



Interreg
Greece-Bulgaria
European Regional Development Fund



Крумовград

**«Policies for Enhancing Access to Health Services in Deprived Areas»
Acronym: 'The Healthy Municipality'**

**Cooperation Programme
'Interreg VA Greece-Bulgaria 2014-2020'**

**WP 1/Deliverable 1.8.5 External Evaluation
Start-Point Evaluation Report**

**Reconstruction and Development Agency
RDU**

Contractor of the Municipality of Krumovgrad

October 2018

**‘The Healthy Municipality’
«Policies for Enhancing Access to Health
Services in Deprived Areas»**

**Subsidy Contract N°B2.91.09
Project MIS Code 5011021**

**Project Evaluation Document
Start-Point Evaluation Report**

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Creation Date: [18/10/2018]
Last Updated:
Version: 1.0



Reconstruction and Development Agency

R D U



**Община Крумовград
Municipality of Krumovgrad**

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1.0 Purpose of the Document - Applied Methodology

1.1 Purpose

The present project evaluation document summarizes the results of the project evaluation procedure after the first two (2) semesters of its implementation (the 1st semester was shorter due to the official beginning of the project on 1st of November 2017). It compares reality to the original commitments documented in the approved Project Proposal, the 1st and the 2nd Progress Reports pertaining to the period from 01/11/2017 to 30/06/2018.

The purpose of this Project Evaluation Report (PER) is to measure the success of the project management and the actual implementation (including the use and effectiveness of processes and tools used) rather than the content (quality) of the project deliverables. The latter may be evaluated at a later stage, after the project has been operational for a period of time, in case it is deemed appropriate by the partners or the authorities involved.

In overview, the aim of this PER is to develop and maintain a system of internal/self-evaluation for the project partners (Project Beneficiaries/PBs) and, to that end, summarizes the first two (2) semester periods of the project towards identifying findings which might lead to improvements through the model of the PDCA cycle (figure 1).

Figure 1: The Plan-Do-Check-Act Cycle



1.2 Methodology

A single evaluation toolkit is used in order to collect the necessary data which will be used for the accurate evaluation of the project. This toolkit consists of three (3) distinct stages and is made of the following elements:

- A **Checklist** for the **start-point evaluation**, to be carried out in the **early-stage** of the project before substantive interventions take place
- A **Questionnaire** for the **mid-point evaluation**, to be carried out at a stage when the project can still be modified without changing/affecting its initial scope
- A **Questionnaire** for the **end-point evaluation**, to be carried out at the **final stage** of the project implementation towards assessing the outputs and the future sustainability of the project just before the final progress report submission.

This evaluation toolkit is designed to help in assessing the performance of the project focused on potential deviations and delays and towards improving its quality and its sustainability.

Filling in the forms does not constitute an evaluation. It is the interpretation and analysis of those responses and the reflection on this analysis that constitutes an evaluation. Specific questions of the evaluation might concern the framing of the project, its objectives, the overall administration, the collaboration amongst the PBs, the capacity of the available resources, etc.

2.0 Review Process

The project review process was conducted by the '**Reconstruction and Development Union**' which was selected following the successful completion of the respective tendering procedure initiated by the **PB8**, the **Municipality of Krumovgrad (BG)** on 25/05/2018.

The approach chosen by the contractor combines the following:

- a. A **desk survey** during which all relevant documentation was examined and specifically:

1. The Project Proposal initially submitted (22nd of April 2016)

2. The Decision of the Monitoring Committee of (21st of March 2017)
 3. The Modified Project AF dated (01/11/2017) as revised AF
 4. The Subsidy contract **B2.9a.09** signed by the Head of the MA at 01/11/2017 and its Annexes
 5. The Partnership agreement signed at 01/11/2017
 6. The 1st progress report for the period 01/11/2017 to 31/12/2017
 7. The 2nd progress report covering the period from 01/01/2018 to 30/06/2018
- b. The **completed Questionnaires** by the involved PBs as follows:
- Regional Development Agency of Rodopi S.A. (LB)
 - Aristotle University / Special Account for Research Funds / Dept. Of Economics (PB2)
 - Municipality of Arriana (PB3)
 - Municipality of Iasmos (PB4)
 - Agency for Transnational Training and Development (PB5)
 - Regional Health Inspectorate of Haskovo District (PB6)
 - Association of Rhodope Municipalities (PB7)
 - Municipality of Krumovgrad (PB8)
 - Municipality of Momchilgrad (PB9)

3.0 Project Purpose

The project with the acronym: '**The Healthy Municipality**' was submitted and approved in the framework of the Cooperation Programme "Greece-Bulgaria 2014-2020" under the Priority Axis 4: A Socially Inclusive Cross-Border Area. Its specific objective is: 8: To improve access to primary and emergency health care (at isolated and deprived communities) in the CB area while the Thematic Objective is 09: Promoting social inclusion, combating poverty and any discrimination and falls under the 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.

The Project in fact pursues to investigate morbidity causes by developing population morbidity maps and formulating policies for its reduction. Also to investigate the access to and the degree of needs' coverage of health services in partner areas, to locate the vulnerable groups and to take measures for enhancing their prevention support (diagnostic exams, standard protocols for treatment of incidents), as well as to develop tools (patient cards, digital alert system, additional equipment for health centers, to network local health structures), towards designing local health policy plans. Within the approved actions is to organize communication actions for facilitating the application of a common plan in project areas and to carry out pilot applications (diagnostic and clinical exams for vulnerable groups, health prevention sessions) in order to support the overall prevention policy.

Nine (9) partners (Project Beneficiaries/PBs) representing local authorities, academic institutions, development agencies, health directorates and other organizations located within the two (2) sides of the cross-border area, collaborate together upon common methodologies and local application of them for the above mentioned purposes.

As far as the foreseen actions of the project are concerned, it should be outlined that the 'Healthy Municipality' Project investigates the effectiveness of the current Health Structures in the two countries over prevention policies, by conducting two (2) desk analyses on the population's socioeconomic characteristics and on the operating health infrastructure of the four (4) targeted areas (Municipalities of Krumovgrad, Momchilgrad, Arriana and Iasmos). It is also foreseen to implement four (4) on-the-field researches on the access to and the degree of needs' coverage of health services in partners' areas, four (4) researches and activities including medical exams for selected sample in the same four (4) areas on identifying local morbidity, one (1) synthesis report for the Cross-Border (CB) area, one (1) common digital map on morbidity and health infrastructure, for the "stocktaking" of the project needed data.

It is also foreseen to set up examination protocols in partner areas upon most frequent diseases, to create digital data bases in four (4) areas with patient cards and digital alert system, a digital municipal health platform in the four (4) areas as well as to supply additional equipment to the health centers. The designing of the four (4) local health policy plans, the setting up of a common CB prevention plan for pilot testing, the

designing of six (6) communication actions for applying a common plan in project areas, the pilot application in four (4) areas with health prevention sessions and medical exams, will contribute to designing a common CB health prevention policy. One (1) evaluation of the results of the pilot applications, one (1) synthesis report on problems and good practices of the pilot applications in the CB area, the adapting of the four (4) local health policy plans to the results of the pilot application, the setting up of a CB lab on prevention and primary health policies, will contribute to the mainstreaming of the project results.

Last but not least, the project is framed by management structures and activities on project publicity (1 Website of the project, 4000 flyers, 4000 Brochures and 2000 USB sticks on the Project, 5 Local Conferences, Opening and Closing Conference of the Project).

In total, it is estimated that four (4) health care institutions will be equipped, four (4) ICT systems will be developed, and around 60.000 persons will be covered by improved health services.

4.0 Assessment of Project Commitments

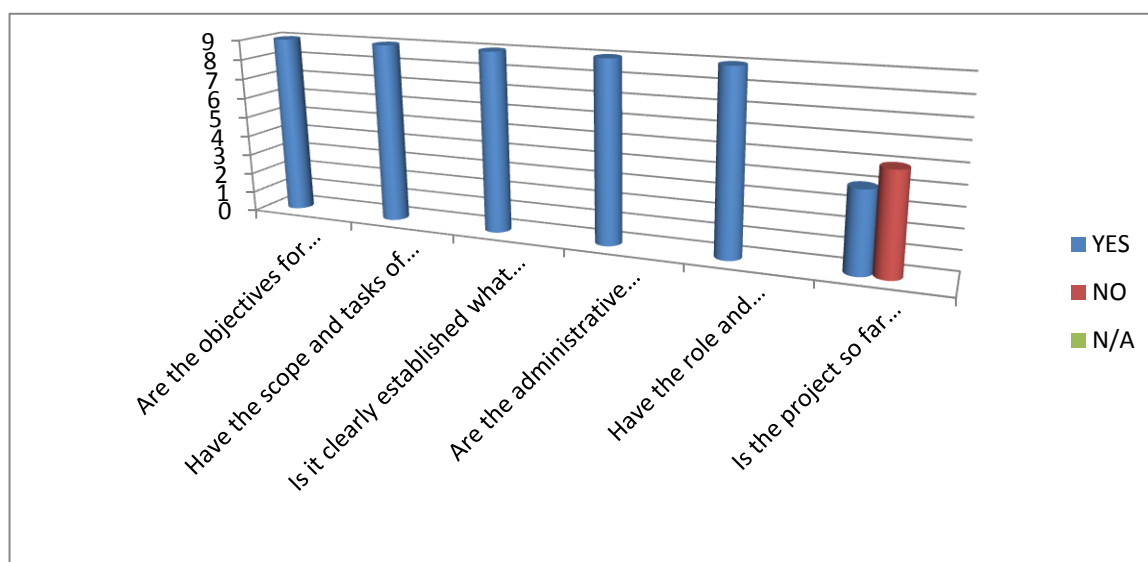
The Project AF and the Progress Reports documented project objectives, scope, deliverables, schedule and cost. This section assesses the project against the original [resp. revised] mandate as laid down in those documents.

4.1 Framing

The Framing of the Project is one of the most important elements of a sustainable and fruitful project. Ensuring proper framing at the start of a project (and throughout the project life cycle also) ensures that project beneficiaries and involved experts will deal with a functional and agile project. In reality the practice has shown that if framing is working well at the start of the project, the project will experience less or none scope changes and will have a greater chance of success in the objective achievement. The section of questions to the PBs with regard to the framing of the project was the following (in the form of check-list):

	QUESTIONS CONCERNING THE FRAMING OF THE PROJECT	YES	NO	N/A
1	Are the objectives for various stages of the project clearly defined?	9		
2	Have the scope and tasks of separate WPs of the project been clearly defined?	9		
3	Is it clearly established what deliverables and outputs are to be produced by each WP?	9		
4	Are the administrative procedures well understood by the PBs?	9		
5	Have the role and responsibilities of LB and PBs been clearly defined?	9		
6	Is the project so far proceeding in line with the initial guidelines and time-framework?	4	5	

Assessment: The results showed that PBs have a clear view of the initially set objectives of the project as well as of the scope and tasks of each WP since they were absolutely positive (9 positive/Zero negative responds) as seen in the following figure. The beneficiaries seem to be well informed about the expected deliverables/outputs to be produced, while they are also aware of the administrative procedures of the project implementation. They do consider the role and responsibilities as clearly defined..



However the opinions regarding the progress of the project and if this is in line with the initially set guidelines and the time-framework are divided (5 out of 9 do consider that the project is not proceeding in line with the guidelines and time-framework) and this definitely gives a clue about the realistic view of the project progress so far by the PBs' point of view. Needless to be pointed out that there is a definite need of restoration over this complex view about the project progress and its compliance with the set framework.

4.2 Objectives

As it is well understood the specific project objectives increase the chances of leading to a specific outcome and consequently to a greater added value. Therefore, objectives shouldn't be vague, because in that case they are not measurable. While there may be one general (or overall) project objective, in pursuing it there may be some more specific project objectives which will be used to assess a project's success. Simply put, they are the specific goals that *PBs* hope to accomplish within and during the project implementation period. In brief, it could be said that the objectives and the expected results for the entire project are summarised as shown below:

As an **overall objective (scope)**, the project pursues upon investigating morbidity causes, development of population morbidity maps and formulation of policies for its reduction, upon investigating the access to and the degree of needs' coverage of health services in partner areas, upon locating vulnerable groups and taking measures for enhancing their prevention support (diagnostic exams, standard protocols for treatment of incidents), upon developing tools (patient cards, digital alert system, additional equipment for health centers, networking local health structures), upon designing local health policy plans, upon organizing communication actions for applying common plan in project areas, upon applying pilot applications (diagnostic and clinical exams for vulnerable groups, health prevention sessions) to support the design of an appropriate CB prevention policy.

A series of activities contribute to the **mainstreaming** of the project results in the CB area. The project's general objective contributes to the program priority specific objective 8 "To improve access to primary and emergency health care (at isolated and deprived communities) in the cross border area" by the implementation of prevention actions addressing the local population, the introduction of prevention policies and capacity building at Municipality level in the remote areas (developing tools-pilot applications to support their prevention policy), by setting up a CB lab on Municipal health prevention.

The overall objective of the project is to develop preventive health policies at Municipality level in the Cross Border Area. For reaching this purpose a number of actions will be implemented seeking to record the morbidity characteristics of the project intervention area, develop appropriate tools and apply tailor made actions in order to mitigate occurrence of diseases in the areas of the project intervention. The specific sub-objectives of the project are to:

1. Investigate the morbidity causes in the project areas
2. Formulate policies on the reduction of morbidity
3. Investigate the access to and the degree of needs' coverage in health services in the partner areas
4. Locate vulnerable groups and take measures towards strengthening the support for diseases' prevention
5. Develop tools for improving the efficiency of the local health prevention systems
6. Design local health policy plans for the involved areas
7. Apply pilot actions to supporting health prevention policies.

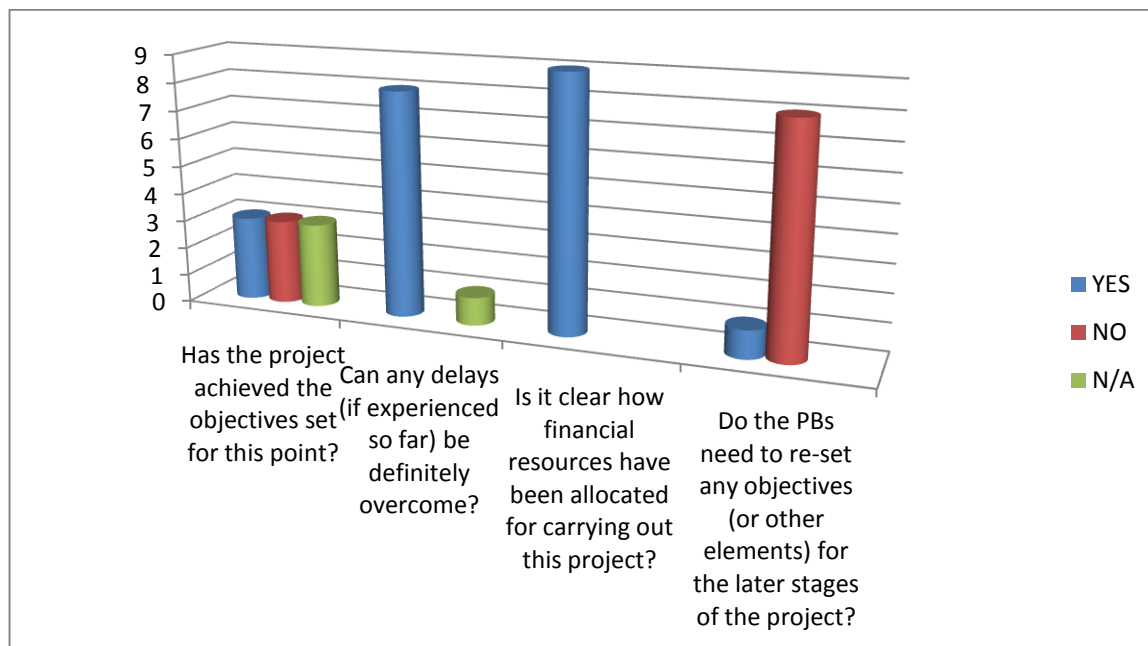
Taking into consideration the considerable delays by the administrative procedures and the consequent caused delay in the actual implementation of the activities, PBs are led to challenge the project's timely coverage of the objectives. This was obviously reflected in the given answers by the PBs as seen in the below figure:

	QUESTIONS CONCERNING THE OBJECTIVES OF THE PROJECT	YES	NO	N/A
7	Has the project achieved the objectives set for this point?	3	3	3
8	Can any delays (if experienced so far) be definitely overcome?	8		1
9	Is it clear how financial resources have been allocated for carrying out this project?	9		
10	Do the PBs need to re-set any objectives (or other elements) for the later stages?	1	8	

Assessment: The answers concerning the Question N°7 were totally balanced amongst 'YES', 'NO' and 'Non Applicable' and this is definitely representing the uncertainty (*and/or the different level of awareness*) over the project problems and obstacles so far. The vast majority (8 out of 9) of the PBs (Question N°8) is optimistic concerning the successful overcome of the current delays. The project partnership is also confident of the allocation of the financial resources (Question 9). A remarkable finding is outlined in the Question 10 where the vast majority (8 out of 9) consider unnecessary to reset the project objectives or even other elements of the project for the later stages.

What is undeniably worrying within this section of Questions is the rather confusing message resulting by the relative responses to the 7th Question, an anomaly that someone would assume that should have been smoothed out or even removed after the Kick-Off meeting and the three (3) technical meetings and that the partnership would

have shared by now a more homogenous view over the proximity to the project objectives.



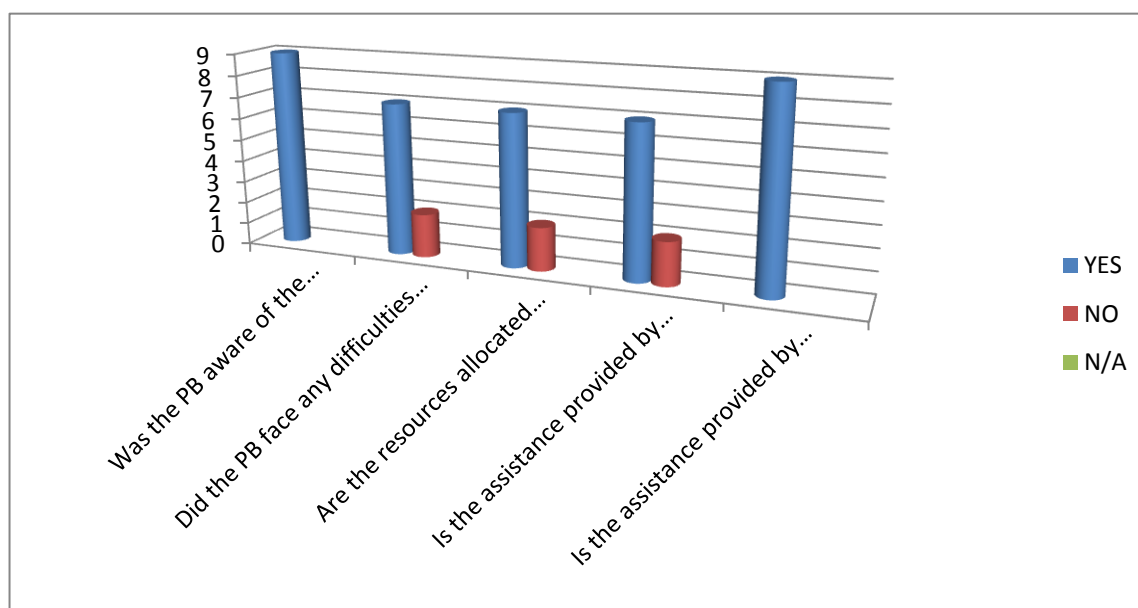
4.3 Administration

According to the approved timetable, the project started at 1/11/2017 and is expected to reach to an end at 31/10/2019 (duration 24 months). However, bearing in mind the long period between the proposal submission on 22 April of 2016, the approval by the 5th JMC in March 21 2017 and the fact that the subsidy contract was signed on 01/11/2017, i.e. 19 months after the initial submission of the proposal, we could argue that this time-gap in addition with many other administrative changes (replacement of many legal representatives of the involved bodies) did not help at all the maintenance of the administrative capacity and readiness of the PBs. On the contrary, we might mention that this definitely contributed towards the 'alienation' amongst the involved actors and to the disorganisation of the overall administrative consistency which was already set-up due to the constant communication that took place prior to the proposal submission but subsequently was lost due to the 19 month delay as described above. Furthermore it should not be neglected that the partnership is one of the largest amongst the approved projects (9 PBs) with the members coming from different areas of the administration.

On the other hand, the project official documents were ensuring the tools in order to assist the administrative efficiency through the establishment of a Project Steering Committee, assuring the continuous surveying of the project progress.

QUESTIONS CONCERNING THE ADMINISTRATION OF THE PROJECT		YES	NO	N/A
11	Was the PB aware of the administrative procedures at the beginning of the project?	9		
12	Did the PB face any difficulties in fulfilling its administrative obligations?	7	2	
13	Are the resources allocated for Project Management adequate to the administrative effort needed?	7	2	
14	Is the assistance provided by the LB considered sufficient for the Partner?	7	2	
15	Is the assistance provided by the JS sufficient for carrying out the activities?	9		

Assessment: As it comes out by the given answers in the specific questionnaire section, the PBs are definite on the fact that were indeed aware of the administrative procedures (Question N°11) of the project during the official start-up. This to one point reflects the background and the experience of the involved actors in previous project implementations (former programming periods). The vast majority (7 out of 9) of the PBs (Question N°12) also declares that they have not faced any significant difficulties in fulfilling their administrative obligations. Most of them (7 out of 9) feel that (Question N°13) the allocated resources are enough while the same percent have the feeling that the provided assistance by the LB is considered sufficient for the PBs.



Not to be neglected that the two (2) PBs which share the different opinion constitute an important landmark for the project implementation so far, since they draw a specific statement of (at least to one point) lack of efficient support by the LB (Question N°14) and this is something that is indeed worrying. Not the same reflection is imprinted when the same question is asked about the JS assistance (Question N°15), where all the PBs share the same positive view.

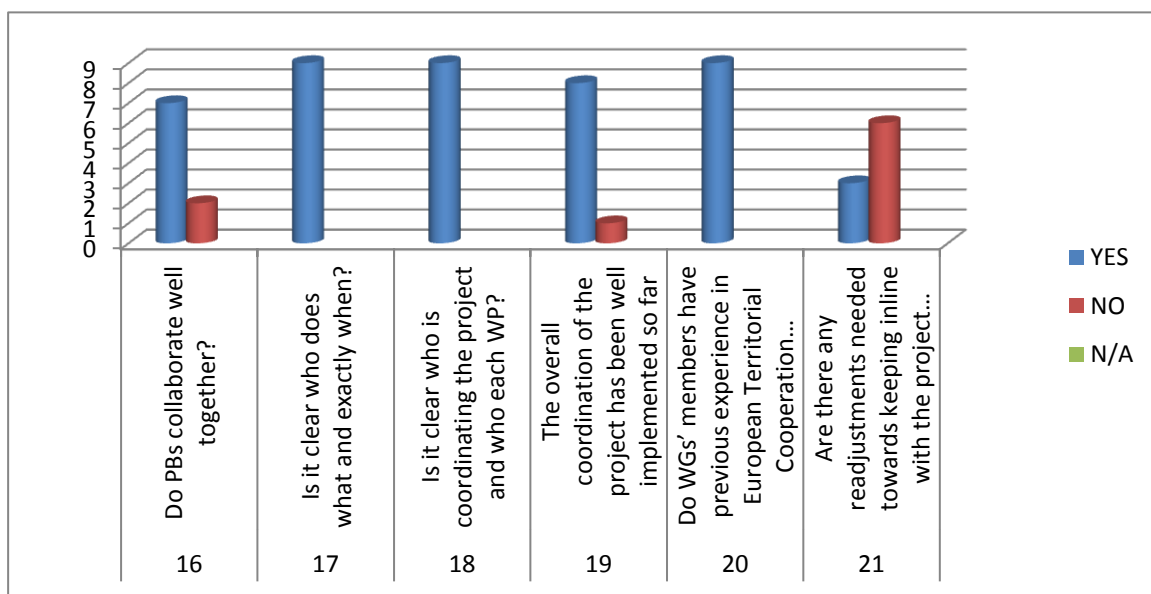
4.4 Collaboration

A partnership can be defined as a collaborative relationship between different organizations. The purpose of this relationship is to work towards a shared goal through a division of labor that all parties agree on. A genuine, fair and clear agreement between the parties is of a key importance since the quality of the collaboration has a direct reflection to the overall project coordination and implementation efficiency.

Assessment: To that end and as far as the questions regarding the collaboration amongst the PBs are concerned, the majority of the partners seem satisfied regarding the quality (Question No16) of their collaboration, while 2 out of 9 express their concerns by being negative on this question. On the other hand the actors seem very sure about the role of each beneficiary (Question N°17) and are totally aware about the actor in charge (Question N°18) of the project coordination and the beneficiary in charge of each separate WP. The vast majority of the PBs do believe that the overall coordination of the project so far (Question N°19) is decent while all the PBs have significant background in ETC programmes as they have participated in other projects in the past.

	QUESTIONS CONCERNING THE COLLABORATION AMONGST THE PBs	YES	NO	N/A
16	Do PBs collaborate well together?	7	2	
17	Is it clear who does what and exactly when?	9		
18	Is it clear who is coordinating the project and who each WP?	9		
19	The overall coordination of the project has been well implemented so far.	8	1	
20	Do WGs' members have previous experience in ETC Programmes?	9		
21	Are there any readjustments needed towards keeping in line with the guidelines & objectives?	3	6	

The question N°21 seems to divide the questioned PBs since in response to the question whether there is a need of readjustments towards keeping in line with the project guidelines and objectives, 3 out of 9 PBs state that there is indeed a need of that while 6 are negative.



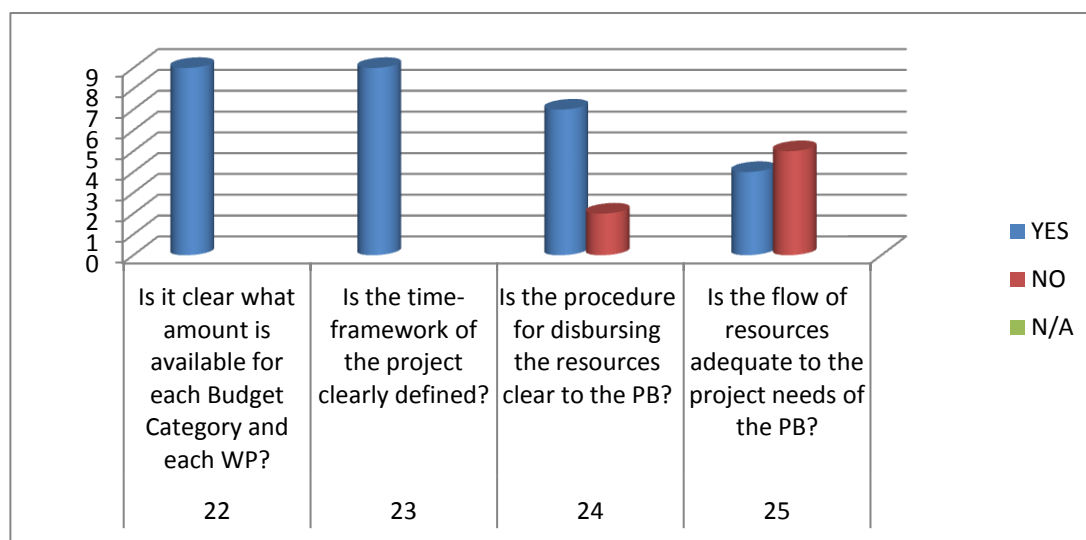
4.5 Resources

The last set of questions was related to the available resources of the project. As it is clear the total budget of the project is co-financed by the ERDF (85%) and by own sources (15%) which in both countries is covered by the national contribution (Public Investment Program in case of the Greek PBs). The initial budget of the project was revised by the JS by some 160.000,00 € (14% of the initial budget) and this was received with mixed reactions by the PBs. However, being almost a year long inside the official start of the project, the level of the contracted amounts as well as the made expenditures seem to be low, a fact that brings concern about the absorption rate that is projected to be achieved for the year 2018.

Actually the most worrying fact being deducted by examining the documents is the pretty obvious conclusion of having two contradicting groups of PBs depending on the level of the rate of expenditure. There is a group which is steadily moving on through periodical consistency on the procurement procedures and consequently contracting and the other group which has not yet contracted anything at all.

	QUESTIONS CONCERNING THE AVAILABLE RESOURCES	YES	NO	N/A
22	Is it clear what amount is available for each Budget Category and each WP?	9		
23	Is the time-framework of the project clearly defined?	9		
24	Is the procedure for disbursing the resources clear to the PB?	7	2	
25	Is the flow of resources adequate to the project needs of the PB?	4	5	

Assessment: To that end and by examining the answers of the given questions all the PBs responded that it is crystal clear which the corresponding amounts (Question No22) are for each WP and BL respectively. The time framework of the Project seems also to be clear for the PBs (Question N°23) since all of them were positive that they are aware of it. As far as the question about whether the procedure for disbursing of the resources is clear enough or not to the PBs (Question N°24), there are two PBs which declare that not all of them are quite sure about the procedure. The most worrying point seems to be the last question of the section (Question N°25), where it is found that the opinions are split between one group of PBs which believe that the flow of resources is adequate to the project needs and another one which does not share the same belief. This may be at one point normal since a long delay in the funds' transfer to the PBs was recorded in the first period of the project. However the problems referred to have now been resolved.



5.0 General Conclusions

As the report refers to the 1st and 2nd implementation semester, there is no significant impact of the project's physical object to be considered and to that end it is only a specific number of elements which can be examined which do refer to possible

deviations by the initial framework of the project proposal as explained above. The project seems to face the problems which are often found during the first to mid stages of projects of similar scale.

A significant factor which might be taken into consideration is obviously the delay of the LB to contract and consequently implement the actions on which other (follow-up) important actions depend and are therefore delayed causing multiple problems to the project implementation (even to the PBs collaboration too). As far as the collaboration amongst the PBs is concerned and after the difficult first phase of the project, the Partnership now seems to work better and in a faster pace as well as demonstrating a better understanding of the procedures. However, taking into account the significant delays in the beginning and in addition the delayed beginning of implementing certain activities, it is recommended that the project partners should accelerate the implementation of the activities so as to ensure their effectiveness. The expressed worries (at some level) about the availability and the capacity of the financial resources of the project are understood, since a. o. initially the PBs had faced a significant reduction of their budgets by the JS.

The project seems to have enjoyed quite a slow to medium developed kick-off phase. The first meetings (Kick-Off and technical) in Komotini, Haskovo and Krumovgrad seem to have supported the development of team spirit and common approaches leading to overcome a series of bureaucratic obstacles. Even though the evaluation process of the project did show positive values and estimations from all the PBs, it seems that the problems are minimized with the exception of the ones which have not yet been efficiently faced and are now starting to cause several consequent problems which - as the time passes by - will swell more and more leading to project deviations even with risk to jeopardize critical actions or to keep irreversibly the rates of the absorption below the desirable. The most important problem at the moment is the delay of specific actors to be actively involved in the project. Another issue which has to be tackled is the overall coordination effectiveness by the LB due to the high number of PBs and the demanding nature of the project. Also, the consistence of the partnership is made of different kind of bodies (development agency, academic institution, municipalities, public health services, non-profit bodies). This leads to additional communication burdens as a consequence of the complexity of the communicating language contributing to further delays. The municipalities involved in the project are small bodies with limited capacity in complex

project implementation and technical knowledge concerning e.g. the purchase of equipment in conjunction with the required procurement procedures. However, they indeed have the will to be a vital part of the project and already take advantage of the benefits of it. Some of them have previous experience in ETC project implementation which is also a valuable asset.

As a sum-up to the above mentioned and with the exception of the specific points, it appears that the project is comparatively well on track: the project partnership is co-operating comparatively well, bearing in mind the number and the diversity of the actors involved, (there are however slight indicators about dissatisfaction).

All project meetings took place on time and seemed successful and all other administrative processes seem to develop smoother in comparison to the initial months. This topic of the project and the expected results are worthwhile according to the legal representatives of the bodies and involved experts and this essential element gives both researchers and policy makers a great tool for the benefit of the inhabitants of the targeted areas. Undoubtedly, all partners contributed from the very first day to the different development steps.

6.0 Outstanding Issues or Concerns

As this is still the beginning of the project, a little part of which has been activated, any outstanding issues or concerns will be explored and depicted at the interim report. However, it is of critical significance that the LB should resolve administrative issues which affect the overall time-framework and proceed with the contracting and the implementation of the project deliverables.

7.0 Project Successes

Regardless of the delays in the commencement of the project - which were not always related to the partnership - it seems that the project partners were considerably motivated, as most of them started tendering and contracting procedures expected to be finalised during the next semester.

8.0 Other Findings

During the evaluation process in September 2018, the external evaluator was in contact with the responsible for the specific deliverable partner (PB8) as well as with the Lead Partner of the project via email, telephone, and face-to-face meetings with project

partners. The coordinator provided the evaluator with all relevant information, documents, and data, in a timely manner and gave access to all parties involved in the project.

The overall working atmosphere between the specific activity coordinator (PB8) and the evaluator was open and professional, allowing different points of view to be properly addressed. In addition to this, there was a general agreement between partners in regard to how external evaluation should be placed in the developed project, which methods and instruments should be developed, adapted and implemented and how the received data and information should be evaluated to ensure a positive development of the project.

Although the project seems to be in a relatively good condition, the following recommendations are made for the implementation of the second half of the project (see chapter 9.0).

9.0 Recommendations

I Partnership Consolidation

Considering that a sound partnership makes up the basis of a successful project implementation, taking also into account the complexity of the “The Healthy Municipality” undertaking, PBs should put more emphasis on deepening the relations between each other and on strengthening the bonds between them in order to secure results of the efforts so far and stabilize the partnership.

To this end more frequent meetings either in conventional form (physical meetings) or on line e.g. via skype etc. should be put on the agenda.

In the same context LB should regularly communicate with the individual PBs and support them in achieving the various management indicators (timetable, absorption rates of resources etc.).

Besides it shouldn't be viewed as granted the anticipation of the difficulties by the partners at each stage of the project. Intense communication work with a focus on those partners, which seem more challenged, should empower and encourage them, thus contributing to the project success.

II Decommitment of Resources

Despite the fact that a number of difficulties the partnership was confronted with in the period of examination were not generated by the PBs themselves, the Healthy Municipality project faces the risk, as most projects of the Greece Bulgaria Cooperation Programme, of losing resources in case that the 20% threshold might not be reached by the end of the year 2018.

On the other hand and considering that PBs are at a rather mature stage to launching a number of calls for tenders (e.g. on supply of equipment) LB should urgently check the level of readiness at each PB and provide any support to those partners which are close to completing the preparation of their procurements, so as for them to directly proceed to publishing the tenders.

III Decentralizing management

Taking account of the size of the partnership along with the large number of tasks for the PBs to carry out the LB should make use of the "WP Coordinator" structure of the project and proceed to activating it. Latter should relieve the LB from a large part of communication work and provide him with the possibility to concentrate on the overall project management tasks and on the quality of the project outcomes.

IV The STPP

Though the project management is overloaded with a large number of duties and tasks and challenged by the capacity of each individual partner, it is considered necessary to raise the STPP document to a guiding document for the project implementation so as to monitor progress of activities upon the milestones encompassed in the particular document. Since it is the PBs themselves, which have defined their own milestones in the specific document, LB should be facilitated in using the specific document as a common to all PBs progress monitoring tool.

V Reviewing timetable

It is suggested that the LB sets a time limit (e.g. a two months period), where the evolution of the progress indicators should be assessed and decisions on potential revision of tasks will be made. Latter might help both the LB and the PBs to verify their real capacities vs the needs of the project and then reschedule and/or redefine some of the monitoring parameters.