

TENDER SPECIFICATIONS FOR SUBCONTRACTING EXTERNAL EXPERTISE

Tender specifications for the project "Strengthening social dialogue in the hospital sector in the Baltic countries" 04.03.03.01

1. Background

A sectoral social dialogue Committee for the hospital sector involving EPSU and HOSPEEM was set up in 2006. Since then, this sectoral social dialogue has matured significantly and has already led to the agreement of a Code of Conduct on Ethical Recruitment, as well as, in 2009, to the negotiation of a framework agreement on needlestick injuries, which has now been transformed into an EU Directive for implementation at Member State level. In addition a number of joint text have been adopted, for example on the proposals for a Directive on Patient's Rights in the EU. A number of working groups have also been active in recent years, which have exchanged information on mobility, retention, ageing and skills issues affecting the sector. EPSU and HOSPEEM are also part of a multi-sectoral initiative exploring the possibility of the development of a joint tool on tackling third party violence in a number of sectors.

The dissemination of social dialogue results such as the needlesticks agreement and the continuation of the exchange of information in the working group on retention and skills development are a priority of the sectoral social partners' work programme for 2010.

In 2008, HOSPEEM and EPSU implemented a project on strengthening social dialogue in the new Member States. The goal of this project was twofold: to identify and chart social dialogue processes in the hospital sector in all Member States and to offer assistance with capacity building to trade union and employer organisations in the sector in the Czech Republic and Slovakia.

EPSU and HOSPEEM are now keen to build on this experience and to run a similar project aimed at further engaging social partner organisations in the Baltic countries. HOSPEEM currently has members in Latvia and Lithuania, with EPSU represented in all Baltic countries.

2. Purpose of the Contract

HOSPEEM is seeking the assistance of an external contractor to support the project by carrying out a survey of EPSU and HOSPEEM members to gather information on good practice in retention and new skills anticipation and development. The findings of this research should be presented at the closing conference. The contractor will also be responsible for capacity building with social partner organisations in the Baltic countries and will run the two seminars in Riga and Vilnius. HOSPEEM also expect the contractor to assist with the co-ordination of the project to ensure successful outcomes.

3. Tasks to be performed by the contractor

The contractor will be responsible for the following tasks:

- Preparation of a background report on measures taken by HOSPEEM and EPSU members to support workforce retention and forecast and deliver new skills.
- Preparation of a background report on the dissemination, impact and implementation of the 2009 needlesticks agreement at national level.
- Capacity building with social partners in the Baltic countries to allow them to co-operate more effectively at national level, as well as in feeding information into the European social dialogue process.
- Assisting with the co-ordination of the project.
- Facilitation of seminars in Riga and Vilnius as well as the closing conference.

The background reports should building on literature reviews as well as surveys of the member organisations of EPSU and HOSPEEM.

3.1 Guidance and indications on tasks execution and methodology

It is anticipated that the tasks outlined above will be performed by one consultant/consultancy company.

The selection of the consultant will be significantly guided by their existing expertise in relation to European social dialogue and knowledge of the health care sector as well as capacity building.

The consultant will be expected to prepare not only the questionnaires and reports for the closing conference, but also the documentation to underpin the capacity building seminars in Riga and Vilnius. The consultant should have significant expertise in the facilitation of such events.

Experience of survey research is necessary, and the consultant should have the capacity to ensure a representative response rate in the survey of EPSU and HOSPEEM members. To achieve this, electronic surveys should be followed up with telephone interviews where necessary.

4. Expertise required

The following expertise is considered necessary to carry out this assignment:

- A proven track record of research on policies and practices affecting the European health care sector;
- Experience of working within the framework of the European social dialogue;
- An understanding of industrial relations structures in different countries;
- Experience of running capacity building events;
- Experience of delivering survey based research.

5. Time schedule and reporting

Project duration is from mid July 2010 until May 2011. Seminar and capacity building materials must be made available no less than two weeks prior to each seminar. An interim report should be prepared by October 2010 and a draft final report by April 2011. A final report, taking into account proceedings at the closing conference is required by May 2011.

The consultant should be available to attend an inception meeting in July 2010.

6. Payments and standard contract

Payment will follow the schedule of payment implemented by the Commission. Sub-contracts will be issued outlining tasks and payment schedule.

7. Prices

Prices must be quoted in Euro (using, where appropriate, the conversion rates published in the C Series of the Official Journal on the day when the invitation to tender was issued) and broken down to express:

- Professional fees, expressed as the number of person-days multiplied by the unit price per working day for each expert proposed. This unit price should cover fees and administrative expenditure, but not the reimbursable expenses referred to below.
- Travel and subsistence expenses will be reimbursed separately and should therefore not be included in the bid.

We anticipate that this work will require around 60 working days.
The maximum budget available for the delivery of these task is €30,000.

8. Selection criteria

Expert(s) will be selected on the basis of their expertise and capacity to deliver the work tendered for as evidenced by a brief outline of the key issues relating to active ageing, a proposed methodology for working and a CV.

9. Award criteria

The contract will be awarded to the tenderer whose offer represents the best value for money – taking into account the following criteria:

- Evidenced track record of research in the area of retention and anticipation of skills
- Experience of working with social partners
- Particular expertise of the hospital sector
- Understanding of the nature of the assignment
- Proposed methodology for conducting the work

It should be noted that the contract will not be awarded to a tenderer who receives less than 70% of the award criteria.

10. Content and presentation of the bids

10.1 Content of the bids

Tenderers must include:

- All information and documents necessary to enable the steering group to appraise the bid on the basis of the selection and award criteria (see points 8 and 9 above);
- A detailed CV of the expert(s)

10.2 Presentation of the bids

Bids should be presented in triplicate and must contain all the information requested in points 8, 9 and 10). Bids must be presented to meet the deadline in line with the specific requirements of the tendering process.