



Úrad splnomocnenca vlády SR
pre rozvoj občianskej spoločnosti

Európska únia
European Regional Development Fund

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Deinstitutionalisation of social services or missing synergies in practice *

SUMMARY

Case study of synergies in European Structural and Investment Funds

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Deinstitutionalisation is an integral part of the transition from institutional services to community based social services. It is a paradigm shift from a medical and charity-based model of rendering social services to a human-rights model of supporting persons with disabilities and senior citizens. Since the change of the paradigm is at the core of the process, the whole transition from institutional to community-based care (hereafter the process of deinstitutionalising and transitioning to community based care will be referred to as “DI”) is perceived as a principal **structural change of systems of rendering support and care** not only in Slovakia, but in the whole of Europe. Slovakia still stands at the beginning, formally declaring its readiness to take up this change and declaring its commitment to its implementation.

Since 2011, when it passed the **Strategy of Deinstitutionalisation of the System of Social Services and Foster Care**¹, the Slovak Republic has adopted several strategic documents, thus reconfirming its commitment to the process.² **This change, however, will not be feasible without synergies and a complementary approach going beyond the European Structural and Investment Fund.**

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<https://www.employment.gov.sk/files/legislativa/dokumenty-zoznamy-pod/strategia-deinstitucionalizacie-systemu-socialnych-sluzieb-nahradnej-starostlivosti-1.pdf>

²National Action Plan on Transition from Institutional to Community-Based Care. National priorities for development of social services for 2015 – 2020, National Developmental Programme for Living Conditions of Persons with Disabilities. Programme Manifesto of the current Slovak government, Act on Social Services No. 448/2008



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Programme period 2007-2013

Between 2007 and 2013, infrastructure projects were supported through the Regional Operational Programme (“ROP”)³. ROP aimed at increasing the quality of social services. The investments were to be geared towards **reconstruction of existing centres or building new ones**. The problem was, however, that only centres with a capacity of 50 or more clients were eligible for the support. This draft measure contradicted the new Act on Social Services No. 448/2008. Even though NGOs pointed to this issue, nobody proposed relevant adjustments within the revision of ROP. At that time, the report of Commissioner **Vladimír Špidla and a number of independent experts⁴ contributed** to a shift in the Commission's attitude towards the use of European structural funds in the field of social inclusion.

This shift resulted in the Commission's requirement to revise ROP to support transition and deinstitutionalisation. The government of Ms. Radičová took up the challenge and started to work towards the required changes with substantial support from NGOs and their experts. From the very beginning, it focused on **synergies with the Operational Programme Employment and Social Inclusion** that should provide for indispensable support of the centres of social services to embark on the deinstitutionalisation process.

OP Employment and Social Inclusion resources were to be used for establishing a National Centre for Deinstitutionalisation as part of a National Support Project for Deinstitutionalisation of care services (an allocation of €1.05 million). The project should have been implemented by the Centre for Education of the Ministry of Labour, Social Affairs and Family of the Slovak Republic in cooperation with selected partners. Institutions involved in this project were to have applied for investment support from ROP, which had allocated €20 million for supporting deinstitutionalisation of the social services system. Support for the transition process for the involved institutions should have been the next step carried out under the demand-driven call for proposals within the OP Employment and Social Inclusion. This model, built on synergies, was considered an example of good practice at the European level, and together with a partnership implementation model of the National DI Programme was listed in various **documents** prepared by the European Expert Group on DI⁵.

Unfortunately, this appreciated synergy was not realized.

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Regional Operational Programme, Version No. 1. Approved on: 27 September 2007.

http://www.ropka.sk/download.php?FNAME=1300713652.upl&ANAME=Regionalny_operacny_program_verzia_1_schvalena_24_9_2007.zip&attachment=1

4 Report of the Ad Hoc Expert Group on Transition of Institutional care into Community-based Care. http://www.zdomovadomov.sk/wp-content/uploads/2013/08/ad-hoc-DI_svk.pdf

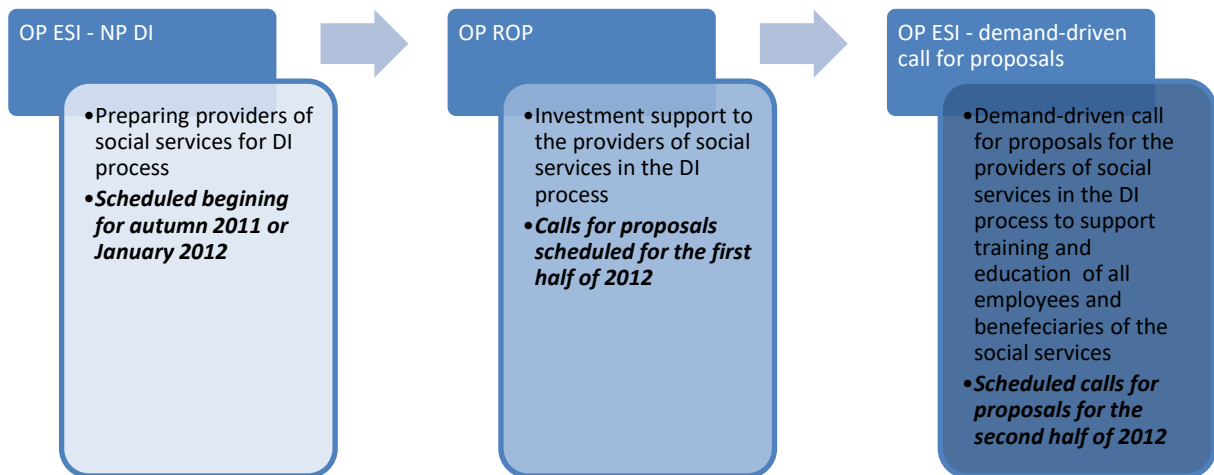
5 <http://www.deinstitutionalisationguide.eu/>



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Overview of the 2007 – 2013 period

Planned synergies for supporting the transition and deinstitutionalisation process in the programme period 2007 – 2013



Reality of implemented calls for proposals and projects supporting transition and deinstitutionalisation in the programme period 2007 – 2013





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Programme period 2014 – 2020

Commissioner Špidla's report, supported by ratification of the Convention by the European Union itself, together with mismanaged synergies of the operational programmes in favour of DI process in Slovakia, created a good basis for designing a new **Programme period and Guidance on Withdrawals of Structural Funds in 2014 – 2020**. Supporting the transition from institutional to community based care became a clear priority of this programming period, and is also defined as a **specific target** of support for using EU structural funds from 2014 to 2020. The **partnership agreement also defined the need for synergy and an integrated approach to deinstitutionalisation**. It also expected an expert group to be created for coordinating this process among relevant operational programmes.

Operational Programme Human Resources 2014 – 2020

The Operational Programme Human Resources stipulated deinstitutionalisation as its specific target

4.2.1. Transition from Institutional to Community-based Care. In 2014, due to the challenges of implementing the transition and deinstitutionalisation under ROP and OP ESI and missing synergies, the Ministry of Labour, Social Affairs and Family suggested **splitting the support for transition and deinstitutionalisation in a new OP HR into two stages. The first stage was to represent support for transition teams** in institutions of social services, and designing much needed transition plans. Those establishments with ready transition plans (approved by the establishing entity and the Ministry of Labour) could then apply for investment support within IROP. Once an institution was approved and contracted for receiving support from IROP, the **second stage** would follow. **Only centres supported within IROP** would be eligible for receiving support. The support would focus on preparing all beneficiaries of social services and employees rendering those services.

Integrated Regional Operational Programme 2014 – 2020

The **Integrated Regional Operational Programme** defined transition from institutional to community-based care under **specific target 2.1.1 To facilitate the transition of social services and socio-legal protection of children and social guardianship in institutions from institutional to community-based form and to support the development of childcare services for children up to 3 years at community level**. Investment support anticipated not only supporting transition of existing institutions with large capacity, but also indispensable support for development of community based services. Those calls for proposals were to be announced simultaneously; another consideration was that community-based services could have been supported earlier in order to prepare new capacities for clients of institutions in transition.

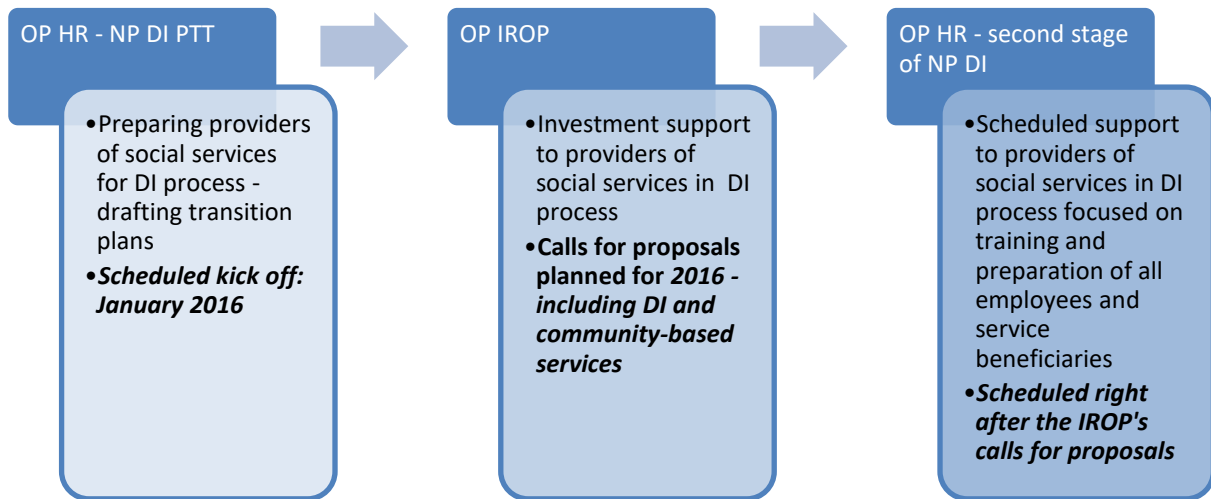
The following section looks into the state of planned synergies as of today.



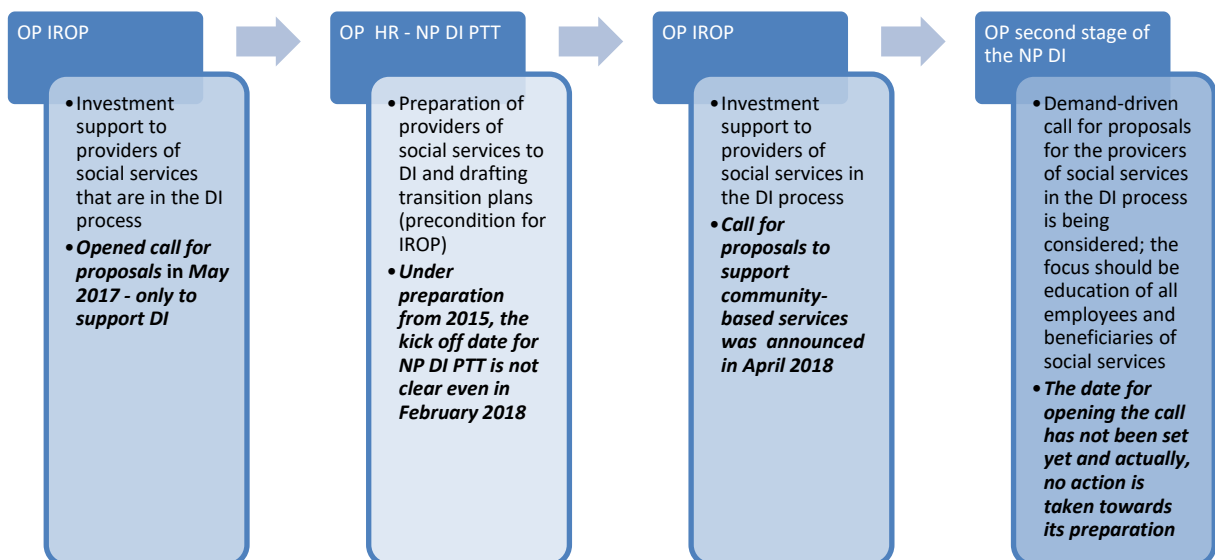
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Summary for the 2014 – 2020 period

Planned synergy of supporting transition and deinstitutionalisation in the programme period 2014 – 2020



Actual implementation of scheduled calls for proposals and projects supporting transition and deinstitutionalisation in the programme period 2014 – 2020





Conclusion

The Slovak Republic has committed itself to implementing the structural change of transitioning from institutional to community based care, also in line with its commitments under the Convention. This commitment has been transformed into various national documents and strategies. In spite of all these conditions, at the beginning of 2018 the transition and deinstitutionalisation process has practically not even started. At the time when this text was finalised, the following conclusion can be made with regards to structural funds:

- **Launch of NP DI PTT implementation is late by almost two years** – the main challenges include: implementation of NP in partnership (selection procedure, division of competencies, budgetary issues); co-funding of NP by partners; and the question of state aid
- **Discussions about the second stage of NP DI (supporting training and education of employees and beneficiaries because of the expected change) have not even started**
- **Opening of the IROP call for proposals to support deinstitutionalisation** has been delayed and there are fewer applicants than originally expected due to missing systemic support that should have been offered within the NP DI –PTT, as well as due to the eligibility requirement of construction permission
- **Opening of the IROP call for proposals to support community-based services is delayed**

Moreover the context of the DI process is much more serious and pressing. Experts draw attention to systemic violations of the human rights of persons with disabilities in institutions providing social services. At the end of the day, the Ministry of Labour, Social Affairs and the Family admits those problems, as is clear from its annual reports on the Social Situation of the Inhabitants⁶. It seems that decision-makers, unlike persons with disabilities, are in no hurry. Neither UN Committee recommendations nor conclusions of the PETI Committee that visited Slovakia on this matter in autumn 2016 have helped to accelerate this process either.

This case study's purpose is to describe the implementation of deinstitutionalisation with particular attention to using synergies between operational programmes. Since the DI process is comprehensive, involving multiple sectors, it has become clear that it is very demanding when it comes to its coordination.

The whole situation regarding the deinstitutionalisation process points to the fact that a profound systemic change first and foremost needs political support, a top-level state representative that

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<https://www.employment.gov.sk/sk/ministerstvo/vyskum-oblasti-prace-socialnych-veci-institut-socialnej-politiky/spravy-socialnej-situacii-obyvatelstva-slovenskej-republiky.html>



takes ownership of it and will support it and promote such change. With such a precondition commitment, the environment in Slovakia is ready for the change.

- Slovakia adopted and ratified international conventions and support of these institutions in the DI process
- The legislative framework and strategic documents that prioritize community-based services are ready (it is only necessary to adjust the funding scheme for such services), and quality standards are focused on human rights
- There is an Expert Group on DI that can be used to promote those values;
- Slovakia has its Strategy for DI 2011-2020 and NAP DI 2016-2020. This creates an opportunity to prepare new, potentially more ambitious strategic documents that could contain a clear time line for terminating provision of institutional care in the Slovak Republic
- **There are substantial finances from EU structural funds geared towards supporting the DI process and community-based services; within this scheme there is a Working group for coordinating OP HR and IROP for deinstitutionalisation.**

Based on experience with implementing European Structural Investment Funds in the DI area (both OP HR and OROP) and synergies between them, we **submit the following suggestions for consideration**. These can contribute to more effective drawing of ESI funds and their synergies:

1. The drafting of a **unified Strategy – Vision for Slovakia**, for instance in the context of Agenda 2030, should precede preparations for a new programming period. It would be much easier to follow synergies among different areas based on a single strategy.
2. **Individual operational programmes should be designed in a participative and multi-sectoral manner.** A participative approach is needed, considering the diversity of stakeholders (state, public, municipal, professional, academic, and non-governmental) as well as different ministries involved.
3. **NP calls for proposals and priority areas** should be designed by multi-sector teams, representing different areas, specialized sections at relevant ministries, implementing agencies, potential beneficiaries and experts in the given area, and the like.
4. Increase effectiveness of **coordinating working groups** for those areas where synergies are wanted – through higher frequency of meetings, more intense



communication, and scaled up authority e.g. through their direct management through the Central Coordinating Body.

5. The complexity of the topic and the scale of support call for **multi-resource projects** for deinstitutionalisation. Thus, both the beneficiary and the institution in transition could draw finances for both soft activities and investments. Where the aim is to support systemic change that requires synergic support of various operational programmes or sectors, Central Coordinating Body should manage the preparation process.

6. Submit **reports on synergies and impact on implemented and planned calls for proposals or national projects** when revising all operational programmes.

7. Create special, **multi-sector teams of evaluators** that could participate in assessing and evaluating applications. They could thus review projects not only for compliance with DI targets, but also for physical accessibility of implemented investments and their financial effectiveness and sustainability.

* Translation of the text to English was issued by **SOCIA – Social Reform Foundation**, July 2018, www.socia.sk