

EXECUTIVE SUMMARY

5. This evaluation is part of the Evaluation Plan related to the Human Capital Operational Programme (HCOP) 2014-2020 and it aims at examining the efficacy, effectiveness and impact arising from the interventions carried-out in the field of social inclusion. The evaluation must also outline the factors contributing to the success or failure of implementation, as well as the sustainability of funded actions. This report focuses on extracting the lessons learnt further to the implementation of HCOP 2014-2020, while the cut-off date for the data which was extracted and used under this evaluation exercise was 31 December 2020.

6. The interventions covered by the evaluation fall under several specific objectives of the Programme and are broken-down into seven themes (numbered from 2 to 8 in the Terms of Reference), as follows:

- **Theme 2** - Evaluating the contribution of HCOP to reducing the number of persons at risk of poverty and social exclusion within the marginalised communities (Area of intervention – specific objectives 4.1, 4.2, 5.1, 5.2);
- **Theme 3** - Evaluating the contribution of HCOP to improving the digital literacy of the population in the disadvantaged communities (Area of intervention – specific objective 4.3);
- **Theme 4** - Evaluating the contribution of HCOP to overcoming the vulnerability situations (Area of intervention: specific objective 4.4);
- **Theme 5** - Evaluating the contribution of HCOP to increasing the quality and accessibility of social services (Area of intervention: specific objectives 4.5, 4.6, 4.7 and 4.14);
- **Theme 6** - Evaluating the contribution of HCOP to increasing the quality and accessibility of medical services (Area of intervention: specific objectives 4.8, 4.9, 4.10 and 4.11);
- **Theme 7** - Evaluating the contribution of HCOP to ensuring the transition from the institution-based system to community-based services (Area of intervention: specific objectives 4.12, 4.13 and 4.15);
- **Theme 8** - Evaluating the contribution of HCOP to reinforcing the capacity of social economy entities to operate on a self-sustainability basis (Area of intervention: specific objective 4.16).

7. The evaluation methodology was built around the nine evaluation questions of the Terms of Reference and it considers: the progress made in the sector and the observable progress attributable to the interventions; the economic benefits resulting therefrom; the indirect, unintentional or spill-over effects; the sustainability; the mechanisms facilitating the effects; the best practices; and the methods whereby things might be done better.

8. The evaluation was carried-out using a wide variety of combinations of evaluation methods and tools, such as: interviews, surveys, focus groups and workshops, expert panels, quantitative analysis methods, including counterfactual methods.

9. Significant constraints were faced during the evaluation in terms of data availability, accessibility and quality. This required the adjustment of the data collection and analysis methodology by identifying new sources and by adding data quality verifications, while the interpretation of findings was adapted to the methodological limitations. The methodological limitations were anticipated as early as in the initial phase, therefore enabling the application of measures aimed at minimising the impact of such limitations on the robustness of the evaluation, as presented below. The evaluation was conducted between April and November 2021, during a time period that was affected by the COVID-19 pandemic restrictions, which limited the physical interaction, but also by the availability of stakeholders to participate in the evaluation, specifically the availability of the staff operating in the healthcare system, who was involved in the interventions carried-out under Theme 6.



Findings and conclusions of the evaluation

10. The progress achieved in the implementation of interventions in the field of inclusion is low overall, therefore the observable effects are limited and the plausibility of their occurrence is conditional on whether the implementation mechanisms would be operational until the end of the implementation period, so as to enable the recovery of delays.

11. After the lapse of two thirds of the programme duration, most of the projects are under implementation. To be noted, however, that better progress was recorded in respect of certain interventions, such as the interventions aimed at reducing social exclusion and poverty, while other interventions, for example those entailing preparatory phases and the creation of new mechanisms, are still at the outset of service provision, as it is the case of the mechanism concerned with the community-led local development (CLLD).

12. The modest progress achieved in respect of achievements and results is mostly attributable to the late launching of the calls, to the long duration of evaluation, selection and contracting processes, as well as to the difficulty of establishing new implementation mechanisms.

13. As to the digital literacy interventions in the form of Information and Communications Technologies (ICT) applications in the field of social and healthcare services, no calls for projects have been launched and there is no vision concerning the reconfiguration of the set of interventions.

14. The intervention of HCOP in the field of social inclusion is taking place in a context of an improved overall situation of vulnerable groups and of persons and communities at risk of poverty and social exclusion, yet the intervention is far from the European average level for most of the indicators. Progress is also recorded in the provision of social services in terms of the regulatory framework and accessibility of such services, yet gaps are still present regarding the funding, the provision of specialised staff, the attractiveness of the profession of social worker and the person-centred inclusive and integrated approach at community level.

15. At programme level, it is found that the distribution of funding is not correlated with the priority needs, being influenced by the capacity to attract funds in the case of non-competitive calls for projects or by the call launching schedule. An example in this regard is the digital literacy, in respect of which no calls for projects were launched despite the fact that Romania is deficient in the implementation of the European Digital Agenda due to the low level of elementary digital skills among the population and also due to the reduced use of digital services in the public space and at the workplace. The need for intervention is significant as it concerns most of the population; phased, national-level actions are required, and such actions should be supported by multiple institutions. The interventions meant to overcome the vulnerability situations were only limited to two groups, namely the elderly persons and the victims of domestic violence; subsequently, in the context of the COVID-19 pandemic, the interventions also concerned the persons affected by the effects of the pandemic, despite the fact that other groups were also defined in the programme.

16. The evaluation produces evidence regarding the improved situation of participants or of the stakeholders' capacity in the case of projects which were completed or are in an advanced stage of implementation. The contribution of HCOP funding is paramount, as the absence thereof would render the implementation impossible due to the limited availability of other alternative funding sources.

17. Successful projects or projects with remarkable results were implemented. „Prima cameră” (*The first room*) is one of the most successful interventions in the field of social inclusion of children in institutional care; the intervention is innovative in nature and outlines mechanisms capable of being used for designing the interventions for the next funding period. The systemic project „Crearea și implementarea serviciilor comunitare integrate pentru combaterea sărăciei și a excluziunii sociale” (*Setting-up and implementation of integrated community services in view of combating poverty and social exclusion*)

ensured the introduction of integrated teams in 139 marginalized communities and the setting-up of a partnership and of practical collaborations in the field of integrated community services at the level of the Ministry of Labour, the Ministry of Health and the Ministry of Education. Tools and methodologies were developed and implemented for integrated services, including online, such as the digital platform for foster parents developed under the „Team up” project and the „Servicii Comunitare Integrate” (Integrated Community Services) (SCI) application for digital case management. The „Bunicii comunității” (*Community grandparents*) intervention stands out due to its extent, as it comprises 77 funded projects out of the 84 projects intended to cope with the vulnerability situation.

18. In the logical intervention mechanism, the employment of vulnerable persons appears as an element that reinforces the impact of the interventions even where such interventions do not specifically address employment measures. The counterfactual analysis concerning the impact of employment support measures indicates that such measures provide the vulnerable groups with an opportunity to enter the labour market, yet the quality of employment is low both in terms of earnings, and in terms of continuity and length of employment. Employment is also the main source of the economic benefits which may arise from the interventions carried-out in the field of inclusion, through the salary-related revenues collected to the state budget; however, employment sustainability is required in order to compensate for the investment.

19. As shown by the implementation process, the complementarity of interventions in the social infrastructure with the interventions concerned with the development and provision of services for vulnerable groups is a challenge both for the European Structural and Investment Funds implementation system, which is unable to ensure a fluent and coordinated process between the two programmes, i.e. HCOP and ROP, on one hand, and for the local stakeholders and the public authorities and dedicated structures operating at local level, such as the Local Action Groups set-up for this purpose and for which capacity building remains a need to be supported, on the other hand.

20. The expected impact is conditional upon the complementarity of results with other projects, such as the projects funded under the ROP or with other national programmes and investments. For example, the implementation of the screening programmes must be complemented by an increased diagnosis and treatment capacity for the tested persons and integrated into a strategy capable of ensuring a predictable allocation of resources and a fluent implementation thereof.

21. The sustainability of interventions is a critical issue as it depends on the funding of activities once the projects have completed, but also on the availability of human resources in areas that are already affected by a heightened deficit, on one hand, and on the operational nature of mechanisms required for the integrated functioning of services addressed to vulnerable persons, on the other hand. Due to their fragility in the competitive environment and to the lack of support measures justified by the need to endorse the employment of persons belonging to vulnerable groups, the social economy entities are faced with a high risk in terms of sustainability.

22. Apart from the expected effects declared in the programme, the interventions also produced other effects, namely indirect and spill-over effects, among which: increased solidarity among the family and community members; enhanced cooperation among stakeholders; increased confidence in the public services (diminished in some cases as a result of the fact that services were ceased upon the completion of the projects); a better understanding of social inclusion and of vulnerable persons in communities; collaboration networks created between training participants; services/products provided by the social economy entities to the benefit of the community; developed social entrepreneurship skills.

23. The implementation of projects is affected by a substantial workload dedicated to reporting and communication to/with the programme authorities. The problems raised and detailed in the thematic reports include the excessive requirements relating to justification and reporting, as well as the low efficacy and adequacy of reporting tools. The evaluation reveals a difference of perception between the programme

authorities and the beneficiaries as regards the level of bureaucracy, which, on one hand, is perceived as excessive by the beneficiaries and, on the other hand, is perceived as necessary in view of the control level pursued by the authorities. Although there is proof of simplification in the implementation of HCOP compared to SOPHRD, the beneficiaries expressed their disappointment in the fact that the progress is insufficient to reduce the useless consumption of resources which has been accumulating at the level of a very high number of projects, for a long period of time.

24. The COVID-19 pandemic and the restrictions related thereto influenced the implementation context of the projects and the initial implementation schedule thereof, therefore requiring a large number of adjustments of project activities to the factual situation, specifically in regard to the legislative unpredictability, uncertainty and instability component, so as to enable remote decision-making methods.

25. The evaluation provides numerous lessons learned, experiences to be replicated or problems to be avoided. The implementation experience until the time of evaluating the HCOP interventions in the field of social inclusion indicates numerous lessons learned and best practices, which are described in each thematic report; among those are: (1) the cross-sector mechanism for the implementation of interventions is a key instrument for an effective fight against marginalisation; (2) local governance creates undisputable benefits in terms of mobilising the local stakeholders and in terms of relevance for the specific needs of each community; (3) the deinstitutionalisation process can be improved by an increased duration of interventions targeting children, to at least one stage of education, by integrating the interventions targeting deinstitutionalisation with employment measures and by a better prioritisation of needs; (4) improvement of data collection systems pertaining to vulnerable groups and their situation, so as to allow for the evaluation of interventions and also for the development of evidence-based policies; (5) both the implementation and the efficacy of interventions in the field of social economy were favoured by: the implementation mechanism based on *de minimis* aid scheme administrators, a concept relying on integrated intervention measures (information, training, counselling, monitoring); a good communication with the *de minimis* scheme administrators; flexibility in the implementation of online training programme following the outbreak of the pandemic.

26. The factors determining the success of interventions in the field of social inclusion, at least in terms of impact and sustainability effectiveness, are: (1) the involvement of the administrative territorial unit (ATU) as a key stakeholder for the development of social services and for the integration thereof into the community; (2) the attraction of competent human resources, the attraction of suppliers with an adequate capacity, the attraction of financial resources and the coordination of all resources; (3) a predictable allocation of programme resources so as to cover the needs related to the provision of services and to allow suppliers to plan their activities and minimise the risk of financial bottlenecks.

Recommendations

27. The recommendations detailed in the thematic reports and summarized below were prepared on the basis of the conclusions of the evaluation and concern measures on the legal and strategic framework, measures on the implementation period left for the HCOP interventions and measures on the interventions in the field of social inclusion for the 2021-2027 programming period.

Legislative or strategic-level recommendations

28. The following recommendations are issued in view of supporting the marginalised communities: the legal framework should be improved so that to enable the administrative territorial units to provide the funding of the human resources employed under the project, to grant subsidies and to prepare strategies at an early stage. Also, the continuity of long-term support during several funding cycles should be ensured; a better complementarity with other programmes should also be ensured so as to reach the intensity and scope required to achieve the expected impact and the substantial economic benefits.

29. It is recommended to implement public policies capable of incentivising the social involvement of (public and private) institutions which might constitute digital literacy stakeholders. By means of incentives granted to companies, the Ministry of Research, Innovation and Digitalization could implement measures aimed at skills development and at the use of digital tools for interacting with the public administration.

30. It is our recommendation that the objectives which were not achieved under the national strategy „Agenda digitală a României 2020” (*National Strategy for the Digital Agenda for Romania - 2020*) be transferred and monitored for the period 2021-2027 as part of the objectives of the Digital Education Strategy for Romania 2021 – 2027, which is implemented by the Ministry of Education, and as part of the ESIF programmes for 2021-2027.

31. The legal and institutional framework for the development of social services should be improved, with particular focus on: updating the cost standards; stimulating the ATUs for them to develop social services in communities, particularly in rural areas; increasing the attractiveness of positions in the field of social services, including by salary increases; increasing the level of social services contracting for the social services intended to such categories of vulnerable persons and provided by NGOs or by other private sector suppliers. Awareness-raising among the representatives of ATUs which have not developed social services, by involving them in events under the best practice dissemination network, together with all categories of stakeholders.

32. The funding of screening programmes should be continued and the Ministry of Health should strengthen its strategic role so as to provide the capacity needed to launch programmes without delays, to ensure the complementarity with other programmes and to integrate the pilot programmes, once completed, into the national programmes and into the information campaigns carried-out at national level.

33. The development of the legal and regulatory framework for the social economy should be continued by setting-up a financial support mechanism and by establishment of fiscal facilities for all existing structures of the social economy, not only for those concerned with insertion, including preferential public procurement arrangements for goods and services provided by the social economy entities (reserved contracts).

Recommendations on the implementation of HCOP 2014-2020

34. For the remaining implementation period, the actions of the Managing Authority (MA) and of the Regional Implementing Organisations (RIOs) must be directed towards speeding-up the implementation of contracted projects, with focus on: reducing the deadlines for response, endorsement and approval of beneficiaries’ and payment execution documents; provision of clarifications on the interventions (the specific objectives of the Programme) for which no calls have been launched; and provision of a clearly disseminated timeline to ensure a clear and reliable overview on available funding for the social services to be supported.

35. The implementation mechanisms should be optimised, as follows: the CLLD mechanism should be optimised so as to improve the coordination between the two funding programmes during all the implementation phases.

36. The programme authorities should improve the monitoring system, with focus on: collection of data which is unavailable for certain indicators, for example the indicators on interventions in marginalised communities; data quality assurance; and prevention of data inconsistency for data extracted from different sources of the Programme.

Recommendations on the implementation of HCOP 2021-2027

37. **For the next programming period**, the funding of complementary interventions should be done under the same multi-fund programme, the use of simplified costs should be expanded, the existing costs should be readjusted or the best possible approximation of real costs should be ensured.



38. Our recommendation is: to continue the implementation of effective projects and of successful interventions; to provide the funding needed for sustainability; to continue the use of the CLLD mechanism and to provide further support for capacity building of the local stakeholders involved in this mechanism; to extend the intervention so as to cover the marginalised communities which were not eligible under the current programme.

39. Priority should be given to launching a broad simplification process regarding the implementation of the current and future programme. The analysis and problem-solving methodology regarding the excessive bureaucracy and the ineffectiveness of processes should consider the involvement of stakeholders and the awareness-raising of such stakeholders so as to prepare the implementation of solutions, but also to understand the interests and attitudes in view of identifying the adequate solutions.

40. The future 2021-2027 programmes should adopt a **systemic approach in the field of social assistance through interventions supporting the application of national and local strategies in the field of social inclusion**; this approach should comprise two levels - social assistance system and social assistance beneficiaries and the use of pilot projects testing specific approaches, in view of developing policies on the basis of project results.

41. In view of supporting the social economy entities, the programme-level recommendations are: increasing the period of support for start-ups; further support during the period 2021-2027 so as to enable the development of already established social economy entities; inclusion of measures aimed at developing entrepreneurship skills complementary to the funding granted to the entity.