

ESF THEMATIC NETWORK ON SIMPLIFICATION

REPORT ON SCO PRACTICES

(Draft for the 6th Meeting of the Thematic Network - The Hague – 8-9 June, 2017)

References:

Member State / Region	GREECE
Reference number (TN's map of SCO practices)	29

Contact details:

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Type of SCO reported (Please choose one of these types of SCO: flat rate financing, standard scale of unit costs, lump sum).	Standard scale of unit costs
Type of activities covered by the SCO (Please indicate what type of activities is targeted by the SCO).	Operation of structures providing day care services for disabled people

A. PROJECT DESCRIPTION

A1. Description of the type of operation (Please describe in brief what types of operations are covered by SCO)
<p>The "Day Care Centers for People with Disabilities" (DCPD-KDIF in Greek), provide daily care services for people with disabilities. It operates 5 days a week, from 8:00 a.m. to 21:00 p.m. maximum, in 2 shifts of 8 hours each one, in order to provide for max 8 hours care services per person per day, including the transportation time . The services provided include at least:</p> <ul style="list-style-type: none">• transfer to and from the Center• stay and snack/lunch

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- special treatment according to the needs of each participant (Ergonomics, Logotherapies, Physical Therapies, etc.), based on the individual program of each one
- individual or group bodywork
- training in self-service and the learning of everyday life activities.
- creative occupation and socialization activities.
- their participation in entertainment, culture and sports programs
- networking and co-operation actions with other social services, institutions and providers and the local community in general (eg municipalities, sports, cultural or other associations, educational community, etc.) in order to interconnect with the local community, to integrate people with disabilities into it and thus to strengthen social cohesion at local level.

For each participant, an Individual Plan for day care services is drawn up by the center's scientific team, based on its special needs.

The cost of providing all the above mentioned services per participant is included in the unit cost, which covers staff cost, operating cost, cost for materials, transportation cost etc.

A2. Definition of outputs/results *(Please give a short definition of outputs and/or results)*

The objectives of the action are:

- Improving the quality of life of disabled people in need of support services,
- strengthening social cohesion and preventing marginalization and social exclusion, and
- Combating discrimination and promoting equal opportunities

Output indicators:

1. "Number of supported structures"
2. "Number of participants/benefiting from supported structures"

result indicator:

"Number of structures offering improved / expanded services" (comparing to provided services during the previous programming period).

A3. Beneficiaries *(please indicate the types of beneficiaries involved in the operations covered by SCO)*

Non-profit legal entities under private law, operating "Day Care Centers for People with Disabilities", have been legally licensed and so have met the terms, conditions and specifications of the relevant institutional framework (Ministerial Decisions, Ministry of Health).

Such legal entities could be: Associations of parents with children with disabilities, Social Organizations of Care for Sensitive Social Groups, etc.

A4. Target group(s) *(Please list target groups within projects covered by SCO)*

Participants are people with mobility, sensory, mental or multiple disabilities or with a different type of disability.

Participants are selected on the basis of criteria based on:

1. the residence scheme (institutions, family or other housing)
2. insurance capacity
3. individual or family income (minus any allowance)
4. marital status
5. working status of the parent / legal guardian

B. METHODOLOGY AND CALCULATION METHOD

B.1 Methodology *(please indicate which methodology/ies has/have been used: Fair, equitable and verifiable method / use of existing EU schemes for similar types of operation and beneficiary / Use of existing own national schemes for similar types of operations and beneficiaries / use of rates and specific methods enshrined in the regulation or in a delegated act / use of a draft budget /combination of methodologies).*

Please indicate if the concerned SCO has been covered by Art. 14(1) ESF)

Use of existing own national schemes for similar types of operations and beneficiaries.

The unit cost hasn't been covered by Art. 14(1) ESF.

B.2 Calculation Methods *(please describe how the calculations have been made)*

The unit cost amounts to € 800 per month per participant. It is based on the current institutional framework for the amount of hospitalization provided by the National Organization for Primary Health Care and in particular the Presidential Decree 383/2002 "Determination of Special Nursing of Rehabilitation Centers and Rehabilitation of Closed and Daily Nursing" (Government Gazette 332, A', 30.12.2002) as amended by the Presidential Decree 187/2005 (Government Gazette 231, A', 22.09.2005).

B.3 Data source *(please indicate the type of data used and the data source)*

Not relevant

C. IMPLEMENTATION OF SCO

(Please describe in brief what implementation rules and conditions have been set out)

The unit cost is per month per person. It is paid if there is verification of the physical object, based on the presences per participant for at least 15 days within the month (excluding official holidays and days of reasoned absence by medical certificate or hospital admission). In case the above condition is not met, for a month,

the center does not receive the amount of 800€ for the person who was absent.

As the operation of these cofounded centers has been recently started, we have not yet any feedback concerning the use of unit cost during the implementation.

D. AUDIT TRAIL

(Please provide a brief description of the audit trail for the concerned SCO, including documents, key contents/conditions and procedures)

The verification of the physical object is carried out by the MA and requires checking of the following:

The “Total Participants Monthly Monitoring Fiche”, showing the presences per participant and per calendar day of the reference month. These data are based on the Individual Monthly Monitoring Reports and the Weekly Schedule of Services of the center.

The Total Participants Monthly Monitoring Fiche should be co-signed by the responsible of the structure and by each participant or parent/guardian.

It is submitted to the MA accompanied by the relevant Monthly Expense Statement.

The check of the Total Participants Monthly Monitoring Report and the relevant Monthly Expense Statement consist the minimum obligatory documents for the administrative verification.

Furthermore, there are on-the-spot verifications by the Managing Authority. In addition to the verification of the above documents submitted, on-the-spot verifications will also require checks on the following documents, which should be kept and submitted by the Beneficiary whenever requested by the MA, as well as the competent Control Authorities:

1. Individual Monthly Plan, signed by the interdisciplinary team (what each participant should do/receive during the following month).
2. Weekly schedule of services, signed by the person responsible for the structure (it refers to the whole structure, is based on all the Individual Monthly Plans, taking into consideration the possibilities, the staff, the planned activities, etc of the center)
3. Individual Monthly Monitoring Reports, presenting the services actually provided by day under the Individual Monthly Plan and signed by the structure manager at the end of each month.
4. Session and communication booklet, which will be co-signed by the participants in the sessions (interdisciplinary group, participant and/or parents/guardians).

Each month, the Beneficiary is required to certify to the MA the provision of care services by submitting the Total Participants Monthly Monitoring Report, as mentioned above.

In addition, the Beneficiary has to submit to the MA a Mid-term Assessment Report in the middle of the implementation period and a Final Assessment Report at the end of the implementation period.

E. ASSESSMENT BY THE AUDIT AUTHORITY(IES) INCLUDING EVENTUAL EX ANTE ASSESSMENT

(If relevant, please explain how the audit authority has been involved in preparation and assessment of the SCO).

The audit authority has not been involved in preparation and assessment of the unit cost.

F. IMPACT OR ADDED VALUE FOR THE MA, BENEFICIARIES AND OTHER STAKEHOLDERS

(Please explain how you have perceived impact/added value of the SCO for the MA, beneficiaries and other stakeholders).

Simple simplification!

Not checking the financial implementation is a great help and service for the beneficiaries of this category, as they have no “know-how” in the management of co-financed operation.

G. SPECIFIC ISSUES FACED WITHIN CALCULATION AND IMPLEMENTATION OF THE SCO

(Please indicate any issues/problems/challenges you have experienced when setting out or implementing the SCO, i.e. high workload, state aid, public procurement, national legislation, revenues etc.)

Certifying the services provided per person, given that they differ according to the needs of each participant and therefore does not result in one and the same service “package” (output) per participant. What is common for all participants is the obligation of the structure to cover all his/her individual needs, plus a minimum of services needed to be provided such as networking, socializing. At the call for proposals level it was determined that the verification of the physical object carried out by the MA is done by checking the Total Participants Monthly Monitoring Fiche as described in unit D.

Due to the lack of a legal framework concerning the documents which must be kept by the structure, it is not always simple/clear for beneficiaries to collect and keep the necessary documents and data. For this reason MA determined in the call for proposals which documents and data have to be kept in the premises.

H. LESSONS LEARNED AND POINTERS

(Please indicate any unforeseen practical implications that have emerged and any key lessons you have learned from the development and implementation of the concerned SCO practice).

As the operation of these cofounded centers has been recently started, we have not yet any feedback concerning the use of unit cost during the implementation.

I. ANNEXES OR LINKS TO ONLINE DOCUMENTS

(Please list documents or links to online documents like complete methodology, calculation methods, documents submitted to the Commission, guidance for MAs and beneficiaries, calls for proposals, audit trail, legal acts etc.).