

## TERMS OF REFERENCE FOR EXPERTS

Terms of reference for on-site activities and missions

**Action code and partner country:** SOCIEUX 2024-17 UZBEKISTAN

**Action title:** Support in the development and implementation of the drug reimbursement program

**Partner institution:** State Health Insurance Fund

**Activity/ies number(s) and title(s):**

- *Activity 1* – Comparative analysis of the regulatory framework relative to drug reimbursement

**Tentative dates of implementation and location:**

- *Activity 1* – February 10<sup>th</sup> – March 31<sup>st</sup>, 2025  
(onsite mission, March 3-7<sup>th</sup>, 2025, tbc)

**Expert positions and responsibilities (by activity):**

- Activity 1 : Expert 1 (principal) – H Health Insurance (including drug reimbursement and/or pharmacology); Health Policy; Access to Health 2.1.Legislation and regulation making and development
- Activity 1 : Expert 2 – Health Insurance (including drug reimbursement and/or pharmacology); Health Policy; Access to Health 4.Finance & budgeting

**Workload:**

Activity 1 - Expert 1 : Total 15 days (10 days at distance; and 5 days onsite)

Activity 1 - Expert 2 : Total 14 days (9 days at distance; and 5 days onsite)

**Call for experts' reference:** 24-17/UZB/1

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## 1 BACKGROUND INFORMATION

### 1.1 Country overview

Uzbekistan is a landlocked country located in Central Asia that borders the countries of Afghanistan, Kazakhstan, Kyrgyzstan, Tajikistan, and Turkmenistan. It is the most populated country in Central Asia, 35 million people. Its capital and largest city is Tashkent (almost 2,7 million people). Other big cities are Namangan (almost 0,6 million people) and Samarkand (0,53 million people). The distribution between urban and rural population is 50/50.

Uzbekistan is a post-soviet country. It was governed by the first president Islam Karimov till his death in 2016. After the transition of power in 2016-2017, some liberalization reforms were conducted, and modernization of the state and public services has been engaged. After an initial phase of market liberalization, Uzbekistan is moving into a more complex phase of reforms of land, labor, capital markets, and state-owned enterprises, but also health and social services. The most significant medium-term challenge will be ensuring reform inclusivity and transparency. To mitigate the economic, social, and health consequences of the pandemic, the Government has been taking anti-crisis policy measures.

Uzbekistan is a lower middle-income economy (GNI per capita is 1 750 USD in 2020). It is an important producer of agricultural products (including cotton) and exporter of natural gas, oil uranium and gold. The informal sector is estimated at 45% of GDP, with almost as many people employed formally as in informal work. Unformal employment concerns above all agricultural sector (seasonal work) and services. The economy is also characterized by high inflation (14,7% in 2020). About 12% of the population live below national poverty line. HDI is 0.72 ranking Uzbekistan at the 106<sup>th</sup> position.

### 1.2 Sector situation

Uzbekistan has been undergoing a major socio-economic transformation since 2016. Health is high on the political agenda and a key priority for the government, as reflected in a significant increase in the health budget in recent years.

As part of this transformation, the country has embarked on comprehensive and far-reaching reforms of its health system to achieve the goals of the "Vision for Health Development of the Republic of Uzbekistan 2019-2025". This includes a reform of financing, provision and modernization of health services, capacity building for health workers, digital transformation, better quality and access to health services and overall promotes the principles of Universal Health Coverage. Since July 1, 2021, a pilot project was conducted in Syr-Darya region, including more regions in 2023. In 2024 after the pilot was recognised as successful the reform was extended nationally.

Health coverage scheme includes an outpatient drug reimbursement component is a part of the reform. This system will include the issuance of an electronic prescription by a doctor, the receipt of medicines by the patient in a registered pharmacy and the subsequent compensation of the costs of issuing medicines at the expense of the Fund. The expected results from the introduction of the drug reimbursement system are an increase in financial protection of the population, management of chronic diseases, prevention of the number of ambulance calls and hospitalizations, as well as possible disability and mortality.

### 1.3 Role of partner institution in the sector

The State Health Insurance Fund was established in 2020 in accordance with the decree of the President of the Republic of Uzbekistan. The SHIF is a state institution conducting non-profit activities. The main objectives of the Fund are to accumulate financial resources allocated to finance the state-guaranteed package of medical services and medicines, to carry out strategic procurement of medical services, to introduce a system of state health insurance (based on general taxation) in all regions of Uzbekistan. The Fund's supreme governing body is its Supervisory Board, which is chaired by the First Deputy State Counselor, and the members of the Supervisory Board are Deputy Ministers of Health and Finance, heads of the antimonopoly body and the national association of non-governmental non-profit organizations.

## 2 ACTION DESCRIPTION

### 2.1 Overall objective

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

### 2.2 Specific objective (s) (purpose)

To support the State Health Insurance Fund in the development of the drug reimbursement component of the UHC

### 2.3 Expected results

ER. 1: T Draft regulations for the extension of the drug reimbursement program are prepared

### 2.4 Final deliverables

D. 1.1: Technical report on the current state of the regulatory framework related to drug reimbursement in Uzbekistan in comparison to EU examples, containing gaps identification and recommendations

D1.2: Action work plan (final)

## 3 METHODOLOGY

### 3.1 General methodology (of the action)

The State Health Insurance Fund of Uzbekistan is the state institution in charge of mandatory health insurance in Uzbekistan.

Under the supervision of the Ministry of Health, the Fund is responsible for accumulating financial resources allocated to finance the state-guaranteed package of medical services and medicines, carrying out strategic procurement of medical services, introducing a system of state health insurance (based on general taxation) in all regions of Uzbekistan. The Fund's supreme governing body is its Supervisory Board, which is chaired by the First Deputy State Counselor, and the members of the Supervisory Board are Deputy Ministers of Health and Finance, heads of the antimonopoly body and the national association of non-governmental non-profit organizations.

*After a pilot phase implemented in 2021-2024 in one then several regions of Uzbekistan (and supported by SOCIEUX+ previous action 2022-01), a new health funding scheme is to be introduced throughout the country. In line with the Universal Health Coverage principles, the provision of a state-guaranteed package of medical services and medicines free of charge guarantees universal access for the entire population to the necessary medical care. Drug provision is part of the social protection of the population, in this regard, the Fund plans to introduce a system of reimbursement of medicines.*

Drug reimbursement was also a part of the pilot project, with 11 drugs provided free of charge through selected pharmacies. The objective for the current phase to enlarge this list to 60 names, and generalize the distribution network. Principles of the identification of the package of reimbursed drugs, price setting, establishing relations with providers and overall reimbursement procedure including information flow should still be set up or reviewed. The proposed action will support the Partner Institution in formalization of different components of the drug reimbursement programme through identification of a necessary regulations framework and then support to develop it. In particular, the experts will conduct a comparative analysis of the existent legal framework (from national legislation to secondary acts of the SHIF), identify needs and propose further activities to complete this action.

### 3.2 Planned activities (work plan of the action)

The following activities are currently planned for the action:

A. 1: Comparative analysis of the regulatory framework relative to drug reimbursement

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

- Activity 1.

### 3.3 Inclusion of cross-cutting issues

SOCIEUX+ recognises the importance of including cross-cutting issues in social protection, labour and employment policies and systems. The following cross-cutting issues are duly taken into account *[remove individual bullets if necessary]*:

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

## 4 ACTIVITIES DESCRIPTION

### 4.1 Tasks

The principal expert will lead the on-site mission. He/she/they will be responsible for producing all activity deliverables (see below Section **Erreur ! Source du renvoi introuvable.**). He/she/they will be responsible for preparing, coordinating, implementing and reporting the overall activity towards SOCIEUX+.

The first activity will focus on the analysis of the existent regulation framework that is applicable in Uzbekistan for drug reimbursement program, including national legislation setting up basic rights for access to medicines up to by-law and acts of the State Health Insurance Fund that regulate the procedure (from the pilot project). The experts will compare this current framework to the mechanisms existing in the EU, present experience from EU countries and identify the gaps (in terms of regulations) that need to be filled in for the successful introduction of drug reimbursement program nationwide.

The sub-topics for this analysis may include definition of entitlement and right for drug reimbursement, access to medicines, identification of the list of reimbursable drug names, price-setting procedures, formalized procedures for reimbursement, regulation of the relations with the providers (pharmacies).

At the end of the activity, the experts will identify needs for the revision or creation of the regulation framework and identify the main steps to be formalized by national legal acts or through secondary regulations at the level of the Ministry of Health or of the State Health Insurance Fund. Further activities will build on this analysis. In particular, two technical deliverables are expected at the end of the activity: (1) a technical report on the current state of the regulatory framework related to drug reimbursement in Uzbekistan in comparison to EU examples, containing gaps identification and recommendations and (2) a final workplan of the action containing up to three additional activities, their purpose and methodology.

The experts shall work together with the Partner Institution on regulatory aspects of drug reimbursement <for outpatient care> including procedures formalized in by-laws and ministerial acts. They are expected to take into consideration the current priorities of public health in Uzbekistan, budget limitations as well as the principles of the universal health coverage and such crosscutting issues as inclusion of vulnerable groups as well as gender considerations (e.g. family planning medicines).

The experts shall co-develop a proposal for peer-to-peer methodology and agenda together with the Partner institution, to be discussed and validated ahead of the mission. Without prejudice to the choice of tools by experts, methodological approaches may include peer-to-peer consultations, presentation of EU good practices, focus groups and questionnaires, setting and verification of hypothesis, collecting and processing quantitative data. Broader network of stakeholders can be involved into this activity, including the line ministry, patients' and professional organizations as well as social partners.

Minimum tasks expected from the experts shall include:

Task 1 – Preparation of the mission. The Experts Team:

- gets substantial knowledge of the local context; reviews any relevant background document provided by the SOCIEUX+ Team and/or the Partner institution (PI);
- establishes in close consultation with the PI the mission’s methodology and agenda (MeN);
- submits the MeN for approval by the SOCIEUX+ Team;
- takes part in the pre-departure briefing with the SOCIEUX+ Team (around 1 week before the mission);

Task 2 – Implementation of the mission. The Experts Team:

- reviews and finalises the agenda of the mission and the list of stakeholders to be consulted with the PI upon arrival; any changes to the MeN shall be timely communicated to the SOCIEUX+ Team;
- organises, as necessary, a brief presentation of the objectives and methodology of the mission for the PI and relevant stakeholders;
- provides a briefing on the background of the request and objectives of the mission to the EU Delegation, if applicable;
- as per agenda, conduct consultations with the PI’s executives and staff, and relevant stakeholders, including the EU Delegation;
- compiles the initial findings and main conclusions emerging from the peer-to-peer technical exchange in a brief presentation that will be used for the final consultation and debriefing on-site;
- channels to SOCIEUX+ Communication officer any material that can be useful to inform the public about the activity (pictures, interviews, brief notes or articles); and,
- at every stage of the implementation, liaise with the SOCIEUX+ Team in case of doubts on the eligibility of proposals raised by the PI, politically sensitive developments, or any other relevant issue that may require a formal position of SOCIEUX+.

Task 3 – Final consultation and debriefing. The Experts Team:

- presents the initial findings and main recommendations emerging from the peer-to-peer technical exchange to the PI, relevant stakeholders and the EU Delegation; and,
- collects the feedback of the PI, relevant stakeholders and the EU Delegation for inclusion, as possible, in their final draft of the activity’s final deliverables.

Task 4 – Finalisation and submission of the deliverables. The FFM Team:

- elaborates the final deliverables for review and commenting by SOCIEUX+, the PI and eventually other stakeholders.

## 4.2 Deliverables

### 4.2.1 Pre-mission deliverables

- MeN: A methodological note, detailing the working approach, tools and methods to be employed, a risks analysis, etc.; and an activity/mission agenda, detailing the meetings and working sessions to be held, persons to meet, etc. The Methodological Note shall not exceed 5 pages (excluding the cover page and annexes)

### 4.2.2 Final deliverables

- D1: An individual or collective 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).
- D2: An individual completed Expert Feedback Form (ExF) completed online (see instructions and link on the ExMR template).
- D3: A collective Activity Report (AcR) in SOCIEUX+ format (template provided). The mission team will produce this AcR jointly. It is intended for the Partner Institution, but will probably be shared 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.

- D4.1 *Technical report on the current state of the regulatory framework related to drug reimbursement in Uzbekistan in comparison to EU examples, containing gaps identification and recommendations* (representing the experts' contribution to the PI in relation to the content of the peer-to-peer exchanges and in view to attain the action's expected results and to contribute to the achievement of its specific objectives. It is a piece of technical work on the very subject matter of the peer-to-peer cooperation. The technical report shall comply with the description provided in ToREx and further agreed upon in the MeN): *Title as per ToREx and/or MeN*
- D4.2: *Final action work plan* to achieve expected results and specific objective of the action through up to 3 activities (template provided)

## 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 editable versions [Microsoft Word 97-2003 [doc], PowerPoint 97-2003 [ppt] and Excel 97-2003 [xls]; or in equivalent OpenDocument format). Non-editable electronic documents, such 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, or in the language of the Partner Institution.

### 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 first agreed with the Partner Institution, then submitted to the SOCIEUX+ Team no later than 5 working days before the departure on mission of the Experts Team.
- Pre-mission deliverables will be shared and reviewed by SOCIEUX+. Feedback on the deliverables should be provided to the FFM Team at the latest 2 days before the departure on the mission of the experts. Comments and recommendations of this feedback shall be taken into account for the implementation of the activity/mission by the experts. An updated version of the MeN, integrating the SOCIEUX+ Team's feedbacks and recommendations shall be re-submitted by the Experts Team at the earliest possible occurrence.

#### 5.2.2 Final deliverables

- The first draft versions of the final deliverables are to be submitted by the Experts Team to the SOCIEUX+ Team *no later than 10 working days upon completion* of the Experts Team’s mission.
- Feedback by the SOCIEUX+ Team on the first draft version of the report should be provided 5 working days after its submission.
- Inclusion of the feedback by the Experts Team in the draft versions is expected 5 working days upon reception of the comments.
- The second draft version of the deliverables shall be submitted by the SOCIEUX+ Team to the PI for review and approval. The PI should approve or formulate comments and/or requests of amendments no later than 5 working days after having received them.
- In case of comments and/or requests of amendments, the Experts Team will have 5 additional working days to achieve a final version of the deliverables. Generally, no more than one round of feedback and revision is accepted.
- Final payments and reimbursement of travel costs to experts can only be authorised upon approval of the final version of the deliverables by the PI and SOCIEUX+.

## 6 REQUIRED EXPERTISE

### 6.1 Expertise profile

#### **Principal expert (Expert #1):**

#### **Area(s) of expertise**

*Health Insurance (including drug reimbursement and/or pharmacology); Health Policy; Access to Health*

#### **Specific skill(s) & competency(ies)**

Legislation & regulation framework

#### **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): 10
- c) Required language knowledge: Fluent in English, written and oral  
*N.B.: Translation and interpretation services may be commissioned by SOCIEUX+.*
- d) Other essential qualification(s):
- Substantial knowledge of legislative and administrative mechanisms involved into Universal Health Coverage and drug reimbursement procedures (including in the conditions of tax-based health funding system) ;
  - Relevant experience in the development of legislation in the area of health insurance/drug reimbursement;

-Good understanding of organizational and regulatory processes needed for setting up and operating drug reimbursement program.

**Additional assets (advantageous in selection):**

- e) A previous experience in delivering short-term technical assistance in international cooperation;
- f) A previous professional experience in Central Asia and/or Eastern and Central Europe;
- g) Language(s): command of Uzbek or Russian language

**Technical expert (Expert #2):**

**Area(s) of expertise**

*Health Insurance (including drug reimbursement and/or pharmacology); Health Policy; Access to Health*

**Specific skill(s) & competence(s)**

4. Finance & budgeting

**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): 5
- c) Required language knowledge: Fluent in English, written and oral  
*N.B.: Translation and interpretation services may be commissioned by SOCIEUX+.*
- d) Other essential qualification(s):
  - Substantial knowledge of financial and budget mechanisms involved into the set up and implementation of drug reimbursement;
  - Relevant experience in implementation of legislation in the area of health insurance/drug reimbursement;
  - Significant experience and proved capacities in individual and organizational capacity building of public administrations.

**Additional assets (advantageous in selection):**

- a) A previous experience in delivering short-term technical assistance in international cooperation;
- b) A previous professional experience in Central Asia and/or Eastern and Central Europe;
- c) Language(s): command of Uzbek or Russian language

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**Collaborative institutions:**

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](mailto:experts@socieux.eu), indicating the reference of the call for experts.

**6.2 Estimated workload**

	<b>Preparation</b>	<b>Onsite work</b>	<b>Distance work</b>	<b>Reporting &amp; deliverables</b>	<b>Total</b>
Principal expert (#1)	3	5	5	2	15
Expert (#2)	3	5	5	1	14
<b>Total experts</b>	<b>6</b>	<b>10</b>	<b>10</b>	<b>3</b>	<b>29</b>

## 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 need to create their SOCIEUX+ account by clicking on "Create an account" using a valide email address.
2. Login details for their account will be sent to experts by email, experts should create and submit their profile for review by<sup>1</sup>:
  - 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 the 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 format<sup>2</sup>.
3. Once the SOCIEUX+ Team approves their profile, they can apply to any available calls for experts accessible under the tab "Call for experts" and click on "Apply."

Applications are reviewed on a rolling basis, and positions may be filled as soon as suitable candidates are identified.

If more information is needed, please contact SOCIEUX+ by email at [experts@socieux.eu](mailto: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](mailto: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:

- 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. The mobilisation of experts currently employed with specialised international agencies is limited to activities and/or actions that are jointly implemented with that expert's agency of origin, indicated as 'Supporting Entity' in the Request.

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](http://www.socieux.eu)

At SOCIEUX+ we value all experts as unique individuals, and we welcome the variety of experiences they bring to the Facility. As such, we have a strict non-discrimination policy. We

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<sup>1</sup> SOCIEUX+ expert database and other management tools comply with the General Data Protection Regulation (GDPR) -Regulation (EU) 2016/679.

<sup>2</sup> Europass templates for CVs are available here: <http://europass.cedefop.europa.eu/en/documents/curriculum-vitae/templates-instructions>

believe everyone should be treated equally regardless of race, sex, gender identification, sexual orientation, national origin, native language, religion, age, disability, marital status, citizenship, genetic information, pregnancy, or any other characteristic protected by law. If you feel that you have been discriminated against, please let the SOCIEUX+ team know as soon as possible. Every complaint will be appropriately investigated.

### 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.

Various options for contracting:

- **Active French Public Expert** (Contracted by Expertise France)

Engagement letter (+ Cumulation of activities form signed by the hierarchical superior)

- **Active Spanish Public Expert**

Spanish public servant will be contracted by FIIAPP according to its internal rules.

- **UE Public Expert** (including French and Spanish retired or private experts)
  - Service contract with expert (+ Authorisation document from employer indicating the dates of the activity + a tax identification number (TIN) to be able to issue an invoice; or
  - Umbrella company: experts who do not have a tax identification number allowing them to invoice for services in their country, but they are authorised to sign temporary employment contracts according to local legislation, or
  - Service contract with institution: experts who do not have a tax identification number that allows them to work in their country and cannot sign an employment contract according to local legislation.

### 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 to 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 contributions for communication and visibility, such as photographs, short texts, and interviews.

Before and after the mission, short briefings can be organised 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+ nor 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 fully complies with and respects the local institutions, policies and cultural behaviours. They shall particularly adopt culturally sensitive behaviour when dealing with their local counterparts.

## **10 OTHER CONSIDERATIONS**

[.....]

## **11 ANNEXES**

[...Text...]

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## 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), the French Ministry for Europe and Foreign Affairs, France Travail, the Fundación Internacional y para Iberoamérica de Administración y Políticas Públicas (FIIAPP) from Spain, the Federal Public Service for Social Security of Belgium / Belgian International Cooperation on Social Protection (BELINCOSOC), and the Belgian Development Agency (Enabel).

The Facility's general objective is to increase employment opportunities and inclusive social protection systems in Partner Countries. Its specific objective is to improve policy and institutional frameworks for the development of labour, employment and social protection in Partner Countries, based on an inclusive and sustainable approach.

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.

More information: [www.socieux.eu](http://www.socieux.eu)