverables of the activity. He/she will also be responsible for the preparation, coordination, implementation and reporting and/or coordination of the overall activity.

The experts shall co-develop a proposal for methodology and agenda together with the Partner institution (Ministry of Health), to be discussed and validated ahead of the mission (for ex: displaying EU models, designing a methodology for facilitating peer-to-peer consultations, etc....)

- Partner Institution (Ministry of Health):

The Ministry of Health shall work in collaboration with experts supporting the preparation and implementation of the activity.

The Ministry of Health shall facilitate the organisation of the activity with regards to the following aspects:

- nominating one or more internal resource-persons to support the experts in the material and technical organisation
- contributing to the technical organisation of the activity, including sharing relevant background documents, contacts and technical inputs with the experts
- introduce the experts mobilized by SOCIEUX+ to *the* working group created for the revision of the Law
- convening participants to the meetings/workshop and ensuring their participation

The main tasks of the mission team include:

➤ Preparation phase (on-line)

- **Task #1** – Ahead of the mission, to get substantial knowledge of the local context; review any relevant background documents provided by the SOCIEUX+ Team and/or the Partner. The experts will familiarise themselves with the different templates and evaluation forms provided by the SOCIEUX+ Team.
- **Task #2** – Preliminary contacts with the Partner in view of the preparation of the mission's methodology and agenda.
- **Task #3** – A briefing meeting will be organised between the experts mobilized and the SOCIEUX+ team at the very beginning of the activity. The purpose of this meeting will be to validate the intermediate deliverables (methodological note and agenda), which will have to be approved by the SOCIEUX+ team, as well as to clarify any other aspects to be taken into account. This includes possibilities in terms of production of communication materials and knowledge management. A separate meeting could be arranged with the SOCIEUX+ communications specialist and/or the knowledge development specialist, as appropriate.
- **Task #4** – contact the Delegation of the European Union to arrange a meeting on-line (briefing and/or debriefing depending on the interest of the EUD).
- **Task #5** – Settle the logistical arrangements with SOCIEUX+ for the implementation of the activity (access to SOCIEUX+'s e-learning platform...).

➤ Implementation phase (on-site and on-line) *(The details of this phase will follow the methodology and agenda prepared beforehand):*

- **Task #1** – in collaboration with the Ministry of Health, prepare all relevant documents for the realization of the activity
- **Task #2** – to conduct consultations with the Partner's executives and staffs, as well as any other relevant actors who can support the activity.
- **Task #3** – To present the outcomes of the mission to the partner in order to discuss and take into account comments on the contents of the deliverables before their finalization.
- **Task #4** – The experts will be available for a debriefing with the EU Delegation.
- **Task #5** – Depending on the visibility and/or knowledge development possibilities identified during the preparation with the SOCIEUX+ team, the experts will be able to transmit to SOCIEUX+ any useful material to inform the public about the activity (photos, interviews, notes or articles), as well as making short videos presenting the actors involved, the activity and the results, if necessary.

➤ Reporting phase (on-line)

- **Task #1** – Finalisation of the deliverables of the activity; experts may be invited to make changes/additions to the deliverables, taking into account the Partner's feedback.
- **Task #2** – Experts will complete additionally an Expert Mission Report (ExMR) and a Feedback Form (ExF), to be shared only with SOCIEUX+.

4.2 Deliverables

4.2.1 Pre-mission deliverables

- P1: A methodological note, detailing the working approach, tools and methods to employ, a risks analysis, etc. The Methodological Note shall not exceed 3 pages (excluding cover page and annexes).
- P2: A activity/mission agenda, detailing the meetings and working sessions to be held, persons to meet, etc. The Activity/mission Agenda shall not exceed 2 pages.

4.2.2 Final deliverables

- **An individual Expert Mission Report (ExMR)** in SOCIEUX+ format (template provided). This report is a confidential product intended solely for and use by SOCIEUX+. The expert team may also submit a single-joint ExMR report if they prefer to do so (see instructions on the template).
- **An individual Expert Feedback Form (ExF)** completed online (see instructions and link on the ExMR template).
- **A collective Activity Report (AcR)** in SOCIEUX+ format (template provided). This AcR is to be produced jointly by the mission team. It is intended for the Partner Institution, and will be shared, most probably, with key stakeholders of the action. The report will reflect the tasks conducted during the activity. It shall provide a meaningful contribution towards the final deliverables of the action.
- **D.1 - Annex 1 of the AcR: Technical report:** A final version of the revised Health Insurance Law of 2014.
- **D.2 – Annex 2 of the AcR:** A brief analysis of the reform to the Health Insurance Law (2014) and the rationale of the envisaged changes, and an explanation of what effects those amendments to the Law shall produce on the actual organization and deployment of the health insurance in Kosovo.

5 REPORTING AND SUBMISSION OF DELIVERABLES

5.1 Formats

All deliverables and products of the activity (notes, reports, presentations, etc) shall comply with the formats and templates provided by the SOCIEUX+ Team.

All deliverables are to be submitted in electronic in electronic editable versions [Microsoft Word 97-2003 [doc], PowerPoint 97-2003 [ppt] and Excel 97-2003 [xls]; or in equivalent OpenDocument format). Non-editable electronic document such as in Portable Document Format (PDF) shall not be accepted.

Templates for electronic presentations during the activity/mission are provided by the SOCIEUX+ Team. These templates are in Microsoft PowerPoint format and comply with the SOCIEUX+ Corporate Image standards. These templates are to be used as a sole format by all members of the expert mission team. They are to be used for all presentations by the experts during and for the activity/mission. The use by the experts of their own, or their organisation(s), templates or formats are not allowed unless otherwise instructed in written [by email] to the experts by the SOCIEUX+ Team.

All versions of deliverables or other products used or produced during activity/mission by the experts shall include the following disclaimer:

"Disclaimer:

The responsibility of this publication sole lies with its authors. The European Union, the European Commission, the implementation partners of SOCIEUX+ and the SOCIEUX+ Staff are not responsible for any use that may be made of the information contained therein."

Please refer to the expert information package for further guidance on communication and templates.

All deliverables are to be provided in English.

5.2 Submission and approval

All deliverables' versions (drafts, final or other) shall be submitted directly and only to SOCIEUX+ Team, unless otherwise instructed in writing [by email] to the experts by the SOCIEUX+ Team.

5.2.1 Pre-mission deliverables

- Pre-mission deliverables shall be submitted no later than 5 working days before the start of activity or departure of the mission of the experts, whichever is the earliest.

- Pre-mission deliverables will be shared and reviewed by the SOCIEUX+ and the Partner Institution. Feedback on the deliverables should be provided to the Principal Expert at latest 2 days before the start of activity or departure of the mission of the experts, whichever is the earliest. Comments and recommendation of this feedback shall be taken into account for the implementation of the activity/mission by the experts. Only the mission agenda shall be resubmitted with revision if requested by the SOCIEUX+ Team.

5.2.2 Final deliverables

- The first draft versions of the final deliverables are to be submitted no later than 10 working days upon completion of the activity or return of the experts.
- Feedback to the first draft version of the report should be provided 10 working days after its submission.
- Inclusion of the feedback on drafts versions is expected 5 working days upon reception of the comments by the principal expert. (In general, no more than one round of feedback and revision is required, unless the quality of the deliverables is considered unsatisfactory by the SOCIEUX+ Team or/and the Partner Institution.)
- Final versions of the deliverables should be approved or rejected no later than 10 working days upon their submission to the SOCIEUX+ Team.
- Final payments and reimbursement of travel costs to experts can only be authorised upon approval of the final version of the deliverables by SOCIEUX+.

6 REQUIRED EXPERTISE

6.1 Expertise profile

Principal expert (Expert #1): Health insurance legislation

Area(s) of expertise:

- *Health insurance; Social security legislation*

Specific skill(s) & competency(ies):

- *Legislation & Regulation making and development (2.1)*

Requirements (essential/required):

- a) The education type and level required:

“Master’s” degree (or equivalent advanced academic degree or diploma requiring 4 years of formal education) in the areas of expertise (see above), or another directly related discipline. In its absence, the master’s degree can be replaced by a combination of academic degree(s) with relevant years of work/professional experience combining the area of expertise and specific skills requested:

- An intermediate academic degree (“Bachelor”, equivalent degree or diploma requiring three (3) years of formal education) with an additional three (3) years of working/professional experience; or,
- A first-level academic degree (“License”, equivalent degree or diploma requiring two (2) years of formal education) with an additional five (5) years of working/professional experience.

The additional work experience used in calculating academic equivalence shall not count towards the minimum general professional experience.

- b) The number of years of relevant work/professional experience combining the area(s) of expertise and demonstrated specific skill(s) & competence(s):

Seven (7) years.

- c) Required language knowledge: English
- d) Specific experience in the legislative design of health policy/strategies;
- e) Proven ability to transfer knowledge and build capacity of public officials;
- f) Sensitivity in conducting institutional relations; strong diplomatic skills.

Additional assets (advantageous in selection):

- g) Previous experience in conducting short-term technical assistance missions in an international cooperation framework;
- h) Previous professional experience in Kosovo or in the Western Balkans

Expert #2: Public health economy

Area(s) of expertise:

- *Health insurance; Social security financing*

Specific skill(s) & competence(s):

- *Financial management, control and audit (4.2); Legislation & Regulation making and development (2.1)*

Requirements (essential/required):

- a) The education type and level required:

“Bachelor’s” degree (or equivalent academic degree or diploma requiring three (3) years of formal education) in the areas of expertise (see above), or another directly related discipline. In its absence, the bachelor’s degree can be replaced by a combination of:

- A first-level academic degree (“License” or equivalent) with an additional two (2) years of professional experience in one or more relevant fields.

The additional work experience used in calculating academic equivalence shall not count towards the minimum general professional experience.

- b) The number of years of relevant work/professional experience combining the area(s) of expertise and demonstrated specific skill(s) & competence(s):

Five (5) years.

- c) Required language knowledge: English
- d) Specific experience in the design and implementation of health financing strategies;
- e) Proven ability to transfer knowledge and build capacity of public officials;
- f) Sensitivity in conducting institutional relations; strong diplomatic skills.

Additional assets (advantageous in selection):

- g) Previous experience in conducting short-term technical assistance missions in an international cooperation framework;
- h) Previous professional experience in Kosovo or in the Western Balkans

Collaborative institutions: Ministry of Health of Estonia and Health Insurance Fund of Germany (AOK)

Public or publicly mandated institutions from European Union Member States with relevant expertise and competencies as outlined above are also encouraged to directly apply and

contact SOCIEUX+ to provide expertise and participate in these/this activity. Focal points and responsible staff may directly contact the SOCIEUX+ Team at:

experts@socieux.eu, indicating the reference of the call for experts.

6.2 Estimated workload

	Preparation	Onsite work	Distance work	Travel	Reporting & deliverables	Total
Principal expert (#1)	5	8	6	2	4	25
Expert (#2)	4	8	6	2	3	23
Total experts	9	16	12	4	7	40

7 APPLICATIONS

7.1 Call for experts

All calls for experts for SOCIEUX+ activities are published online on the SOCIEUX+ website. Interested experts should submit their application on the SOCIEUX+ online expert database: <https://pmt.socieux.eu> (currently only available in English). The application process is:

1. If they have not already, experts create their SOCIEUX+ account by clicking on "Create an account" using an email address.
2. Login details for their account will be sent to experts by email, experts should create and submit their profile for review by⁸:
 - a. Providing contact details
 - b. Providing information on the competencies, skills and working history of the expert. Experts are required to provide only limited information through fields marked with an asterisk. However, *experts are encouraged to complete in most detail de sections on skills and competencies as the SOCIEUX+ Team also regularly reviews profiles in the roster to identify and contact potential experts for future missions.*
 - c. Uploading of a curriculum vitae, preferably in Europass format⁹.
3. Once their profile is approved by the SOCIEUX+ Team, they can apply to any available calls for experts accessible under the tab "Call for experts" and click on "Apply."

If more information is needed, please contact SOCIEUX+ by email at experts@socieux.eu with the reference number of the application.

Collaborative or interested institutions wishing to make expertise available for a specific call for application may directly contact the team of SOCIEUX+ at experts@socieux.eu.

7.2 Selection of experts

In principle, SOCIEUX+ mobilises experts from the public administrations and mandated bodies of EU member states, and practitioners working for social partners, including:

⁸ SOCIEUX+ expert database and other management tools comply with the General Data Protection Regulation (GDPR) -Regulation (EU) 2016/679.

⁹ Europass templates for CVs are available here: <http://europass.cedefop.europa.eu/en/documents/curriculum-vitae/templates-instructions>

- Practitioners, civil servants and employees from publicly mandated bodies;
- Collaborators and employees of social partner institutions, such as trade unions and employer associations; and,
- Academic and research institutions.

Active public experts from collaborative institutions are given priority in the selection. Private consultants may also apply. Their application will be considered if an appropriate public expert cannot be identified.

Only short-listed applicants may be contacted. The selection process may include interviews by phone or other communication means.

Interested candidates may download the **Guide for Experts and Collaborative Institutions** with detailed information on contracting with SOCIEUX+ at www.socieux.eu

7.3 Contracting of public experts

Public experts can be on active duty or retired. Retired employees from international specialised agencies or cooperation agencies can also be mobilised, without regard to their former employer's collaborating with SOCIEUX+ on a specific action. Retired experts are considered as public experts for all purposes, benefits, and financial compensation provided by SOCIEUX+.

Short-listed candidates may be required to provide the contact of the employer or proof of their ability to be directly contracted under their status as a civil servant or public employee.

7.4 Financial compensations

Contract officials or active-duty or retired employees are entitled to standard fixed allowances of 350 euros per working day worked. The fees of private consultants are negotiated according to their number of years of relevant expertise and the standard scale of SOCIEUX+.

Retired experts are assimilated into public employees for all intents and purposes, benefits and financial compensation are provided by SOCIEUX+.

National regulations on remuneration and compensation of public employees and civil servants apply and may limit the payment of allowances by SOCIEUX+. The responsibility for compliance and verification lies with individual experts and their institutions of origin. The payment of income or other taxes is the sole responsibility of the mobilised experts and/or their organisations.

7.5 Travel costs

All travel expenses for the mobilised experts (public, private or international institutions) are covered by SOCIEUX following the **Guide for Experts and Collaborative institutions** with detailed information on contracting with SOCIEUX+ (version as of the date of signature of the contract).

8 COMMUNICATION & VISIBILITY

SOCIEUX + can use its communication channels, such as the web, newsletter and other media, to share information about the implementation and results of the activities. For this, contributions of the experts mobilised are expected. The experts may be requested to provide such contributions in the field of communication as photographs, provide short texts, and interviews.

Short briefings, before and after the mission, with the Communication Officer of SOCIEUX+. These briefings will provide the opportunity to identify communication opportunities and strategies.

For specific activities, visibility products, such as brochures, USB sticks, notebooks and pens, can be made available to experts for on-site distribution.

9 CODE OF CONDUCT

The experts mobilised by SOCIEUX+ will provide technical assistance from the preparatory stages of each activity to the delivery of products. The SOCIEUX+ Team will assist experts to fulfil their assignments by supporting and advising on preparing background materials before meetings. The SOCIEUX+ team will collect feedback from partner institutions and relevant stakeholders to ensure

that mission reports and recommendations are delivered to national authorities, the EU Delegations in the partner countries and the European Commission.

The experts mobilised are not representing SOCIEUX+ or the EU. Technical opinions and recommendations expressed are their own. They shall not express negative opinions on the implementation of actions supported by SOCIEUX+ to third parties. Nevertheless, they shall be aware of SOCIEUX+'s objectives and functioning, and promote its services to the best of their knowledge, whenever possible and feasible.

The experts shall perform their duties in the Partner Country in a way that is fully compliant with and respectful of the local institutions, policies and cultural behaviours. They shall particularly adopt culturally-sensitive behaviour when dealing with their local counterparts.

10 OTHER CONSIDERATIONS

Conditions of entry to Kosovo

Since February 5th, 2022, only travellers presenting one of the following documents are allowed to enter Kosovo:

- either a proof of vaccination less than 12 months old with 2 doses (one Janssen dose) ;
- or proof of vaccination with 1 dose AND a negative PCR test less than 48 hours old;
- or proof of cure (PCR positive for more than 21 days and less than 90 days);
- or proof of third dose (or second if first dose of Janssen);
- or a PCR test less than 48 hours old.

11 ANNEXES

N/A

TABLE OF CONTENTS

1	Background information	2
1.1	Country overview	2
1.2	Sector situation.....	2
1.3	Role of partner institution in the sector	4
2	Action Description	4
2.1	Overall objective	4
2.2	Specific objective (s) (purpose).....	5
2.3	Expected results.....	5
2.4	Final deliverables.....	5
3	Methodology	5
3.1	General methodology (of the action).....	5
3.2	Planned activities (work plan of the action).....	5
3.3	Inclusion of cross-cutting issues	5
4	Activities description	6
4.1	Tasks	6
4.2	Deliverables.....	7
4.2.1	Pre-mission deliverables	7
4.2.2	Final deliverables	8
5	Reporting and submission of deliverables	8
5.1	Formats	8
5.2	Submission and approval.....	8
5.2.1	Pre-mission deliverables	8
5.2.2	Final deliverables	9
6	Required expertise.....	9
6.1	Expertise profile	9
6.2	Estimated workload	11
7	Applications	11
7.1	Call for experts	11
7.2	Selection of experts	11
7.3	Contracting of public experts	12
7.4	Financial compensations.....	12
7.5	Travel costs	12
8	Communication & Visibility	12
9	Code of conduct	12
10	Other considerations	13
11	Annexes	13

ABOUT SOCIEUX+

The SOCIEUX+ Facility was established and funded by the EU through the European Commission's Directorate-General for International Partnerships (DG INTPA) and Directorate-General for Neighbourhood and Enlargement Negotiations (DG NEAR). The Facility is co-funded by France, Spain, and Belgium. It is implemented by a partnership composed of Expertise France (the partnership lead), Fundación Internacional y para Iberoamérica de Administración y Políticas Públicas (FIIAPP) from Spain, Belgian International Cooperation on Social Protection (BELINCOSOC), and the Belgian Development Agency (Enabel).

The Facility's general objective is to expand and improve access to better employment opportunities and inclusive Social Protection systems in Partner Countries. Its specific objective is to enhance Partner Countries' capacity to design, manage, and monitor inclusive, effective, and sustainable employment strategies and Social Protection systems through short-term, peer-to-peer technical assistance and knowledge development.

SOCIEUX+ recognises the impact of Social Protection and employment in reducing poverty and vulnerability. It supports the efforts of partner governments in promoting inclusive and sustainable Social Protection and employment systems. SOCIEUX+ also complements the efforts made through other EU initiatives.

The Facility is an expansion of SOCIEUX Social Protection EU Expertise in Development Cooperation, established in 2013.

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