

Παραδοτέο 1.1.4 Απολογιστική Έκθεση Πεπραγμένων Εναρκτήριας Συνάντησης (Kick off Meeting) στο πλαίσιο του έργου "Remote Healthcare Service Provision" με ακρωνύμιο "RemoteCARE" INTERREG V - A CROSS-BORDER COOPERATION PROGRAMME GREECE – BULGARIA 2014 – 2020



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1. Εισαγωγή

Την Παρασκευή 23/11/2018, η εναρκτήρια συνάντηση (kick off meeting) του έργου με τίτλο «Remote Healthcare Service Provision» και ακρωνύμιο «REMOTECARE» πραγματοποιήθημε στις εγματαστάσεις του Δήμου Ωραιόκαστρου όπου συμμετείχαν με εκπροσώπους τους οι τρείς (3) εταίροι του Έργου, δηλαδή ο Δήμος Ωραιοκάστρου με τον κ. Σαράντη Τύπου, τον κ. Ισαάκ Εανθόπουλο και την κα Στεφανίδου Σοφία, το Ινστιτούτο Πληφοφοφικής και Τηλεπικοινωνιών EΘNIKO KENTPO ΕΡΕΥΝΑΣ ΕΠΙΣΤΗΜΩΝ "ΔΗΜΟΚΡΙΤΟΣ" με τον κ. Παπαδόπουλο Όμηρο και το νοσοκομείο MPHAT "SOUTHWEST HOSPITAL" με την κ. Vasilika Nikolova από τη διοίμηση του εν λόγω νοσοκομείου, την κ. Iliana Popova, αντιδήμαρχο του Δήμου Petrich, την κ. Julieta Georgieva, τον κ. Hristo Medarov και την κ. Iliana Hadjiiska , ὁπως υπογράφηκε και στη συνημμένη λίστα συμμετεχόντων. Στη συνάντηση συμμετείχε επίσης η κ. Jenya Dinkova, Project Officer από την Κοινή Γραμματεία του Προγράμματος.

Σε όλους τους εταίρους δόθηκε λίγος χρόνος για εγγραφές ενώ το σύνολο των συμμετεχόντων καλωσορίστηκε γύρω από έναν μπουφέ υποδοχής. Η συνάντηση άνοιξε από τον κ. Σαράντη Τύπου, ο οποίος καλωσόρισε όλους τους εταίρους του Έργου και εξέφρασε το έντονο ενδιαφέρον του για τα αποτελέσματα που αναμένεται να παραχθούν μέσα από την υλοποίηση του έργου, ενώ χαρακτηριστικά επισήμανε: Έκ μέρους του Δήμου θα ήθελα να σας αναφέρω ότι το έργο REMOTECARE είναι σημαντικό σε δύο διαστάσεις: Πρώτον, μέσω του οχήματος η προμήθεια του οποίου θα γίνει στο πλαίσιο του έργου, θα δώσει τη δυνατότητα σε απομακρυσμένες περιοχές να έχουν πρόσβαση σε υπηρεσίες υγείας και ειδικότερα σε μια περίοδο κρίσης στην Ελλάδα. Δεύτερον, το έργο παρουσιάζει μια καινοτομία στην υλοποίησή του η οποία προϋποθέτει την συνεργασία των φορέων που συμμετέχουν στο εταιρικό σχήμα και την μεταφορά εμπειριών και τεχνογνωσίας σε διασυνοριακό επίπεδο.'

2. Γενική επισκόπηση του έργου

Ο συντονιστής της συνάντησης κ. Ισαάκ Εανθόπουλος, πήρε τον λόγο, ευχαριστώντας τον κ. Τύπου για την ευπρόσδεκτη ομιλία του και καλωσόρισε τους συμμετέχοντες. Η ημερήσια διάταξη για την εναρκτήρια συνάντηση ακολουθήθηκε ως εξής:

	MEETING AGENDA
11:00 - 11:30	Arrival and registration of the participants
11:30 - 11:45	Welcome speech Asterios Gavotsis - Mayor of Municipality of Oraiokastro (LB)
11:45 - 12:00	General Overview of the project 'RemoteCARE' Isaak Xanthopoulos - Representative of Municipality of Oraiokastro (LB)
12:00 - 12:15	Presentation of LB's action plan Sarantis Tipou - Representative of Municipality of Oraiokastro (LB)
12:15 - 12:30	Presentation of PB2's action plan Homer Papadopoulos - Representative of PB2 (PB2)
12:30 - 12:45	Presentation of PB3's action plan Representative of PB3 (PB3)
12:45 - 13:15	Coffee Break
13:15 - 13:30	Management Procedures Technical Consultant of LB (LB)
13:30 - 13:45	Definition of the Project Management Team All partners
13:45 - 14:00	Discussion on 'RemoteCARE' requests for modifications, Summary of the tasks for the upcoming period – Final conclusions All partners
14:00 - 15:00	Lunch

Στη συνέχεια, έδωσε το λόγο στον κ. Σαράντη Τύπου, ο οποίος ως εκπρόσωπος του Δήμου Ωραιοκάστρου παρουσίασε την Γενική Επισκόπηση του Έργου, τον Σκοπό και τους Στόχους του Έργου, τα Αποτελέσματα και τις εκροές του έργου καθώς και τη γενική διάρθρωση του έργου ανά Πακέτο Εργασίας και Δράσης.

3. Παρουσίαση του Σχεδίου Δράσης των εταίρων του έργου 'REMOTECARE'

Ο κ. Ισαάκ Ξανθόπουλος, εξ ονόματος του επικεφαλής εταίρου, παρουσίασε το Σχέδιο Δράσης του LB1 στο πλαίσιο του έργου «REMOTECARE». Στη συνέχεια, ο κ. Σαράντης Τύπου ξεκίνησε τη συζήτηση για να θέσει ορισμένα θέματα και ζητήματα σχετικά με την υλοποίηση του έργου τους επόμενους μήνες. Οι εκπρόσωποι των εταίρων ζήτησαν να τους αποσταλούν όλες οι παρουσιάσεις, η λίστα συμμετεχόντων, τα πρακτικά και οι φωτογραφίες της πρώτης συνάντησης των εταίρων.

Η επόμενη παρουσίαση έγινε από τον κ. Όμηρο Παπαδόπουλο, εκπρόσωπο του Εταίρου 2 (PB2) και αφορούσε στο Σχέδιο Δράσης του PB2 στο πλαίσιο του έργου «REMOTECARE». Ο κ. Παπαδόπουλος, γνωστοποίησε επίσης ότι το έργο παρουσιάστηκε σε ευρωπαϊκό συνέδριο στο πλαίσιο των ESI FUNDS, γεγονός που ενισχύει την αναμενόμενη επιτυχία του.

Τέλος, παρουσιάστηκε το Σχέδιο Δράσης του PB3 από εκπρόσωπο του εταίρου 3 (PB3).

4. Διαδικασίες Διαχείοισης του Έργου

Ο κ. Ξανθόπουλος, έδωσε το λόγο στην κα Στεφανίδου Σοφία, εκπρόσωπο του Τεχνικού Συμβούλου του Επικεφαλής Εταίρου, η οποία, εξ ονόματος του Δήμου Ωραιοκάστρου, παρουσίασε τις Διαδικασίες Διαχείρισης του Έργου (Management Procedures). Αναφέρθηκε ειδικά στην επιλεξιμότητα των

δαπανών, τις διαδικασίες αναφοράς, τις εκθέσεις προόδου, τις διαδικασίες ελέγχου πρώτου επιπέδου, τις αιτήσεις πληρωμών, τις ταμειακές ροές και τις διαδικασίες τροποποίησης του προϋπολογισμού.

5. Ορισμός της Ομάδας Διαχείρισης του Έργου (Project Management Team)

Συμφωνήθηκε μεταξύ των εταίρων ότι η ομάδα διαχείρισης του έργου θα αποτελείται από έναν υπεύθυνο έργου και έναν ειδικό σε τεχνικά ζητήματα, ο οποίος θα εκπροσωπεί κάθε δικαιούχο του έργου. Επιπλέον, θα διοριστεί ένας Συντονιστής Έργου από τον PB1, ο οποίος θα είναι υπεύθυνος για τη γενική διαχείριση και τον συντονισμό της ομάδας διαχείρισης του έργου (PMT).

Το PMT θα είναι το βασικό όργανο της διαχειριστικής δομής και θα είναι υπεύθυνο για τη διασφάλιση της υλοποίησης των αποτελεσμάτων του έργου και της επίτευξης των αποτελεσμάτων του έργου. παρακολούθηση της προόδου, της ποιότητας, των χρονοδιαγραμμάτων και των κινδύνων του έργου, καθορισμός ορόσημων, αποφασίζοντας για διορθωτικές ενέργειες.

Συμφωνήθηκε επίσης ότι η Ομάδα Διαχείρισης Έργου, η οποία θα είναι υπεύθυνη για την παρακολούθηση της υλοποίησης του έργου, θα συνεδριάζει σε 6 μήνες. Η Κοινή Γραμματεία/ Διαχειριστική Αρχή μπορεί επίσης να κληθεί να παρευρεθεί στις συνεδριάσεις.

Το έγγραφο θα υπογραφεί το επόμενο χρονικό διάστημα μετά τον ορισμό των της Ομάδας Διαχείρισης Έργου.

6. Συζήτηση- Συμπεράσματα

Ο κ. Ξανθόπουλος, ως συντονιστής στης συνάντησης έδωσε την ευκαιρία για περαιτέρω ερωτήσεις και απαντήσεις και για μια ανοικτή συζήτηση μεταξύ των εταίρων, κατά την οποία ο κος Hristo Medarov, τεχνικός σύμβουλος του εταίρου 3 (PB3), ευχαρίστησε την κα Dinkova για την προσωπική της

συνεισφορά στην επίλυση του ζητήματος της αντικατάστασης του εταίρου 3. Ειδικότερα, ανέφερε ότι το νοσοκομείο ΜΡΗΑΤ "SOUTHWEST HOSPITAL", με έδρα το Σαντάνσκι της Βουλγαρίας αποτέλεσε την καλύτερη δυνατή λύση για να συμμετέχει στο εταιρικό σχήμα του έργου «REMOTECARE».

Η κ. Dinkova, ζήτησε να της σταλεί ένα νέο αίτημα για τροποποίηση στο οποίο το Παραδοτέο 5.1.1 – Προμήθεια Κινητής μονάδας υγείας θα αναφέρεται, όπως επιτάσσει η ελληνική νομοθεσία ως Προμήθεια οχήματος/ βαν το οποίο θα μεταφέρει κλιμάκια ιατρών και επαγγελματιών υγείας και μεταφοράς τηλεπικοινωνιακού και ιατροτεχνολογικού εξοπλισμού. Ουσιαστικά η αλλαγή αυτή θα σημαίνει ότι δεν θα πραγματοποιούνται ιατρικές εξετάσεις μέσα στο εν λόγω όχημα αλλά εκείνο θα χρησιμοποιείται μόνο για την μεταφορά ιατρικού προσωπικού και εξοπλισμού στα τοπικά κέντρα υγείας.

Επίσης, η κ. Dinkova, επισήμανε ότι δεδομένης της μεγάλης καθυστέρησης στην υλοποίηση του έργου, η οποία όπως επισήμανε, έχει εισάγει το έργο σε μια 'μαύρη λίστα', θα έχει ως αποτέλεσμα να αυξάνεται η πιθανότητα για περικοπή του προϋπολογισμού του. Παράλληλα ζήτησε να σταλεί επικαιροποιημένο το χρονοδιάγραμμα και το πλάνο διαγωνισμών (Startup Time Plan – Procurement Plan) με βάσει τα τωρινά δεδομένα στο οποίο θα προσαρμόζεται ο χρόνος υλοποίησης κάθε δράσης (συμπεριλαμβανομένου και της πιλοτικής εφαρμογής), έτσι ώστε να έχει υλοποιηθεί το έργο έως και τις 11/10/2019, οπότε και είναι η επίσημη ημερομηνία λήξης του. Τέλος, επισήμανε ότι δεν μπορεί να δεχτεί κανένα αίτημα που να αφορά σε παράταση του χρόνου υλοποίησης του έργου, από την στιγμή που υπάρχει μεγάλη καθυστέρηση στο στάδιο των διαγωνιστικών διαδικασιών.

Ειδικότερα, στο πλαίσιο της συζήτησης προτάθηκε να μειωθεί ο χρόνος της πιλοτικής λειτουργίας, αυξάνοντας όμως τον χρόνο απασχόλησης του

προσωπικού, έτσι ώστε να επιτευχθεί ο στόχος και οι δείκτες που τέθηκαν, παρά το γεγονός ότι υπάρχει μεγάλη καθυστέρηση στο έργο.

Τέλος, η κ. Dinkova, επισήμανε την σημαντικότητα της διαδικασίας της πιστοποίησης των δαπανών και του ορισμού του ελεγκτή, έτσι ώστε να απορροφηθούν οι πόροι του έργου, καθώς επίσης τόνισε ότι από την στιγμή που είναι αποδεκτές οι αλλαγές που προαναφέρθηκαν στη συζήτηση δεν χρειάζεται επιπρόσθετη γραπτή συναίνεση από το εταιρικό σχήμα.

Μετά την ολοκλήρωση της συνάντησης πραγματοποιήθηκε γεύμα, στο οποίο συμμετείχαν όλοι οι παρευρισκόμενοι.

7. Παράρτημα

- 1. Επίσημη πρόσκληση της συνάντησης
- 2. Ατζέντα
- 3. Λίστα συμμετεχόντων
- 4. Παρουσιάσεις των Εταίρων
- 5. Φωτογραφίες συνάντησης
- 6. Υλικό που μοιράστηκε στους συμμετέχοντες



Deliverable 1.1.4 Kick off Meeting Report

In the framework of the project "Remote Healthcare Service Provision" with acronym "RemoteCARE" INTERREG V - A CROSS-BORDER COOPERATION PROGRAMME GREECE - BULGARIA 2014 - 2020



Tzimouli Sofia

Research and Development Consultant

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1. Introduction

On Friday, 23/11/2018, the kick-off meeting of the project «Remote Healthcare Service Provision» with acronym «REMOTECARE» took place in the premises of Municipality of Oraiokastro in which participated representatives from three (3) project Beneficiaries, Municipality of Oraiokastro with Mr. Saranti Tipou, Mr. Isaak Ksanthopoulos and Mrs. Stefanidou Sofia, the Institution of Informatics and Telecommunication - Institute of Informatics and Telecommunications (IIT)-National Centre of Scientific Research "Demokritos" with Mr. Papadopoulos Omiros and the Hospital MPHAT "SOUTHWEST HOSPITAL" with Mrs. Vasilika Nikolova from the administration of this Hospital, Mrs. Iliana Popova, Deputy Mayor of the Municipality of Petrich, Mrs. Julieta Georgieva, Mr. Hristo Medarov and Mrs Iliana Hadjiiska, as signed in the attached participants' list. Mrs. Jenya Dinkova, Project Officer from the Joint Secretariat of the Program, also participated in the kick off meeting.

In all partners, time was given in order register while all the participants welcomed around a welcome buffet. The meeting opened from Mr. Sarantis Tipou, who welcomed all the Project Partners and expressed his sound interest for the results which are expected to be produced through the implementation of the project, while he pointed out:

'On behalf of the Municipality of Oraiokastro I would like to tell you that the project REMOTECARE is very important in two dimensions: First, through the vehicle, the supply of which will be implemented during the project, access to health services will be given to people that live in remote areas and especially in a period of economic crisis in Greece. Secondly, the project presents an innovation in its implementation, which presupposes the cooperation of the bodies involved in the partnership and the transferring of experience and know-how in cross-border level.'

2. Project Overview

The moderator of the meeting, Mr. Isaak Ksanthopoulos, took the floor, thanking Mr. Tipou for his welcome speech and also welcomed the participants. The agenda for the kick off meeting was adopted:

	MEETING AGENDA
11:00 - 11:30	Arrival and registration of the participants
11:30 - 11:45	Welcome speech Asterios Gavotsis - Mayor of Municipality of Oraiokastro (LB)
11:45 - 12:00	General Overview of the project 'RemoteCARE' Isaak Xanthopoulos - Representative of Municipality of Oraiokastro (LB)
12:00 - 12:15	Presentation of LB's action plan Sarantis Tipou - Representative of Municipality of Oraiokastro (LB)
12:15 - 12:30	Presentation of PB2's action plan Homer Papadopoulos - Representative of PB2 (PB2)
12:30 - 12:45	Presentation of PB3's action plan Representative of PB3 (PB3)
12:45 - 13:15	Coffee Break
13:15 - 13:30	Management Procedures Technical Consultant of LB (LB)
13:30 - 13:45	Definition of the Project Management Team All partners
13:45 - 14:00	Discussion on 'RemoteCARE' requests for modifications, Summary of the tasks for the upcoming period – Final conclusions All partners
14:00 - 15:00	Lunch

Then, he gave the floor to Mr. Saranti Tipou, who as representative of the Municipality of Oraiokastro presented the General Project Overview, Project

Objectives and Goals, Project Results and Outputs as well as a general structure of the project per Work Package and Action.

3. Presentation of 'REMOTECARE' Action Plan

Mr. Isaak Ksanthopoulos, on behalf of LB, presented the Action Plan of Lead Beneficiary in the framework of the project «REMOTECARE». Then, Mr. Sarantis Tipou opened the discussion to all PBs for raising certain issues and concerns regarding the project implementation within the next months. Partners asked for all presentations, participants' lists, minutes and photos to be sent to them as well as the follow-up of the meeting.

The next presentation was made by Mr. Omiros Papadopoulos, representative Partner's representative 2 (PB2) and was concerned PB2's Action Plan within the framework of the project «REMOTECARE». Mr Papadopoulos, also announced that the project was presented at a European conference in the framework of ESI FUNDS, which enhances project's expected success. Finally, PB3's Action Plan was presented by representative of Partner 3 (PB3).

4. Management Procedures

Mr. Ksantopoulos, gave the floor to Mrs. Stefanidou Sophia, representative of the technical consultant of the Lead Beneficiary, which, on behalf of the Municipality of Oraiokastro, presented the Project Management Procedures. Particularly the presentation concerned the eligibility of expenditure, reporting procedures, progress reports, first - level control procedures, requests for payment, cash flow and budget modification procedures.

5. Definition of Project Management Team

It was agreed between the partners that the Management Team of the project will be composed by one Project Manager and one Technical Manager, who will represent each Project Beneficiary. Moreover, will be appointed one Project Coordinator by PB1, who will be responsible for the general management and coordination of the Project Management Team (PMT).

The PMT will be the key body within the management structure and will be responsible for ensuring the delivery of the project outputs and the attainment of project outcomes; monitoring the project's progress, quality, timelines and risks; setting milestones; deciding upon corrective actions.

It was also agreed that the Project Management Team, which will be responsible for monitoring the implementation of the project shall meet on 6 month basis. The JTS/MA can also be invited to attend the meetings.

The document will be signed during the next period after the appointment of the Project Management Team.

6. Discussion - Conclusions

Mr Ksanthopoulos, as coordinator of the meeting gave the opportunity for further questions and answers and for an open discussion between the partners, in which, Mr. Hristo Medarov, technical consultant of Project Beneficiary 3 (PB3), thanked Mrs. Dinkova for her personal contribution to resolving the issue of replacing the partner 3. In particular, reported that the hospital MPHAT "SOUTHWEST HOSPITAL", located in Sandanski, Bulgaria, was the best possible solution to participate in the partnership of the project «REMOTECARE».

Mrs Dinkova, asked to be sent a new request for modification regarding the Deliverable 5.1.1 – Mobile Health Unit Supply which should be referred, as

required by the Greek law, as 'Supply of a Vehicle / Van' that will transfer doctors and healthcare professionals as well as telecommunication and medical equipment. In fact, this change would mean that no medical examinations will be carried out within the aforementioned vehicle but it will only be used to transport medical staff and equipment to local health centers. Also, Mrs Dinkova, stressed that given the long delay in the implementation of the project, which as she pointed out, has inserted the project into a 'black list', it will have as a result the increase of the possibility for cuts into the project's budget. At the same time she asked to be sent the updated Startup Time Plan and Procurement Plan based on the current data in which the timetable of each deliverable will be adjusted (including the pilot implementation), taking under consideration that the project should be completed by 11/10/2019, when it's the official end date.

Lastly, she pointed out that MA/ JS cannot accept any request concerning the extension of the duration of the project, since there is a long delay in the tender procedures.

Especially, during the discussion it was proposed the shortening of pilot operation's duration by increasing staff's employment duration, so as to achieve the target and the indicators set, despite the fact that there is a long delay in the project.

Finally, Mrs Dinkova, highlighted the importance of the process of verifying of expenditures and of the appointment of the auditor, for the absorption of the resources/ budget of the project. Also, she stressed that once the changes mentioned above in the discussion are acceptable during the kick off meeting, there is no need for additional written consent from the partnership.

After the meeting, a meal was held, in which participate all the attendees.

7. Attachments

- 1. Official invitation of the meeting
- 2. Agenda

Tzimouli Sofia

Research and Development Consultant

- 3. Participants 'List
- 4. PBs presentations
- 5. Photos of meeting
- 6. Project's material



INVITATION

The Municipality of Oraiokastro, Lead Partner of «RemoteCARE» project,

invites you to the project kick-off Meeting that will take place on Friday, 23th November 2018, at 11:00 am

at the premises of Municipality of Oraiokastro,

at Komninon 76, Thessaloniki Oraiokastro

P.C 57013, Greece







REMOTECARE: Remote Healthcare Service Provision

Kick-off Meeting

Date: Friday, 23/11/2018

Venue: Premises of Municipality of Oraiokastro

(Komninon 76, Thessaloniki Oraiokastro, P.C. 57013)

	MEETING AGENDA
11:00 - 11:30	Arrival and registration of the participants
11:30 - 11:45	Welcome speech Asterios Gavotsis - Mayor of Municipality of Oraiokastro (LB)
11:45 - 12:00	General Overview of the project 'RemoteCARE' Isaak Xanthopoulos - Representative of Municipality of Oraiokastro (LB)
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13:45 - 14:00	Discussion on 'RemoteCARE' requests for modifications, Summary of the tasks for the upcoming period – Final conclusions All partners
14:00 - 15:00	Lunch

Kick-off Meeting



Project Title: Remote Healthcare Service Provision

Project Acronym: 'RemoteCARE' Oraiokastro, Thessaloniki, 23/11/2018



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Kick-off meeting

Oraiokastro, Thessaloniki, 23/11/2018

"RemoteCARE" **PROJECT OVERVIEW**

Remote Healthcare Service Provision



LB - MUNICIPALITY Ωραιοκάστρου OF ORAIOKASTRO



- ♦ 2nd Call for Proposals
- Priority Axis 4: A Socially Inclusive Cross-Border Area
- *Thematic Objective: 09 Promoting social inclusion, combating poverty and any discrimination
- Investment priority: 9a. Investing in health and social infrastructure which contribute to national, regional and local development, reducing inequalities in terms of health status, promoting social inclusion through improved access to social, cultural and recreational services and the transition from institutional to community-based services.
- Specific objective 8: To improve access to primary and emergency health care (at isolated and deprived communities) in the CB area
- Project Duration: 12/10/2017 11/10/2019 (24 months)



PARTNERSHIP

- Lead Beneficiary: Municipality of Oraiokastro
- Project Beneficiary 2: Institute of Informatics and Telecommunications (IIT)-National Centre of Scientific Research "Demokritos"
- * Project Beneficiary 3: MPHAT "SOUTHWEST HOSPITAL"



- The cross-border area has similar geographic conditions with high rough mountains and disperse small villages with difficult access to urban centers.
- *No local primary healthcare facilities exist in these areas. As a result, the rural population of the cross border area does not have access to primary healthcare services as they are provided only in the large urban centers
- Municipality of Oraiokastro includes in its territory areas with difficult access to urban centers, e.g. villages of Petroto, Mesaio, Filaphelphia, Neoxorouda, Pentalofos. These villages are mainly inhabited by elder people as well as immigrants with low income.

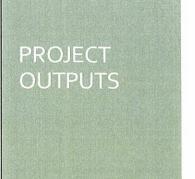


The main objectives of the project are:

- improve access to primary health care in the rural cross border areas where population has difficult access to healthcare units
- *The project promotes social inclusion and combats poverty and discrimination as it provides healthcare services to people of remote areas who do not have easy access to healthcare structures
- *To contribute significantly to the priorities set by the Programme
- improvement access to primary health care at isolated and deprived communities in the cross border area.

PROJECT OUTPUTS

- The main outputs of the project are divided into 6 thematic categories (WP), each of which has a distinctive objective.
- In WP1, PBs will produce regular progress reports (on a semiannual base) according to the Project Implementation Guide as well as six (6) project meetings will be organized. Moreover the Project Management Handbook will be elaborated by LB. These outputs will ensure the efficient management of the project and its implementation according to activities' time-schedule.
- In WP2, outputs aim at the dissemination of project results and raising awareness in local communities and include: a strategic communication plan, a website (developed according to WCAG 2.0 for people with disabilities), publicity material (2000 leaflets, 2 banners, 1000 pens, 1000 notebooks, 1000 folders, 1000 cd), international dissemination event in Bulgaria, Final event in Oraiokastro, 3 raising awareness events (2 in Greece & 1 in Bulgaria)



- WP3 is focused on the organization of 2 workshops in Greece and 2 in Bulgaria, the elaboration and contribution to the Mobile Health Unit Operation Plan and to the Business Plan on the provision of primary healthcare services. Moreover PB2 has undertaken the elaboration of the requirements analysis.
- The outputs of WP4 are:
- The supply of 2 vehicles (vans) in Greece and Bulgaria respectively
- The supply of 2 medical equipment (Supply of the necessary medical equipment for the mobile unit as exam table, autoclave, ENT scope kit, BP cuff, pelvic exam light scope, thermometer, sharps container, AED emergency equipment, Oxygen portable kit)
- The supply of 2 IT equipment (Supply of the necessary equipment (e.g. computers, transmition device) for the installation of the ICT application)
- 4. Development of Greek and Bulgarian Software mobile unit

PROJECT OUTPUTS

WP5 includes:

- the preparation of mobile unit services, organization of 2* 2days seminars for the mobile unit professionals and involved health centers people on subject as working with protocols, responsible and professional attitude, handling of the new ICT software and smart devices and other. It will be organized by the LB and the Bulgarian partner will participate in it
- 1 year of functioning of mobile unit service. Includes: the payroll of 5 people (driver, social worker, nurse, doctor, IT expert) Pilot Operation

PROJECT OUTPUTS

WP6 includes:

- * Evaluation and Assessment study expressed in health terms, in served population rate, in economic terms, in accessibility rates
- Feasibility study of the mobile health units in locating sources of funding to continue providing their services without charging a fee (PB₃ will elaborate it and the other partners will contribute to it)
- Development of the MoU signing procedure and complying with the standards of the European reference sites for healthy ageing

PROJECT RESULTS

- * Decrease of the number of hospital admissions and consequently decrease of secondary and tertiary health costs
- Protection of vulnerable social groups from hospital infections and provision of information to these groups about selfmanagement techniques to handle their own health situations
- Improvement of the psychological condition of vulnerable social groups
- Improvement of the quality of life for the habitats of the rural areas
- Promotion of prevention and early diagnosis
- Reduction of health care costs
- Training of the caregivers and health professionals to incorporate a professional responsible attitude and to handle ICT smart devices,

MUNICIPALITY OF ORAIOKASTRO (LB)

- Del. 1.1.2 Project Management
- · Del. 1.1.3 Project Management Handbook
- Del 1.1.4 Project Meetings (4 project meetings in Oraiokastro)
- · Del. 1.1.5 FLC (Audits)
- Del 2.1.1 Communication Plan
- Del 2.1.2 Final Event
- Del 2.1.3 Dissemination Material (2 banners, 1.000 project leaflets, 1000 pens, 1000 notebooks, 1000 folders)
- Del. 2.1.4 Project Website
- Del 2.1.5 Raising Awareness Actions (2)

PROJECT ACTIONS

MUNICIPALITY OF ORAIOKASTRO (LB)

Del. 3.1.1 - Workshops (2)

Del. 3.1.2 - Mobile Health Unit Operation Plan

Del. 3.1.3 - Business Plan on the provision of primary healthcare services

Del. 4.1.1 - Supply of 1 vehicle (van)

Del. 4.1.2 - Supply of medical equipment

Del. 4.1.3 - Supply of IT equipment

MUNICIPALITY OF ORAIOKASTRO (LB)

Del. 5.1.1 - Mobile Unit (Preparation of mobile unit services. Assembling of all the parts into a total working system)

Del. 5.1.2 - Seminars (2* 2days seminars for the mobile unit professionals and involved health centers people on subject as working with protocols, responsible and professional attitude, handling of the new ICT software and smart devices and other. It will be organized by the LB and the Bulgarian partner will participate in it)

Del. 5.1.3 - Pilot operation (1 year of functioning of mobile unit service. Includes: the payroll of 5 people (driver, social worker, nurse, doctor, IT expert))

PROJECT ACTIONS

MUNICIPALITY OF ORAIOKASTRO (LB)

Del. 6.1.1 - Evaluation & Assessment (expressed in health terms, in served population rate ,in economic terms, in accessibility rates)

Del. 6.1.2 - Contribution to Feasibility Study of the mobile health units in locating sources of funding to continue providing their services without charging a fee

Del. 6.1.3 - Development of the MoU signing procedure and complying with the standards of the European reference sites for healthy ageing

INSTITUTE OF INFORMATICS AND TELECOMMUNICATIONS (IIT)-NATIONAL CENTRE OF SCIENTIFIC RESEARCH "DEMOKRITOS" (PB2)

- Del. 1.2.2 Project Management
- Del 2.1.3 -Project Meetings (Participation in 6 project meetings)
- Del 1.2.5 FLC (Audits)
- Del 2.2.1 Participation in the Dissemination Events (1 Final Event & 2 workshops in Oraiokastro, 1 event in Bulgaria)
- · Del 3.2.2 Requirement Analysis
- · Del 3.2.3 Contribution to Feasibility Study
- Del. 4.2.1 Software for the Greek mobile unit
- Del. 4.1.2 Software for the Bulgarian mobile unit

PROJECT ACTIONS

MPHAT "SOUTHWEST HOSPITAL" (PB3)

- Del. 1.3.1 Preparation Activities
- Del. 1.3.2 Project Management
- Del 1.3.3 Project Meetings (2 project meetings in Bulgaria)
- Del 2.3.1 1 Dissemination Event
- Del 2.3.2 Dissemination Material (Translation of leaflets, 1.000 project leaflets, 1000 cd)
- Del 2.3.3 Raising Awareness Actions (1 public event)

MPHAT "SOUTHWEST HOSPITAL" (PB3)

Del. 3.3.1 - Workshops (2)

Del. 3.3.2 - Mobile Health Unit Operation Plan (Contribution)

Del. 3.3.3 - Business Plan on the provision of primary healthcare services (Contribution)

Del. 4.3.1 - Supply of 1 vehicle (van)

Del. 4.3.2 - Supply of medical equipment

Del. 4.3.3 - Supply of IT equipment

PROJECT ACTIONS

MPHAT "SOUTHWEST HOSPITAL" (PB3)

Del. 5.3.1 - Mobile Unit (Preparation of mobile unit services. Assembling of all the parts into a total working system)

Del. 5.3.2 - Participation in 2* 2days seminars that will be organized by LB1

Del. 5.3.3 - Pilot operation (1 year of functioning of mobile unit service. Includes: the payroll of 5 people (driver, social worker, nurse, doctor, IT expert))



MPHAT "SOUTHWEST HOSPITAL" (PB3)

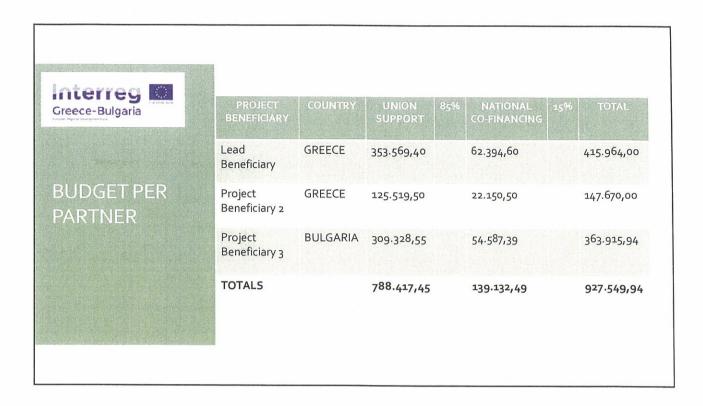
Del. 6.3.1 - Evaluation & Assessment (expressed in health terms, in served population rate, in economic terms, in accessibility rates)

Del. 6.3.2 - Feasibility Study (Elaboration of Feasibility study of the mobile health units in locating sources of funding to continue providing their services without charging a fee)

Del. 6.3.3 - Development of the MoU signing procedure and complying with the standards of the European reference sites for healthy ageing



	TITLE OF WP	START	AND	COST (euros)
WP 1	Project Management & Coordination	12/10/2017	11/10/2019	94.606,94
WP 2	Communication & Dissemination	12/10/2017	11/10/2019	50.051,00
WP 3	Establishment of a common strategy & road map for the establishment of the mobile health units	12/10/2017	28/09/2018	81.022,00
WP 4	Procurement of equipment	01/12/2017	31/08/2018	484.120,00
WP 5	Pilot operation & training for the services to be provided by the mobile health units	03/09/2018	30/08/2019	182.250,00
WP 6	Evaluation and future planning for the services of the mobile health	01/07/2019	11/10/2019	35.500,00
TOTAL	units			927.549,94





Thank you for your attention!!!





LB's Action

WP1 - Management & Coordination

LB will be responsible for:

- Cooperating with the partnership for the smooth coordination of all the actions of the project "RemoteCARE"
- Timely submission of the Progress Reports to the Joint Secratariat (JS) of the Programme Interreg Greece Bulgaria 2014 2020
- The preparation of the requests for modification and the communication with JS
- Preparation of the requests for verification of expenditures
- Its participation in all project meetings
- Organization of four (4) project meetings in Oraiokastro, Thessaloniki & participation in two (2) meetings in Bulgaria



WP2 - Communication & Dissemination

LB will be responsible for the:

- Elaboration of communication plan
- The organization of the final event in Thessaloniki
- Development of project website
- Organization of two (2) public events for raising awareness
- The production of communication materials (project logo, 2 project banners, 1.000 leaflets, 1.000 pen, 1.000 blocks, 1.000 folders).



WP3 – Establishment of a common strategy & road map for the establishment of the mobile health units

LB will be responsible for:

- The organization of two (2) Workshops in Oraiokastro in order to establish a common Framework for the operation of mobile health units/and digital recording of the patient's health status in the 2 regions.
- Development of Mobile health units' operation plan
- Development of the overall business plan of the network for the primary health services and the support in from the mobile unit for each region



WP4 - Procurement of equipment

LB will be responsible for:

- Supply of vehicle
- Supply of medical equipment
- Supply of IT infrastructure



WP5 – Pilot operation & training for the services to be provided by the mobile health units

LB will be responsible for:

- Preparation of mobile unit services. Assembling of all the parts into a total working system (van, medical equipment, software to be used, connection to primary health organization), test drives etc.
- Organization of two 2days seminars for the mobile unit professionals and involved health centers people on subject as working with protocols, responsible and professional attitude, handling of the new ICT software and smart devices and other. It will be organized by the LB and the Bulgarian partner will participate in it
- 1 year of functioning of mobile unit service. Includes: the payroll of 5 people (driver, social worker, nurse, doctor, IT expert)



WP6 – Evaluation and future planning for the services of the mobile health units

LB will be responsible for:

- Evaluation and Assessment study expressed in health terms, in served population rate, in economic terms, in accessibility rates
- Contribution to the Feasibility study of the mobile health units in locating sources of funding to continue providing their services without charging a fee
- Development of the MoU signing procedure and complying with the standards of the European reference sites for healthy ageing



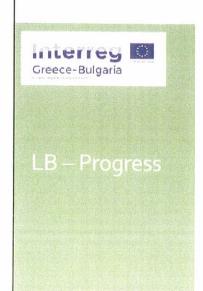
What LB has done so far:

- Submission of the first (January 2018) and second progress report (July 2018) to the Joint Secretariat of the Programme
- Insertion to MIS the project information & documents (signed AF). The MIS code of "RemoteCARE" project is 5010962
- LB contracted (direct award) on 16/05/2018 the deliverable 1.1.2 (Project Management & Coordination) and the contracted amount is 23.876,00 euros, by carrying out one call for interest, according to the submitted STTP.



What LB has done so far:

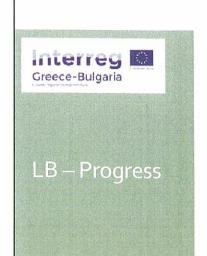
- LB contracted (direct award) on 15/11/2018 the deliverable 1.1.4 (Project Meetings) and the contracted amount is 4.700,00 euros, by carrying out one call for interest, according to the updated STTP that submitted on September 2018.
- Organization of the kick off meeting on 23/11/2018 in Oraiokastro
- Submitted the 1st project modification on June 2018, that was approved by the Managing Authority



What LB has done so far:

the tender documents for the open electronic procurement, according to the STTP, have already been finalized. In particular the open electronic procurement for the deliverables :

- PART 1 (SERVICES):
- Del. 1.1.3 Project Management Handbook
- Del. 2.1.1 Communication Plan
- Del. 2.1.2 Final Event
- Del 2.1.3 Dissemination Material
- Del. 2.1.4 Project Website
- Del. 2.1.5 Raising Awareness Actions
- Del 3.1.1 Workshops
 - Del 3.1.2 Mobile Health Unit Operation Plan
 - Del 3.1.3 Business Plan on the provision of primary healthcare services



10. Del 5.1.1 - Mobile Unit

11. Del. 5.1.2 - Seminars

12. Del. 6.1.1 - Evaluation & Assessment

13. Del. 6.1.2 - Contribution to Feasibility Study

14. Del 6.1.3 - MoU

(117.480,00 euros including VAT)



What LB has done so far:

♠ PART 2 (EQUIPMENT):

Del. 4.1.1 - Supply of vehicle

PART 2 (EQUIPMENT):

Del. 4.1.2 - Supply of medical equipment

PART 3 (EQUIPMENT):

Del. 4.1.3 - Supply of IT infrastructure

Have been finalized and will be published after the approval by JS and Municipal Council (140.000,00 euros / 28.000,00 euros / 27.000,00 euros including VAT)



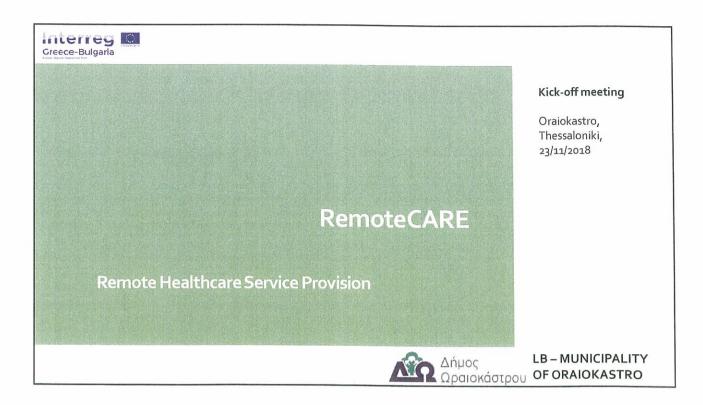
- *LB will proceed to the publishing of the open procurements (services and equipment) at the beginning of 2019, after the approval of tender documents by JS.
- *LB will submit the 3rd Progress Report of the project till 20th of January 2019

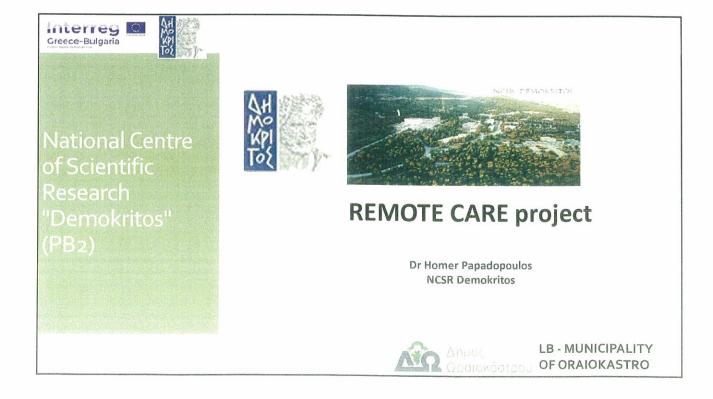


- Due to the fact that according to the Greek national legislation the use of mobile health unit is not permitted, LB faced a delay at the stage of the preparation of the technical specifications that should change in order to be in compliance with the aforementioned national legislation. The mobile health unit should be used only for transferring both the equipment & staff to local health centers.
- JSince MBAL "Rokfeler" is in liquidation procedure it was unable to fulfill its obligations as PB3 in the required quality. This forced its official replacement with another partner, MPHAT "SOUTHWEST HOSPITAL"



Thank you for your attention!!!







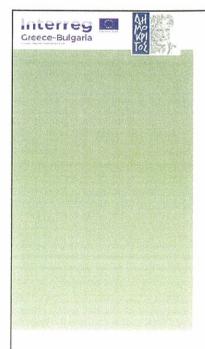
Who we are - Greek Leading Research Center

National Center For Scientific Research "Demokritos" is a multi-disciplinary Research Centre, with research activities in the field of physical, Bio, ICT sciences and significant laboratory infrastructure.

- Total number of staff: 700 (Scientific personnel and full time high qualified Researchers)
- Graduate students and post-doc researchers: 180 NCSR consists of five institutes and the Division of Applied Technologies:

Institute of Informatics and Telecommunications
Institute of Biosciences and Applications
Institute of Nuclear & Radiological Sciences & Technology, Energy & Safety
Institute of Nanescience and Nanotechnology
Institute for Nuclear and Particle Physics
Division of Applied Technologies



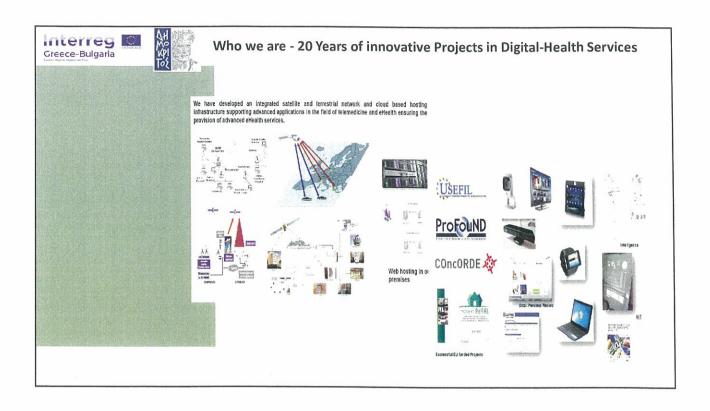


Who we are - Greek Leading Research Center

Mission of the Institute of Informatics and Telecommunications – ehealth Group:

Connect society, business-innovation and research

- $\bullet \underline{\text{Transform research results}}$ into tangible commercial innovation opportunities.
- <u>Generate new products and services</u> responding both to public demand and to the needs of the knowledge economy.
- •<u>Enhance new research</u> perspectives stressing interdisciplinary approaches in areas with strong societal and economic importance.
- <u>Commercialize</u> (spin of) the most up-to-date and relevant research findings, potentially giving advantage in the latest technological fields.







REMOTECARE is deploying innovative technology to support innovative concepts of primary integrated health care services in Greece and Bulgaria

Project's results are mainly focused on equal opportunities and battling discrimination, as the project aims to improve services and conditions providing on sensitive social groups.

The project developments and deployments will lead to:

- improvement of provided primary health services and elimination of the conditions excluding sensitive social groups, by the introduction of mobile units for those social sensitive groups which are not able to reach the nearest primary health centers.
- the improvement of cooperation to respond to common problems between two countries regarding social integration issues
- · exchange of best practices
- network creation and joint health & social integration protocols
- eHealth interoperability problems cross-border interoperable health records
- Budget of the project 927.549,94 €
- Duration of the project 24 months since October 2017
- ERDF 85% and National cofinancing
- Project partners in Greece are public entities (Municipality of Oraiokastro and Public Research Center-NCSR Demokritos) and in Bulgary the SouthWest Hospital in Municipality of Sandanski.



The policy challenges that are being addressed by the project are:

- The cross-border area has similar geographic conditions with high rough mountains and disperse small villages with difficult access to urban centers. Furthermore, no local primary healthcare facilities exist in these areas. As a result, the rural population of the cross border area does not have access to primary healthcare services as they are provided only in the large urban centers.
- Municipality of Oraiokastro includes in its territory areas with difficult access to urban centers, e.g. villages of Petroto, Mesaio, Filaphelphia, Neoxorouda, Pentalofos. These villages are mainly inhabited by elder people as well as immigrants with low income.
- Bulgarian partner facing the same problem. The area of municipality of Petrich and Municipality of Sandanski also include plenty mountainous and remote villages, e.g. Gega, Dolna Krushitsa, Skrat, Klyuch etc. These villages are also inhabited by elder and low-income people.

Municipality of Sandanski is served by the MPHAT Sowthwest Hospital.

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The policy challenges that are being addressed by the project are:

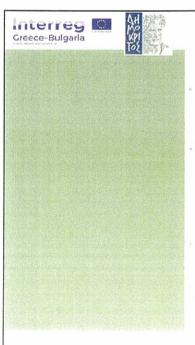
· Health service barriers to collection and sharing of health information

The free movement of people within the EU further and an increasingly mobile labour force further increases demand for cross-border health data exchange while individuals increasingly expect access to their data and a continuity of data-driven service provisioning regardless of its physical location.

Eg. in 2016, 1.8 million EU citizens shifted their residency between member states while 93% of immigration to Luxembourg and 74% of immigration to Romania, for example, originated from another EU member state.

(http://ec.europa.eu/eurostat/statistics-explained/index.php/Migration and migrant population statistics, http://ec.europa.eu/social/main.jsp?catld=738&langld=en&publd=7981&furtherPubs=yes)

REMOTECARE aims to improve access to health care services in rural cross border areas (between Greece-Bulgaria) using electronic applications.



REMOTECARE and eHealth

- **REMOTECARE** is using e-health technologies to improve access to primary health care in the rural cross border areas where population has difficult access to healthcare services.
- The methodology to be followed in order to provide primary healthcare services to the rural population is the development of mobile unit that will facilitate a multidisciplinary team (a general doctor, a nurse and a social worker) that will visit the target population on a regular basis.
- The mobile unit will be supported by **innovative ICT tools** for recording patient's health history and data.

The healthcare service will not be conducted in the mobile unit. The mobile unit will support homecare services, transportation issues and remote monitoring.



National Centre of Scientific Research 'Demokritos" (PB2)

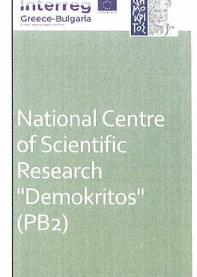
Our Role in the Project

- WP1: Project Management & Coordination
 - D1.2.2 Project Management
 - · NCSR published 4 technical jobs and republished the two of these in order to search for more qualified personnel
 - · NCSR prepared the Table of Expenditure on the MIS and is ready to submit the appropriate documents for verification



LB - MUNICIPALITY

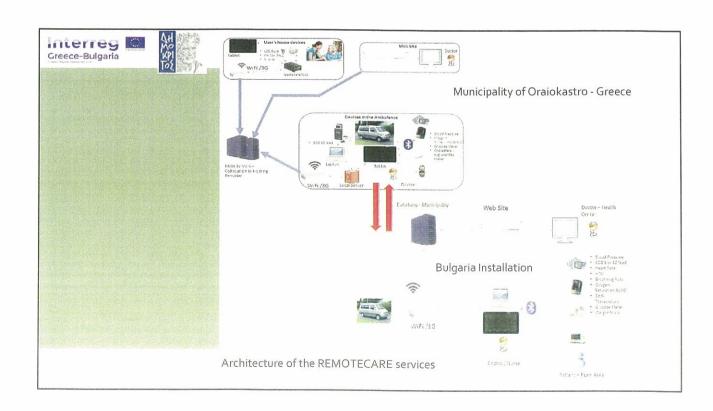


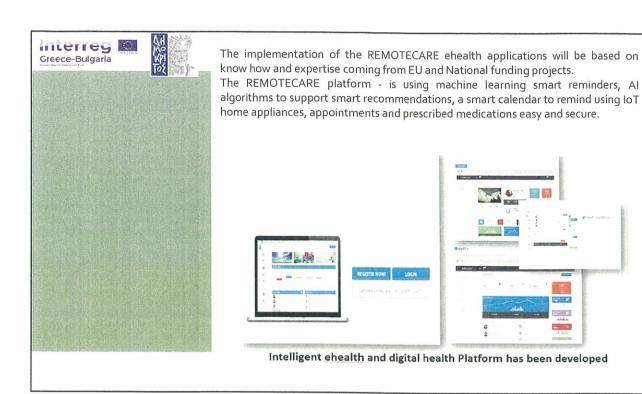


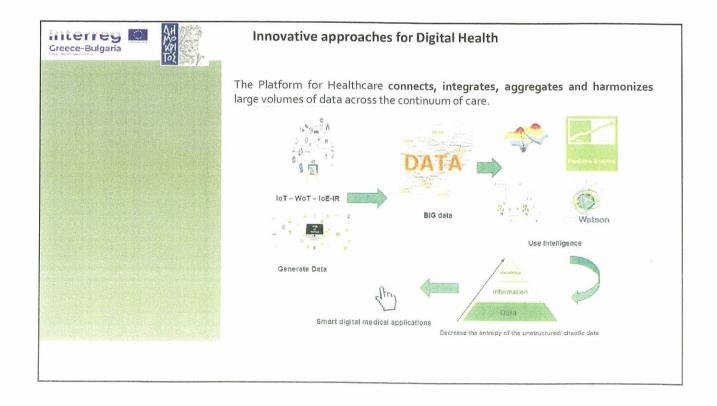
- · Our Role in the Project
- · WP3: Establishment of a common Strategy
 - D_{3.2.2} Requirements Elicitation & Analysis
 - D3.2.3 Contribution to the overall business plan of the technical perspective and partly of the financial perspective
- WP4: Procurement of Equipment
 - D4.2.1 Development Installation and Customization of software (ICT) of the Greek mobile Unit
 - The system for the Greek unit is installed and configured using Microsoft's Virtual Machine technology (Hyper-V). Windows Server 2012 OS has been installed. The system uses a 3-tier architecture (Database Web services web application). The database is based on MySQL open source technology. Web services have been developed using Microsoft's C# and support both SOAP and REST protocols. Web application is based on Angular JS.
 - ${\sf D4.2.2}$ Development Installation and Customization of software (ICT) of the Bulgarian mobile Unit
 - PB2 will demo a prototype of parts of the platform and mockups from other parts. The system for the Bulgarian unit is also installed and configured using Microsoft's Virtual Machine technology (Hyper-V). Fast Healthcare Interoperability Resources (FHIR) protocol will be implemented in order to provide secure access the health data to third party users (etc hospitals). Also the system will be designed to comply with the latest General Data Protection Regulation (GDPR).



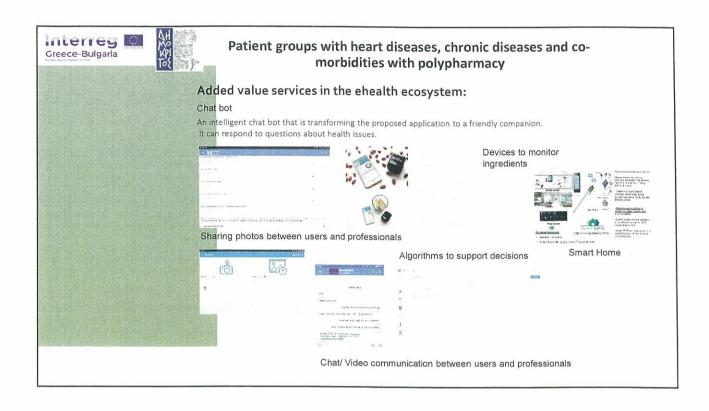
LB - MUNICIPALITY Ωραιοκάστρου OF ORAIOKASTRO

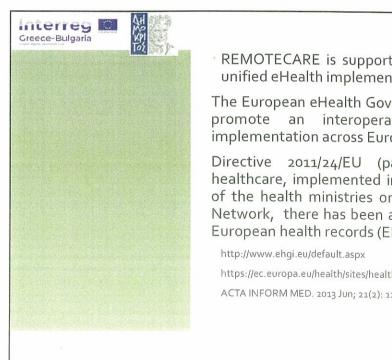






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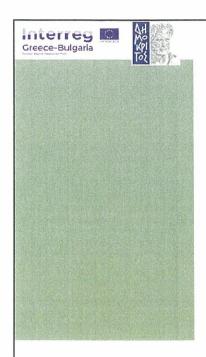
REMOTECARE is supporting European strategy towards a unified eHealth implementation:

The European eHealth Governance initiative (eHGI) strives to promote an interoperable and sustainable eHealth implementation across Europe.

Directive 2011/24/EU (patients' rights in cross-border healthcare, implemented in 2013) and the work programme of the health ministries organised in the European eHealth Network, there has been a push for the centralisation of EU European health records (EHR) systems.

https://ec.europa.eu/health/sites/health/files/ehealth/docs/ev_20170509_coo1_en.pdf

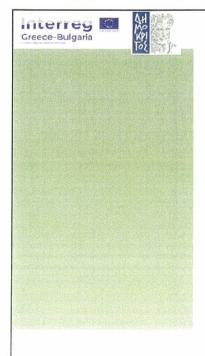
ACTA INFORM MED. 2013 Jun; 21(2): 129-134



Issues of the project

- We identified a clear need: How to facilitate the inhabitants of cross-border area that have difficulty to access to urban centers and relevant health services.
- Furthermore, no local primary healthcare facilities exist in these areas.
- After the announcement of the GR-BG Interreg Program the Public authorities asked us to design a low cost but efficient solution.
- NCSR D designed the technical architecture of REMOTECARE and is implementing the applications and services

We Believe that this cooperation could greatly contribute to the transferability of the project approach in other regions or countries with similar characteristics.



Key Success factors

We believe that we will have a successful project. The success factors of the project are:

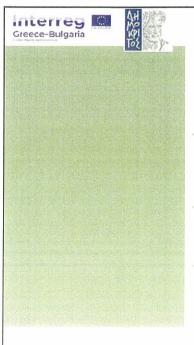
- There is an existing need that concerns the provision of primary healthcare services to the rural population of the area, i.e. 24.686 Bulgarian and 16.584 Greek citizens, total 41.270 citizens that live to the rural cross border areas.
- Local authorities have the determination to cope with this need and implement innovative approaches for the provision of primary healthcare services

There is a smooth cooperation between an established research center with proven expertise in ehealth and the public authorities.



Problems experienced

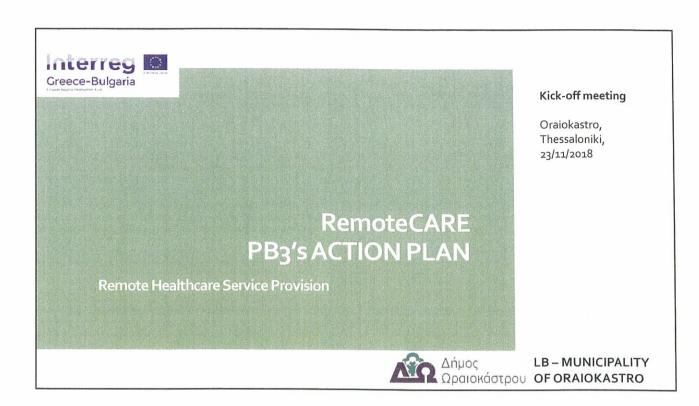
- According to a new Greek national legislation the use of mobile unit as a heatlhcare service unit is not permitted.
- This caused a delay at the stage of the preparation of the technical specifications that should be changed in order to be in compliance with the aforementioned national legislation.
- Delays were also caused due to the official replacement of one of the Bulgarian partners.



Sustainability of the project:

- A feasibility study is under development in order to evaluate the services offered by the mobile health units and the project's benefits in economic and health terms.
- The study will propose business models that can sustain the developments.
- Municipality of Oraiokastro will also allocate funds to sustain the developed services. The local authority is looking for methods to support this activity.







PB3's Action Plan

WP1 - Management & Coordination

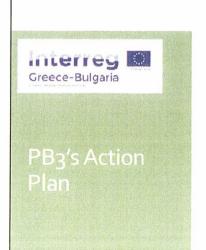
PB3 will be responsible for:

- · Carrying out the specific activities set out in the AF
- Providing all information and data to the LB that is required by the latter to coordinate and monitor the implementation of the project and to perform its reporting duties towards the MA
- Submitting expenditure for verification as they become available, to the designated Controllers. To submit the verified expenditures as soon as the certificate is received, in order to assist the reporting and reimbursement procedures



WP1 - Management & Coordination

- Notifying the LB of any factors that may adversely affect implementation of the project in accordance with the work plan
- Its participation in all project meetings
- Organization of two (2) technical meetings in the town of Petrich, Bulgaria & participation in four (4) meetings in Oraiokastro, Thessaloniki



WP2 - Communication & Dissemination

PB3 will be responsible for the:

- Organization of an International dissemination event in the town of Petrich
- Organization of a public event as a rising awareness action of the local population on health issues
- The preparation dissemination and communication materials



WP3 – Establishment of a common strategy & road map for the establishment of the mobile health units

PB3 will be responsible for:

- The organization of two (2) Workshops in the town of Petrich in order to establish a common Framework for the operation of mobile health units/and digital recording of the patient's health status in the 2 regions.
- · Contribution to the Mobile health units' operation plan
- Contribution to the overall business plan of the network for the primary health services and the support in from the mobile unit for each region



WP4 - Procurement of equipment

PB3 will be responsible for:

- Supply of vehicle
- Supply of medical equipment
- Supply of IT infrastructure



WP5 – Pilot operation & training for the services to be provided by the mobile health units

PB3 will be responsible for:

- Preparation of mobile unit services. Assembling of all the parts into a total working system.
- Functioning of mobile unit service.



WP6 – Evaluation and future planning for the services of the mobile health units

PB3 will be responsible for:

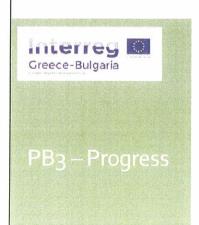
- Contribution to the evaluation expressed in health terms, in served population rate, in economic terms, in accessibility rates
- Feasibility study of the mobile health units in locating sources of funding to continue providing their services without charging a fee
- Drafting, Monitoring and Completion of the MoU signing procedure and complying with the standards of the European reference sites for healthy ageing



What PB3 has done so far:

 In June 2018 a project modification procedure was initiated – the replacement of MBAL "Rokfeler" Ltd. with MPHAT "SOUTHWEST HOSPITAL" Ltd. for the position of PB3 was requested.

Thus the 1st Amendment of the Subsidy contract was signed on 28th June 2018. The Amendment was send to PB₃ on 11th October 2018.



What PB3 has done so far:

- After the PB3 replacement the overall management of the project was subcontracted to an external organization (Fidelity Group Ltd.) – a service contract was signed on 29th August 2018.
- MIS Body Code for PB3 was obtained
- Created user account in the Monitoring Information System



What PB3 has done so far:

- On 16th November 2018 a National co-financing contract was signed
- On 21st November 2018 a request for advance payment was sent
- Preparation of procurement procedure documents was started



Thank you for attention!!!





Management Procedures

INTERREG V-A Greece - Bulgaria 2014 - 2020

Project Acronym: RemoteCARE

Project Title: Remote Healthcare Service Provision Kick off meeting - Oraiokastro, Thessaloniki, 23/11/2018

Key Documents

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- 1. Subsidy Contract & Partnership Agreement
- 2. Program and Project Implementation Manual
- 3. Project implementation guidelines for Bulgarian partners
- 4. Specific Guidelines for Greek Beneficiaries for Project Implementation Procedures and Eligibility of Expenditure of ERDF European Territorial Cooperation Programmes
- 5. Ministerial decision of the management and control system of the ETCP, $300488/Y\Delta1244$ (ΦΕΚ 1099, Τεύχος Β', 19/04/2016)
- 6. First Level Control (FLC)_Guidance and files on verification of expenditure
- 7. Information and Publicity Guide
- 8. Progress report Guidelines

LB's responsibilities



Management

- ▶ Is the contact point representing the partnership for any communication with the JS/MA or any other of the Programme Structures
- ▶ Is responsible for the overall coordination, management and implementation of the project vis-à-vis the Managing Authority.
- Sets the management team of the project
- Prepares and submits progress reports
- Shall address requests for project modifications

Financial Monitoring

- ▶ Ensures that the expenditure presented by the partners participating in the project has been incurred for the purpose of implementing the project.
- Receives the ERDF contribution for the entire project and transfers it to the other partners participating in the project within one month of its receipt.

PB's responsibilities

- ▶ Carry out the specific activities set out in the Application form;
- Provide all information and data to the LB that is required by the latter (information for the progress report etc)
- ▶ Submit expenditure for verification to the designated Controllers. The issued certificates must be submitted to the LB every 3 months, in order to assist the reporting and reimbursement procedures, unless requested by the JS at a different time.
- Notify the LB of any factors that may negatively affect implementation of the project in accordance with the work plan.



Reporting procedures (1)

- The Lead Beneficiary is responsible for the submission to the Joint Secretariat (JS) of progress reports on project implementation activities
- All project beneficiaries have to submit on time their input (financial & technical part) to the LB
- LB uses the official forms (Progress Reports), which are provided by the MA/JS
- LB will still abide by the deadlines for submission of the reports even if there is missing information
- · LB will add the missing information in the next reporting period
- All reports must be submitted in English

Reporting Procedures (2)

For the thorough monitoring of the project's implementation a "Progress Report" is submitted to the JS by the Lead Beneficiary, every six (6) months.

Reporting Periods	Deadlines for the submission of progress reports
January - June	20th of July of the respective year
July - December	20th of January of the following year
Final report	2 months after the issuance of all the certificates of all the project beneficiaries



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The expenditure is eligible since:

- ▶ They correspond to actions, services or products described in the Application Form of a project and if they are foreseen in the approved budget of the project under a specific budget line.
- ► They are executed by the beneficiary and they are paid in the approved period of the project.
- ▶ They comply to the financial and the labour legislation of the country.
- ▶ They are paid by invoices or any other documentation of equal value.
- ▶ They reflect the present account system of the beneficiary.

Eligibility of Expenditures



Staff Costs

Expenditure on staff costs shall consist of gross employment costs of staff employed by the PB in one of the following ways:

- i. full time;
- ii. part-time with a flexible number of hours worked per month;
- iii. part-time with a fixed percentage of time worked per month; or
- iv. on an hourly basis.

Expenditure on staff costs shall be limited to the following:

- relating to responsibilities specified in the job description of the staff member concerned:
- in accordance with the legislation referred to in the employment document and with standard practices in the country and/or organisation where the individual staff member is actually working;
- The monthly timesheets;
- The salary payments related to the activities which the entity would not carry out if the operation concerned was not undertaken, fixed in an employment / work contract
- Signed payment rolls.

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Travel and Accommodation

- ► They are eligible only for the staff of beneficiary organisations that relate to delivery of the project.
- ► Travel and accommodation of experts, external to the project partnership under External expertise and services.
- Maximum daily rates for hotel and subsistence should be respected, in line with national legislation or internal policy of the partner organisation.

Expenditure on travel and accommodation costs is limited to the following items:

- (a)Travelling costs;
- (b) accommodation;
- (c) visa;
- (d) daily allowances.

Eligibility of Expenditures

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Office and administration costs

Eligible cost: Operating and administrative expenses of the beneficiary organisation that support delivery of the project activities.

Reimbursement options: Option I: Real costs

Option II: Flat rate



Equipment

Expenditure for the financing of equipment either purchased, or rented or leased by a partner, necessary to achieve the objectives of the project. Equipment expenditure is limited to the following items:

- office equipment;
- ☐ IT hardware and software;
- furniture and fittings;
- □ laboratory equipment;
- machines and instruments;
- □ tools or devices;
- u vehicles:
- other specific equipment needed for operations.
- Equipment has to be purchased in compliance with public procurement rules.
- ▶ Equipment can only be funded by the programme if no

other EU funds have contributed towards the financing of this equipment.

- Supporting documents for the verification of expenditure:
 - Evidence of compliance with the applicable EU, national and internal procurement rules,
 - Invoice (or a supporting document with equivalent probative value to invoices, in case of depreciation),
- Depreciation may be considered, under the following cases:
 - Purchase cost of equipment is not requested (the equipment must have been purchased before the initiation of the project)
 - There is a justified methodology for partial distribution of the time allocated to the specific project.

Eligibility of Expenditures

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External expertise and services

Include expenditure paid on the basis of contracts or written agreements, against invoices or requests for reimbursement to external service providers who are subcontracted to carry out certain tasks/activities linked to delivery of the project, such as:

- studies or surveys;
- $\ \square$ training;
- translations;
- ☐ IT systems and website development;
- promotion, communication, publicity or information:
- ☐ financial management;
- services related to the organisation and implementation of events or meetings;
- ☐ participation in events;
- legal consultancy and notarial services, technical and financial expertise, other consultancy and accountancy services;
- intellectual property rights;
- verifications (i.e. first level control costs);

- the provision of guarantees by a bank or other financial institution;
- travel and accommodation for external experts, speakers, chairpersons of meetings and service providers;
- other specific expertise and services needed for operations.

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External expertise and services

Supporting documents for the verification of expenditure:

- ▶ Evidence of the selection process, in compliance with the applicable EU, national and internal public procurement rules. Any changes to the contract must comply with the public procurement rules and must be documented,
- A contract or other written agreements of equivalent probative value laying down the services to be provided with a clear link to the project,
- An invoice or a request for reimbursement providing all relevant information in line with the applicable accountancy rules,
- Proof of payment,
- Outputs of the work of external experts or service deliverable.

Eligibility of Expenditures

Infrastructure

- ▶ Covers costs related to investments in infrastructure that do not fall into the scope of other budget lines. The necessary studies, allowances must be met.
- ▶ This includes costs for example; site preparation, delivery, handling, installation, renovation, and purchase of land, when applicable.
- ▶ The following documents must be available for control purposes:
 - Contracts and other related documentation (tender procedures, Selection committee decisions etc.).
 - 2. Invoices and / or other documentation ensuring the works in progress.
 - Proof of payment.
 - 4. The necessary environmental studies and licenses.

Project Funding & Cash Flows (1)



Greek Beneficiaries

- ightharpoonup Registration in the Public Investments Programme for the acquiring of a numbered account (Ενάριθμος);
- Appointment of an account administrator (υπόλογος);
- Notification by the beneficiary to the MA/JS on the needed amount for the first allocation and for every allocation. The MA reserves the right to accordingly decrease a request for allocation by a beneficiary, if unused funds from previous allocations are still available in the account;
- Provided that enough credit is available, the allocation is granted by the PIP and performed via the account administrator;
- ► The allocations granted through the Public Investments Programme involve the amounts from both funding sources (ERDF and national co-financing);
- Very Important: Please consult the Guidance Circular on the operation of the Central Account 23/200850 (ΑΔΑ: ΩΖΘΙ465ΧΙ8-7ΧΙ).

Project Funding & Cash Flows (2)



Bulgarian Beneficiaries

- Advance Payment: It is estimated that 7-7.5% of the beneficiary's budget will be given as advance payment via the Paying Authority to the Lead Beneficiary, who will in turn transfer it to the respective beneficiaries. The issue is to be finalized with the signing of the MoU between the memberstates. Furthermore, 80% of the national co-financing will be given as advance, after request to the Bulgarian National Authority;
- **ERDF:** After the submission of the certificates and their integration in the payment requests, ERDF reimbursement is received by the Certifying Authority and transferred to the Lead Beneficiary, who will in turn transfer it to the respective beneficiaries within one (1) month from its receipt. Transactions are performed in euro (€) and in whole, without deductions for bank charges, etc.;
- National co-financing: The national co-financing is ensured by the Ministry of Regional Development and Public Works.

Project Funding & Cash Flows (3)

General points

- ► For the sound financial management of the project, all project beneficiaries should have a dedicated, interest-free bank account;
- Payment of the eligible preparation cost should be included <u>preferably</u> in the first progress report

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Project Modifications (1)

General Rules

- □ Not an automatic procedure
- Project Management Team consent needed in a written form in all types of modification
- Starts with a written justified request by the Lead Beneficiary to the Joint Secretariat
- Endorsement/approval by the relevant Programme management structure always needed
- ☐ ERDF ceiling and n+3 rule should be strictly observed
- Project objectives and expected results should be retained



Project Modifications (2)



Cases

Minor Modifications

- · Administrative Information in the Application Form
- · Bank information
- · Justification of Budget adjustments not affecting the Application Form
- Implementation period of a Work Package within project duration
- · Readjustments between budget categories or actions up to 10% of total budget of the Application Form

Modifications approved by the MA

- · Reallocations above 10% and up to 20% of the total budget of the Application Form
- · Extension of the end date of project implementation
- Reallocation between beneficiaries from the same Member State up to 10% of the total budget of the Application Form

Modifications approved by the Monitoring Committee

- Reallocations between budget categories or actions greater than 20% of the total budget of the Application Form
- Reallocations between beneficiaries from the same Member State greater than 10% of the total budget of the Application Form
- Project structure / Composition of partnership / New activities
- · Reallocations between beneficiaries from different Member States

interreg Project Modifications (3) Greece-Bulgaria **Procedures** Electronical Endorsement or Reflection in the justified notice Reflection in the Minor Modifications justified next version of to the Joint next Progress rejection by the the Application Secretariat by Report JS/MA Form the LB Official request JS informs the LB Information and by the LB to the JS - electronically electronically reasoned opinion Decision of the about the by the JS to the MA scanned and hard decision and next MA CODY steps Official request JS informs the LB Information and Information and by the LB to the electronically reasoned opinion reasoned opinion JS - electronically about the by the JS to the to the Monitoring scanned and hard decision and next MA Committee CODY steps

Project Modifications (4)

Modifications related to infrastructure works

- ▶ National legislation applies
- ▶ Project Beneficiary is responsible
- ▶ Before the modification the Joint Secretariat should be informed by the Lead Beneficiary to check whether this affects the scope of the project



Useful Contacts

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PHOTOS OF THE KICK-OFF MEETING, 23/11/2018, 11:00AM , Municipality of Oraiokastro







PHOTOS OF THE KICK-OFF MEETING, 23/11/2018, 11:00AM, Municipality of Oraiokastro





