

UKRAINE

Twinning project fiche

UA 13 ENPI SO 01 16 (UA/55)

"Support to Ukrainian administration in developing a legal and administrative set up to introduce a system of early intervention and rehabilitation for children with disability or having a risk of disability"

LIST OF ABBREVIATIONS

ANED	Network of European Disability Experts
BC	Beneficiary Country
CRPD	Convention on the Rights of Persons with Disabilities
CSO	Civil Society Organisation
DPO	Disability People Organisations
EEG	European Experts Group on Transition
ENPI	European Neighbourhood Policy Instrument
EU	European Union
EUD	European Union Delegation
HR	Human Resources
ICF	International Classification of Functioning, Disability and Health
IRP	Individual Rehabilitation Programmes
MOH	Ministry of Health
MRs	Mandatory Results
MSP	Ministry of Social Policies of Ukraine
MS	Member State
NGO	Non-Governmental Organisation
PAO	Programme Administration Office
PCA	Partnership and Co-operation Agreement
PWD	People with disabilities
RTA	Resident Twinning Adviser
UN	United Nations
UNICEF	United Nations Children's Fund

1. Basic Information

1.1 Programme: ENPI - Framework Programme in support of EU-Ukraine Association Agreements (AAP 2013).

1.2 Twinning Number: UA13ENPI SO 01 16 (UA/55)

Title: "Support to Ukrainian administration in developing a legal and administrative set up to introduce a system of early intervention and rehabilitation for children with disability or having a risk of disability".

1.4 Sector: Social Affairs and Employment

1.5 Beneficiary country: Ukraine

2. Objectives

2.1 Overall Objective

To strengthen the capacity of the Ukrainian administration at central and local level in developing and introducing **a system of early intervention and rehabilitation for children with disabilities and children at risk of disability** thus to enhance the new role of public administration in terms of social services provision including quality, accessibility, and financial sustainability.

2.2 Project purposes:

- a) To assess the efficiency and effectiveness of the existing legal, administrative and financial set-up of the present system of early detection, identification and medico-social service rehabilitation for children with disabilities and children at risk of disability.
- b) To support Ukrainian authorities (respective services of the Ministry of Social Policy and the Ministry of Health) to elaborate amendments to the national legislation and administrative practice used at central and local level in the organisation of services delivery including early intervention and rehabilitation for children with disabilities.
- c) To enhance close cooperation of local administration with civil society organisations in developing a new approach for the implementation of an effective mechanism of early intervention and rehabilitation to prevent disability and to reduce the consequences of disability among children.

2.3 Contribution to National Development Plan / Cooperation Agreement / Association Agreement / Action Plan

Since 1991, when Ukraine gained independence, the European Union and Ukraine have developed an increasingly dynamic relationship. Ukraine is a priority partner country within the European Neighbourhood Policy (ENP) and the Eastern Partnership.

The ambitions of both the EU and Ukraine to enhance their relationship created an opportunity to move beyond cooperation towards gradual economic integration and deepening political association.

On 21 March 2014, the European Union and the Government and Ukrainian signed the **EU-Ukraine Association Agreement**. This signature underlined the EU's strong support for Ukraine in difficult times.

In the EU-Ukraine Association Agreement the following chapters are related to the topic of this project:

CHAPTER 21

COOPERATION ON EMPLOYMENT, SOCIAL POLICY AND EQUAL OPPORTUNITIES

ARTICLE 419

Taking into account of Chapter 13 (Trade and Sustainable Development) of Title IV (Trade and Trade-related Matters) of this Agreement, the Parties **shall strengthen their dialogue and cooperation on promoting** the decent work agenda, employment policy, health and safety at work, social dialogue, **social protection, social inclusion, gender equality and non-discrimination.**

ARTICLE 420

Cooperation in the area covered by Article 419 of this Agreement shall pursue the following goals:

- (a) Improve the quality of human life;
- (j) Enhance the level of social protection and modernise social protection systems, in terms of quality, accessibility, and financial sustainability;
- (k) Reduce poverty and enhance social cohesion;

To facilitate the implementation of the EU-Ukraine Association Agreement, both parties agreed to cooperate on the basis of priorities specified in the **EU-Ukraine Association Agenda**. The updated version of the EU-Ukraine Association Agenda endorsed by the EU-Ukraine Cooperation Council on 16 March 2015 highlights the following priorities in the field of social co-operation:

- Exchange best practices in improving the effectiveness of social protection, with a view to enhancing both its social adequacy and financial sustainability and to significantly reduce the number of poor and vulnerable people;
- Exchange of best practices as regards the provision of social services with a view to encouraging synergies between public and private partners in this sector in Ukraine.

Furthermore, under paragraph 2 “Political Dialogue” both parties indicate the attention on implementing the UN Convention on the Rights of Persons with Disabilities and its Optional Protocol. (See The UN Convention on the Rights of Persons with Disabilities,

which was ratified by the Law of Ukraine No. 1767-VI dated 16.12.2009.). Article 23 of the document clearly envisages the commitment of states "to promote the exchange of appropriate information in the field of preventive health care and of medical, psychological and functional treatment of disabled children".

The EU has made strong commitments in the field of protection rights of people with disabilities; the UN Convention on the Rights of persons with Disabilities (CRPD) is the only human rights treaty ratified by the EU as a regional integration organisation. Therefore EU obliged support national efforts for implementation of CRPD, with measures including "Facilitating and supporting capacity building, including through the exchange and sharing of information, experiences, training programmes and best practices".

The Twinning project should be implemented fully in line with the UN Convention of Rights of Persons with Disabilities and seek to help Ukrainian government to fulfil its obligations as a party to it – including in particular articles 7 on children with disabilities, 19 On living independently and being included in the community, 23 on family life, 24 on education, 25 on health, 26 on habilitation and rehabilitation, 28 on adequate standard of living and social protection.

This Twinning project is in line as well with the ENP policy and is supporting the Ukrainian public administration reform and thus also contributes to the social sector reform process.

3. Description

3.1 Background and justification

8 million children are living in Ukraine, 151 000 children are registered with disabilities (from 0 till 3 years – 51%; from 3 till 6 years – 20%; from 7 till 14 years – 7% and from 15 till 17 years – 21%. More than 44,000 of these children are living in institutions.

These numbers do not even consider those children who have special needs or are at risk of disabilities.

There is yet a strong stigma and **discrimination** against children with disability which makes more difficult their inclusion in the society and their access to essential services in healthcare, schooling and social support for them and their families.

Statistics show an increasing number of newly born children with disabilities as a consequence of the deterioration of the social and economic situation in the country: increasing number of families living in poverty, the armed conflict, stress at work, the abuse of drugs and alcohol and many other negative factors.

The **system of social and medical services** for this target group is outdated and left parents and children alone with the problem. The only solution and advice parents can get is to place such children into institution, or it proposes residential care for “rehabilitation”.

This is a violation of children rights as well as a violation of the UN Convention as to the rights of persons with disability that was ratified by Ukraine in 2010.

Ukraine - Democracy reporting International (DRI), the international organisation which is dealing with Human Rights protection of disable persons in Ukraine made an assessment of the situation with disable children in the country for the period 2013-2015. The report clearly stressed that boarding institutions are very dangerous place for children, even they are dangerous for healthy children where they can easily get physical or mental disabilities. The report stresses that Human Rights of children are violated in state service institutions. Children who were placed in institutions can easily become victims of trafficking and other violations.

In 2011 the UN Committee on Rights of the Child recommended to "develop and strengthen early childhood intervention services for children with disabilities and pay much attention to support of their families and thus prevent institutionalisation of children". Global research has proven that early intervention and empathy shared between child and parent play a key role in the child's overall physical and psychological development.

Ukrainian authorities many times declared the necessity to start the process of deinstitutionalisation. Unfortunately this political moto was not realised or transformed in a policy process with legal and administrative changes within the social and medical services in the country. In the framework of the ongoing decentralisation process, medical, social and rehabilitation services will be the responsibility of local authorities. This is the right chance to set up a new mechanism and to use modern tools and services for effective and efficient rehabilitation of children with disabilities and children at risk of having a disability without being institutionalised.

The success of early rehabilitation to great extend depends on the close coordination and cooperation between medical, social and educational institutions. The role of central executive bodies (the Ministry of Social Policy, the Ministry of Health and the Ministry of Education and Science) is very important in developing a system of early intervention. But local authorities will play a key role as they will manage these services at local level.

It is expected that the analysis of best European practices and the cooperation with the EU Members State institutions in charge of these issues will help Ukraine to develop its own model of early intervention and rehabilitation.

The idea of setting up a system of early intervention and rehabilitation of children with disabilities and children at risk of having a disability has more than 15 years history of struggle launched by the civil society and Ukrainian leading specialists in this area. Basic principles and provisions of a new system had been already developed and reflected in legal documents. In 2000, the Cabinet of Ministers of Ukraine published the concept of early social rehabilitation for children with disability. In order to implement this concept the centres of rehabilitation started to develop methods of early intervention and rehabilitation. The early intervention was mentioned in the Article 34 of the Law of Ukraine "On the Rehabilitation of People with Disability in Ukraine". The new version of the Order on Social Rehabilitation Centre for Disabled Children No. 505, approved by the Ministry of Social Policy of Ukraine on 15 August 2013 and registered in the

Ministry of Justice of Ukraine on 2 September 2013 under No. 1511/24043 created units of “Mothers and Children” in the structure of such rehabilitation centres for children with disabilities.

However, the question of common approaches and methods for early intervention remains problematic. The current system of rehabilitation institutions relies on practical knowledge and skills of specialists working in these centres. The lack of a common state-defined policy in the field of early intervention, the absence of coordination and cooperation of actions with the Ministry of Health of Ukraine in identification of children at risk of developing a disability lead to disappointing results.

It is important to enhance the cooperation with the Ministry of Education and Science of Ukraine in order to strengthen the integration of children with disabilities into the regular schools as it is the case in Europe and around the world. More than 70% of children with disabilities in the EU are integrated in the normal schooling process and graduate with their school friends. Every child with disability and his or her family can receive free of charge support from the specialists in rehabilitation. It is human-oriented approach because a sick child can stay in the family and do not be taken out of his/her biological and psychologically known environment. The system of early is economically efficient because children can achieve better results in a short period of time and therefore there is a decrease of related.

The revision of the legal framework in the field of early intervention and its implementation together with a better coordination and cooperation between the stakeholders will give an opportunity to solve the disability issues outlined in this project.

3.2 Linked activities

The setting up of an effective and efficient system of early intervention and rehabilitation for children with disabilities is an integrated element of the reform that the government of Ukraine plans to undertake in the social protection area.

In collaboration with other international donors, the **EU** has been engaged in the following initiatives collaborating closely with the Ministry of Social Policies (MSP):

- a) The new draft law on Social Services developed under the EU Twinning project "Support for the development of the social services system in Ukraine" (September 2012 – December 2014) is on the Parliament already and is to be approved in 2016. It will create the legal base and the frame for local authorities to set up a new system of social service provision.
- b) The EU Twinning light project "Approximation of Ukrainian legislation to the EU norms and standards in the sphere of vocational rehabilitation and employment of persons with disabilities" (February – November 2014) made a substantial contribution to the approximation of Ukrainian legislation in the area of rehabilitation and employment of persons with disabilities.

- c) Many useful practical recommendations in the sphere of social service reform including recommendations on social service planning, modelling and budgeting were delivered by the EU Technical Assistance project "Support to the development of a mid-term strategy for improving the system of social benefits" (2008-2010). In this context, the MPS staff was trained in data mining and statistical modelling. An important project output has been the development of a new tax-benefit model as an add-on to the already existing system. It allows micro-simulations to predict the impact of policy reform in terms of poverty reduction and changes in income distribution.

Other **international donors** were and now are active in the field of social sector reform. The most recent and relevant initiatives are the following:

- a) The project of the World Bank and SIDA "Social Assistance System Modernization in Ukraine". This project enhanced cooperation between the Ministry of Social Policy, Ministry of Finance, and the State Statistic Committee of Ukraine during 2005-2010.
- b) In September 2014 the World Bank had announced a US\$300 million loan for the Social Safety Net Modernization Project in Ukraine to expand a targeted social safety net program that will help the most vulnerable and socially excluded people.
- c) The new six year project with the budget of 3,5 USD billion was announced by the WB at the end of 2014. This new investment is going to expand a cash-transfer program, or the Guaranteed Minimum Income (GMI) program, to cover those most in need. It aims to support high-priority measures for more efficient administration of social benefits and services through strengthening performance management to be supported by the national management information system. In addition, the project directly addresses the needs of orphans and disabled orphans in four selected regions (oblasts). They will benefit from a full range of social welfare services that the project will help design and implement.

3.3 Results

The Mandatory Results (MRs), as outlined below, are jointly agreed between the European Commission and beneficiary administration. The EU supports Ukrainian Administration efforts for reform. Direction for the reform in this area is set out in strategic documents adopted by Ukrainian Government and Presidential Administration concerning implementation of International convention ensuring human rights of persons with disability. These results have to be achieved by means of robust cooperation and coordination between the BC and MS counterparts. The final ownership of the mandatory results of this Twinning project will rest entirely with Ukrainian authorities. At the completion of the Twinning project, the BC will have significantly improves system of early intervention and rehabilitation of children with disabilities or having a risk of disability. Introduction of the new system should reduce number of disable children in the country and service provision will be organised in more professional and cost effective manner.

The MRs to be achieved by this Twinning Project are structured according to four components as follows:

Mandatory Result 1: Revision of existing legal framework in the field of rehabilitation and social services provision and development of recommendations for the introduction of better system of early intervention and rehabilitation having in mind the process of administrative reform and decentralisation in the country.

Mandatory Result 2: Evaluation of the administrative and operational set up of rehabilitation institutions regarding early intervention for children who are at risk of having disabilities and children with disabilities. The role and procedures of different stakeholders at central, regional and municipal level will be defined. Draft of the new system will be developed.

Mandatory Result 3: New basic standard of services with costing will be developed that constitute a new approach to rehabilitation. Specific requirements for human resources providing services and for those who purchase this services will be developed in order to increase professional capacity of specialists working in the system.

Mandatory Result 4: Efficient and effective system of reporting, monitoring and evaluation of rehabilitation services will be designed and piloted.

3. Activities

The Twinning partners (BC and MS Administrations) should clearly define project activities during the (maximum) 5 months available for the preparation of the Twinning Contract, including the associated work plan. Before project activities can begin, both projects partners must prepare and agree a detailed work-plan, which must fix clear benchmarks to allow for close monitoring of project progress towards the final mandatory results. The work plan together with corresponding budget will become an integral part of the Twinning contract and will be signed by both Project Leaders (BC and MS).

The components and activities related to the implementation of the MRs are described below. The activities suggested below are of an *indicative* nature and will be fine-tuned or adapted during the contracting period in the work plan. It should be emphasised that the Twinning partners will have scope for the definition of modes of implementation.

The Twinning Partners should pay attention to **Project Visibility** as an important feature of this twinning. Internet should be used as a tool for broadcasting the project's materials and results. Throughout the project visibility and communication with stakeholders including the public should be emphasised. The results of the work should be publicly presented and available on the MSP website. Having this in mind partners to the project should elaborate the communication plan that should reflect main project activities and results achieved.

The project should also address awareness raising activities towards public officials and the general public, with regards the rights of persons with disabilities.

The Project will start with a **kick-off** workshop and finish with a closing event in the following way:

- During the first quarter of the project implementation a Kick-off meeting would take place involving the key MS and BC officials, the EUD, representatives of the PAO, EU Embassies in Kiev officials, representatives of international organisations, and other stakeholders within Ukraine, including relevant government departments. Representatives of the media would also be invited. The purpose of this meeting will be to raise general and public awareness of the twinning project within Ukraine.
- The first month of the project will be used for the installation of the Resident Twinning Adviser (RTA) in Ukraine. The RTA will have to be installed in his/her office provided by the Beneficiary. S/he will be introduced to the BC stakeholders of the project and to his counterparts and staff.
- A **Closure Event**, involving the stakeholders, will be organised in order to generate a dissemination of the project's results, raise awareness of project results achieved by stakeholders and the public. During the last month of the project, a closing event should be organised at which the results of the project will be presented. The state of play in the areas of the project's interventions will be discussed with the beneficiary, the Ukrainian Government, civil society and other actors. This event could have the format of a conference, where both partners report on results achieved and propose recommendations for future actions. The final event can also be organised as a visibility event on a specific theme of interest. The event should be concluded with some recommendations for possible follow-up and lessons learnt for similar projects.

3.4.1 Activities related to MR 1 (Component 1)

Component 1 - *Revise existing legal framework in the field of rehabilitation and social services provision and development of recommendations for the introduction of better system of early intervention, rehabilitation having in mind the process of administrative reform and decentralisation in the country.*

The twinning activities will be focused on the following engagements:

- 1) To carry out a comprehensive **analysis of the existing legislative** environment that establish norms and standards of early intervention and rehabilitation, regulates social service provision for this target group and envisages rights and obligations of all parties concerned like state, municipality, family, civil society, etc.
- 2) Conducting a comparative study of the existing provisions of Ukrainian legislation related to rehabilitation of PWD including children who bare a risk of having disability and children with disabilities. This includes comparing these provisions with the EU *acquis*, identifying discrepancies or shortfalls in legal statutes or instruments required, and proposing the harmonisation of the existing legal framework in the field of rehabilitation and social services provision regarding the early intervention and rehabilitation services.
- 3) To assist the MSP in the **preparation of proposals for amending current legislation and regulations** taking into account the EU *acquis* and other international legal conventions where Ukraine is a signatory party. Specific attention

should be taken to match the existing legislation with the recently adopted national strategy for human rights protection, as well as with the legislation on decentralisation where regions and community will gain responsibility for social service provision. Taking into account the length of the process for the adoption of new legislation, particular attention should be paid to the structuring of the legal framework related to the division of regulations between primary legislation (adopted by the Parliament) and secondary legislation (adopted by the Government). In particular, the need for codes of practice and guidance for the interpretation and enactment of the new legislation will have to be addressed.

3.4.2 Activities related to MR 2 (Component 2)

Component 2 - *Evaluation of the existing and operational set up of rehabilitation institutions regarding early intervention for children who are at risk of having disabilities and children with disabilities. The role and procedures of different stakeholders at central, regional and municipal level will be defined. Design of the new system will be developed and discussed with all stakeholders including NGOs that represent interest of persons with disabilities.*

The twinning activities will be focused on the following engagements:

- 1) To develop an inter-Ministerial strategic approach for the development of a system for social and medical rehabilitation of people with disabilities in Ukraine with especial emphasise on early intervention and rehabilitation services, including prevention policies and accessibility strategies. An essential component for the transformation of services is the existence of a clear and coherent strategy with clearly defined objectives. This could include a strategic overview of the current position and gaps in service provision as well provide indications of how services and social inclusion could be developed in the future. An inclusive, multi-stakeholder approach will help promote ownership and ensure that a broader and more social model will inform developments. Close working relationships with the Ministry of Health, Ministry of Education, Rehabilitation Centres, NGOs, disability associations, employers' associations, Disabled Peoples' Organizations, parents' groups and community organisations are anticipated. It is expected that the views and opinions of service users, parents, and other family carers will be taken into account in undertaking the work for this component.

To revise the Individual Rehabilitation Programmes (IRP) to introduce an efficient early intervention, rehabilitation services

To assist the MSP in the piloting of introduction of an efficient approach of early intervention and rehabilitation services in 2 rehabilitation centres. A multi-stakeholder approach should be used involving the Ministry of Health, as well as active NGO running social services.

To develop a clear and coherent communication strategy for the development of a services of early intervention and rehabilitation services into social and medical rehabilitation system in Ukraine.

To develop and undertake public awareness campaign with the focus on administration and general public with regard the rights of persons with disabilities.

3.4.3 Activities related to MR 3 (Component 3)

Component 3 – *New basic standards of services with costing will be developed. Specific requirements for human resources providing services and for those who purchase this services will be developed in order to increase professional capacity of specialists working in the system.*

The twinning activities will be focused on the following engagements:

- 1) To develop basic standards of services with cost analysis on the basis of existing services. Proposed standards will be discussed and approved by the Ministry and included as a secondary legislation and guidance for administration and service providers.
- 2) To develop a multi-level, multidisciplinary and multi-agency approach for the training of staff in preparation for the development of appropriate services and early intervention and rehabilitation services of people with disabilities in Ukraine. It is expected that, in line with the multidisciplinary nature, professions such as social workers, psychologists and health workers should be represented.
- 3) To assist the MSP in the preparation of training strategy to guide the implementation of the early intervention approach. This should be designed to enhance the professional competence and capability of staff and should relate to their day-to-day work.
- 4) Organisation of 3 study visit to EU Member States to collect information on different aspects of early intervention and rehabilitation services. These visits are intended to allow participants to study examples of good practice in relation to EU standards and to exchange experiences and knowledge. The expectation is that any study tour should form a valuable learning experience for participants, with a coherent agenda and programme of visits prepared in consultation with the MSP. An intensive follow up of the study visit by involvement of the BC participants is requested.

Component – 4: *Efficient and effective system of reporting, monitoring and evaluation of rehabilitation services will be designed and piloted.*

The twinning activities will be focused on the following engagements:

- 1) To review the existing system for reporting, monitoring and evaluation to manage the medico-social rehabilitation system in Ukraine as well as to implement the early intervention in Ukraine.

The MSP has developed and regularly use the monitoring approach for the system of social- medical rehabilitation. This monitoring is managed through the paper-based reports collected throughout the regional offices and agglomerated on national level. In addition, the MSP has introduced the Central Database on Disability (CBI) which is an information system gathering together the information about the Individual Rehabilitation Programmes (IRP) for the beneficiaries of rehabilitation services.

However, the information existing in the CBI is not used for automatic generation of monitoring tables. In this regards, the process of data exchange should be reviewed and new indicators related to early intervention should be developed and integrated into existing monitoring.

2) To assist the MSP by making recommendations for the preparation of reporting procedures to guide the implementation of the early intervention and rehabilitation services and demonstrate its impacts. Existing information system for the registration of people with disabilities (CBI) should be improved and a glossary of terms prepared. This could include the review of the software programme for the registration of **used by children at risk of having a disability** the MSP, along with the requirements to meet new standards of proposed social and medical rehabilitation and early intervention approach.

3.5 Means input from MS partner administration

3.5.1 Profile and tasks of the Project Leader

Roles and tasks

The Twinning project will be implemented under the supervision of the two Project Leaders (PLs) acting as counterparts of the EU Member State and Ukraine.

The Member State Project leader (MS PL) is expected to be a senior civil servant from MS-partner administration. He/she should be a high ranking official. MS PL should direct, coordinate and monitor overall progress of the Twinning Project.

He/she should be well aware as to the recent developments in the area of rehabilitation of persons with disabilities and best practices exist in EU MS. He/she must be aware as to the role and new initiatives and practices of a network of European Disability Experts (ANED) as well as to the work done European Expert Group on Transition from Institutional to Community-based care (EEG)

He/she is expected to ensure the achievement of the mandatory results of the project. In particular, the MS PL will be responsible for the following tasks:

- Conceive, supervise, coordinate and monitor the overall trust of the project;
- Plan project activities together with the BC Project leader (BC PL) and ensure MS experts' availability to work in the project;
- Maintain communications with the Ministry of Social Policy, other partners to the project and with the EU Delegation to Ukraine;
- Ensure backstopping and financial management for the project;
- Co-chair the Project Steering Committee (PSC) meetings with the BC PL;
- Submit interim quarterly and financial project reports to the PSC and to the EU Delegation to Ukraine.

He/she will continue to work at his /her senior position at the MS Partner Administration but is expected to devote at least three working days per month to carry out on-site mission to Ukraine and to attend the PSC meetings to be held at least once every 3 months.

The Beneficiary Country Project Leader (BC PL), being a senior official of the Ministry of Social Policy, will act as the MS Project Leader's Counterpart.

He/she is expected to coordinate and to provide supports to the project concerning all political, organisational, logistical and technical matters in the Ukrainian territory. The BC PL will co-chair and coordinate the Steering Committee meetings on behalf of the Ministry of Social Policy.

The senior official status of the Project Leaders should ensure their ability to mobilize the necessary staff and resources (including logistics) to ensure the efficient and smooth implementation of the Twinning project.

The MS Project Leader (PL) supported by the Junior MS PL (in case of a consortium) will direct, co-ordinate, and control the overall thrust of the project. He/she will guide the RTA in the implementation of the activities.

MS Project Leader Profile

Qualification and skills

- University degree preferably in Law or Public Administration
- Fluent in written and spoken English language
- Good inter-personal skills.

General professional experience

- At least 15 years of professional experience of work in public administration
- Minimum 10 years of professional experience in the social sector
- Experienced manager, good record in organizational leadership, staff motivation and communication
- Experience in managing international projects is an asset.

Specific professional experience

- Excellent knowledge of the best EU practices in organisation and managing social services including services for disability
- Excellent knowledge of EU basic legislation related to disabilities and social protection.

3.5.2 Profile and tasks of the Resident Twinning Adviser (RTA)

Role and tasks

The RTA, under the guidance of the PL, will be seconded in the Beneficiary administration (MSP) for the entire duration of the project and will lead the work of the team and work on a daily basis with the RTA counterpart to implement the project, to support and co-ordinate the actions in the BC. He/she is expected to ensure that mutually agreed input from MS experts will be delivered in time. He/she may also propose alternative and/or complementary project activities and/or outputs to those identified above where necessary. Also he has to give an active contribution in the

preparation of documentation necessary for all activities, and also to intermediate and final reports.

Profile of RTA

Qualification and skills

- Relevant university degree on social science and/or management in public administration
- Fluent in written and spoken English language
- Command of Russian and /or Ukrainian language would be an asset
- Good interpersonal skills/capability to work in an international team
- Demonstrable analytical skills.

General experience

- At least 5 years' experience in Public Administration / Social sector
- Experience in policy formulation and implementation
- Experienced in Human Resources management
- Project Cycle Management, reporting, presentation and communication skills
- Sound knowledge of the best practice in international settings.

Specific experience

- Specific experience in the field of social-medical rehabilitation subjects
- Specific experience in the field of early intervention would be an asset.

The RTA may have one or two assistants (RTA Assistant and Language Assistant) depending on the proposed project's implementation strategy. The assistant(s) will be recruited and funded by the project. The profile of the Assistant(s) will be specified by the RTA and agreed with the sector manager from the EU Delegation following the provisions of the Common Twinning Manual (revision 2012, updated 2013-2014). The selection of the Assistant(s) will be organised once the Twinning contract will be signed.

3.5.3 Profile and tasks of the MS short-term experts (STEs)

Roles and Tasks

The short-term experts shall assist the RTA in implementation of the expected project activities. They are expected to be seconded from the MS administration or approved mandated body(ies).

The exact number of STEs is to be indicated with their specific assignment to respective activities by proposal. Their number should be sufficient enough to implement activities in the most effective way.

They should have work experience and skills related to the project activities and will actively collaborate with the RTA and counterparts from the MSP. Their tasks will consist in providing support by conducting technical expertise, analyses, drafting legislation, making budget calculation, conducting training needs analysis, training, reporting and planning activities. The experts must be capable to provide the expected outputs mentioned below in a sufficient quality. It is planned to work by training for trainer method in order to pass training subjects to local experts and staff of the MSP.

Profiles of Twinning Project STEs

Qualifications and skills of STEs

- Preferred University Degree / or equivalent experience relevant to the assignment
- English working knowledge, both spoken and written;
- Good interpersonal skills
- Excellent team-working skills
- Strong analytical skills.

General professional experience

- Civil servant or equivalent seconded to work by EU MS Administration in the area of social safety net
- Solid knowledge of EU policy and/or legislation related to rehabilitation of disable people and social inclusion
- Minimum of 5 years' experience in the field related to the exact activities of the assignment.

Interpretation services costs will be included in the Budget of the Twinning contract.

4. Institutional Framework

The social rehabilitation system of the Ministry of Social Policies (MSP) of Ukraine is composed of rehabilitation centres, social rehabilitation centres for children with disabilities) with the special emphasis on keeping social and family connection. Furthermore, civil society organisations have created 88 centres for social rehabilitation of children with disabilities. The main target group is the children with disabilities from birth to 18 years old. The rehabilitation process includes social, psychological, pedagogical rehabilitation as well as medical services and professional rehabilitation. The individual programmes of rehabilitation for children with disabilities are used in all social rehabilitation centres.

Every year about thousands of children with disabilities are served by the social rehabilitation system, and only 100 of such children are integrated into the general education system. Child disability in Ukraine has a stable tendency of growing despite the decreasing birth rate. The main causes for disability are diseases of nervous system, sensory organs, mental disorders and birth defects.

The existing institutional system appeared to be non-effective and outdated. Rehabilitation in many cases is limited to medical services and due to the very limited infrastructure, children with disabilities in rural areas are inaccessible.

The country plans to implement a policy of decentralisation when all social, medical and educational services will be provided at the level of municipality or community. Therefore it is the right moment for putting in place a comprehensive approach and institutional setup of early identification, intervention and rehabilitation to be developed at local level.

Steering Committee

A Twinning Steering Committee will assess and approve the project progress with regard to the contract related work plan including mandatory results and related activities, and will approve intermediate and final reports.

Steering Committee meetings will take place in a 3 monthly interval, where the RTA should also report on the state of affairs and on any problems arising, and discuss any recommendations.

Representatives from the PAO and the EU Delegation, the RTA counterpart and BC PL as well as the RTA and MS PL, BC component leaders will take part at the Steering Committee meetings. Observers from other institutions who may be involved from time to time in cross cutting issues like representatives from other administrations (Ministry of Health, Ministry of Education etc.) or short term experts may also be invited if necessary.

The secretarial support of the PSC will be provided by the RTA and RTA Assistant(s) who will prepare the agenda of meetings, documents to be discussed as well as minutes of meetings. Translation and interpretation will be provided where necessary and where permitted by the provisions of the Twinning Manual. The Project Leader from MSP and MS will co-chair the Steering Committee meetings.

5. Budget

The total amount of the budget is EURO **1,300 000**.

6. Implementation arrangements

6.1 Implementing Agency responsible for tendering, contracting and accounting

The **Delegation of the European Union to Ukraine** will be responsible for tendering, contracting, payments and financial reporting, and will work in close cooperation with MSP.

The person in charge of this project is

Mr. Sergey Polyuk

Coordinator Social and Health Care sector

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The Programme Administration Office (PAO) under the national Agency of Ukraine on Civil Service is the administration responsible for coordination of the preparation of Twinning projects and support for their implementation. It also provides advisory and methodological support to public authorities during the preparation and implementation of Twinning projects.

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6.2. Main counterpart in the Beneficiary Country

The beneficiary of the project is the **Ministry of Social Policies of Ukraine (MSP)**.
Persons in charge are:

BC Project Leader:

First Deputy Minister Vasiliy Shevchenko

Ministry of Social Policy of Ukraine, Project Leader.

8/10, Esplanadna str., Kyiv 01001, Ukraine

BC RTA Counterpart:

Ms. Oksana Polyakova

Director of Department of Social Protection of People with Disabilities,
Ministry of Social Policy.

6.3. Contracts

This project will be implemented through one Twinning Contract.

A new Financial Regulation applicable to the general budget of the European Union entered into force on 1st January 2013. The Twinning contract that shall be signed as a result of the present procedure shall follow the templates of the updated Twinning Manual and Annexes.

7. Implementation Schedule (indicative)

7.1 Launching of the call for proposals: June 2016

7.2 Start of project activities: March 2017

7.3 Project completion (Date): December 2018

7.4 Duration of the implementation period: 21 months

Legal duration: 24 months

8. Sustainability

The assistance required under this Twinning project is intended to expose the Ukrainian administration and more specifically the Ministry of Social Policies, to EU disability policy, via the provision of the EU best practices in the development and implementation of social inclusion, early intervention and community-based forms of

service provision for people with disabilities, children at risk of having a disability, and the development of new quality standards and benchmarks.

The above objective will be achieved by the revision of national legislation in line with best EU standards and *acquis*, development of standard for early intervention and rehabilitation services, introduction of inter-ministerial strategic approach for early intervention, capacity building of MSP staffs and revision and updating of information system and monitoring practices, based on the EU experience and methodologies.

The development of a specific approach of the Twinning project will be a joint responsibility of the MS partner and the BC, which will be laid down in the Twinning contract.

The dissemination of project results and obtained knowledge will be integrated into all levels of the project. Effective mechanisms will be put in place by the BC to disseminate and consolidate the results of the project in order to ensure sustainability of the project and long lasting results after the completion date.

Approximation/adjustment of existing Ukrainian legislation related to the early intervention and developing new by-laws and resolutions regulating activities of social rehabilitation of peoples with disabilities, developing a new basic standard and enhanced staff capacity will contribute to project sustainability and create the room needed for upgrading the quality of social care.

A mid-term or long-term collaboration with the counterpart institution from the EU member states should contribute to the improvement of institutional set up and make social aspect of rehabilitation of PWD more target oriented.

9. Cross-cutting issues

Equal opportunities

The issue of equal opportunities is of central importance for this project. The focus of the latter is on enhancing equal opportunities for people with disabilities. This need to be considered in its broadest sense: opportunities for the inclusion of people with disabilities in Ukraine will need to be created and sustained, while those with disabilities will require support in order to ensure that they can take advantage of any opportunities that do arise. This will include opportunities for inclusion in education, the labour market, housing, cultural activities, leisure and recreation and so on. The development of equal opportunities policies and mechanisms for monitoring their implementation will be required.

The dimension of gender equality and the creation and sustaining of equal opportunities for girls and women affected by disability is an issue that deserves particular attention in Ukraine.

The observance of equal opportunities will be included in the Twinning contract as a joint responsibility of the MS partner and the BC.

**Environmental sustainability – n/a
HIV/AIDS etc.**

People with disabilities need to be treated in exactly the same way as any other member of the general population. They are, in other words, as liable to be infected by blood-borne virus infections, and other diseases, as anyone else within society. They are therefore entitled to benefit and be included in health promotion and health care treatment programmes, along with the general population. It is worth noting, however, that special, additional measures may be required to ensure health protection among people with disabilities, due to their particular circumstances.

10. Conditionality and sequencing

Projects to be implemented through Twinning require full commitment and participation of the Ukrainian counterparts. The Ukrainian Government will provide the MSP with sufficient budgetary and staff resources to ensure a consistent implementation of the program.

The Ukrainian counterparts will ensure a further continuation of all activities and new methodologies supported by this program. Furthermore, they commit themselves to apply the acquired best practices in line with the EU rules, methods and standards. Possible other twinning projects that might be initiated in a short run by other Ukrainian institutions working in the area of social policies should accumulate best knowledge and experience from this one.

The following contributions are expected from the beneficiary institution, the MSP, and they must be regarded as important preconditions of the successful implementation of the twinning project:

- Provision of high level political and professional support by the MSP hierarchy to the Twinning project;
- Strong involvement/commitment of the MSP staff, the stakeholder institutions' staff and social partners at all levels;
- Assignment of the necessary experts to activities connected with the project;
- Ensuring the BC assignment of an operational PSC monitoring all components of the Twinning project, in line with the time schedule of implementation and according to the benchmarks agreed;
- Ensuring coordination between institutions (Ministry of Health, Ministry of Education and Science and two selected regional administrations) connected with the project;
- Ensuring access to all the necessary information and documents in accordance with legislation in force and guidance issued.

In terms of sequencing, it is expected that some concurrent running of components will take place within the twinning project, in order to ensure completion of activities before the end of the 24 month project timeline.

Close cooperation, collaboration and coordination will be essential among those responsible for the activities under the different components, to help ensure cross-component synergies.

ANNEX: Logical framework matrix