



Terms of Reference (TOR)

For (evaluation / baseline survey / context analysis / etc.)
Assesment of Diaconia Home Care Services, Ecumenical Humanitarian Organisation (EHO)

Made (internally / independently / externally)

externally

Of (start / mid-term / final / ex-post / other)

End of phase

In (country)

Serbia

ToR for EVALUATION	were	reviewed	by
M&E team?			

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1 DESCRIPTION OF THE INTERVENTION

Diaconia Home Care Services is a project of Ecumenical Humanitarian Organization supported by HEKS/EPER – Swiss Church Aid as long-standing partner of EHO. The project works towards the overall goal that elderly and disabled persons in targeted municipalities have better quality of life through high quality home care services

Specific Objectives of the DHCS project:

- To improve the quality of life for sick and elderly people by providing home care assistance of high quality;
- To increase institutional sustainability of the home care service, by accrediting the services, licensing the personnel and by registering as social enterprise. Long-term vision: Spin-off from EHO into a specialized organization;
- To improve financial sustainability of the home care service by increasing access to state and municipal funds and by increasing co-funding by beneficiaries.

Diaconia Home Care Service is located in the Republic of Serbia in the following locations: Novi Sad (2 medical nurses and 4 social nurses), Kisač (1 social nurse), Pivnice (1 social nurse), Stara Pazova (1 medical nurse), Bački Petrovac (6 social nurses and 1 driver, 1 local coordinator), Plandiste (8 social nurses and 1 local coordinator), Secanj (4 medical nurses and 8 social nurses, 1 local coordinator), Odzaci (18 social nurses and 1 local coordinator), Raska (12 social nurses, driver and 1 local coordinator), and new centers opened in 2020 in Gadzin Han (6 social nurses and 1 local coordinator) and Opovo (7 social nurses and 1 local coordinator)

During 2020, 90 staff members in 11 centres have provided 97'800 home care visits, serving 1'192 patients with average 6.3 visits per day per nurse.

EHO signed 10 contacts with local municipalities in 2020. Also a new centre was opened on the South of Serbia (Gadzin Han) and another one in Vojvodina- Opovo. After signing the contract with the municipality, all EHO procedures and standards are applied for new municipality, to meet both state standards and internal criteria to ensure a high level of quality. Good planning, following all laws and conditions for public tenders, a good reputation and constant presence in the field are the reasons for a high level of success in public tenders.

DHCS continued to exchange information and to coordinate its actions with other relevant parties, such as Centres for social work, municipalities and local CSOs. Also, harmonization of standards and procedures for service delivery, joint advocating actions for financial contribution by local/state bodies and capacity building activities were realized.





Since January 2012 the existing Diaconal Center of EHO was transformed in Diaconia Home Care Services (DHCS) and is organized as separate unit (profit/cost center within EHO) with its own management team. For the future, the organizational form shall be reconsidered, in order to allow the DHCS to stay competitive in the market and to offer its services with a favorable quality/cost ratio.

In September 2015 DHCS obtained a state license to provide home assistance services. Local self-governments, according to the new Law, establish social care institutions (governmental/public institution) for providing day-care services in local community, which are under their jurisdiction, their budget and responsibility. Only if the public institutions are not established or if the present institutions cannot provide the required service, the

local self-government can purchase, via public invitation for tenders, the service from other care providers which are licensed for providing the specific service. In such cases the licensed care providers - after signing the agreement on public purchase with the local community - becomes the authorized care provider of social protection service. This enabled an option DHCS to be official social care providers in local community, financed or co-financed by local self-government.

The license needs to be renewed in September 2021. For this reason, the DHCS is in a need to clarify its future set-up.

2 PURPOSE AND SCOPE

The main purpose of the assessment is to explore different options for the further institutional development of the DHC service and to discuss these options with the management and involved staff of EHO as well as with HEKS/EPER.

Advantages and disadvantages of future institutional set-ups with various degrees of independence from EHO as the "mother organization" shall be analyzed and chances for future institutional and financial sustainability assessed for each of them, e.g. spin-off into a separate legal entity (which could be controlled by EHO), different options to form a separate organizational entity within EHO, etc.

The findings and results of the assessment shall serve as a base for a decision about the future organizational set-up and the midterm-strategy for the next 3-4 years.

3 CRITERIA AND QUESTIONS

The consultant is asked to explore and find answers to the following key questions (questions may be jointly adapted during the contracting phase):

- Which are the main options, including challenges and opportunities, for an institutional set-up that allows DHCS to be competitive in the market in the longer term and to be economically and institutionally sustainable?
- Which are the legal and other external factors (existing or anticipated ones) that need to be considered?
- Which is the most adequate institutional/legal form (e.g. social enterprise, foundation, association etc.)?
- Which are the implications from an institutional point of view (owner of the institution, new role of EHO)?
- Which are the implications from an economic point of view (co-funding by governmental structure and health system; possibilities to make facture; VAT and income tax exemption, other benefits etc; influence on cost-structure)?
- Which are the implications from a social point of view (acceptance by patients, municipality, identity, shift from existing to new setting, etc).
- Which are the consequences for the mid and long term strategy of EHO's DHCS?

4 METHODOLOGY AND PROCESS

- Kick-off meeting with project manager, EHO and HEKS/EPER (0,5 day);
- Analysis of project documents, desk surveys on relevant topics (1,5 days);
- Analysis of legal frame (1 day);





- Analysis of the economic aspects and implications of the different options on the cost structure of DHCS (2 days):
- Meetings and discussions with EHO DHCS staff and management (0.5 day);
- Interviews with most relevant stakeholders from government and health system preferably together with EHO (0,5 day);
- Reporting, submission of draft report (2 days).
- Presentation of results and discussion with DHCS, EHO and HEKS/EPER (0,5 day)
- Final report (0,5 day)

5 DELIVERABLES

Draft Report: 8-10 pages with focus on main findings and comparison (e.g. SWOT analysis) of the different options; language: English;

Final report in English and Serbian

6 TIME FRAME AND BUDGET

The time frame for the assessment is end of June- mid August 2021, deadline for the final report is 15 August 2021.

The duration of the assessment is 8 days. The consultant is asked to offer his/her daily rate.

7 MANAGEMENT ROLES AND RESPONSIBILITIES

The evaluation is mandated by HEKS/EPER and EHO. The responsible program officer of HEKS/EPER and the coordinator of DHCS will have the final decision on the key questions to be assessed.

The coordinator of DHCS will provide the consultant with all required documents. DHCS will provide the consultant with any necessary logistical support and contact information. HEKS/EPER will hire the consultant.

8 LIST OF DOCUMENTS

- Project proposal, logframe and budget (2018-2021)
- Project financial and narrative reports
- List of project partners addresses (provided by EHO)
- Previous assessment and analysis

9 ASSESSMENT TEAM / QUALIFICATIONS

The consultant is expected to meet the following qualifications:

- Good knowledge of the field of homecare
- Knowledge about the state context, as well as NGOs and private providers involved in this field
- Experience with organisational development of service providing institutions or social businesses
- Proficiency in writing in English
- Serbian language skills would be an asset
- Ability to deliver quality reports / analysis and results in line with established deadlines

Interested and eligible candidates should forward 1) a cover letter indicating relevant experience, availability, and daily rate, 2) CV, 3) draft design / methodology ("1 pager"), 4) two samples of previous work, and 5) two references. Submit applications (preferably in one file) to borkavrekic@yahoo.com by 27.06.2021.