



REPUBLIC OF SLOVENIA
GOVERNMENT OFFICE FOR DEVELOPMENT
AND EUROPEAN COHESION POLICY



FINAL PROGRAMME REPORT ON THE IMPLEMENTATION OF THE NORWEGIAN FINANCIAL MECHANISM PROGRAMME 2009–2014 IN SLOVENIA

Programme name and number: NORWEGIAN FINANCIAL MECHANISM PROGRAMME SI05
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1. Executive summary

Why was the programme needed?

Slovenia is facing rapid changes and development challenges in all areas that are important for societal progress and prosperity. The Slovenian population ranks health – an important element of quality of life and welfare – at the very top of the scale of values, while health also represents an important social capital, which is a prerequisite for social and economic development. Health system can significantly contribute to reducing health inequalities by securing equal access and utilization of health services. This includes also preventive and other public health programmes.

Slovenia's public health and primary health care structures are relatively well-organised. Preventive services in primary health care are fully covered by health insurance but there are no additional financial resources for quality assurance, research, development and testing of the new innovative approaches, programmes and tools. Financial resources for public health research, testing and introducing innovative pilot projects and for supporting non-governmental organisations are very limited. Norwegian financial mechanism offered opportunity to support development work, pilot testing, partnership building in local communities, programmes and interventions that can significantly contribute to the improvement of public health and reduction of health inequalities.

The current over-representation of men in power and decision-making in Slovenia are not only structural and multifaceted, but are also grounded in and maintained through traditional gender roles. While many structural barriers that may impede women's attempts to climb the corporate ladder have been removed through legislation, other significant structural factors limit women's career opportunities. The traditional division of labour, which defines women's responsibility as caring for the family and that of men as providing for it, certainly acts as a persistent barrier to women's advancement.

Various efforts to promote women's access to political and public life and their input into the decision-making process have been taken. However, there were very limited effects of these measures. Slovenia is aware that it must ensure full exercise of women's right to participate in public life and in political and economic decision-making at all levels. Development and implementation of gender equality policy is financed primarily from the state budget. Financial resources for gender equality research, innovative pilot projects and for supporting non-governmental organisations are very limited. Norwegian financial mechanism offers option to support development work, pilot testing, partnership building in local communities, programmes, interventions and awareness-raising activities that would significantly contribute to better understanding of gender issues and gender equality policy.

What did the programme achieve?

The SI05 programme was designed in line with national priorities in two areas; i/ strengthening of public health and primary health care capacities in the area of disease prevention and health promotion; and ii/ development of effective gender equality policy. The programme was very successful as regards the achievement of planned programme outputs and outcomes.

20 projects were implemented within the programme area *Public health initiatives*; of which 19 projects were selected under a call for proposals and 1 project was pre-defined. The programme in the area of public health initiatives was designed and carried out in partnership with the Donor Project Partner (DPP) Norwegian Institute of Public Health. The DPP facilitated networking and transfer of know-how through bilateral relations and study visits. The project promoters emphasised that Norway Grants and cooperation with the Norwegian partners were the crucial aspect adding value to the projects.

All projects achieved planned results; in some cases results were significantly surpassed. The implementing strategies and awareness-raising campaigns for healthy lifestyle effectively targeted the general public, and professionals in terms of the use of new work methods. New models of upgraded preventive health care programmes for children, young people and adults were designed and piloted with the focus on community approach to promote health and reduce health inequalities in the local community. Such approach provides response to the needs of the population in the local environment, better access to services and treatment, development of supportive networks and self-help groups, and takes into account formal and non-formal forms of help.

6 projects were implemented within the programme area *Mainstreaming gender equality and promoting work-life balance*, of which 5 projects were selected under a call for proposals and 1 project was pre-defined. Implementation of projects aimed at gender equality successfully raised awareness about gender issues, promoted research on gender issues and increased understanding of equal/unequal power relations between women and men. The analysis of the historic context and documentation of current challenges related to gender equality in Slovenia and organisation of an international conference on exchange of good practices was the key to sharing and spreading the knowledge about this topic. An overview of the national legislation and panel discussions encouraged the development of a supportive environment for the introduction of gender equality-related legislative measures.

Considering achieving objectives, exceeding indicators and impact of some projects, it can be estimated that that in the areas *Public Health Initiatives* and *Mainstreaming Gender Equality and Promoting Work-Life Balance* there were no unsuccessful projects. As a good practice example two projects can be mentioned: project SI05-0011 "Active and quality aging in home environment" in the area Public Health Initiatives and project SI05-0025 "Fathers and Employers in Action" project in the area Mainstreaming Gender Equality and Promoting Work-Life Balance.

The greatest added value of SI05-0011 "Active and quality aging in home environment" project was to upgrade the existing home care system to a system addressing the needs of users, in particular of older users, in an integrated manner. Various services in the areas of occupational therapy, physiotherapy, nursing care, dietetics and physical exercise were delivered in the context of the project. Intervention proposals to adapt the living environment to reduced functional and cognitive capacities of older people were prepared in order to enable elderly people to remain in their own living environment as long as possible. The project developed proposals for changes to the system of long-term care at the local and national level.

The greatest added value of SI05-0025 "Fathers and Employers in Action" project was to design and test measures targeting only men and helping them to reconcile work, family and private life. A model called "Flexible package of measures ODA" was developed as a result of cooperation between working fathers, employers and trade unions. The project was dedicated to employers and general public with a view to raising awareness of the needs and benefits of reconciling work and family not only for women but also for men.

How were bilateral relations strengthened?

Bilateral relations at the programme level were implemented through 2 measures: i/ Preparation of project proposals and ii/ Fund for bilateral relations.

The preparation of project proposals was implemented by the programme operator in co-operation with the Embassy of the Kingdom of Norway in Budapest and with close involvement of the DPP Norwegian Institute of Public Health. Slovenia was relatively successful in finding Norwegian

partners; as many as 20 projects out of 26 projects included partners from Norway. In general, bilateral cooperation at the project level was very successful.

In the framework of SI05-0003 project "Equality in health for children and youngsters with autism and their families", the project promoter Institute of Autism Spectrum Disorders collaborated with the National Autism Unit within Oslo University Hospital in order to develop therapeutic education programmes targeted at reducing health inequalities in children and young people with autism and providing guidance to their families.

In the framework of SI05-0002 project "Towards better health and reducing inequalities in health", the project promoter National Institute of Public Health collaborated with the Norwegian Institute of Public Health in order to upgrade preventive programmes targeting children and youth and to develop a comprehensive programme of prevention of lifestyle-related diseases in adults.

In the framework of SI05-0001 project "Towards equalising power relations between women and men" the Ministry of Labour, Family, Social Affairs and Equal opportunities collaborated with the Norwegian Association of Local and Regional Authorities in order to exchange good practices and increase knowledge and awareness about social structures and aspects of power and influence that shape inequalities between women and men.

The Fund for bilateral relations supported networking, exchange, sharing and transfer of knowledge, technology, experiences and best practices between Slovenian project promoters and entities in Norway.

Co-operation between the two countries included study visits and professional cooperation as well as sharing of knowledge between both countries. The transfer of knowledge accelerated the development of Slovenian health sector. Also, knowledge of project partners about culture, political and socio-economic situation in both countries improved.

In terms of achievement of objectives at the programme level, it is the input of the cooperation with the Norwegian Institute of Public Health from Oslo that played a decisive role. Experience shows that good relations established between project partners from both countries are pursued even after the closure of projects and make an important contribution to sustainability of the results. The bilateral cooperation at the project level contributed to strengthening relations between Norway and Slovenia.

What will be the impact of the programme?

The programme had a very tangible impact on target groups during project implementation phase. The implementing strategies and awareness-raising campaigns for healthy lifestyle effectively targeted the general public, and professionals in terms of the use of new work methods.

Certain pilot projects which were implemented in the area of public health were later integrated in the public health system, which improved public health services for citizens. Given the projects' success, the country should investigate the possibility of co-funding such projects at a system-wide level. In order to ensure systematic and sustained financing of the solutions presented and tested within the framework of individual projects, the possibilities of expanding the public health network at the primary level and other funding opportunities should be further explored.

Projects funded with SI05 programme funds, represent an important leverage in terms of reduction of inequalities between user groups, prevention of lifestyle-related diseases and improved mental health services, but in order to achieve significant and long-term effect continuous and substantial funding for this type of activities has to be assured.

Implementation of projects targeting gender equality successfully raised awareness about gender issues, promoted research on gender issues and increased understanding of equal/unequal power

relations between women and men. The responses to the imbalances that persist in participation in politics at the local and national level were identified within the programme, and a research that analysed collective agreements in Slovenia and the role of social partners in promoting gender equality was carried out.

Since the share of women holding leadership positions in business and politics in Slovenia is still noticeably lower than the share of men, it is important to continuously raise awareness on the importance of women's participation in economic and political life and to promote work life balance, as well as to amend the current legislation to increase women's representation in decision-making positions.

2. Programme area developments

The SI05 programme covers two areas (i.e. strengthening of public health and primary health care capacities and development of effective gender equality policy) that are crucial for social and economic prosperity of any country. In order to achieve positive changes in these areas it is necessary to provide long-term support for necessary investments in infrastructure and for activities that aim at awareness raising of general public and training of professionals. It cannot be expected that significant results are achieved in a short time period. The programme and project implementation period was relatively short and therefore significant changes in areas covered by the SI05 programme cannot be observed. Furthermore, the total amount granted to Slovenia through the SI05 programme represents a very limited share of funds therefore it is not possible to directly attribute the changes in the statistical data for specific sectors or regions to the SI05 programme. It is also not possible to assess the concrete impact of the SI05 programme to the development of Slovenia in the recent years.

Slovenia is facing development challenges in all areas that are important for social progress and prosperity. With the aim of becoming a society that is capable of coping with social, economic, environmental and other challenges, Slovenia wants to create conditions and establish a systematic approach towards sustainable development. The main focus of Slovenian Development Strategy 2030 is the “quality of life for all”.

Slovenians rank health – an important element in the quality of life and welfare – at the very top of the values scale, moreover health is inextricably connected with social capital which is essential for social and economic development. It therefore comes as no surprise that one of the goals of Slovenian Development Strategy 2030 is healthy and active life. By 2030, Slovenia wants to increase life expectancy from 58.8 years to 64.5 years¹.

Slovenia's public health and primary health care structures are relatively well-organised. Public health workforce is gradually shifting focus from the traditional role (surveillance, identification of health hazards) to a more proactive, action-oriented and responsive approach to current complex public health problems. However, the capacity to meet complex public health challenges remains limited, in particular as regards non-communicable diseases, mental health and healthy lifestyle in different socio-economic groups. There are significant differences in health status between the populations of municipalities with the highest and lowest income.

The SI05 programme was designed in line with national priorities to strengthen public health and primary health care capacities in the area of disease prevention and health promotion with specific

¹ Source: Slovenian Development Strategy 2030, available at <http://www.svrk.gov.si/>

focus on NCDs, mental health and health inequalities. It was very successful as regards the achievement of programme outputs and outcomes.

Even though there are many good practices and areas of excellence in public health, key functions and infrastructure need to be continuously strengthened and made more coherent to be able to address the complex nature of health problems. The government commitments to the health of the population needs to be matched by programmes and processes at the national, regional and local levels if effective public health strategies are to be delivered.

The pattern and magnitude of health inequalities in Slovenia are similar to those found in other EU countries. Further significant improvements in the population health indicators can be achieved if Slovenia improves the wider social, economic, and physical environment in which people are born, live, work, and age, as well as the accessibility and quality of health programmes and services.

As regards gender equality policy, the Slovenian national priorities are to identify, develop, implement and support policies and activities that will address unequal power relations between women and men and thus unequal distribution of social power and influence between them, and increase representation of women in economic, political and public decision-making. In Slovenia, the share of women holding leadership positions in business and politics is still considerably lower than the share of men. It is therefore important to raise awareness on the importance of women's participation in economic and political life, support the relevant NGOs and other groups working for mainstreaming gender equality and promoting work life balance, as well as to amend the current legislation to increase women's representation in decision-making positions. Reconciliation between work and family-life is a pre-condition for more equality between women and men as regards participation both in the labour market and leadership positions.

The SI05 programme was designed in a way that it corresponds with Slovenia's national priorities to improve the situation of women and to advance the development of effective gender equality policy. The achieved outputs and outcomes were in line with the programme goals.

Slovenia ranks relatively high as concerns the indicators of gender equality. It holds the 10th place in the EU with the gender equality index 68.4 (EU average is 66.2)². The goal of Slovenian Development Strategy 2030 is to increase the gender equality index to at least 78 by 2030. In order to achieve this, it is essential to continue to support environment in which gender equality is understood as a public good for all.

3. Reporting on Programme outputs

3.1 Selected projects

19 projects selected under a call for proposals were implemented within the programme area *Public health initiatives*:

- 7 projects in the sub-area Reducing inequalities between user groups;
- 6 projects in the sub-area Prevention of lifestyle-related diseases;
- 6 projects in the sub-area Improved mental health services.

The project results set under all of the projects have been achieved, in some cases even significantly surpassed. For instance, the number of trained professionals in health inequality and related topics and issues, the number of trained professionals in lifestyle-related chronic diseases prevention and the number of trained primary health care and other professionals in mental health was

² Source: Slovenian Development Strategy 2030, available at <http://www.svrk.gov.si/>

considerably higher than expected. The reason for this in most cases lies in planning which was too modest. Even though it was clear that the sub-areas covered by the programme needed intervention and positive feed-back of target groups was anticipated, the actual response of target groups exceeded expectations. Also, due to careful planning and management of expenditures, project promoters were able to achieve more with limited resources granted to their projects.

Good project results significantly contributed to programme outcomes and certainly had some impact on target groups. However, the programme itself cannot have a long term impact on target groups, since it does not provide long-term funding to sustain the results achieved. Only projects that are able to continue with new financial sources will make a difference for target groups. (For more information on sustainability of project results, please refer to points 4.1 and 6 of this report).

Results of all projects in the area Public health initiatives were showcased at the conference "From Projects to a System-wide Solution" (Ljubljana, 26 October 2016). All project promoters emphasised that the Norway Grants and cooperation with the Norwegian partners were the crucial aspect adding value to the projects. Since all projects were so successful in delivering results, it is not possible to list them all. The key project results that significantly contributed to programme outputs are described below.

Within sub-area *Reducing inequalities between user groups* the following outputs should be pointed out:

- 10 different physical activity programs for children and youth, adults and elderly people with disabilities were developed with the aim of integrating people with disabilities into sport and thus reducing inequalities between user groups;
- 6 programmes with the aim of preparing people for old age, and an inter-sectoral support network for elderly care were established;
- Awareness raising campaign on healthy lifestyle was carried out for the Roma community, 5 pilot training programs and a plan for health care in the Roma settlements were developed;
- More than 4,000 therapeutic interventions for children with autism were carried out, training for professionals and parents was organized and a Respite centre for children and young people with autism was established;
- A multidisciplinary educational platform consisting of several tools for recognition and treatment of domestic violence was developed;
- Free activities of physiotherapy, occupational therapy, dietetics, nursing, speech language pathology and similar were delivered to 905 elderly, disabled or chronically ill people over 65 years old living at home.

The projects' outputs had a very tangible impact on target groups during project implementation phase, but long-term impact on target groups is questionable. The situation for target groups in the future will not change if long-term funding is not assured. In order to achieve significant and long-term effect in terms of reduction of inequalities between user groups, continuous and substantial funding for this type of activities has to be assured. (For more information on sustainability of project results, please refer to points 4.1 and 6 of this report).

Within sub-area *Prevention of lifestyle-related diseases* the following outputs should be pointed out:

- Over 1,000 people used new community-based testing for HIV, STD and counselling service, over 200 community workers and medical professionals/students participated in training and educational activities related to this topic; a comprehensive communication campaign was carried out;

- More than 1,200 pupils attended educational activities organized in primary and secondary schools with the aim of raising awareness about the negative consequences of risky or harmful use of alcohol, and a counselling office in Krško was established;
- 450 individuals aged over 55 from the Upper Gorenjska region participated in the newly developed programme for maintenance of good health for the elderly;
- 3 innovative intervention programmes for non-pharmacological treatment of obesity for children, youth and adults were developed and tested;
- Family model practices were modernized and upgraded through the development of two new clinical paths, family approach to obesity treatment was introduced and simulation centre for persons at risk was established in relation to the growing number of non-communicable chronic diseases.

The implementing strategies and awareness-raising campaigns for healthy lifestyle effectively targeted the general public, and professionals in terms of the use of new work methods. Projects funded with SI05 programme funds, represent an important leverage in terms of prevention of lifestyle-related diseases, but only long-term funding of before mentioned activities can give long term effects. As mentioned above, only projects that are able to continue with new financial sources will make a difference for target groups. (For more information on sustainability of project results, please refer to points 4.1 and 6 of this report).

Within sub-area *Improved mental health services* the following outputs should be pointed out:

- An innovative model of coping with peer violence in schools was developed which covered the theoretical/conceptual basis of the model, and focused on prevention activities and practical procedures and guidelines for dealing with peer violence to provide help to all directly and indirectly involved pupils. The manual instantly reached the majority of primary schools in Slovenia since it was distributed to all the participants as part of the study material at the annual national professional training for school principals. The manual is well accepted at all levels of educational practice and policy.
- More than 600 professionals were included in the programme for recognising mental distress and suicidal behaviour, 6 counselling centres were newly established and 3 counselling centres upgraded. People in mental health distress who received free counselling services, and mental health gatekeepers who were offered education on depression and suicide recognition were target groups. General public was addressed by means of a public awareness campaign (around 180,000 leaflets disseminated, TV and radio spot, posters, public lectures, etc...).
- A comprehensive 160-hour educational programme for supervisors was developed and 25 supervisors and 6 supervisors of supervisors were trained.
- The first Memory Centre that offers a multidisciplinary treatment for people with dementia and counselling for relatives was established in Slovenia.

Projects within this sub-area contributed to changes in the attitude towards mental health, in particular in rural areas. Unfortunately, some projects that were designed to offer direct services to users will not be continued because they did not find new sources of future funding. Only long-term funding of before mentioned activities can give long term effects on target groups. (For more information on sustainability of project results, please refer to points 4.1 and 6 of this report).

5 projects selected under a call for proposals were implemented within the programme area *Mainstreaming gender equality and promoting work-life balance*:

- 1 project in the sub-area Economic decision-making;

- 2 projects in the sub-area Political decision-making;
- 2 projects in the sub area Promoting work-life balance.

Implementation of projects targeting gender equality successfully raised awareness about gender issues, promoted research on gender issues and increased understanding of equal/unequal power relations between women and men. The responses to the imbalances that persist in participation in politics at the local and national level were identified within the programme, and a research that analysed collective agreements in Slovenia and the role of social partners in promoting gender equality was carried out.

One of the pilot projects under the programme particularly stood out (SI05-0025 “Fathers and Employers in Action”). The 6-month pilot experiment involved 41 fathers and four organisations. Employed men were included in work-life balance policies by participating in the development of “Flexible package of measures ODA” that enabled easier work-life balance for fathers and increased recognition of their caring role in the families. The project impressively contributed to raising awareness of employers of the positive effects of work-life balance measures in organisational cultures. In fact, the project results had broader impact than expected.

Contribution of selected projects to the achievement of the SI05 programme outputs

Output	Standard output indicators	Baseline	Target value	Achieved value (selected projects only)
New equity-oriented programmes and services for different user groups developed and implemented	Number of actions taken to reduce inequalities in health through increased access	0	10	91
Capacity of professionals for health equity and work with vulnerable groups improved	Number of trained professionals in health inequality and related topics and issues	0	500	3640
New integrated programmes and services for lifestyle- related chronic diseases prevention for different user groups developed and implemented	Number of actions aiming to reduce or prevent lifestyle related diseases at national/local level	0	15	12
Capacity of professionals for work with vulnerable groups in lifestyle-related chronic diseases prevention improved	Number of trained professionals in life style related chronic diseases prevention	0	300	1530
Local capacity for mental health improved	Number of local structures for mental health developed	0	3	22
Capacity of primary health care and other professionals in mental health improved	Number of trained primary health care and other professionals in mental health	0	100	1435
Understanding of	Number of target audience	0	50	70

Output	Standard output indicators	Baseline	Target value	Achieved value (selected projects only)
equal/unequal power relations between women and men in order to identify adequate responses to imbalances that persist in a gender-based power structure in society increased	reached (in %)			
	Number of implemented policies (action plans, measures)	0	2	12
	Number of good practices identified and assessed	0	2	42
Understanding of equal/unequal power relations between women and men increased	Number of reports disseminated to target groups	0	500	n/a
	Level of satisfaction (in %)	0	60	n/a
	Number of target audience reached using TV, radio spots and other means of communication (in %)	0	50	n/a
	Number of implemented policies (action plans, measures)	0	2	n/a
	Number of good practices identified and assessed	0	4	n/a

3.2. Pre-defined projects

One pre-defined project was implemented within the programme area *Public health initiatives 1*. The pre-defined project no. SI05-0002 “Towards better health and reducing inequalities in health” was implemented by the National Institute of Public Health. The pre-defined project mainly contributed to the achievement of programme outputs in the sub-area Prevention of lifestyle-related diseases, which was a springboard for the achievement of the set programme outcome – reducing or preventing lifestyle-related diseases.

New models of the upgraded preventive health care programmes for children and young people and adults were designed and piloted with the focus on community approach to promote health and reduce health inequalities in the local community. Such approach is well in tune with the needs of the population in the local environment, it provides better access to services and treatments, development of supportive networks and self-help groups, and takes into account formal and non-formal forms of help. Over 100 workshops, events, professional meetings and education programmes were carried out. More than 100 health care workers attended extensive trainings and learning materials were prepared for future needs.

One pre-defined project was implemented within the programme area *Mainstreaming gender equality and promoting work-life balance*. The pre-defined project no. SI05-0001 “Towards equalising power relations between women and men” was implemented by the Ministry of Labour, Family, Social Affairs and Equal Opportunities.

The analysis of the historic context and documentation of current challenges related to gender equality in Slovenia and organisation of an international conference on exchange of good practices was the key to sharing and spreading the knowledge about this topic. An overview of the national legislation and panel discussions encouraged the development of a supportive environment for the

introduction of gender equality-related legislative measures. In order to raise awareness of the general public about gender equality a nation-wide media campaign was carried out. All activities implemented in the scope of the pre-defined project contributed to the achievement of programme outputs in the field of Mainstreaming gender equality and promoting work-life balance.

Pre-defined projects have proven to be an efficient way to allocate funds from at least two reasons. First, they were more tailored to the needs of the ministry in charge of the policy in a certain area. Second, as pre-defined projects started earlier, there was more time for their implementation.

Contribution of pre-defined projects to the achievement of the SI05 programme outputs

Output	Standard output indicators	Baseline	Target value	Achieved value (pre-defined projects only)
New equity-oriented programmes and services for different user groups developed and implemented	Number of actions taken to reduce inequalities in health through increased access	0	10	n/a
Capacity of professionals for health equity and work with vulnerable groups improved	Number of trained professionals in health inequality and related topics and issues	0	500	n/a
New integrated programmes and services for lifestyle-related chronic diseases prevention for different user groups developed and implemented	Number of actions aiming to reduce or prevent lifestyle related diseases at national/local level	0	15	2
Capacity of professionals for work with vulnerable groups in lifestyle-related chronic diseases prevention improved	Number of trained professionals in life style related chronic diseases prevention	0	300	220
Local capacity for mental health improved	Number of local structures for mental health developed	0	3	n/a
Capacity of primary health care and other professionals in mental health improved	Number of trained primary health care and other professionals in mental health	0	100	n/a
Understanding of equal/unequal power relations between women and men in order to identify adequate responses to imbalances that persist in a gender-based power structure in society increased	Number of target audience reached (in %)	0	50	n/a
	Number of implemented policies (action plans, measures)	0	2	n/a
	Number of good practices identified and assessed	0	2	n/a
Understanding of	Number of reports	0	500	500

Output	Standard output indicators	Baseline	Target value	Achieved value (pre-defined projects only)
equal/unequal power relations between women and men increased	disseminated to target groups			
	Level of satisfaction (in %)	0	60	93
	Number of target audience reached using TV, radio spots and other means of communication (in %)	0	50	82
	Number of implemented policies (action plans, measures)	0	2	10
	Number of good practices identified and assessed	0	4	11

3.3 Small grant schemes

There were no small grant schemes implemented within SI05 programme.

4. Reporting on Programme outcome(s)

4.1 Outputs' contribution to outcomes

The programme outputs contributed to programme outcomes in both programme areas according to expectations, in some cases even significantly surpassed. The main reason for this lies in modest planning. PO did not expect such good response of programme areas' stakeholders and target groups therefore the outcome indicators were quite modest. The target values were set relatively low because PO wanted to make sure that the target value is reached.

The fact that the indicators were surpassed means that the intervention in the areas covered by the programme was really necessary. This is also an indicator that the areas covered by the programme need sustainable and reliable long-term funding.

The achieved outcomes of SI05 programme are as follows:

Outcome	Standard outcome indicators	Baseline	Target value	Achieved value
Reduced inequalities between user groups	Number of actions taken to reduce inequalities in health through increased access	0	10	91
Lifestyle-related diseases prevented or reduced	Number of actions/activities aiming to reduce or prevent lifestyle-related diseases at national/local level	0	15	14
Improved mental health services	New local structures for mental health	0	3	22
Awareness raised and research on gender issues promoted	Attitudes towards gender roles changed	0	60	60

Some pilot projects, which were implemented in the area of public health, were later integrated in the public health system, which improved public health services for citizens.

The Ministry of Health provides further financial support for the following 5 projects:

- SI05-0007 "Healthy lifestyle of children and youth through the empowerment of youth workers and the establishment of programmes on local level";
- SI05-0008 "Partnership for prevention development and community based HIV testing for men who have sex with men in Slovenia";
- SI05-0015 "Parenting training for the prevention of behavioural problems in children – mental health for every child";
- SI05-0019 "Help to people, knowledge to experts";
- SI05-0020 "A systematic approach to peer violence in educational institutions".

The European cohesion policy operation programme provides further financial support for the following 2 projects:

- SI05-0004 "Upgraded comprehensive patient care";
- SI05-0013 "An integrated and innovative approach for providing a healthy lifestyle with a focus on nutrition, physical activity, prevention and management of obesity among children, adolescents and adults, and reduction of health inequalities".

The Medical Chamber of Slovenia provides further funding for project SI05-0010 "Recognizing and treating victims of domestic violence in health care settings".

The local communities provide further funding for 2 projects:

- SI05-0005 "The mosaic of prevention in Posavje region";
- SI05-0006 "Fit and healthy towards old age".

All other projects will not be continued because they did not get new sources of future funding. In order to ensure systematic and sustained financing of the solutions presented and tested within the framework of individual projects, the possibilities of expanding the public health network at the primary level should be explored. This means that the programme of services for primary healthcare would be upgraded with proposals identified through pilot projects in order to receive financing from the compulsory healthcare insurance.

Since the share of women holding leadership positions in business and politics in Slovenia is still noticeably lower than the share of men, it is important to continuously raise awareness on the importance of women's participation in economic and political life and to promote work life balance, as well as to amend the current legislation to increase women's representation in decision-making positions. Reconciliation between work and family-life is a pre-condition for more equality between women and men as regards participation in both the labour market and in leadership positions.

4.2 Horizontal concerns

When designing the SI05 programme, the requirement to take into account horizontal concerns was taken into account. This aspect was also closely observed at the project level throughout all phases of project cycle, starting at project application phase. Even though horizontal concerns are an important element of the programme and projects, the main focus of the programme should always be kept in mind. Due to the specifics of programme main objectives, the SI05 programme and projects addressed horizontal concerns adequately.

PO assesses that focusing on different horizontal concerns would not contribute to better performance of the programme. In PO's view there are no issues to be highlighted in relation to horizontal concerns. In this respect the programme performed as planned and expected.

Projects within the SI05 programme addressed to some extent the following topics:

- *Tolerance and multicultural understanding* (e.g. project No. SI05-0012 / Cooperation for the health of Roma people);
- *Respect for the vulnerable groups in society*, for instance elderly people (e.g. project No. SI05-0011 / Active and quality ageing in home environment; project No. SI05-0016 / Potentials of inhabitants and institutions in Pomurje region in reducing health and social inequalities of older people in local environment and project No. SI05-0006 / Fit and healthy towards old age) and people with mental health problems (e.g. project No. SI05-0003 / More health for children and young people with autism and their families and project No. SI05-0014 / Establishment of mental health prevention programmes);
- *Violence against women and domestic violence* (e.g. project No. SI05-0010 / Recognising and treating victims of domestic violence in health care settings: Guidelines and training for health professionals);
- *Gender equality* (all projects within the programme area Mainstreaming gender equality and promoting work-life balance).

4.3 Cross-cutting issues

Good governance: the programme and projects performed positively in relation to good governance. The Programme Operator (PO) ensured that the principles of good governance were followed by defining an adequate management set-up on programme and project level. The monitoring and control system was well designed and successfully put in place. The procedures for preventing, identifying and managing cases of corruption and mismanagement were part of the management set-up. Project monitoring was carried out practically on a daily basis. The PO and Project Promoters (PPs) cooperated smoothly and effectively during the programme implementation and encountered no major problems in this respect. If relevant, minor issues were tackled by phone or at organised meetings. The principles of good governance, such as accountability, transparency, equality and the rule of law were respected throughout the implementation of the programme. All necessary measures were taken to have the programme implementation as transparent and open as possible in all phases. The PO actively involved all relevant stakeholders and target groups in the preparation, implementation, selection and decision taking procedures. All procedures were public, and were subject to in-house and external supervision. All eligible applicants were treated equally.

Good governance was ensured at the level of the PO and at the level of PPs. The PO was monitored by the National Focal Point (NFP). The PPs' good governance was monitored by the PO in all phases of project implementation. Good governance at the project level, for instance good project management, contributed to the implementation of the project.

Environmental considerations: The programme and projects implemented within the programme did not have any negative environmental effect. As no investments were carried out under this programme, no waste disposals or other negative environmental effects resulted from the programme implementation.

Economic sustainability: The SI05 programme created a favourable environment for the development and provision of services, which would otherwise not be provided. Based on programme results, it can be assessed that the required financial inputs were justifiable in terms of outputs. The necessary economic sustainability was guaranteed through partnership between NGOs, public institutions and local/national authorities, which were involved in the project implementation. Such partnerships can better integrate project solutions into the system at local, regional or national level, and secure sustainability. The proof for this statement are 10 projects that

are being financed by the government or other financing bodies after the financial support from the Norwegian Financial Mechanism ended (please see point 4.1 of this report).

Social sustainability: Social dimension of the SI05 programme was particularly important as it was directly linked to its focus areas. By focusing on gender equality and reduction of health inequalities, the programme outcomes contributed towards stronger social sustainability. The programme ensured that priorities and needs of various groups in terms of gender, disability, ethnicity, age and sexual orientation were respected. An important aspect of the programme was also promotion of equality and antidiscrimination, as well as fight against social exclusion.

Gender equality: Implementation of the SI05 programme was focused on gender equality since all activities promoted gender mainstreaming.

4.4 Capacity building

Capacity building and training of public health professionals and other relevant professionals (education, social affairs and gender equality professionals) was implemented with Norwegian partners in order to facilitate bilateral exchange of know-how and to build long term bilateral cooperation. The aim of capacity building was to adapt the most effective policies to the specifics of the Slovenian national context. New innovative approaches/models/interventions that build on local partnerships between NGOs, public institutions and local communities were tested through the implementation of the projects. With focus on few priority areas and key target groups programme funds were concentrated and thus better used to improve capacity building at the local, regional and national level in a relatively short time.

5. Reporting on bilateral relations

5.1 Bilateral outcomes

Extent of cooperation

The programme in the area of public health initiatives was designed and carried out in partnership with the Donor Project Partner (DPP) Norwegian Institute of Public Health. The DPP facilitated networking and transfer of know-how through bilateral relations and study visits.

Bilateral relations at the programme level were implemented through 2 measures:

Preparation of project proposals: This measure was implemented by the PO in co-operation with the Embassy of the Kingdom of Norway in Budapest and with close involvement of the DPP. The measure supported search for partners prior to or during the preparation of a project application, the development of such partnership and the preparation of an application for a donor partnership project. Slovenia was relatively successful in finding Norwegian partners; as many as 20 projects out of 26 projects included partners from Norway. In general, bilateral cooperation at the project level was very successful. According to the survey carried out by external evaluators, the bilateral cooperation at the project level contributed to strengthening relations between Norway and Slovenia. Also, knowledge of project partners about culture, political and socio-economic situation in both countries improved.

- **Fund for bilateral relations:** The fund supported networking, exchange, sharing and transfer of knowledge, technology, experiences and best practices between Slovenian project

promoters and entities in Norway. The activities under this measure included study visits of Slovenian experts and policy makers to Norway, expert visits from Norway to Slovenia, annual events and conferences with participation of Norwegian partners and information activities supporting networking, exchange, sharing and transfer of knowledge, information and experience.

A call for proposals of bilateral activities under bilateral cooperation at the programme level worth EUR 104,000 was launched on 20 May 2016. Two types of activities were foreseen: 1/Type 1: participation of Slovenian representatives at conferences, seminars, workshops in Norway and 2/Type 2: organisation of bilateral conferences, seminars and workshops in Slovenia. The call for proposals was open for project promoters and had two application deadlines (i.e. 30 July 2016 and 30 September 2016). Seven proposals, of which 5 were in line with the requirements of the call, were submitted by the first deadline. Six proposals were received by the second deadline.

Given that a considerable amount remained unspent, the Cooperation Committee decided to approve the launch of another call for proposals of bilateral activities in 2017. The call had the same characteristics as the first one. The deadline for submission of proposals of bilateral activities was 31 March 2017.

Five proposals were submitted by the deadline. All bilateral activities financed under the Fund for bilateral relations were completed by 31 August 2017. The total amount disbursed for bilateral activities was EUR 71,680.15.

Shared results

Financial resources available within the Fund for bilateral relations enabled that several bilateral activities were carried out, among which the following:

- Slovenian experts visited the Senior Centre Askers and got acquainted with the Norwegian programmes for the elderly with the aim to introduce similar programmes in Slovenia.
- A study visit to Helseutvalget organisation, Oslo was organised in order to get knowledge about the Norwegian system of STD testing. The representatives of Helseutvalget organisation later participated at the seminar about this topic that was organized in Ljubljana.
- The Norwegian experts from Stavanger University and Norwegian National Advisory Unit on Aging and Health together with Slovenian experts participated at the conference "New approaches in treating dementia" (Celje, June 2017).
- A Norwegian tutor of the "Incredible Years" programme for children carried out supervisions, clinical consultations and certification procedures for Slovenian experts at the University Medical Centre Ljubljana that implement the same programme in Slovenia. Norwegian and Slovenian partners participate in the network of "Incredible Years" tutors.
- The representatives of the Community Health Centre Ljubljana met the research group of Bergen University in order to explore possibilities of future cooperation and research, in particular in the field of care for elderly, sleeping disorder, immigrants and quality of basic healthcare.
- Norwegian and Slovenian representatives participated at the 7th European conference on alcohol policy (Ljubljana, 22. - 23. 11. 2016) and presented the approach of both countries to fight alcoholism.
- Slovenian representatives actively participated at the conference of the Nordic network MenEngage: "Making the Invisible Visible: Transforming Social Norms among Boys & Men for Gender Justice in Practice" (Oslo, 16. 2. 2017). Back-to-back with the conference, a meeting was held with the Reform-resource centre for men in order to discuss

- possibilities for further bilateral cooperation in the area of life-work balance. In addition, a scientific article (Authors: Mojca Frelj, Peace institute; Ole Bredesen Nordfjell, Reform; Žiga Planinc, Slovenian Police) was published in Slovenian expert magazine “Varnost”.
- A conference “Towards power balance between women and men” was organized on 16. - 17. 2. 2017 in Ljubljana. At the conference Norwegian and Slovenian participants shared experiences and presented examples of good practices. This conference was also a good opportunity to explore possibilities for future cooperation.

Improved knowledge and mutual understanding

Co-operation between the two countries included study visits and professional cooperation as well as sharing of knowledge between both countries. The transfer of knowledge accelerated the development of Slovenian health sector. On the other hand, the Norwegian acquired experience regarding the transfer of such products to a country with a different health system, different social, economic and cultural history.

Wider effect

One particular feature of the SI05 programme was the cooperation of Norwegian partners in a number of projects, since as many as 20 projects involved Norwegian partners. In terms of achievement of objectives at the programme level, it is the input of the cooperation with the Norwegian Institute of Public Health from Oslo that played a decisive role. Experience shows that good relations established between project partners from both countries are pursued even after the closure of projects and make an important contribution to sustainability of the results.

The bilateral indicators were quite modest, since the project promoters as well as PO did not expect such good development of cooperation between the two countries. It was expected that cultural differences, geographical distance and specifics of the health systems would have a significant negative impact on the outcome of bilateral cooperation. However, this did not materialize in practice. Cooperation and special ties with Norwegian institutions at the programme and project level give an additional boost to already successful bilateral relations between the Kingdom of Norway and the Republic of Slovenia.

SI05 - Bilateral indicators

Indicator	Baseline	Target	Achieved
Number of project partnership agreements in beneficiary civil society	0	0	0
Number of project partnership agreements in the beneficiary private sector	0	0	0
Number of project partnership agreements in the beneficiary public sector	0	2	26
Number of projects with expected shared results (both partners are involved professionally in planning and implementation and can claim credit for achieved results)	0	2	20
Number of women involved in exchange visits between beneficiary and donor states	0	30	149
Number of men involved in exchange visits between beneficiary and donor states	0	25	68

Indicator	Baseline	Target	Achieved
Number of joint (bilateral) articles published, written by persons from both institutions in a beneficiary and donor state, published in national or international publications, originated from a project financed by the programme	0	4	50
Number of joint (bilateral) scientific papers written with co-researchers in at least one beneficiary and one donor state, and published in a national or international scientific publication, originated from a project financed by the programme	0	3	3
Number of new technologies/new practises, including IT-systems, adopted in a beneficiary state, as a result of transfer of knowledge from a donor state partner	0	2	8
Number of professional networks between institutions in beneficiary and donor states established and operational	0	1	8

5.2 Donor partnership programmes

The Norwegian Institute of Public Health (NIPH) in Oslo acted as the donor programme partner (DPP) in the SI05 programme and also as the project partner of the pre-defined project. The NIPH is a national centre of excellence in the areas of environmental medicine, epidemiology, forensic toxicology and drug abuse, infectious diseases control and mental health. Social inequalities represent one of the research areas in which the NIPH has been one of the leading organisations in Norway, a country with a good record of egalitarian traditions which can be shared with Slovenia.

The cooperation with the NIPH was very effective on programme and on project level.

As the DPP, the NIPH helped to identify the potential partners from Norway based on their competencies, experience and compatibility of their activities with the overall objective and expected outcomes of the programme.

As the project partner in the pre-defined project, NIPH co-operated with the Slovenian National Institute of Public Health. Co-operation of both institutions in the joint project included study visits and professional cooperation as well as sharing of knowledge between both countries. The two institutions particularly focused their common work on health care data and health indicators. The Norwegian experts shared their experience in developing and implementing the so-called Norwegian Health Profiles. The transfer of knowledge accelerated the development of Slovenian health indicators in municipalities. On the other hand, the cooperation with Slovenian experts provided the Norwegian experts with a valuable critical view on their previous work. They also acquired experience regarding the transfer of such products to a country with a different health system, different social, economic and cultural history and also with different situation in terms of access and use of data.

The NIPH established professional ties with many stakeholders in Slovenian public health sector, in particular with the Slovenian National Institute of Public Health, which represents a good base to continue cooperation in the framework of other programmes or projects.

5.3 Complementary actions

Funds earmarked to finance complementary actions were mainly used to finance participation of PO representatives at the PO meetings organised in several beneficiary countries (e.g. in Vilnius in June 2016, in Bucharest in November 2016, in Lisbon in March 2017, in Bergen in June 2017). The PO meetings were an excellent opportunity for the PO representatives to discuss the implementation status of their respective programmes, to share good practices at the project and programme level and to present their success stories.

Apart from being an excellent platform for networking, the PO meetings usually focused on a particular topic relevant at that specific moment. For example, the meeting held in Vilnius in June 2016 focused on key mid-term evaluations of Norwegian Financial Mechanism Programme and EEA Financial Mechanism Programme and underlined priority areas and developments concerning programme implementation in the upcoming period.

In the scope of complementary actions a visit of Lithuanian delegation (3 persons) took place in Ljubljana at the beginning of December 2014. The main focus of the visit was the exchange of information and knowledge in the field of primary health of children and youth.

6. Reporting on sustainability

In the survey carried out by external independent evaluators, 81% of respondents said that their project would continue in some way after the expiration of funding. However, some projects that were designed to offer direct services to users will not be continued because they did not find new sources of future funding. Given the projects' success, the country should investigate the possibility of co-funding such projects at a system-wide level. Funding opportunities are available in the scope of European Structural and Investment Funds (Cohesion Fund), EU cross-border cooperation programmes, in the scope of calls for proposals launched by individual ministries and within local communities' funding.

In order to ensure a systematic and sustained financing of the solutions presented and tested within the framework of individual projects, the possibilities of expanding the public health network at the primary level should be explored. This means that the programme of services for primary healthcare would be upgraded with proposals identified through pilot projects in order to receive financing from the compulsory healthcare insurance.

The recently conducted external evaluation highlighted the following elements of sustainability of project results:

- Some projects will be continued directly through regular work of partners (please see point 4.1 of this report);
- Some projects, which provided services for the users, will be implemented with co-funding of the state or municipality (please see point 4.1 of this report);
- All other projects that were unsuccessful in securing financial sources will cancel services for the users;
- Newly gained skills of the project promoter will be useful for organization and preparation of similar projects and programmes in the future;
- The results can be used for further research and projects;
- The newly established formal and informal networks will be maintained (e.g. network of counselling offices, centres);
- Promotional items, products of media campaigns, educational modules, manuals and other publications;

- Scientific and academic articles.

7. Project selection and implementation

7.1 Project selection

The Call for proposals to co-finance projects under the Norwegian Financial Mechanism Programme 2009-2014 and the EEA Financial Mechanism Programme 2009-2014 was published on 27 December 2014 in the Official Gazette of the Republic of Slovenia No. 110/2014. The deadline for submitting applications was 28 February 2014. The call for proposals was divided into two sets SET A (Norwegian Financial Mechanism Programme 2009-2014) and SET B (EEA Financial Mechanism Programme 2009-2014).

SET A included the areas of the Norwegian Financial Mechanism Programme 2009-2014:

- Area Public Health Initiatives - A.1
 - Sub-area Reducing inequalities between user groups - A.1.1
 - Sub-area Prevention of life-style related diseases - A.1.2
 - Sub- area Improved mental health services - A.1.3
- Area Gender Equality - A.2
 - Sub-area Economic decision-making - A.2.1
 - Sub-area Political decision-making - A.2.2
 - Sub-area Promoting work-life balance - A.2.3

In order to carry out the call for proposals and to select projects, *the Core and the Extended Committee for SET A and SET B* were established. The Core Committee for SET A conducted the administrative check of received proposals (i.e. checked the compliance of applications with administrative and eligibility criteria for SET A).

Statistics at the end of administrative check for SET A – Norwegian Financial Mechanism Programme 2009-2014

	ALL RECEIVED APPLICATIONS (Set A)	REFUSED and REJECTED APPLICATIONS					COMPLETE APPLICATIONS	
		Inappropriately marked envelope	2 nd received application for the same sub-area	Admin. phase and applications eligibility phase	Total no. of refusals/rejections	Proportion in relation to the total no. of received applications	Complete applications	Proportion in relation to received applications
SET A – NOR FM PROGRAMME	182	29	2	23	54	29.7%	128	70.3%

Applications submitted for the quality assessment for SET A – Norwegian Financial Mechanism Programme 2009-2014

SET A - Norwegian Financial Mechanism Programme 2009-2014

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Area A.1 – Public Health Initiatives	85
Sub-area A.1.1 Reducing inequalities between user groups	34
Sub-area A.1.2 Prevention of life-style related diseases	29
Sub-area A.1.3 Improved mental health services	22
Area A.2	43
Sub-area A.2.1 Economic decision-making	16
Sub-area A.2.2 Political decision-making	7
Sub-area A.2.3 Promoting work-life balance	20

The quality assessment was made by external independent evaluators. Based on the priority list made by external evaluators, the Extended Committee, on its session held on 1 December 2014, took the decision on selected projects.

**Statistics at the end of selection procedure for SET A –
Norwegian Financial Mechanism Programme 2009-2014**

	No of selected projects
SET A - Norwegian Financial Mechanism Programme 2009-2014	24
Area A.1 – Public Health Initiatives	19
Sub-area A.1.1 Reducing inequalities between user groups	7
Sub-area A.1.2 Prevention of life-style related diseases	6
Sub-area A.1.3 Improved mental health services	6
Area A.2	5
Sub-area A.2.1 Economic decision-making	1
Sub-area A.2.2 Political decision-making	2
Sub-area A.2.3 Promoting work-life balance	2

In the first quarter of 2015 a total of 24 contracts were signed with project promoters of projects selected through the public call in the area of Public Health Initiatives and in the area of Gender

Equality. Hence, it took almost one year from the publication of the call to the selection of the projects, which is a relatively long period. There are several reasons for this delay.

First, several institutional changes hampered smooth functioning of the PO. Due to changes in the Government of Republic of Slovenia in 2014, there were some changes in the management structures of the EEA and Norway Grants on the side of the beneficiary state. The PO was transferred from the Ministry of Economy, Development and Technology to the Government Office for Development and European Cohesion Policy on 1 March 2014. This institutional change had an evident impact on the implementation of programmes and projects by delaying it considerably.

Second, the number of received applications was much higher than expected (182 received applications, of which 128 eligible applications); hence, it took longer to check the compliance of applications with administrative and eligibility criteria.

Third, the selection of external independent evaluators was a very long and complex process. In fact, the procedure fell through twice before a pool of independent experts to perform quality assessment of applications could finally be established.

The delays resulting from the late announcement of the call for proposals and late signing of contracts shortened the implementation period and represented a risk factor affecting successful implementation of projects.

7.2 Project implementation

Besides 24 selected projects, additional 2 pre-defined projects were implemented within the SI05 programme:

- Along with 19 selected projects, one pre-defined project was implemented in the programme area Public health initiatives (sub-area Prevention of lifestyle-related diseases). The pre-defined project called “Towards better health and reducing inequalities in health” was implemented by the National Institute of Public Health (with the Norwegian Institute of Public Health as a project partner).
- Along with 5 selected projects, one pre-defined project was implemented in the programme area Mainstreaming gender equality and promoting work-life balance. The pre-defined project “Towards equalising power relations between women and men” was implemented by the Ministry of Labour, Family, Social Affairs and Equal Opportunities.

Area	Sub-area	No of projects	Total amount (in EUR)	Grant amount (in EUR)
Public Health Initiatives		20	11,337,373.37	10,751,091.89
	Reducing inequalities between user groups	7	3,834,493.13	3,597,010.07
	Prevention of lifestyle-related diseases	7	4,924,642.68	4,745,838.38
	<i>Selected projects</i>	6	2,571,701.68	2,392,897.38
	<i>Pre-defined project</i>	1	2,352,941.00	2,352,941.00
	Improved mental health services	6	2,578,237.56	2,408,243.44

Area	Sub-area	No of projects	Total amount (in EUR)	Grant amount (in EUR)
Gender Equality		6	1,715,353.69	1,626,951.00
	<i>Selected projects</i>	5	1,215,353.69	1,126,951.00
	<i>Pre-defined project</i>	1	500,000.00	500,000.00
TOTAL NOR		26	13,052,727.06	12,378,042.89

The programme area *Public health initiatives* includes three sub-areas: Reducing inequalities between user groups, Prevention of lifestyle-related diseases and Improved mental health services with 20 projects implemented:

- 7 projects selected under a call for proposals worth EUR 3,834,493.13 (of which EUR 3,597,010.07 in grant) were implemented in the sub-area *Reducing inequalities between user groups*.
- 6 projects selected in the scope of a call for proposals and amounting to EUR 2,571,701.68 (of which EUR 2,392,897.38 in grant) and 1 pre-defined project were implemented in the sub-area *Prevention of lifestyle-related diseases*. The pre-defined project called "Towards better health and reducing inequalities in health" worth a total of EUR 2,352,941.00 (100% grant) was implemented by the National Institute of Public Health (with the Norwegian Institute of Public Health as a project partner).
- 6 projects selected in the scope of a call for proposals equalling EUR 2,578,237.56 (of which EUR 2,408,243.44 in grant) were carried out in the sub-area *Improved mental health services*.

The programme area *Mainstreaming gender equality and promoting work-life balance* includes three sub-areas: Economic decision-making (one project selected under a call for proposals), Political decision-making (two projects selected under a call for proposals) and Promoting work-life balance (two projects selected under a call for proposals). The 5 selected projects worth a total of EUR 1,215,353.69 (of which EUR 1,126,951.00 in grant) were implemented along with 1 pre-defined project, i.e. "Towards equalising power relations between women and men" worth a total of EUR 500,000.00 (100% grant) and implemented by the Ministry of Labour, Family, Social Affairs and Equal Opportunities.

The delays in signing contracts shortened the implementation period and the concern that projects might not be completed on time was quite realistic. After the SI05 programme had been extended in 2015, all project promoters were informed about the possibility of extending their projects. Only 3 projects out of 26 decided not to extend project duration.

All project promoters and PO put every effort into successful implementation and completion of all projects. The PO provided support to project promoters and monitored the substantive and financial progress of the projects. All projects were subject to on-the-spot verification. The findings were positive and did not unveil any significant shortcomings. Project promoters regularly reported about project progress. At start, a bottleneck relating to the first-level control of expenditures emerged at the PO. As soon as it was eliminated, the control activities proceeded smoothly. No significant issues were identified regarding disbursement of the allocated support under the SI05 programme and making payments to project promoters.

By the end of December 2016, all projects within the SI05 programme were completed. In 2017 Project promoters were preparing final reports and submitted them to the PO for approval. Approved final reports were the pre-condition for making payments of sums withheld.

Lessons learned:

- Almost all project promoters required strong guidance from PO staff. Most of them were not satisfied with reporting requirements and considered this as an unnecessary administrative burden. From the perspective of project promoters, the obligation to comply with public procurement legislation was also often seen as an unnecessary obstacle for efficient project implementation.
- The reporting deadlines should be strictly respected by all project promoters otherwise it is impossible for the PO to organize its work. In case of non-compliance with the reporting deadlines, sanctions should be considered.
- The project promoters and project partners had severe problems to assure sufficient funds to pre-finance project implementation. A thorough first-level control of expenditures is a time consuming process, which means that it takes some time before the PO reimburses the expenses to project promoters. If PO, according to the law on execution of the state budget, cannot execute advance payment to project promoters, the ability of project promoters to assure pre-financing for project implementation should be verified in advance.
- The project promoters were requesting the PO to approve changes of detailed budget breakdown of their projects so often that it was very difficult to keep track of all changes. The number of changes of detailed budget breakdown should be limited (e.g. to 1 change) and approved only in very well justified cases.

8. Monitoring and audit

MONITORING

The monitoring of projects was carried out by the PO in accordance with the monitoring plan. The monitoring plan was revised annually by the PO and submitted to the National Focal Point and the FMO as an annex to the Combined Strategic and Annual Report.

The PO used the following monitoring tools:

- Project interim report reviews;
- On-the-spot controls;
- Day-to-day monitoring;
- Post-closure project monitoring.

The PO carried out regular reviews of project interim reports. Each project interim report consisted of an activity report on project activities implemented within the given reporting period and a financial report comprising expenditures incurred in the reporting period. By reviewing activity reports, the PO examined the progress in implementation of project activities and achievement of project outputs and outcomes. By reviewing financial reports, the PO checked the expenditures and their compliance with the project contract, the Regulation, the Programme Agreement and applicable law, including law on public procurement.

The Control Unit within the PO performed on-the-spot controls of all projects implemented within the SI05 programme. By carrying out on-the-spot controls, the PO checked the progress in project implementation and its compliance with the project contract, as well as with requirements of the Regulation and other relevant legal documents. The PO also verified procurement procedures and cost efficiency of incurred expenditures. During an on-the-spot control the PO found some inaccuracies in the procurement procedure for equipment within the project “Recognizing and treating victims of domestic violence in health care settings: Guidelines and training for health professionals” and recommended that PO recovers ineligible amount from the project promoter and reimburses the ineligible expenditure to the Donors in the relevant share. On-the-spot controls did not detect any other significant shortcomings.

Day-to-day monitoring of the projects was carried out at all stages of the project implementation. The contract managers at the PO maintained direct communication with project promoters on a regular basis, mainly by phone and by e-mail.

At the end of the project implementation project promoters prepared a project completion report and submitted it to the PO. The PO reviewed the report in order to check the achievement of outputs, outcomes and objectives of the project and to assess the project’s contribution to the overall objective and outcomes of the programme.

EXTERNAL AUDIT

The following external audits were carried out during the SI05 programme implementation:

- In the first quarter of 2014, the Budget Supervision Office performed an audit of the management and control systems of the Programme Operator for the SI05 programme. Based on the audit carried out and the audit findings the Budget Supervision Office issued an unqualified audit opinion on the assessment of compliance of the management and control systems with the requirements set in the Regulation on the implementation of the Norwegian Financial Mechanism 2009-2014.
- Follow-up audit of the management and control systems was performed by the Budget Supervision Office in February 2017. On the basis of the assessment of the extent of implementation of recommendations, the Budget Supervision Office concluded that the system works but some improvements are needed.
- In February 2015, the Budget Supervision Office audited the expenditure in the 1st, 2nd and 3rd Interim Financial Reports for the SI05 programme. The Budget Supervision Office reviewed the selection procedures, programme implementation, eligibility of expenditure, public procurement procedures, audit trail and storage of documents, information and publicity procedures, irregularities and recoveries initiated by the CA. No irregularities were detected in any of these fields.
- The Budget Supervision Office performed audit of expenditures of the pre-defined project No. SI05-0002 (“Towards better health and reducing inequalities in health”) implemented by the National Institute of Public Health. The audit was carried out from 3 April 2017 to 14 June 2017. The Budget Supervision Office (BSO) detected ineligible expenditure in the amount of EUR 878.10 (DoRIS Irregularity No.: IR 0796). PO recovered EUR 878.10 from the project promoter. The ineligible expenditure was taken into account in the Last Financial Report.

- The Budget Supervision Office performed audit of expenditures of the project No. SI05-0003 (“Equality in health for children and youngsters with autism and their families”) implemented by the Institute of Autism Spectrum Disorders. The audit was carried out from 29 May 2017 to 26 October 2017. The Budget Supervision Office (BSO) detected ineligible expenditure in the amount of EUR 522.35 (DoRIS Irregularity No.: IR 0830). PO recovered EUR 522.35 from the project promoter. The ineligible expenditure was taken into account in the Last Financial Report.
- The Budget Supervision Office performed audit of expenditures of project No. SI05-0014 (Establishment of mental health prevention programmes) implemented by Development Agency for Upper Gorenjska - RAGOR. The audit was carried out from 29 May 2017 to 14 September 2017. No irregularities were detected.
- Moore Stephens LLP, London, contracted by the Financial Mechanism Office (FMO), carried out audit of Management and Control Systems of the SI05 programme. The audit was carried out from 4 December 2017 to 19 December 2017. The audit report has not been issued.

9. Irregularities

Project ID No.: SI05 – 0002 (“Towards better health and reducing inequalities in health”)

DoRIS Irregularity No.: IR 0796

Date of irregularity: 20 November 2017

Based on the performed audit verifying the eligibility of expenditures under the 9th Interim Financial Report under the SI05 programme, the Budget Supervision Office (BSO) detected ineligible expenditure in the amount of EUR 878.10. BSO found that in three cases project promoter made ineligible claims for project-related labour cost for overtime worked at home, which does not comply with the beneficiary’s politics relating to salaries. The BSO recommended that PO recovers EUR 878.10 from the project promoter and reimburses the ineligible expenditure to the Donors in the relevant share. PO recovered EUR 878.10 from the project promoter. The ineligible expenditure was taken into account in the Last Financial Report.

Project ID No.: SI05 – 0003 (“Equality in health for children and youngsters with autism and their families”)

DoRIS Irregularity No.: IR 0830

Date of irregularity: 18 December 2017

Based on the performed audit verifying the eligibility of expenditures under the 9th Interim Financial Report under SI05 programme, the Budget Supervision Office (BSO) detected ineligible expenditure in the amount of EUR 522.35. BSO found that project promoter claimed expenditure for overtime work for 1 employee that exceeded maximum legally allowed number of overtime work hours for 35 hours. The BSO recommended that PO recovers EUR 522.35 from the project promoter and reimburses the ineligible expenditure to the Donors in the relevant share. PO recovered EUR 522.35 from the project promoter. The ineligible expenditure was taken into account in the Final Balance.

Project ID No.: SI05 – 0010 (“Recognizing and treating victims of domestic violence in health care settings: Guidelines and training for health professionals”)

DoRIS Irregularity No.: IR 0829

Date of irregularity: 21 December 2017

Control division of the PO performed an on-the-spot control of the project implementation and detected ineligible expenditure amounting to EUR 385.37. Control division found there was

inaccuracy in the procurement procedure for equipment and recommended that PO recovers EUR 385.37 from the project promoter and reimburses the ineligible expenditure to the Donors in the relevant share. The PO recovered EUR 385.37 from the project promoter. The ineligible expenditure was taken into account in the Last Financial Report.

10. Risk management

Several risks were identified as important factors that could hamper the implementation of the SI05 programme, but not all of them actually occurred. The risk assessment, including risk mitigation measures at the programme level were both prepared on a yearly basis and attached to the Combined Strategic and Annual Report.

The *first* important issue were the delays in starting the programme and publishing the call for project proposals, which shortened the time for project implementation.

At the very beginning, institutional changes considerably delayed the programming and implementation of programmes and projects. Due to changes in the Government of the Republic of Slovenia in 2012, there were some changes in management structures of EEA and Norway Grants on the side of beneficiary state. At the beginning of the Norwegian Financial Mechanism for the period 2009–2014, the Government Office for Local Self-Government and Regional Policy acted as the PO for SI05 programme. After general elections in 2012, the Government Office for Local Self-Government and Regional Policy ceased to function. Consequently, the PO was transferred to the Ministry of Economy, Development and Technology in February 2012. As of 1 March 2014 the PO has been operating within the Government Office for Development and European Cohesion Policy.

In order to mitigate the consequences of the delays the PO speeded up all the administrative and management procedures and thus ensured that project promoters started projects as soon as possible. Good communication between the PO and project promoters was a precondition for intensifying project activities wherever possible.

The *second* important risk that was identified was the one associated with failure to achieve the projects outcomes and indicators. The risk assessment at the project level was described in the project implementation plans attached to the contracts with project promoters.

In order to mitigate this risk, the contract managers at the PO monitored projects' progress reported in the interim project reports and compared the achieved goals against the goals and milestones defined in the project implementation plans. If necessary (in case of deviations), they provided guidance and support to project promoters in order to put projects back on track. Rapid and adequate response of PO to identified risks and critical situations contributed to successful completion of all projects within the SI05 programme.

The most important measure mitigating the risk of not achieving project and programme outcomes and indicators was the extension of programme duration. The majority of project promoters decided to extend the duration of their projects, which enabled them to finish projects successfully.

The *third* important risk was the shortage and rapid turnover of staff at the PO. As a result, there were significant delays in performance of first-level control of eligibility of expenses at the beginning of programme implementation.

The measures mitigating the abovementioned risk included regular assessment of required human resources and informing of superiors and National Focal Point about shortage, better organisation of work and stimulation of staff. Consequently, the delays in performance of first-level control of eligibility of expenses were eliminated.

11. Information and publicity

The National Focal Point developed a communication strategy in order to reach the objectives with the aim of highlighting the role of the EEA and Norway Grants 2009–2014 and to ensure that the assistance from the mechanisms is transparent. The communication strategy took into account the programme level, with different priority areas and target groups.

The Government Office for Development and European Cohesion Policy developed and updated the website (www.norwaygrants.si and www.eeagrants.si) which is available in Slovenian and English and provides information on the National Focal Point, specific programmes, relevant documents (including reports, guidelines and logos), latest news and upcoming events. The redesigned website and updated Facebook profile EEA and Norway Grants Slovenia contain information with more links to different events, new photos, etc. The Facebook profile and website address are placed on the Government Office's website.

Special attention was given to promotion of the SI05 programme, both at the programme and project level.

The PO disseminated information about the programme and the calls for proposals through different channels since the most effective way of informing is communication through various communication channels.

At the project level, the channel used most often for informing users and other audiences was project web page – almost all project promoters used that communication channel, which is followed by conferences and local print media. Local media (radio, television and newspapers) proved to be a very powerful channel of informing and sharing information. Less often used channels were lease of media/advertising space and television.

Project promoters organised several events to showcase the results and outputs of their projects. An international conference “From Projects to a System-wide Solution” featuring public health initiative projects implemented within the SI05 programme was organised in October 2016 by the Ministry of Health. The aim of the conference was to seek and discuss new ways for further implementation of good examples, models and other solutions in order to ensure sustainability of projects’ results.

The SI05 programme contents and results were showcased at the Final event for the Norwegian and EEA Financial Mechanism 2009-2014 titled “Working Together Towards Common Goals”, organized by the National Focal Point in Ljubljana on 7 October 2016. The event was an occasion bringing together all stakeholders to share experience and disseminate results. The Royal Norwegian Embassy in Budapest supported the shooting of a short promotional video of the final event, which was published on the website and Facebook profile.

The information about all projects funded under SI05 programme is compiled in a publication titled “Working Together Towards Common Goals”.³

³ Available at: http://www.norwaygrants.si/wp-content/uploads/SODELUJEMO_ZA_SKUPNE_CILJE_web.pdf

12. Conditions set in the Programme Agreement

12.1 Compliance with conditions

The PO complied with the conditions set out in Annex I, Article 2 of the Programme Agreement during the implementation of the SI05 programme.

Condition:

Bilateral, output and outcome indicators shall be reported in the Combined Strategic and Annular report.

Statement:

Bilateral, output and outcome indicators were reported in the Combined Strategic and Annular report.

Condition:

The use and implementation of the bilateral fund shall be agreed with the donor programme partner and decided upon in the Cooperation Committee.

Statement:

The use and implementation of the bilateral fund was agreed with the donor programme partner and decided upon in the Cooperation Committee.

Condition:

Detailed selection criteria, developed by the PO and adopted by the Selection Committee, will be submitted to the FMO before the deadline referred to in Article 6.3.4 of the Regulation.

Statement:

Detailed selection criteria, developed by the PO and adopted by the Selection Committee, were submitted to the FMO before the deadline referred to in Article 6.3.4 of the Regulation.

Condition:

Unit prices for voluntary work of in-kind contributions referred to in Article 5.4.5 of the Regulation shall be submitted to the FMO no later than four weeks prior to the deadline for providing to the NMFA the text of the call for proposals, as required by Article 6.3.4 of the Regulation.

Statement:

Unit prices for voluntary work of in-kind contributions referred to in Article 5.4.5 of the Regulation were submitted to the FMO no later than four weeks prior to the deadline for providing to the NMFA the text of the call for proposals, as required by Article 6.3.4 of the Regulation.

Condition:

A methodology on the calculation of the flat rate to be applied to indirect eligible cost (overheads) in accordance with Article 7.4.1 (b) of the Regulation shall be submitted to the FMO no later than four weeks before the deadline referred to in Article 6.3.4 of the Regulation.

Statement:

A methodology on the calculation of the flat rate to be applied to indirect eligible cost (overheads) in accordance with Article 7.4.1 (b) of the Regulation was submitted to the FMO no later than four weeks before the deadline referred to in Article 6.3.4 of the Regulation.

Condition:

The Programme Operator will no later than three months after the National Focal Point signs the Programme Agreement, assigned additional staff, temporarily or permanently to assist in the

implementation of this programme and the Programme SI02 “The EEA Financial Mechanism Programme”.

Statement:

No later than three months after the National Focal Point signed the Programme Agreement, the Programme Operator assigned additional staff, temporarily or permanently to assist in the implementation of this programme and the Programme SI02 “The EEA Financial Mechanism Programme”.

12.2 Changes to the programme

Several modifications of the SI05 programme were made during the programme implementation period; however the content of the programme did not change during its implementation. Larger changes were related to the implementation of the public call and the extension of the programme implementation deadline.

The most important change to the programme related to the extension of programme duration which was approved in 2015, and enabled successful implementation and completion of projects.

With the modification dated 11 November 2013, the Annexes I and II to the Programme Agreement have been replaced with new versions. The modification to the Programme Agreement reflects the delay in the publication of the open call. With this modification the deadline for publication of the open call was postponed for 3 months (to the fourth quarter of 2013).

With modification dated 18 December 2013, the Annexes I and II to the Programme Agreement have been replaced with new versions. The modification concerns post-completion obligations of Projects Promoters with regard to the purchased equipment and eligibility of costs for new equipment.

The modification dated 29 October 2014 concerns the approval of a different project selection procedure (in line with Article 6.5 of the Regulation). This modification enabled the Programme Operator to approve the list of expert evaluators and finalize the project selection procedure.

With modification dated 26 November 2015 the period for eligibility of cost was extended for 9 months (from 31 March 2017 to 31 December 2017). This was the most significant change to the programme that enabled successful implementation and completion of projects.

13. Attachments to the Final Programme Report

- 1) Project list
- 2) List of irregularities
- 3) Audit overview

Audit overview

Type of audit	Audit of management and control system performance with regard to the implementation of the Norwegian and EEA Financial Mechanism 2009-2014 implemented at the National Focal Point and Programme Operator
Entity subject to audit	National Focal Point and Programme Operator
Audit company / entity	Budget Supervision Office (Audit Authority)
Period covered	n/a
Date of final report	April 2015 (Report No. 0615-3/2012)
Audit Opinion	Based on the audit carried out and the audit findings the Budget Supervision Office issued an unqualified opinion on the assessment of compliance of the management and control systems with the requirements set in the Regulation on the implementation of the Norwegian Financial Mechanism 2009-2014.
Summary of findings	<ol style="list-style-type: none"> 1. The audit trail on how the NFP responsible person and the head of Financial Mechanism Division perform control of the implementation of the financial mechanisms is not adequately evident. 2. By the date of performing the audit the PO had not yet concluded the procedure for selecting the projects to be awarded a grant under the call for proposals. There is a high risk that projects will not be fully realised by the final date of eligibility of expenditures. 3. The guidelines for project implementation and reporting for SI05 lack forms for reporting and checklists for verification of project co-financing. 4. There is only one fully employed controller in control unit, who checks eligibility of expenditure incurred under financial mechanisms. No arrangements have been made to provide for adequate substitution of the controller in case of absence from work. 5. PO does not submit all Interim Financial Reports to the Certifying Authority in due time, which makes it impossible for the CA to submit the reports in due time to the Donors. 6. PO has not developed checklists to be used when performing on-the-spot checks to verify eligibility of projects and expenditures incurred under financial mechanisms.
Follow-up measures	<ol style="list-style-type: none"> 1. The Government Office for Development and European Cohesion Policy described in an internal act the internal controls performed by the NFP responsible person and the head of the Financial Mechanisms Division, and laid down the procedures that ensure there is an adequate audit trail of such controls. 2. PO concluded the contracts on co-financing of selected projects after the results of the evaluation of project proposals. 3. PO included the forms for reporting and checklists for verification of project co-financing in the guidelines for project implementation and reporting for SI05. 4. Control unit staff was reinforced in terms of staff number. 5. PO made effort to ensure that all Interim Financial Reports were submitted to the Certifying Authority in accordance with the timeframe set out in the Regulation. 6. PO developed checklists to be used when performing on-the-spot checks to verify eligibility of projects and expenditures incurred under financial mechanisms.

Type of audit	Follow-up audit of the management and control system at the National Focal Point and Programme Operator
Entity subject to audit	National Focal Point and Programme Operator
Audit company / entity	Budget Supervision Office (Audit Authority)
Period covered	n/a
Date of final report	February 2017 (Report No. 0615-3/2012)
Audit Opinion	On the basis of the assessment of the extent of implementation of recommendations made to the Government Office for Development and European Cohesion Policy as the NFP and Programme Operator, the Audit Authority concludes that the system works but some improvements are needed.
Summary of findings	PO does not submit all Interim Financial Reports to the Certifying Authority in due time, which makes it impossible for the CA to submit the reports in due time to the Donors.
Follow-up measures	PO made effort to ensure that all Interim Financial Reports were submitted to the Certifying Authority in accordance with the timeframe set out in the Regulation.

Type of audit	Audit of the expenditure in the 1 st , 2 nd and 3 rd Interim Financial Report for the programme SI05
Entity subject to audit	Programme Operator
Audit company / entity	Budget Supervision Office (Audit Authority)
Period covered	7 February 2013 – 30 April 2017
Date of final report	February 2015 (Report No. 0615-9/2015)
Audit Opinion	Based on the performed audit of the expenditure and on the basis of the performed review of documents with PO and CA, no irregularities were detected.
Summary of findings	The Budget Supervision Office reviewed the selection procedures, programme implementation, eligibility of expenditure, public procurement procedures, audit trail and storage of documents, information and publicity procedures, irregularities and recoveries initiated by the CA. No irregularities were detected in any of these areas.
Follow-up measures	n/a

Type of audit	Audit of expenditures of pre-defined project No. SI05 -0002 (“Towards better health and reducing inequalities in health”) implemented by the National Institute of Public Health
Entity subject to audit	Programme Operator and Project Promoter
Audit company / entity	Budget Supervision Office (Audit Authority)
Period covered	1 January 2016 – 30 April 2016 (IFR No.9)
Date of final report	June 2017 (Report No. 0623-3/2017)
Audit Opinion	The Budget Supervision Office (BSO) detected ineligible expenditure in the amount of EUR 878.10 (DoRIS Irregularity No.: IR 0796).
Summary of findings	In three cases, the project promoter made ineligible claims for project-related labour costs for overtime worked at home, which does not comply with the usual wage policy of the beneficiary. Therefore the Audit Authority found ineligible expenditure in the total amount of EUR 878.10.
Follow-up measures	PO recovered EUR 878.10 from the project promoter. The ineligible expenditure was taken into account in the Last Financial Report.

Type of audit	Audit of expenditures of project No. SI05 - 0003 (“Equality in health for children and youngsters with autism and their families”) implemented by the Institute of Autism Spectrum Disorders
Entity subject to audit	Programme operator and Project Promoter
Audit company / entity	Budget Supervision Office (Audit Authority)
Period covered	1 January 2016 – 30 April 2016 (IFR No.9)
Date of final report	October 2017 (Report No. 0623-5/2017)
Audit Opinion	The Budget Supervision Office (BSO) detected ineligible expenditure in the amount of EUR 522.35 (DoRIS Irregularity No.: IR 0830).
Summary of findings	<ol style="list-style-type: none"> 1. The project promoter declared the expenditures for overtime work performed by employee AB which exceeded by 35 hours the maximum amount of overtime set out in the regulations governing overtime. The AA concluded that the amount of ineligible expenditures resulting from this non-adherence to overtime provisions equalled EUR 522.35. 2. GODC did not monitor whether the equipment, co-financed within the framework of the project, was used to achieve the objectives of the project after the project completion in accordance with Article 7.15 of the Regulation and the co-financing contract.
Follow-up measures	<ol style="list-style-type: none"> 1. PO recovered EUR 522.35 from the project promoter. The ineligible expenditure was taken into account in the Last Financial Report. 2. PO checked whether the equipment was still used for the purpose of achieving the objectives of the project.

Type of audit	Audit of expenditures of project No. SI05 -0014 (Establishment of mental health prevention programmes) implemented by Development Agency for Upper Gorenjska - RAGOR
Entity subject to audit	Programme operator and Project Promoter
Audit company / entity	Budget Supervision Office (Audit Authority)
Period covered	1 January 2016 – 30 April 2016 (IFR No.9)
Date of final report	September 2017 (Report No. 0623-4/2017)
Audit Opinion	The audit of expenditures incurred and declared showed there were no ineligible expenditures.
Summary of findings	The Audit Authority did not find any irregularities in terms of project selection procedure, project implementation, eligibility of expenditures, procurement procedures, audit trail and storage of documents, information and publicity procedures.
Follow-up measures	n/a

Type of audit	Management and Control Systems of SI05 programme audit
Entity subject to audit	Programme Operator
Audit company / entity	Moore Stephens LLP, London, contracted by the Financial Mechanism Office (FMO)
Period covered	Whole implementation period
Date of final report	Not issued yet
Audit Opinion	n/a
Summary of findings	n/a
Follow-up measures	n/a