




**PROJECT KSV/014**  
**Health Support Programme in Kosovo**



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**PROJECT KSV/014**  
**HEALTH SUPPORT PROGRAMME IN KOSOVO**

**Terms of References**

**for**

**Framework Provider II**

**to Strengthening capacities of the administration of the MoH for implementation  
of the Health Care reform**

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## ACRONYMS

AP	Action Plan for the Health Sector Strategy 2010-2014
CTA	Chef Technical Adviser
CV	Curriculum Vita
FR	Final Report
HFA	Health Financing Agency
HIS	Health Information System
HIS-Strategy	Health Information System Strategy
HQ	Head Quarter
HSS	Health Sector Strategy
HSS2014	Health Sector Strategy 2010-2014
HSS2020	Health Sector Strategy 2014-2020
IDP	Institutional Development Plan
KHUCS	Kosovo Hospital University Clinic Service
KNIPH	Kosovo National Institute of Public Health
KSV/014	The Health Support Programme in Kosovo
LuxDev	Luxembourg Agency for Development Cooperation
MFA	Luxembourg Ministry of Foreign Affairs
MIR	Mission implementation report
MoH	Ministry of Health, Kosovo
MTEF	Mid Term Expenditure Framework
PMC	Professional Medical chambers
SIC	Strategy for Improving the Capacity of MoH
The project	The Health Support Programme in Kosovo
ToR	Terms of Reference



## 1. BACKGROUND

Project KSV/014 "Health Support Programme in Kosovo" (hereafter called: "the project") has the overall goal to contribute to the improvement of the health of the population in Kosovo in accordance with the Millennium Development Goals 4 & 5 and according to the vision of the Health Sector Strategy (HSS) of Kosovo.

The specific objective is to support the Kosovo Ministry of Health (MoH) in strengthening its capacity to implement the HSS with specific regard to strengthening the management capacity, the institutional framework as well as the legal framework and to improve the system for delivery of health care services.

The project is designed to achieve these objectives through the implementation of four results as follows:

**Result 1:** MoH's organisation, processes and tools to implement the HSS strengthened

**Result 2:** Selected key-actors' capacity to apply evidence based decision-making and strategic planning improved via further development of the health information system (HIS)

**Result 3:** Clinical protocols and guidelines for treatment/prevention/follow-up in primary and secondary care reviewed/ developed and capacity strengthened to support their implementation

**Result 4:** Infrastructure in primary and secondary health care improved and enhanced provision of the quality of services

The project is financed by the Governments of the Grand-Duchy of Luxembourg and the Republic of Kosovo. LuxDev has been mandated by the Luxembourg Ministry of Foreign Affairs (MFA) to implement the project in partnership with MoH. MoH is the national project counterpart and is, on behalf of the Government of Kosovo, responsible for the overall project coordination. In addition MoH facilitates, monitors, and guarantees the efficient implementation of its obligation under the bilateral agreements related to the project

LuxDev has established a project office in Prishtina, responsible for the overall project management in close cooperation with the national counterpart, the executive agency, and other partners of the project. The project office is besides the Chef Technical Adviser (CTA), staffed with the Health Policy Adviser (HPA), health information expert, a procurement officer, a project assistant, and a driver.

The project started in April 2009 and is foreseen to last until December 2013. However, a request for extension until June 2014 has been submitted to the donor. Furthermore, the formulation of a phase II to project KSV/014 is expected to be done before the end of the year with the new project, KSV/017, expected to start early 2014.

With respect to result 1, the MoH has implemented the HSS2010-2014, its Action Plan, and is in the process of drafting the new HSS2014-2020. Further, MoH is pursuing a major reform of the health care sector, where so far the following major milestones have been achieved: adoption of the new health law in December 2012, signing of performance contracts with all hospitals in January 2013, adoptions of the legal provision for establishing the Professional Medical Chambers (PMC) and the independent health care provider organisation Kosovo Hospital University Clinical Service (KHUCS). Fully implemented the vision of the reform is to ensure the separation of providers, financiers and the executive level by establishing the KHUCS within which the more independent and accountable hospitals receive payment for service provision, based on a performance contract with the Health Financing Agency (HFA). Medical professional issues will be the remit of the independent PMC.

Part of the reform also encompasses increasing the capacity and professionalization of MoH in order to enable it to meet its new roles and responsibilities and to shape the MoH as a modern public citizens focused administration able to drive the changes in the health sector. To this end, the Ministry of Public Administration in February 2013 approved MoH's new organisation that will enter into force as soon as adopted by the Government. The project has supported the MoH in preparing the implementation of the new organogram. Under the ongoing contract with the Framework Provider the Institutional Development Plan were elaborated, ToRs for the new department structure, ToRs for the individual employees as well as the training needs assessment of all employees. Further, the Strategy for Improving the Capacity of MoH (SIC) has been developed.



The SIC pivots around an approach combining skill and knowledge upgrade through integration of formal training, coaching, on the job training and professional consultancy support to the General Secretary, the middle managers and to key employees. To support this process the MoH and the project wish to identify a Framework Provider that is able to provide qualified experts and training for the administration.

## **2. THE OBJECTIVE OF THE ASSIGNMENT**

The overall objective of this assignment is to administer, identify, and provide highly qualified short-and medium term experts/coachers as well as training with the purpose of strengthening the capacity and the professionalism of the MoH.

The services will be delivered through a mixture of coaching, mentoring, expert support, formalised training and on the job training.

More specifically the Framework Provider will maintain a roster of the needed experts, issue standardised CV/offers as well as keep an updated list of qualified training providers. Based on the request from the project office for experts/training the Framework Provider will contract, pay, and administer the chosen expert/training as well as provide quality assurance, backstopping and report on the assignment.

## **3. THE REQUESTED SERVICES**

The requested services relate to the activities within the new healthcare reform agenda, the support of which is transposed into the project specific activities. Although the precise content of these services will have to be defined in detail alongside the implementation, the outline of the content of the activities related to this assignment are explained in these ToR with special emphasis on the type of services the Framework Provider is expected to supply.

The health sector reform will require new skills and competences for the MoH, among these can especially be mentioned: leadership, management, strategic management, evidence-based decision-making, delegation, empowerment, involvement, team-spirit, information sharing, professionalization, citizens and patient focus. These are key competences that need to be present in the MoH employees' toolbox in the end of the Framework contract.

The issues for which the Framework Provider can expect to provide assistance, during the remaining part of 2013, through international, regional and national experts and training, are the following:

- Facilitate the Minister, the Cabinet and the General Secretary to identify formalised cooperation modalities that respect that the role of the administration is to support and advise the Minister and in order to do so the administration needs to be involved;
- Support the Division of PR to prepare the public campaign for the health law, for budget 2015 (to be launched during spring 2014) and to provide support related to improvement of the internal communication in MoH;
- Support establishing of capacity within the MoH for monitoring the work of and support the decision-makers participation in the boards of: HFA/health insurance fund, PMC, KHUCS and KNIPH;
- Support establishing permanent procedures and staff basis for regular update, monitoring and reporting on the implementation of the Mid-term Action Plan for the HSS2020 and the MTEF;
- Support introduction of simple HR-management including annual staff appraisal;
- Support increased integration of health care provision;
- Support establishing incentives for modernising health care and increasing outpatient services and day surgery;
- Support for establishing incentives for improving performance of the health institutions, performance contracting of primary health care, as well as equalising the budget-base for the regional hospitals;
- Support for establishing of the legal basis for introduction of health insurance and other health financial issues.

## **4. EXPERT PROFILES, DURATION AND AMOUNT OF THE SERVICES**

The implementation of the services described in this ToR is foreseen to be implemented not later than December 2013, or June 2014 following the requested extension of the project.

The detailed profile of the experts will depend on the precise specification of the services to be rendered, and cannot be provided at this stage. However, the following **indicative types and working days of experts** of international, regional, and national experts are foreseen to be provided by the Frame Work Provider:

**International expertise:**

1. Expert in leading and management of a Ministry of Health
2. Expert in health facility management and modernising health service provision
3. Expert in health insurance, financing, and health economics
4. Expert in HRM
5. Expert in strategic management

Anticipated number of working days: 140

**Regional expertise:**

1. Expertise in health financing and economics
2. Expertise in health service management

Anticipated number of working days: 80

**National expertise**

1. Legal expertise
2. Expertise in health management
3. Expertise in Health financing and economics
4. Expertise in public health and health statistic

Anticipated number of working days: 180

Altogether, approximately 400 working days are foreseen to be provided by the Framework Provider until the end of June 2014, in case the extension is granted. However, under the expected approval of a new phase of the project for an additional period of 3 years (project KSV/017), further services will be required including training, for which the contract with the Framework Provider would need an extension.

Working days will be from Monday to Friday, with the exception of public holidays. Work over weekend or public holidays, as well as weekend or public holidays on mission, worked or not, will not be paid, unless exceptionally authorized by the contract's supervisor. Travel days are not considered as worked days and are not paid.

The qualifications and skills of the experts will be specified in the specific requests for services but in general an academic education of at least master degree is expected to be a requirement.

The professional experience requested will, for all the different types of expertise, be classified according to the following categories:

**Category I:** with more than 15 years of relevant professional experience;

**Category II:** with between 5 to 15 years of relevant professional experience and;

**Category III:** with less than 5 years of relevant professional experience.

Bidders for the tender are requested to state in their offers the prices per type of expert (international, regional and local) for each of the categories mentioned above.

The type of expertise will be assessed based on their experience, not on their nationality, where experts will be considered as:

- Local experts if they have only or essentially experience acquired in Kosovo;
- Regional experts if they have relevant experience in at least two countries of the Balkan region;
- International experts if they have relevant experience acquired on an international level.



It is acknowledged that the classification of an expert within one of these types might lead to discussions between the Framework Provider and the project.

Bidders for the tender who wish may make proposals already for some of the short-term experts, without being considered in the evaluation of the offer. Attention is drawn to the fact that one of the first missions will be for the elaboration of the list of expected expertise and for development of standard documents for reporting, CVs, etc.

## **5. METHOD**

### **5.1 Methods of service selection**

Based on the identification of the needed services by the national counterpart and the Project, a request for specific services is issued to the Framework Provider.

This request will, among other things, include a short but concise ToR including a schedule for the services delivery as well as a description of the required expertise (type of experts and quantities) based on which the Framework Provider will submit a proposal consisting of minimum three qualified experts for each position required (short CVs), based on which the national counterpart and the project will select the most qualified candidate. The selection of candidates will have to be validated by LuxDev Regional Office or Head Quarters prior to their mobilization.

The Framework Provider will have to submit these CVs within two weeks following the request. If no CV is selected the Framework Provider will have to submit new proposals. Services delivery will have to start within maximum three weeks after the selection of the qualified candidates unless otherwise agreed on with the project.

Following the selection, the Framework Provider will contract and pay the successful expert as well as administer and pay for all other issues related to the execution of the task defined for the assignment including per diem, travel cost, quality assurance, backstopping, reporting, etc.

### **5.2 Methods of service implementation**

The project CTA is charged with decision-making with respect to all operational matters related to the project and is as such the supervisor of the Framework Provider services contract. The HPA is assisting MoH and will support the Framework Provider's experts services implementation as required. The expert(s) for each specific assignment will, in the daily work, refer to the CTA.

Although the project office in Prishtina will supervise the experts and overview that services are implemented and delivered, the Framework Provider has to ensure that the services are provided in close cooperation with the MoH, in line with other components provided by the project team and that deliverables are following the stipulated deadlines.

The Framework Provider will be responsible for the proper and timely execution of the tasks as detailed in the ToR and in compliance with the rules and regulations of LuxDev, including being subject to professional discretion concerning all information relating to this assignment.

The Framework Provider must make available an appropriate management contact person charged with the responsibility for the successful implementation of the assignment, backstopping mechanism, quality control system, and an administrative person responsible for the day to day implementation of the assignment as well as any other support staff considered necessary by the Framework Provider.

The management-contact person will have at least the following tasks which may not be subcontracted:

- Responsibility for the day-to-day management of each individual assignment;
- Monitoring of the services rendered and of the performance of the experts for the assignments;
- Technical backstopping;
- Quality control of the specific contracts outputs.

The management-contact person must have the following skills and experience:

- University-degree;
- Minimum 10 years of experience in project management;
- Excellent knowledge of English.

The cost of the management-contact and backstopping is not paid for separately but considered part of the Framework Provider's general obligations and is considered to be included in the fee rate of the experts.

The management-contact person or the backstopping-team can participate in the execution of an assignment in which case the Framework Provider will be eligible to receive the standard expert fee according to the category of the expert.

The management-contact person should be assisted by relevant support staff with the qualifications required in order to administer the assignment inclusive secretarial services. The cost of the support staff both in the Framework Provider's and/or expert's home office and for experts in the field are considered to be included in the fee rate of the experts.

The management/backstopping team will have:

- For the professional management/backstopping team members at least 5 years of professional experience related to the assignment function;
- At least one member of the team will have experience in development issues or development cooperation;
- All team members will be fluent in written and spoken English additionally.

## **6. REPORTING**

All reports and technical documents will be issued in English, as drafts, to the CTA for his approval (only electronic version). The final approved version, two hard copies in English and two hard copies in Albanian, as well as electronic copies, will be delivered to the CTA who will distribute them to the counterpart and to the LuxDev's Regional Office. All reports are expected to be short and precise.

The Framework Provider is, besides the technical documents required after each mission (specific reporting requirements defined in the missions ToR), obliged to submit a mission implementation report (MIR) and a short final report (FR) at the end of the contract.

The MIR will contain a status of the implementation of the activities with emphasis on any deviation for the anticipated time table, problems discovered, stakeholders met and recommendations required to ensure successful delivery of the expected output.

The FR will provide information on the input provided, outcome and results achieved.

The draft MIR and technical documents will be submitted at the latest 10 working days calendar days after the end of the mission. Final versions will be submitted at the latest 10 working days after reception of the CTA's comments.

The draft FR will be submitted at the latest one month after the last mission. The final version will be submitted at the latest 10 working days after reception of the CTA's comments.

Payment of services is conditional to the approval of the reports and technical documents.

## **7. LOGISTICS**

Appropriate office accommodation will be made available within the MoH in Prishtina for the experts and hence, the Framework Provider is not requested to establish office space or invest in office equipment. However, the experts are anticipated to be accommodated with PCs and mobile phones.

The Framework Provider will in addition to the fee/cost of the expert/service pay travel cost, per diem, local travel cost and local per diem.

The project office will facilitate the progress of the implementation the services and make available all relevant material and reports as well as facilitate organisation of meetings etc.



## 8. BASIS OF PRICING

The prices shall be provided broken down as laid out in the price schedule.

The fees have to include:

- The remuneration actually paid to the experts concerned per working day;
- The per diem and in country travel costs;
- All administrative costs of employing the relevant experts and other employment benefits accorded to the experts by the Framework Provider;
- All office and administration costs for work in Kosovo and/or in HQ office;
- All costs related to backstopping;
- All equipment required and all translation costs;
- All incidental expenditure incurred in the course of the contract;
- The Providers benefits.

Any costs not specifically mentioned in the price schedule are expected to be included in the fees.

The cost of the management contact person, the backstopping-team and support staff both in the Framework Provider's and/or expert's home office and for experts in the field are considered to be included in the fee rate of the experts unless they are selected as candidates for specific services.

The price schedule includes a provision (not to be changed during the tender) of 9170 EUR for international and regional travel (Travel costs to and from Kosovo). These travel costs will be reimbursed based on the real costs as defined in the contract's special conditions.

All the quantities indicated in these ToR and the Price schedule are estimates and can considerably change during the services implementation based on the specific services' requirements.

Event though the price schedule doesn't indicate any quantities for cat III experts, the unit price for this category has to be indicated.

**Working days will be from Monday to Friday, with the exception of public holidays. Work over weekends or public holidays, as well as weekend or public holidays on mission, worked or not, will not be paid, unless exceptionally authorised by the contract's supervisor. Travel days are not considered as worked days and are not paid.**

## 10. FORMAT FOR PRESENTING THE TECHNICAL PROPOSAL

The following should form headings of different paragraphs/sections of the technical proposals so as to ensure easy comparison between proposals for evaluation purposes. Length and details left to the appreciation of the candidates, but the document should be concise and to the point.

- A. General understanding of the assignment and comments on the ToRs
- B. Description of the capacity of the Framework Providers to organise, coordination administer and backstop backstopping to be provided by the home office
- C. Proposed overall management structure for producing results, including a brief description of their company/joint venture
- D. Proposed approach to control the implementation of the services and ensuring quality and timeliness of works completion
- E. Proposed staff deployment strategy
- F. An organization chart for their proposed staffing
- G. CV and function of the permanent staff



**Request for registration and validation of PCA procedure and HR procedures over 20 000 EUR**

No	Category	Notes
1	Type	PCA
2	Object	<i>MoH Capacity Building Framework Contract</i>
3	Short description	<p>Project KSV/014 is tendering for supporting the MoH to build capacities for implementation of the Health Care reform. The objective of the services is to provide short-term International, regional and national experts that can be mobilised at very short notice (within about 3 weeks in order to provide the expertise for the following:</p> <ul style="list-style-type: none"> <li>• Facilitate the Minister, the Cabinet and the General Secretary to identify formalised cooperation modalities that respect that the role of the administration is to support and advise the Minister and in order to do so the administration needs to be involved;</li> <li>• Support the Division of PR to prepare the public campaign for the health law, for budget 2015 (to be launched during spring 2014) and to provide support related to improvement of the internal communication in MoH;</li> <li>• Support establishing of capacity within the MoH for monitoring the work of and support the decision-makers participation in the boards of: HFA/health insurance fund, PMC, KHUCS and KNIPH</li> <li>• Support establishing permanent procedures and staff basis for regular update, monitoring and reporting on the implementation of the Mid-term Action Plan for the HSS2020 and the MTEF</li> <li>• Support introduction of simple HR-management including annual staff appraisal,</li> <li>• Support increased integration of health care provision;</li> <li>• Support establishing incentives for modernising health care and increasing outpatient services and day surgery;</li> <li>• Support for establishing incentives for improving performance of the health institutions, performance contracting of primary health care, as well as equalising the budget-base for the</li> </ul>





		<ul style="list-style-type: none"> <li>regional hospitals;</li> <li>Support for establishing of the legal basis for introduction of health insurance and other health financial issues..</li> </ul>
4	Background and justification	<i>N/A – Included in Annual Workplan</i>
5	Task and Activity	<i>T7/A3&amp;4</i>
6	Planned and programmed	<i>Y</i>
7	Budget foreseen	<i>200 000 EUR</i>
8	Foreseen performance period	<i>12 months</i>
9	Procedure used	<i>Simplified restricted</i>
	Required derogations to procedure	<i>N</i>
10	Short-list	<i>Not yet established</i>
11	Documents used	<i>QM</i>
12	Process owner	<i>Aferdita Ademi-Osmani</i>
13	Contracting Authority	<i>LD</i>
14	Supervisor	<i>Aferdita Ademi - Osmani</i>
15	Planned date of launch	<i>15 April 2013</i>
16	Procurement/recruitment period	<i>30 days</i>
17	Technical specifications/ToR/Job description	
	Prepared by	<i>Aferdita Ademi-Osmani</i>
	Validated by	
18	Confidential detailed cost estimate	
	Prepared by	<i>Aferdita Ademi-Osmani</i>
	Validated by	
	Approval by National counterpart of procedure, technical specifications/ToR/Job description, budget and short-list (if applicable)	

Date 26/03/2013

Signature of CTA

*Dr. Aferdita Ademi - Osmani*



Signature of National Counterpart

*Dr. Gani Shabani –General Secretary*

