

HEALTH AND SOCIAL CARE

1. The INTERREG VA Programme

The INTERREG VA 2014-2020 Programme is one of approximately 60 programmes across the European Union designed to promote greater levels of cross-border cooperation.

Northern Ireland, the Border Region of Ireland and Western Scotland share a number of common features with other border areas across Europe where developmental problems are exacerbated by the existence of borders. Borders can distort infrastructure and communication networks resulting in reduced economic development and different policy approaches which hinder joined-up service delivery.

The INTERREG VA Programme has been designed to address many of these issues in order to promote greater economic, social and territorial cohesion across the region.

2. Summary of call

To improve the population health and well-being of people living in the region by enabling them to access quality health and social care services in the most appropriate setting to their needs, through collaboration on a cross border basis.

Over the last 24 months SEUPB has provided funding to 32 projects (10 health projects http://seupb.eu/sites/default/files/styles/INTERREGVA/Dec_Beneficiaries_Spreadsheet_INTERREG_Webcopy_English1.xlsx) to support the achievement of agreed output indicators as outlined within our INTERREG VA Cooperation Programme. Through achievement of these outputs we aim to support the following **Result Indicator**:

An increase in the number of 'episodes of health, community and social care' delivered on a cross border basis. The baseline value for 2014 is 4,700 per annum. The target value for 2023 is 9,000 per annum.

The Output Indicators within the Health and Social Care Priority, Population Health, have the following output targets:

- **Population health:**
 - **4.110** - 12 new cross-border area interventions developed to support positive health and wellbeing and the prevention of ill health
 - **4.111** - 15,000 beneficiaries supported by new cross-border area initiatives for positive health and wellbeing and the prevention of ill health

This call is seeking new applications to support achievement of the population health output indicator. More specifically we are seeking applications that will ensure:

- **Population health:**
 - **4.110** – **up to 4** new cross-border area interventions developed to support positive population health and wellbeing and the prevention of ill health
 - **4.111** - **5,000** beneficiaries supported by new cross-border area initiatives for positive population health and wellbeing and the prevention of ill health

The total value of this call is up to €4.2 million ERDF+ Match

Opening Date: 13 February 2019

Workshop: 26 February 2019 (Belfast)

Closing Date: 29 March 2019 (15:00)

Steering Committee Date: 14 June 2019

3. Essential information

The call for applications should be read in conjunction with the following:

- Cooperation Programme and associated Citizens' Summary
- The Programme Rules
- Guide for Applicants
- Commission Guidance for the Preparation of Unit Costs

Please consult these documents before completing the application form as they contain essential information to assist you in making the best application possible.

Applicants may also find it useful to consult the ‘Impact Assessment Toolkit for Cross Border Cooperation’. This toolkit has been developed by the Centre for Cross Border Studies, as part of an INTERREG IVA funded project and is intended to be a practical guide to assist with planning cross-border projects. A copy of the toolkit can be downloaded from <http://crossborder.ie/research-policy/research/toolkits/impact-assessment-toolkit/>

4. Project Selection Criteria

Applicants must apply to develop and implement cross border health and social care services by the defined “critical action area” in population health.

The following selection criteria will be used:

- a. Contribution of the project to the defined results and outputs of the Programme.
Applications under each critical action area which demonstrates a strategic approach that will deliver all of the beneficiary targets are favoured.
- b. Quality of project design
 - Assessment of delivery mechanisms; the mobility of health and care professionals and patients across borders; provision of service remotely by electronic means; to include the development of the necessary protocols;
 - All activities must align with Directive 2011/24/EU of the European Parliament and of the Council of 9 March 2011.

In addition to the above, applications are encouraged to consider the inclusion of the following:

- New innovative approaches to service delivery;
- E-Health/digital health & care technology solutions in the delivery of health and care/services including development of necessary protocols;
- Provision of staff training aimed at maximizing the delivery and value of cross border interventions;
- Additional to current provision;
- Capacity to mainstream;

- Assessment of added value to improving health and wellbeing and community resilience;
- c. Quality of project team and implementation arrangements;
 - Collaboration and partnership approach;
- d. Value for money - Cost effectiveness of impacting on the result indicator;
- e. Quality of cross-border co-operation with demonstrable added value;
- f. Contribution towards sustainable development; and,
- g. Contribution towards equality.

5. Eligible Region

The eligible area for the INTERREG VA Programme is:

- Northern Ireland;
- The Border Counties of Ireland (Monaghan, Leitrim, Cavan, Louth, Sligo and Donegal); and
- Western Scotland (Dumfries & Galloway, East Ayrshire and North Ayrshire mainland; South Ayrshire; Lochaber, Skye & Lochalsh, Arran & Cumbrae and Argyll & Bute and Eilean Siar/Western Isles).

Projects must comply with the cross-border requirements of Article 12 of 1299/2013 as detailed in the Programme Rules.

6. What is the theme “Health and Social Care” going to achieve?

The Programme has already invested in a number of health and care sectors where there is greatest need and where the value of cross-border cooperation can deliver greatest results. The specific objective is, through collaboration on a cross-border basis, to improve health and well-being of people living in the region by maximising community assets and enabling citizens to access quality health and social care services in the most appropriate setting to their needs, and to enable greater self-management and a focus on prevention.

The programme will invest in programmes that reflect and support current strategic priorities within the jurisdictions of the region. These include, but are not restricted to:

- 'Health and Wellbeing 2026: Delivering Together'
<https://www.healthni.gov.uk/publications/health-and-wellbeing-2026-delivering-together>;
- eHealth and Care Strategy <https://www.health-ni.gov.uk/publications/ehealth-andcare-strategy>;
- Making Life Better in Northern Ireland
https://www.healthni.gov.uk/sites/default/files/publications/dhssps/making-life-better-strategicframework-2013-2023_0.pdf;
- Department of Health Statement of Strategy 2016-2019 <https://health.gov.ie/wp-content/uploads/2016/12/DoH-SoS-2016-2019-Final-En.pdf>
- Healthy Ireland -
<https://health.gov.ie/wpcontent/uploads/2014/03/HealthyIrelandBrochureWA2.pdf>
- eHealth Strategy Ireland <http://ehealthireland.ie/Knowledge-Information-Plan/eHealth-Strategy-for-Ireland.pdf>
- "Better Health, Improving Health Care"
<http://health.gov.ie/blog/publications/betterhealth-improving-health-care/>
- Scotland's Health & Social Care Delivery Plan
<http://www.gov.scot/Publications/2016/12/4275/downloads>
- Scotland's Digital Health & Care Strategy
<https://www.gov.scot/publications/scotlands-digital-health-care-strategy-enablingconnecting-empowering/>

7. Anticipated Actions

It is anticipated that the Programme will fund the following types of actions.

- Population health: Supporting positive health and well-being and the prevention of ill health through an integrated approach which could incorporate, e.g. using digital technology and remote monitoring to support patient self-management, e.g. Long Term Conditions

Within this defined area of health and social care the following actions will be included:

- Development and implementation of support and cooperation services on a crossborder basis for community and voluntary organisations involved in supporting communities and in the provision of social care and health care services within their own communities;
- Development, implementation and evaluation of cross-border initiatives in the area of mobile, digital and e-health, including addressing challenges of isolation in rural areas, telemetry, web-based information on community resources and support services across a range of health care service areas;
- Development of cross-border cooperation in the area of health care records management in order to streamline access to information for patients and clinical professionals in the provision of cross-border care services;
- Cross-border training interventions for health care professionals, social care professionals and personnel in community and voluntary organisations involved in the provision of cross-border health and social care support services.

8. Budget and co-financing rate

€4.2 million is available under this call to support achievement of outputs within this theme. Successful projects will be offered a grant in Euro. The maximum intervention rate that can be applied is 85%

This means that applicants are required to bring a minimum of 15% match funding to the eligible project costs over the lifetime of the project. Applicants may seek match funding from the member states through this application process. More information will be provided at the workshop event on 26th February 2019.

However, please be aware the intervention rate (grant rate) may decrease depending upon the state aid implications of your project. It is the responsibility of the Lead Partner to ensure that State Aid implications have been fully considered. The application should clearly demonstrate how State Aid compliance will be achieved.

The level of grant aid may also be adjusted to take due account of anticipated future revenue streams. Please consult the Programme rules for further details.

Grants and payments may take any of the following forms:

- (a) Reimbursement of eligible costs actually incurred and paid;
- (b) Standard scales of unit costs;
- (c) Flat-rate financing, available for overhead costs or salary costs.

The above options may be combined only where each option covers different categories of costs or where they are used for different projects forming a part of an operation or for successive phases of an operation.

8.1 Simplified Cost Option (SCO)

In order to simplify the administration of grant aid the SEUPB would propose to use simplified costs options for the administration of this theme. Simplified costs will be established during the application process in consultation with the successful applicant and in accordance with the Commission guidance. It is envisaged that the relevant simplified cost options will include unit costs and flat rate cost as outlined in the Programme Rules.

8.2 Applicant Proposed Unit Cost Option

Applicants have the opportunity to present alternative unit costs. Where applicants take this opportunity the information must be presented in accordance with the Commission's guidance for the preparation on unit costs.

Unit costs must be:

- Fair – based on reality, not excessive or extreme
- Equitable – it does not favour some beneficiaries or projects over others
- Verifiable – determination of flat rates, standard scales of unit costs or lump sums should be based on documentary evidence which can be verified.

Applicants must document as a minimum:

- The description of the calculation method, including key steps of the calculation
- The sources of data used for the analysis and the calculations, including an assessment of the relevance of the data to the project(s), and an assessment of the quality of the data

- The calculation itself to determine the value of the Simplified Cost Option (unit cost).

The Common Provisions Regulation (CPR) specifies that the following may be used in evidence to support Simplified Cost Options:

- 'Statistical' data or other objective information
- The verified historical data of individual beneficiaries
- The application of the usual cost accounting practices of individual beneficiaries.

When providing calculations of unit costs, applicants must provide accounting data over at least three years so as to identify any potential exceptional circumstance which would have affected costs in a specific year as well as the tendencies in the cost amounts.

Where alternative unit costs are presented, applicants will be able to suggest modifications to the overall financial allocations.

Unit Costs are not to be used where a project is outsourced or implemented exclusively through the procurement of works, goods or services.

9. Application process

A one stage process will be in place for this call as detailed in the Guide for Applicants. Full details of the assessment process, including admissibility criteria is also available in the Guide for Applicants.

You can apply on-line through <https://interreg.seupb.eu/ems/app/main?execution=e1s1>

10. Contact Us

For general enquiries about this call please contact the SEUPB on: Tel: + 44 28 82 255750

Contact Name: Glenny Whitley

Programme Manager

Special EU Programmes Body

Email: glenny.whitley@seupb.eu