

ANNEX II: TERMS OF REFERENCE

1. BACKGROUND INFORMATION.....	2
Beneficiary country	2
Contracting Authority	2
Country background	2
2. OBJECTIVE, PURPOSE & EXPECTED RESULTS	2
2.1.Overall objective.....	2
2.2. Results to be achieved by the Contractor.....	3
2.3. Assumptions underlying the project	3
2.4. Risks	3
3. SCOPE OF THE WORK	4
General.....	4
3.1-Description of the assignment	4
3.2- Geographical area to be covered	4
3.3-Target groups.....	4
4. LOGISTICS AND TIMING	9
Location	9
Start date & Period of implementation of tasks	9
Equipment.....	9
5. REPORTS.....	9
Reporting requirements.....	9
Special requirements.....	9

BACKGROUND INFORMATION

Beneficiary country

Greece

Contracting Authority

InnoPolis- Centre for Innovation and Culture

Country background

The project AdriHealthMob deals with the Strategic Priority of sustainable accessibility services, focusing on the specific sector of Health and Care, where mobility is increasing and showing an enormous potential within the cross-border environment.

The project aims at developing sustainable transport services, models and schemes addressing a cross-border health and care system in the whole Adriatic area. Through the involvement of project beneficiaries and the realization of the workplan, AdriHealthMob will succeed in making transports services for health and care safer, more rationale, connected, environment respectful, functional and smart. AdriHealthMob addresses the needs to define a sustainable model of transport for health and care, making accessibility and mobility of passengers/travellers safer and more rational, reducing those useless or optimising those necessary.

AdriHealthMob intends to provide consistent solutions to those needs, through: the promotion and the creation of the Adriatic cross-border health and care area; the definition and the implementation of the related transport services;

- the introduction of ICT (eHealth, mHealth, teleHealth);
- the implementation of specific and tailored mobility solutions;
- the establishment of protocols and joint integrated planning practices to make the Adriatic basin the most innovative experience of transport for health and care.

OBJECTIVE, PURPOSE & EXPECTED RESULTS

2.1. Overall objective

The main objectives of AdriHealthMob are the following:

1. Collect, systemize and analyze data, information, documents, policies, financial performances and operational strategies, to create the most **functional cross border transport model for health and care**.
2. **Introduce ICTs in health& care** focusing the mobility across the Adriatic macro-region, to integrate, to upgrade, to rationalize and to optimize the different type of transfers.
3. Modernize/adapt existing infrastructures, **making them accessible for health and care** by efficient and sustainable transport.

4. **Promote joint rules, protocols and planning of transport services** for health and care, leading to efficient mobility, savings and including health and care needs in transport models.
5. To **identify and to map experiences of excellence** in the Adriatic region able to match health and care with sustainable transport models, creating a network of innovative mobility accessible at a cross border level.
6. **Define pilot initiatives** of sustainable transport and to experiment sustainable models to test and validate innovative solutions.
7. Provide **proposals, guidelines and recommendations** for a sustainable, intersectoral, integrated and cross border transport strategy for the health and care system.

2.2. Results to be achieved by the project

Cross border **mapping on transport routes** for health and care, mobility behaviors, needs, priorities, costs and crosscuts between transport and health investment; **ICT solutions** implemented for a sustainable model of transport (interactive map, Resource Centre, Tele-Control, Electronic Patient Summary); **Pilots** on transport and health infrastructures, focusing on exploitation of ICT, deployment of “Health Routes”, implementation of remote control centres, training; **Protocols on mobility of staff and professionals**, on accreditation requirements of health centres and for Joint Health and Transport Planning; introduction of systems for permanent and **systematic collection and analysis of data and statistics**; **Capitalization strategy**; Initiation of the implementation process for **Electronic Patient Summary**, ICT Resource Centre, platform for eHealth and eCare; Networking capacity to implement services of **tele-medicine**(tele-assistance/diagnosis/consultation); Permanent tool for policy and decision makers, the **Adriatic Health&Care Mobility Association (AHCMA)**, to plan health and care, to network providers, to identify integrated funding schemes.

2.3. Assumptions underlying the project

AdriHealthMob Project objectives, actions and expected results are shared and agreed amongst beneficiaries, respecting local and regional requirements as well as adaptation capacities.

AdriHealthMob project is going to realise the Joint Implementation approach. The implementation organisation is made up of 8 complementary and cross-cutting thematic WPs. The WPs have defined a balanced and reasonable task distribution for project beneficiaries respecting their genuine missions, availability of resources and roles played in their respective communities. Additionally, each WP has been assigned to a WP Leader, one of the project beneficiaries responsible to supervise and coordinate the implementation of the WP, reporting to the others.

Addressing public Health authorities and institution along the participating countries and collecting feedback and contributions from the equivalent authorities might be implemented with delay. Also ICT solutions and pilot need to be carefully designed to apply the real needs of the addressed target groups, so as to secure more active participation by the direct and indirect beneficiaries in our activities and secure success of the produced project outputs.

2.4. Risks

Following conditions can put into the question project’s results:

1. Not all ICT solutions may have all requested functionalities, a compromise solution/modifications and increased adaptations may be required.
2. The Pilots on transport and health infrastructures and protocols on mobility of staff and professionals, on accreditation requirements of health centres and for Joint Health and Transport Planning may be difficult to adapt in national framework, or the target groups might not be able to migrate the content to the national context due to different legal status. In this case the project will provide “train the trainers” activities to educate the health providers in each region. In case this approach doesn't work, the IT partners will provide direct support to those who find it difficult to digitize the content properly.

SCOPE OF THE WORK

General

3.1-Description of the assignment

The contractor will support InnoPolis in implementing monitoring activities in the framework of the project «AdriHealthMob: Adriatic Model of Sustainable Mobility in the Health & Care Sector», funded under IPA ADRIATIC Programme

3.2- Geographical area to be covered

Greece.

Ionian Islands, Thesprotia, Epirus

3.3-Target groups

- Health institutions,
- Care institutions,
- transport services for health and care
- patients and users of health services i

The contractor will be responsible to implement the following activities:

WP4 – Action 4.1 “Mapping of Health institutions”

To carry out the survey about the Health Institution in the targeted Area in Greece, in particular The contractor has to achieve a census of health providers in the Area, and the survey has to include, through quantitative and qualitative approach at least the following aspects:

- Contacts
- Services provided
- Accessibility as for transport
- Right to use

Please note that to conduct the survey it will be used the format of questionnaires given by WP4 Leader.

In detail The contractor has to :

1. present a detailed plan describing how intend to carry out this survey, in particular The contractor is required to present:
 - The detailed action plan, that includes: intermediate and final deliverables, Gantt, Instrument that will be used to carry out the analysis, resources (professionals, technical...) that will be used.
 - The methodology to conduct the survey: it is expected that The contractor conduct both desk and on field analysis. So Company has to present to the Contractor:
 - o The data that have to be collected
 - o The structure of the database
 - o The questionnaires filled in
 - o The way on which these data will be stored
2. Provide all raw data collected, and the related bibliography, sitography and all other sources
3. Provide all organized data in Excel or in another compatible format (i.e. opensource)
4. Provide n.1 report on Health Institutions in the target Area

The contractor must also take care to format the above reports in graphical form suitable for publication and on line dissemination, following all the instructions of the Programme IPA ADRIATIC 2007-2013 regard to the production of communication materials.

WP4 – Action 4.2 “Mapping of Care institutions”

To carry out the survey about the Care Institution in the targeted Area in Greece , in particular The contractor has to achieve a census of Care providers in the Area, and the survey has to include, through quantitative and qualitative approach at least the following aspects:

- Contacts
- Services provided
- Accessibility as for transport
- Right to use

Please note that to conduct the survey it will be used the format of questionnaires given by WP4 Leader.

In detail The contractor has to :

1. present a detailed plan describing how intend to carry out this survey, in particular The contractor is required to present:

- The detailed action plan, that includes: intermediate and final deliverables, Gantt, Instrument that will be used to carry out the analysis, resources (professionals, technical...) that will be used.
 - The methodology to conduct the survey: it is expected that The contractor conduct both desk and on field analysis. So Company has to present to the Contractor:
 - o The data that have to be collected
 - o The structure of the database
 - o The questionnaires filled in
 - o The way on which these data will be stored
2. Provide the envisaged number of questionnaires filled in.
 3. Provide all row data collected, and the related bibliography, sitography and all other sources
 4. Provide all organized data in Excel or in another compatible format (i.e. opensource)
 5. Provide n.1 report on Care Institutions in the target Area

The contractor must also take care to format the above reports in graphical form suitable for publication and on line dissemination, following all the instructions of the Programme IPA ADRIATIC 2007-2013 regard to the production of communication materials.

WP4 – Action 4.3 “Mapping of transport services for health and care”

To carry out the survey about the mobility and transport services offered by or available for health care institution in the targeted Area in Greece, in particular The contractor has to achieve a census of mobility and transport services offered by or available for health care institutions in the Area, and the survey has to include, through quantitative and qualitative approach at least the following aspects:

- Transport means
- Transport synergies among institutions (e.g. protocols)
- Infrastructures (e.g. airport roads)
- Mapping of accessories services such as: roads and traffic info, tourist points, health and care services nearby, car assistance

Please note that to conduct the survey it will be used the format of questionnaires given by WP4 Leader.

In detail The contractor has to :

1. present a detailed plan describing how intend to carry out this survey, in particular The contractor is required to present:

- The detailed action plan, that includes: intermediate and final deliverables, Gantt, Instrument that will be used to carry out the analysis, resources (professionals, technical...) that will be used.
 - The methodology to conduct the survey: it is expected that the contractor conduct both desk and on field analysis. So Company has to present to the Contractor:
 - o The data that have to be collected
 - o The structure of the database
 - o The questionnaires filled in
 - o The way on which these data will be stored
2. Provide all raw data collected, and the related bibliography, sitography and all other sources
 3. Provide all organized data in Excel or in another compatible format (i.e. opensource)
 4. Provide n.1 report on mobility and transport services in the target Area

The contractor must also take care to format the above reports in graphical form suitable for publication and on line dissemination, following all the instructions of the Programme IPA ADRIATIC 2007-2013 regard to the production of communication materials.

WP4 – Action 4.4 “Mapping of mobility of patients and crossborder health and care flows”

To carry out the survey about the mobility of patients and crossborder health and care flows in the targeted Area in Greece, in particular The contractor has to achieve a census of mobility of patients and crossborder health and care flows in the Area, and the survey has to include, through quantitative and qualitative approach at least the following aspects:

- Cases
- Pathologies
- Therapies
- Costs
- Revenues
- Transport means
- Access routes
- Reasons

Please note that to conduct the survey it will be used the format of questionnaires given by WP4 Leader.

In detail the Contractor has to :

1. present a detailed plan describing how intend to carry out this survey, in particular The contractor is required to present:

- The detailed action plan, that includes: intermediate and final deliverables, Gantt, Instrument that will be used to carry out the analysis, resources (professionals, technical...) that will be used.
 - The methodology to conduct the survey: it is expected that The contractor conduct both desk and on field analysis. So Company has to present to the Contractor:
 - o The data that have to be collected
 - o The structure of the database
 - o The questionnaires filled in
 - o The way on which these data will be stored
2. Provide the envisaged number of questionnaires to be filled in.
 3. Provide all row data collected, and the related bibliography, sitography and all other sources
 4. Provide all organized data in Excel or in another compatible format (i.e. opensource)
 5. Provide n.1 report on mobility of patients and crossborder health and care flows in the target Area

The contractor must also take care to format the above reports in graphical form suitable for publication and on line dissemination, following all the instructions of the Programme IPA ADRIATIC 2007-2013 regard to the production of communication materials.

All aspects are subject of prior approval by the Contracting Authority.

The Experts or Companies must also observe the latest Communication and Visibility Manual for EU External Actions concerning acknowledgement of EU financing of the project. (See http://ec.europa.eu/europeaid/work/visibility/index_en.htm).

The Consultant should provide in its offer the timing, sequence and duration of the proposed activities, taking into account mobilisation time. During the inception phase the Consultant and the Contractor will agree about the detailed time schedule for implementation of the above activities.

Project management

Responsible body

Contracting Authority will be InnoPolis

Management structure

The Contracting Authority is InnoPolis, and in that capacity it is responsible to launch the service tender procedure, sign the service contract, authorize payments to the contractor and handle the financial management and control during project implementation. InnoPolis, given the fact that it is not possible to envisage in advance the total of man months that will finally be demanded for the provision of the contractor services reserves the right to adjust the offered Contract Value exercising the option right up to 10% of the initial contract value.

The day-to-day operational project implementation will be performed by Mrs. Katerina Sotiropoulou– which is responsible for implementation of project “AdriHealthMob: Adriatic Model of Sustainable Mobility in the Health & Care Sector», under IPA ADRIATIC Programme”.

Facilities to be provided by the Contracting Authority and/or other parties

Not applicable

4. LOGISTICS AND TIMING

Location

The operational base for the project will be set up in Corfu (Kerkyra), Greece

Start date & Period of implementation of tasks

The intended start date is 15/04/2014 and the period of implementation of the contract will be till the project ends.

Equipment

No equipment is to be purchased on behalf of the Contracting Authority / beneficiary country as part of this service contract or transferred to the Contracting Authority / beneficiary country at the end of this contract. Any equipment related to this contract which is to be acquired by the beneficiary country must be purchased by means of a separate supply tender procedure.

5. REPORTS

Reporting requirements

The Contractor will submit the following reports in English in one original and one copy:

Draft final report of maximum 30 pages (main text, excluding annexes) in free format. This report shall be submitted no later than one month before the end of the period of implementation of tasks.

Final report with the same specifications as the draft final report, incorporating any comments received from the parties on the draft report. The deadline for sending the final report is 20 days after receipt of comments on the draft final report. The report shall contain a sufficiently detailed description of the different options to support an informed decision on the problems and obstacles occurred during the implementation of contract (if applicable). The detailed analyses underpinning the recommendations will be presented in annexes to the main report. The final report must be provided along with the corresponding invoice.

Special requirements

Not applicable