



**WORKSHOP on  
OUTPUT INDICATORS  
1<sup>st</sup> Call for Proposals projects –  
Priority Axis 1  
Zagreb, 6 February 2018**



## Agenda

Time	Agenda point
09:00h – 09:15h	1. Opening and introduction
09:15h – 09:45h	2. Presentation on output indicators, performance framework and evaluation of the programme
09:45h – 11:45h	3. Discussion and group work
11:45h – 12:00h	4. Conclusions

## WHY are the INDICATORS so important?

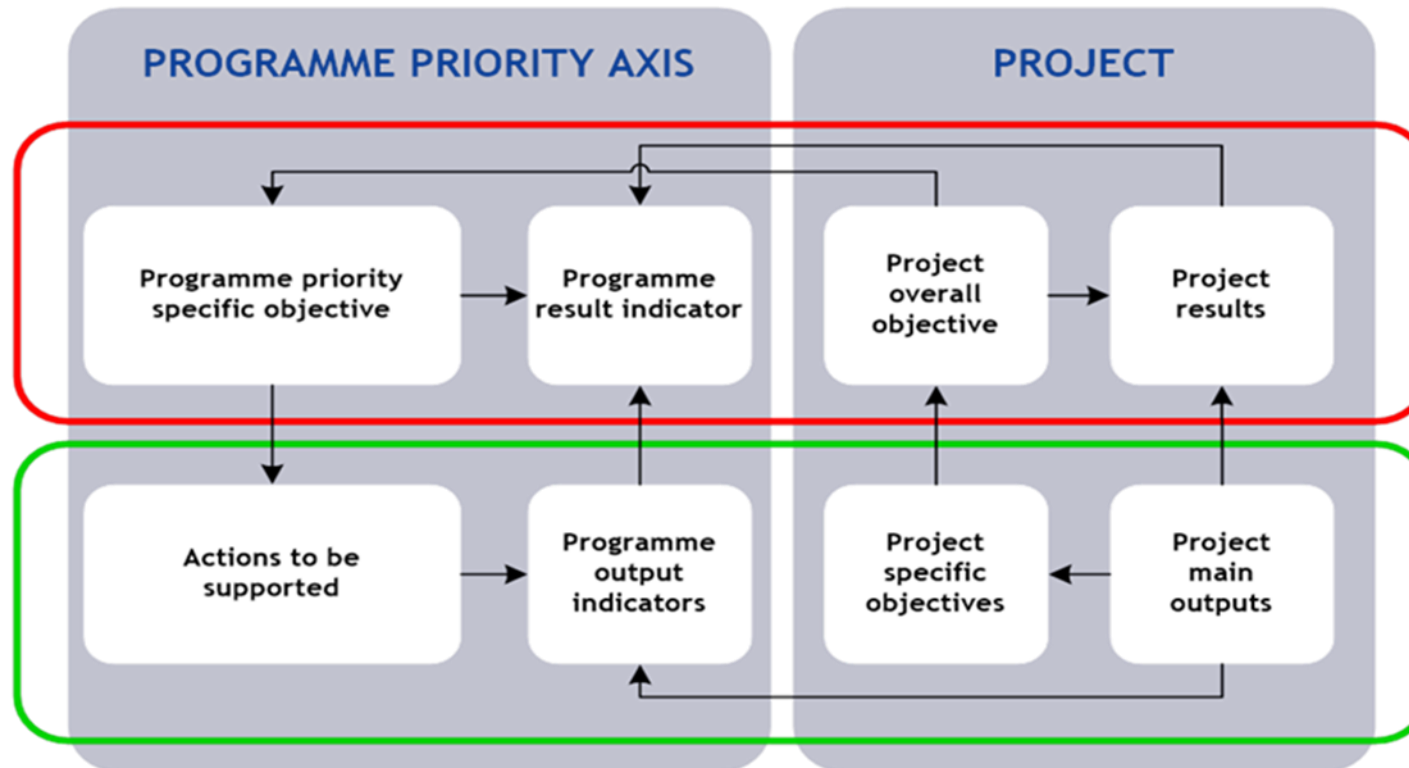
Programming period 2014-2020:

- shift from a focus on absorption of funds to a clearer articulation of the results → result-oriented approach!
- Financial consequence

Tools to achieve this approach:

- Intervention logic
- Performance framework
- Result indicators

## INTERVENTION LOGIC



## PRIORITY AXIS 1 – INTERVENTION LOGIC

PA title	Improving the quality of the services in public health and social care sector	BASELINE VALUE (2014)	TARGET VALUE (2023)
Specific objective	To improve the quality of services in public health and social care sector across the borders		
Result indicator	The level of accessibility and availability of the services within public health care sector	44%	75%
Output indicator 1	Number of jointly developed and/or implemented tools and services that enable better quality of health and/or social care services	0	11
Output indicator 2	Number of participants in joint education and training schemes on health and/or social care	0	343
Output indicator 3	Population covered with improved health and/or social care services	0	300.000

## PERFORMANCE FRAMEWORK

- A new tool used to control if the programme is following its intervention logic and is achieving its result as planned
- Established at the level of Priority Axis
- Consists of selected financial, output indicators and key implementation steps (relates to fully implemented operations by end 2018)
- Performance framework achievement assessed in 2019 against milestones and in 2025 against targets



## PRIORITY AXIS 1 – PERFORMANCE FRAMEWORK

	<b>FINANCIAL PERFORMANCE</b>	<b>Financial performance (2018)</b>	<b>Financial allocation</b>
Specific objective	Improving the quality of the services in public health and social care sector	625.000,00 EUR	8.573.297,00 EUR
	<b>OUTPUT INDICATORS</b>	<b>Milestone (2018)</b>	<b>Target value (2023)</b>
Output indicator	Number of jointly developed and/or implemented tools and services that enable better quality of health and/or social care services	3	11
Output indicator	Number of participants in joint education and training schemes on health and/or social care	70	343
Output indicator	Population covered with improved health and/or social care services	0	300.000
	<b>KEY IMPLEMENTATION STEPS</b>		
	Projects contracted	5	

## LEVELS OF APPROVAL

- Task Force: approval of all programming documents, including intervention logic and performance framework (partially in our case)
- Ex – ante evaluation: analysis whether the targets are relevant and can be realistically achieved
- European Commission: Verification and approval

## MONITORING PERFORMANCE

- Managing Authority (preparation and submission of AIR)
- European Commission (examination, observations)
- Annual review meeting between EU COM and MS



## CONSEQUENCES

- Revision of milestones and targets by the MA – only in duly justified cases
- Significant overreaching milestones in 2018 will result in setting more ambitious targets for 2023
- Negative consequences: suspension of all or part of payment for a Priority Axis of the programme if criteria set in Article 22(6) of CPR are met
- The suspension is lifted when MA takes needed corrective actions
- Financial correction – at the end of programming period



## WHAT CAN WE DO?

- Projects: make sure to achieve the results and indicators as per Subsidy Contract
- Programme bodies: make sure projects report realistic and verifiable data
- Programme evaluation:

*„An adjustment may also be necessary over the course of the programming period where monitoring or evaluation evidence show that the effect of interventions supported is insufficient” (Commission Guidance fiche on Intervention logic)*





## PRIORITY AXIS 1

Project	Number of jointly developed and/or implemented tools and services that enable better quality of health and/or social care services	Number of participants in joint education and training schemes on health and/or social care	Population covered with improved health and/or social care services
PALL NET	3	60	800
Q-Access-HC	7	20	140.000
SLEEP MEDICINE	2	20	800.000
We CARE	6	29	660
MELAdetect	4	570	900
NeurNet	1	30	200

# Thank you for your attention!

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