EEA Financial Mechanism 2014-2021

PROGRAMME AGREEMENT

between

The Financial Mechanism Committee

established by Iceland, Liechtenstein and Norway

and

The General Directorate for European Non-reimbursable Financial Mechanisms and Instruments (GDENFMI), Ministry of European Funds,

hereinafter referred to as the "National Focal Point",

representing Romania,

hereinafter referred to as the "Beneficiary State"

together hereinafter referred to as the "Parties"

for the financing of the Programme "European Public Health Challenges"

hereinafter referred to as the "Programme"

Chapter 1
Scope, Legal Framework, and Definitions

Article 1.1
Scope

This programme agreement between the Financial Mechanism Committee (hereinafter referred to as the FMC) and the National Focal Point lays down the rights and obligations of the Parties regarding the implementation of the Programme and the financial contribution from the EEA Financial Mechanism 2014-2021 to the Programme.

Article 1.2
Legal Framework

1. This programme agreement shall be read in conjunction with the following documents which, together with this programme agreement, constitute the legal framework of the EEA Financial Mechanism 2014-2021:

(a) Protocol 38c to the EEA Agreement on the EEA Financial Mechanism 2014-2021;

(b) the Regulation on the implementation of the EEA Financial Mechanism 2014-2021 (hereinafter referred to as the "Regulation") issued by the Donor States in accordance with Article 10(5) of Protocol 38c;

(c) the Memorandum of Understanding on the Implementation of the EEA Financial Mechanism 2014-2021 (hereinafter referred to as the "MoU"), entered into between the Donor States and the Beneficiary State; and

(d) any guidelines adopted by the FMC in accordance with the Regulation.

2. In case of an inconsistency between this programme agreement and the Regulation, the Regulation shall prevail.

3. The legal framework is binding for the Parties. An act or omission by a Party to this programme agreement that is incompatible with the legal framework constitutes a breach of this programme agreement by that Party.

Article 1.3
Definitions

Terms used and institutions and documents referred to in this programme agreement shall be understood in accordance with the Regulation, in particular Article 1.6 thereof, and the legal framework referred to in Article 1.2 of this programme agreement.

Article 1.4
Annexes and hierarchy of documents

1. Annexes attached hereto form an integral part of this programme agreement. Any reference to this programme agreement includes a reference to its annexes unless otherwise stated or clear from the context.

2. The provisions of the annexes shall be interpreted in a manner consistent with this programme agreement. Should the meaning of any provision of the said annexes, so interpreted, remain inconsistent with this programme agreement, the provisions of the annexes shall prevail, provided that these provisions are compatible with the Regulation.

3. Commitments, statements and guarantees, explicit as well as implicit, made in the preparation of the programme are binding for the National Focal Point and the Programme Operator unless otherwise explicitly stipulated in the annexes to this programme agreement.

Chapter 2
The Programme

Article 2.1
Co-operation

1. The Parties shall take all appropriate and necessary measures to ensure fulfilment of the obligations and objectives arising out of this programme agreement.

2. The Parties agree to provide all information necessary for the good functioning of this programme agreement and to apply the principles of implementation as set out in the Regulation.

3. The Parties shall promptly inform each other of any circumstances that interfere or threaten to interfere with the successful implementation of the Programme.

4. In executing this programme agreement the Parties declare to counteract corrupt practices. Further, they declare not to accept, either directly or indirectly, any kind of offer, gift, payments or benefits which would or could be construed as illegal or corrupt practice. The Parties shall immediately inform each other of any indication of corruption or misuse of resources related to this programme agreement.

Article 2.2
Main responsibilities of the Parties

1. The National Focal Point is responsible and accountable for the overall management of the EEA Financial Mechanism 2014-2021 in the Beneficiary State and for the full and correct implementation of

this programme agreement. In particular, the National Focal Point undertakes to:

(a) comply with its obligations stipulated in the Regulation and this programme agreement;

(b) ensure that the Certifying Authority, the Audit Authority, the Irregularities Authority and the Programme Operator properly perform the tasks assigned to them in the Regulation, this programme agreement and the programme implementation agreement;

(c) take all necessary steps to ensure that the Programme Operator is fully committed and able to implement and manage the Programme;

(d) take the necessary measures to remedy irregularities in the implementation of the Programme and ensure that the Programme Operator takes appropriate measures to remedy irregularities in Projects within the Programme, including measures to recover misspent funds;

(e) make all the necessary and appropriate arrangements in order to strengthen or change the way the Programme is managed.

2. The FMC shall, subject to the rules stipulated in the legal framework referred to in Article 1.2 of this programme agreement, make available to the Beneficiary State a financial contribution (hereinafter referred to as "the programme grant") to be used exclusively to finance the eligible cost of the Programme.

Article 2.3
Objective and outcomes of the Programme

1. This programme agreement sets out the objective, outcome(s), outputs, indicators and targets for the Programme.

2. The National Focal Point shall ensure that the Programme Operator implements and completes the Programme in accordance with the objective, outcome(s), outputs, indicators and targets set for the Programme.

Article 2.4
Programme grant

1. The maximum amount of the programme grant, the programme grant rate, and the estimated eligible cost of the Programme shall be as specified in this programme agreement.

2. In case the Programme is also supported by the Norwegian Financial Mechanism, this programme agreement shall be interpreted in conjunction with the agreement regulating that support.

3. The financial plan annexed to this programme agreement shall:

(a) contain a breakdown between the Programme's budget headings;

(b) indicate the agreed advance payment, if any.

4. The management cost of the Programme Operator shall not exceed the amount specified in this programme agreement.

Article 2.5
Special conditions and programme specific rules

1. This programme agreement shall list any conditions set by the FMC with reference to paragraph 2 of Article 6.3 of the Regulation. The National Focal Point shall ensure compliance with these conditions and take the necessary steps to ensure their fulfilment.

2. The National Focal Point shall ensure compliance with any other programme specific rules laid down in this programme agreement.

Article 2.6
Programme implementation agreement

With reference to Article 6.8 of the Regulation and without prejudice to paragraph 2 thereof, the National Focal Point shall, before any payment is made to the Programme, sign a programme implementation agreement with the Programme Operator. The National Focal Point shall notify the FMC of such signing.

Article 2.7
Reporting

The National Focal Point shall ensure that the Programme Operator provides financial reports, annual programme reports and a final programme report in accordance with Chapter 9 and Articles 6.11 and 6.12 of the Regulation as well as statistical reporting in accordance with guidelines adopted by the FMC.

Article 2.8
External monitoring

The external monitoring and audit referred to in Articles 11.1, 11.2, 11.3 and 11.4 of the Regulation shall not in any way relieve the National Focal Point or the Programme Operator of their obligations under the legal framework regarding monitoring of the Programme and/or its projects, financial control and audit.

Article 2.9
Modification of the Programme

1. Unless otherwise explicitly stipulated in this programme agreement, any modification of the Programme is subject to prior approval by the FMC.

2. Programme specific exceptions from paragraph 1, if any, are set in the annexes to this programme agreement.

3. Expenditures incurred in breach of this article are not eligible.

4. Should there be a doubt as to whether the proposed modifications require approval by the FMC, the National Focal Point shall consult the FMC before such modifications take effect.

5. Requests for modifications shall be submitted and assessed in accordance with Article 6.9 of the Regulation.

Article 2.10
Communication

1. All communication to the FMC regarding this programme agreement shall take place in English and be directed to the Financial Mechanism Office (hereinafter referred to as the FMO), which represents the FMC towards the National Focal Point and the Programme Operator in relation to the implementation of the Programme.

2. To the extent that original documents are not available in the English language, the documents shall be accompanied by full and accurate translations into English. The National Focal Point shall bear the responsibility for the accuracy of the translation that it provides and the possible consequences that might arise from any inaccurate translations.

Article 2.11
Contact information

1. The contact information of the Programme Operator is as specified in this programme agreement.

2. The contact information for the FMC and the Financial Mechanism Office are:

Financial Mechanism Office
Att: Director
EFTA Secretariat
Rue Joseph II, 12-16
1000 Brussels
Telephone: +32 (0)2 286 1701
Telefax (general): +32 (0)2 211 1889
E-mail: fmo@efta.int

3. Changes of or corrections to the contact information referred to in this article shall be given in writing without undue delay by the Parties to this programme agreement.

Article 2.12
Representations and Warranties

1. This programme agreement and the awarding of the programme grant is based on information provided by, through, or on behalf of the National Focal Point to the FMC prior to the signing of this programme agreement.

2. The National Focal Point represents and warrants that the information provided by, through, or on behalf of the National Focal Point, in connection with the implementation or conclusion of this programme agreement are authentic, accurate and complete.

Chapter 3
Projects

Article 3.1
Selection of projects and award of grants

1. The National Focal Point shall ensure that the Programme Operator selects projects in accordance with Chapter 7 of the Regulation and this programme agreement.

2. Eligibility of project promoters and project partners is stipulated in Article 7.2 of the Regulation and, in accordance with paragraph 4 thereof, subject only to the limitations stipulated in this programme agreement.

3. Pre-defined projects shall be outlined in this programme agreement.

4. The National Focal Point shall take proactive steps to ensure that the Programme Operator complies fully with Article 7.5 of the Regulation.

Article 3.2
Project contract

1. For each approved project a project contract shall be concluded between the Programme Operator and the Project Promoter.

2. In cases where a project contract cannot, due to provisions in the national legislation, be made between the Programme Operator and the Project Promoter, the Beneficiary State may instead issue a legislative or administrative act of similar effect and content.

3. The content and form or the project contract shall comply with Article 7.6 of the Regulation.

4. The National Focal Point shall ensure that the obligations of the Project Promoter under the project

contract are valid and enforceable under the applicable law of the Beneficiary State.

Article 3.3
Project partners and partnership agreements

1. A project may be implemented in a partnership between the Project Promoter and project partners as defined in paragraph 1(w) of Article 1.6 of the Regulation. If a project is implemented in such a partnership, the Project Promoter shall sign a partnership agreement with the project partners with the content and in the form stipulated in Article 7.7 of the Regulation.

2. The partnership agreement shall be in English if one of the parties to the agreement is an entity from the Donor States.

3. The eligibility of expenditures incurred by a project partner is subject to the same limitations as would apply if the expenditures were incurred by the Project Promoter.

4. The creation and implementation of the relationship between the Project Promoter and the project partner shall comply with the applicable national and European Union law on public procurement as well as Article 8.15 of the Regulation.

5. The National Focal Point shall ensure that the Programme Operator verifies that the partnership agreement complies with this article. A draft partnership agreement or letter of intent shall be submitted to the Programme Operator before the signing of the project contract.

Chapter 4
Finance

Article 4.1
Eligible expenditures

1. Subject to Article 8.7 of the Regulation, eligible expenditures of this Programme are:

(a) management costs of the Programme Operator in accordance with the detailed budget in the financial plan;

(b) payments to projects within this Programme in accordance with the Regulation, this programme agreement and the project contract.

2. Eligible expenditures of projects are those actually incurred by the Project Promoter or project partners, meet the criteria set in Article 8.2 of the Regulation and fall within the categories and fulfil the conditions of direct eligible expenditure set in Article 8.3 of the Regulation, the conditions regarding the use of standard scales of unit costs set in Article 8.4 of the Regulation as well as indirect costs in accordance with Article 8.5 of the Regulation.

4. The first date of eligibility of expenditures in projects shall be set in the project contract in accordance with Article 8.13 of the Regulation. The first date of eligibility of any pre-defined projects shall be no earlier than the date on which the National Focal Point notifies the FMC of a positive appraisal of the pre-defined projects by the Programme Operator in accordance with paragraph 3 of Article 6.5 of the Regulation.

5. The maximum eligible costs of the categories referred to in paragraph 1 are set in this programme agreement. Programme specific rules on the eligibility of expenditure set in this programme agreement shall be complied with.

Article 4.2
Proof of expenditure

Costs incurred by Programme Operators, Project Promoters and project partners shall be supported by documentary evidence as required in Article 8.12 of the Regulation.

Article 4.3
Payments

1. Payments to the Programme shall be made when all relevant conditions for payments stipulated in this programme agreement and the Regulation have been fulfilled.

2. Payments to the Programme shall take the form of an advance payment, interim payments and payment of the final balance and shall be made in accordance with Articles 9.2, 9.3 and 9.4 of the Regulation.

3. Payments of the project grant to the Project Promoters may take the form of advance payments, interim payments and payments of the final balance. The level of advance payments and their off-set mechanism is set in this programme agreement.

4. The National Focal Point shall ensure that payments are transferred in accordance with paragraph 2 of Article 9.1 of the Regulation.

5. Chapter 9 of the Regulation shall apply to all aspects related to payments, including currency exchange rules and handling of interests on bank accounts.

Article 4.4
Transparency and availability of documents

The National Focal Point shall ensure an audit trail for financial contributions from the EEA Financial

Mechanism 2014-2021 to the Programme in accordance with Article 9.8 of the Regulation.

Article 4.5
Irregularities, suspension and reimbursements

The FMC has the right to make use of the remedies provided in the Regulation, in particular Chapter 13 thereof. The National Focal Point has a duty to take all necessary measures to ensure that the provisions in Chapter 12 and 13 of the Regulation regarding irregularities, suspension of payments, financial corrections and reimbursement are complied with.

Chapter 5
Final provisions

Article 5.1
Dispute settlement

1. The Parties waive their rights to bring any dispute related to the programme agreement before any national or international court, and agree to settle such a dispute in an amicable manner.

2. If a demand for reimbursement to the FMC is not complied with by the Beneficiary State, or a dispute related to a demand for reimbursement arises that cannot be solved in accordance with paragraph 1, the Parties may bring the dispute before Oslo Tingrett.

Article 5.2
Termination

1. The FMC may, after consultation with the National Focal Point, terminate this programme agreement if:

(a) a general suspension decision according to Article 13.6 of the Regulation or a decision to suspend payments according to paragraph 1(h) of Article 13.1 of the Regulation has not been lifted within 6 months of such a decision;

(b) a suspension of payments according to Article 13.1 of the Regulation, other than under paragraph 1(h), has not been lifted within one year of such a decision;

(c) a request for reimbursement according to Article 13.2 of the Regulation has not been complied with within one year from such a decision;

(d) the Programme Operator becomes bankrupt, is deemed to be insolvent, or declares that it does not have the financial capacity to continue with the implementation of the Programme; or

(e) the Programme Operator has, in the opinion of the FMC, been engaged in corruption, fraud or similar activities or has not taken the appropriate measures to detect or prevent such activities or, if they have occurred, nullify their effects.

2. This programme agreement can be terminated by mutual agreement between the Parties.

3. Termination does not affect the right of the Parties to make use of the dispute settlement mechanism referred to in Article 5.1 or the right of the FMC to make use of the remedies provided in Chapter 13 of the Regulation.

Article 5.3
Waiver of responsibility

1. Any appraisal of the Programme undertaken before or after its approval by the FMC, does not in any way diminish the responsibility of the National Focal Point and the Programme Operator to verify and confirm the correctness of the documents and information forming the basis of the programme agreement.

2. Nothing contained in the programme agreement shall be construed as imposing upon the FMC or the FMO any responsibility of any kind for the supervision, execution, completion, or operation of the Programme or its projects.

3. The FMC does not assume any risk or responsibility whatsoever for any damages, injuries, or other possible adverse effects caused by the Programme or its projects including, but not limited to inconsistencies in the planning of the Programme or its projects, other project(s) that might affect it or that it might affect, or public discontent. It is the full and sole responsibility of the National Focal Point and the Programme Operator to satisfactorily address such issues.

4. Neither the National Focal Point, the Programme Operator, entities involved in the implementation of projects, nor any other party shall have recourse to the FMC for further financial support or assistance to the Programme in whatsoever form over and above what has been provided for in the programme agreement.

5. Neither the European Free Trade Association, its Secretariat, including the FMO, its officials or employees, nor the FMC, its members or alternate members, nor the EFTA States, can be held liable for any damages or injuries of whatever nature sustained by the National Focal Point or the Beneficiary State, the Programme Operator, Project Promoters or any other third person, in connection, be it direct or indirect, with this programme agreement.

6. Nothing in this programme agreement shall be construed as a waiver of diplomatic immunities and privileges awarded to the European Free Trade Association, its assets, officials or employees.

1. This programme agreement shall enter into force on the date of the last signature of the Parties.

2. This programme agreement shall remain in force until five years have elapsed after the date of the acceptance of the final programme report.

Article 5.4
Entry into force and duration

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This programme agreement is drawn up in two originals in the English language.

For the Donors	For the National Focal Point
Signed in Oslo on 02/07/2018	Signed in Bucharest on 16/07/2018
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Niels Engelschiøn Chairman of the EEA Financial Mechanism Committee	Minister for European Funds

Annex I to the Programme Agreement

Programme Operators and Partners	
Programme Operator:	Ministry of Health - Romania
Donor Programme Partner:	Norwegian Directorate of Health (HDIR)
IPO:	-
Other Programme Partner(s):	-

Programme Objective	Improved prevention and reduced inequalities in health

PA	Outcome/Output	Expected programme results	Indicator	Disaggregation	Unit of measurement	Source of verification	Frequency of reporting	Baseline values	Baseline year	Target value
PA06	Outcome 1	Policies and services for prevention of diseases improved	Percentage of women screened under the CEDICROM 1 project that have received follow-up treatment with mobile unit	Roma	Percentage	Project promoter's records	Annually (APR)	0 %	2018	100 %
			Number of family doctors practices using the PREVENT solution	N/A	Cumulative number	Project Promoter's records	Annually (APR)	100	2018	200
			Percentage of early detection of heart failure due to ischemic heart disease	N/A	Percentage	Local, regional and national statistics	Annually (APR)	5.9 %	2017	40 %
			Satisfaction with level of health care services received	N/A	Scale 1-5	Survey results	Annually (APR)	5	2022	4
			Percentage of women screened under the CEDICROM 2 project that have received follow-up treatment with mobile unit	Roma	Percentage	Project promoter's records	Annually (APR)	0 %	2018	100 %
	Output 1.1	Data analysed for the purpose of	Number of studies on the prevalence of the most	N/A	Cumulative number	Copy of studies	Semi-annually	0	N/A	2

		developing adequate health policies at national and local level	frequent diseases in adults and children				(APR and September IFR)			
			Study on prevalence of the socio-economic determinants of health and of risk factors for health carried out	N/A	Binary	Copy of studies	Semi-annually (APR and September IFR)	No	N/A	Yes
	Output 1.2	Guidance tools for Primary Health Care level developed/updated	Number of community teams using the guidance tools at local level	N/A	Cumulative number	Project Promoter's records	Semi-annually (APR and September IFR)	0	N/A	84
			Number of guidance tools published	N/A	Cumulative number	Copy of guidance tools	Semi-annually (APR and September IFR)	0	N/A	2
	Output 1.3	Capacity building and monitoring services provided	Number of medical students and residents/volunteers who completed Youth Sexual and Reproductive Health Training as educators	N/A	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	50
			Number of people reached by awareness raising campaigns	Roma	Cumulative number	Project Promoters' records	Semi-annually (APR and September IFR)	0	N/A	50,000
			Number of youth who completed Youth Sexual and Reproductive Health Training (to reduce teen pregnancy)	Gender, Roma	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	500
			Number of community care providers and school nurses trained	N/A	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	120

			Number of District Public Health Directorates personnel trained	N/A	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	100
			Number of family doctors trained	N/A	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	84
	Output 1.4	Integrated health services model implemented	Number of fully functional school cabinets created	N/A	Cumulative number	Monitoring reports	Semi-annually (APR and September IFR)	0	N/A	45
			Number of fully equipped and functional community integrated centres created	N/A	Cumulative number	Monitoring reports	Semi-annually (APR and September IFR)	0	N/A	84
	Output 1.5	Primary and community care services provided to vulnerable groups	Number of preventive cancer screening tests performed for women from vulnerable groups of 7 counties	Roma	Cumulative number	Project Promoters' records	Semi-annually (APR and September IFR)	0	N/A	7,000
			Number of women (young girls and catch-up campaigns for Human Papilloma Virus- HPV) vaccinated with HPV vaccines	Roma	Cumulative number	Project Promoters' records	Semi-annually (APR and September IFR)	0	N/A	1,000
			Number of women reached by "door to door" information campaign on cervical cancer prevention	Roma	Cumulative number	Project Promoters' records	Semi-annually (APR and September IFR)	0	N/A	30,000
	Output 1.6	Medical registries developed	Number of persons trained to use the new registries	N/A	Cumulative number	Project Promoters' records,	Semi-annually (APR and	0	N/A	15

						Attendance sheets	September IFR)			
			Medical Registry to track left ventricular remodelling as a result of acute myocardial infarction developed	N/A	Binary	Project Promoter's records	Semi-annually (APR and September IFR)	No	N/A	Yes
PA06	Outcome 2	Access to health care services for vulnerable groups improved	Number of policies adapted to the needs in mental health area	N/A	Cumulative number	Formal responses	Annually (APR)	0	N/A	1
			Percentage of cured cases in paediatric oncology	N/A	Percentage	Local and National statistics	Annually (APR)	60 %	2017	70 %
			Number of children with mental disorders with access to services	Roma	Cumulative number	Statistics on medical records	Annually (APR)	8,000	2017	11,000
			Satisfaction with outreach services among people from vulnerable groups	N/A	Scale 1-5	Survey results	Annually (APR)	5	2022	4
			Treatment success rate (%) of bacteriologically confirmed new tuberculosis cases	N/A	Percentage	National TB programme data	Annually (APR)	86 %	2018	90 %
			Tuberculosis mortality rate (per 100,000 population)	N/A	Rate	National TB programme data	Annually (APR)	4.4	2018	4
			Case notification rate of all forms of tuberculosis[1]	N/A	Rate	National TB programme data	Annually (APR)	64.9	2017	50
			Number of national action plans for AMR and HAI piloted	N/A	Cumulative number	Project Promoter's records	Annually (APR)	0	N/A	1
	Output 2.1	Rapid diagnostic tests for early diagnosis of	Number of persons tested for tuberculosis	N/A	Cumulative number	National TB programme data	Semi-annually (APR and	0	N/A	15,300

[1] Per 100,000 population; bacteriologically confirmed plus clinically diagnosed, new and previously treated cases

		tuberculosis conducted					September IFR)			
	Output 2.2	Ambulatory care patient-centred approach rolled-out in line with WHO recommendations	Number of M/XDR tuberculosis patients receiving adequate social and psychological treatment and support	N/A	Cumulative number	National TB programme data	Semi-annually (APR and September IFR)	0	N/A	600
	Output 2.3	Capacity building provided for diagnostic services in haematology and paediatric oncology area improved	Annual number of children reached by the programme	Roma	Annual number	Project Promoter's records	Semi-annually (APR and September IFR)	0	N/A	450
			Guideline for diagnosis and treatment for all localizations in the paediatric oncology and haematology field developed	N/A	Binary	Copy of the guidelines	Semi-annually (APR and September IFR)	No	N/A	Yes
			Number of professional staff trained in the paediatric haematology and oncology and radiotherapy field	N/A	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	84
	Output 2.4	Appropriate early intervention treatment services provided for children at risk of developing mental health disorders	National study conducted on the incidence of mental health disorders among children and adolescents, especially pervasive developmental disorders	N/A	Binary	Copy of the study	Semi-annually (APR and September IFR)	No	N/A	Yes
			Number of standards for mental health community services developed and implemented	N/A	Cumulative number	The published standards' manual	Semi-annually (APR and September IFR)	0	N/A	8

	Output 2.5	Outreach services and other projects provided to vulnerable groups	Number of vulnerable persons that have received health care services	Roma	Cumulative number	Project Promoters' records	Semi-annually (APR and September IFR)	0	N/A	56,000 [2]
			Number of projects to improve access to health care services in remote areas or for vulnerable groups	N/A	Cumulative number	Project Promoter's records	Semi-annually (APR and September IFR)	0	N/A	18
	Output 2.6	Capacity to address antimicrobial resistance and healthcare associated infections in Romania strengthened	Methodologies for AMR and HAI developed and piloted in 5 hospitals	N/A	Binary	Copy of guideline	Semi-annually (APR and September IFR)	No	N/A	Yes
			Number of operational tools for national action plan for AMR and HAI developed	N/A	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	3
			Number of specialist (microbiologists, epidemiologists, infectious diseases specialists, antibiotic stewards specialists) from 5 hospitals trained	N/A	Cumulative number	Project Promoters' records, Attendance sheets	Semi-annually (APR and September IFR)	0	N/A	170
PA06	Bilateral Outcome	Enhanced collaboration between beneficiary and donor state entities involved in the programme	Level of satisfaction with the partnership	N/A	Scale 1-7	Survey results	Annually (APR)	4.8	2020	4.5 [3]
			Level of trust between cooperating entities in Beneficiary States and Donor States	N/A	Scale 1-7	Survey results	Annually (APR)	5.27	2020	4.5 [4]
			Share of cooperating organisations that apply the	N/A	Percentage	Survey results	Annually (APR)	N/A	N/A	60 %

[2] At least 11,200 Roma
[3] Target is ≥4.5, and an increase on the baseline value
[4] Target is ≥4.5, and an increase on the baseline value

			knowledge acquired from bilateral partnership							
	Bilateral Output 1	Knowledge exchanged between Romania and EEA countries in the area of health	Number of bilateral initiatives in Romania or EEA countries for strengthening bilateral cooperation, exchange of good practices, know-how in health area	N/A	Cumulative number	Project Promoter's records	Semi-annually (APR and September IFR)	0	N/A	10
			Number of projects involving cooperation with a donor project partner	N/A	Cumulative number	Copies of contracts concluded with Project Promoters, Partnership agreements between Project Promoters and project partners	Semi-annually (APR and September IFR)	0	N/A	10

Conditions

General

1. For the following indicators where the baseline value is "to be determined" (TBD), the Programme Operator shall submit to the FMO the baseline value, together with a description of the data collection method used, within 6 months of the contracting of the relevant projects. Updated baseline values shall be agreed upon through a modification of the programme agreement:

a. Outcome 1 indicator "Percentage of women screened under the CEDICROM 1 project that have received follow-up treatment with mobile unit (disaggregated by Roma)"

b. Outcome 1 indicator "Satisfaction with level of health care services received"

c. Outcome 2 indicator "Satisfaction with outreach services among people from vulnerable groups"

2. The maximum level of funding available from the total eligible expenditure of the programme for infrastructure (hard measures) shall be 50%.

3. At least 10% of the total eligible costs of the Programme shall target the improvement of the situation of the Roma population. The fulfilment of this condition shall be reported on, through the use of quantitative and qualitative data, inter alia, in the annual and final programme reports.

4. The National Focal Point shall ensure that the Programme Operator ensures that synergies with the programme 'Local Development' are sought in the implementation of the programme.

7. The Programme Operator shall ensure that an ex ante control of public procurement procedures and documentation carried out within projects implemented under the Programme is carried out by a competent independent entity, other than the respective project promoter, in accordance with the applicable Romanian public procurement law.

8. The Programme Operator shall inform and coordinate its actions with the Global Fund to Fight AIDS, Tuberculosis and Malaria in order to avoid overlap and to seek and achieve synergies.

9. The National Focal Point shall ensure that the Programme Operator ensures that Project Promoters:

-Keep any buildings purchased, constructed, renovated or reconstructed under the project in their ownership for a period of at least 5 years following the completion of the project and continue to use such buildings for the benefit of the overall objectives of the project for the same period;

- Keep any buildings purchased, constructed, renovated or reconstructed under the project properly insured against losses such as fire, theft and other normally insurable incidents both during project implementation and for at least 5 years following the completion of the project; and

- Set aside appropriate resources for the maintenance of any buildings purchased, constructed, renovated or reconstructed under the project for at least 5 years following the completion of the project. The specific means for implementation of this obligation shall be specified in the project contract.

10. The Programme Operator shall in the Annual and Final Programme Reports, report on the implementation of the 'Plan for enhancing of the management capacity of the Programme Operator', submitted in accordance with the Memorandum of Understanding.

11. The Programme Operator shall ensure that expenditures by the project promoters and project partners related to project management and administration are proportionate and necessary in order to achieve the objectives of the projects.

Pre-eligibility

1. No costs shall be eligible under pre-defined project no. 1 (number under Section 5.1 of Annex II to the Programme Agreement) before a detailed description and budget for the pre-defined project, including the role and contribution of any project partner(s), has been agreed with the project partner(s), has been submitted by the PO and the FMC has confirmed the grant to the project as described in Annex 2 to this Programme Agreement.

3. No costs shall be eligible under pre-defined project no. 4 (number under Section 5.1 of Annex II to the Programme Agreement) before a revised detailed description and budget for the pre-defined project, including the role and contribution of any donor project partner(s), has been agreed with the donor project partner(s), has been submitted by the PO and the FMC has confirmed the grant to the project as described in Annex 2 to this Programme Agreement.

4. No costs shall be eligible under pre-defined project no. 5 (number under Section 5.1 of Annex II to the Programme Agreement) before a revised detailed description and budget for the pre-defined project, has been submitted by the PO and the FMC has confirmed the grant to the project as described in Annex 2 to this Programme Agreement.

5. No costs shall be eligible under pre-defined project no. 8 (number under Section 5.1 of Annex II to the Programme Agreement) before the detailed description and budget for the pre-defined project, including the role and contribution of any donor project partner(s), has been agreed with the donor project partner(s), has been submitted by the PO and the FMC has confirmed the grant to the project as described in Annex 2 to this Programme Agreement.

Pre-payment

Not applicable

Pre-completion

Not applicable

Post-completion

Not applicable

Eligibility of costs - period	**First date**	**Final date**
Eligibility of costs	14/10/2016	30/04/2025
Grant rate and co-financing		
Programme eligible expenditure (€)		€ 44,861,765
Programme grant rate (%)		85.00 %
Maximum amount of Programme grant - EEA Financial Mechanism (€)		€ 38,132,500
Maximum amount of Programme grant - Norwegian Financial Mechanism (€)		-
Maximum amount of Programme grant - Total (€)		€ 38,132,500

PA	Budget Heading	EEA Grants	Total grant	Programme grant rate	Programme co-financing	Programme eligible expenditure	Advance payment
PA06	Programme management	€ 761,726	€ 761,726	85.00 %	€ 134,422	€ 896,148	€ 436,832
PA06	Outcome 1 (EEA Grants)	€ 10,727,853	€ 10,727,853	85.00 %	€ 1,893,151	€ 12,621,004	€ 500,000
PA06	Outcome 2 (EEA Grants)	€ 26,642,921	€ 26,642,921	85.00 %	€ 4,701,692	€ 31,344,613	€ 1,562,500
Total		**€ 38,132,500**	**€ 38,132,500**	**85.00 %**	**€ 6,729,265**	**€ 44,861,765**	**€ 2,499,332**

Retention of management costs	
Retention of management costs - Percentage of the management costs	10.00 %
Retention of management costs - Planned Euro value	€ 89,615

European Public Health Challenges

Operational rules (Annex II)

1. **Programme summary**

This Annex sets out the operational rules for the programme. The programme agreement is based on the MoU, the concept note and comments made by the FMC. Commitments, statements and guarantees, explicit as well as implicit, made in the concept note, are binding for the National Focal Point and the Programme Operator unless otherwise explicitly stipulated in the annexes to this programme agreement.

The Programme Operator is the Romanian Ministry of Health. The Norwegian Health Directorate (HDIR) is the Donor Programme Partner (DPP).

The programme objective 'Improved prevention and reduced inequalities in health', will be achieved through two outcomes:

The programme shall support the outcome 'Policies and services for the prevention of diseases improved' (Outcome 1) by way of three pre-defined projects (PDPs).

The first PDP under Outcome 1, entitled 'Strengthening the National Network of Primary Health Care Providers to improve the Health Status of the Population, children and adults (including vulnerable population' (PDP No 1), shall focus on prevention through primary care and community care by way of improving existing community centres and community care networks and strengthening evidence based policy at all levels of healthcare including evaluation of population health needs, development of a feasibility study for causes of death registry. The project builds on the results of the Roma health mediator project supported by the RO19 programme under the Norwegian Financial Mechanism 2009-2014.

The second PDP under Outcome 1, entitled 'Strengthening at National level the capacity of the Romanian Health Sector to implement Organized Screening for Cancers amenable to cost-effective early detection interventions - CEDICROM 2' (PDP No 2) shall improve the quality assurance of integrated preventive and curative medical services related to cervical cancer prevention among disadvantaged population at risk living in communities in remote areas. The project builds on the results of the „CEDICROM 1" project supported by the RO19 programme under the Norwegian Financial Mechanism 2009-2014.

The third PDP under Outcome 1, entitled 'Creating a registry to track left ventricular remodelling as a result of acute myocardial infarction in order to prevent heart failure' (PDP No 4) will create a risk model to identify the predictors of heart failure development in long-term acute myocardial infarction survivors as well as creating a cardiac insufficiency registry based on the Norwegian Registry in cardiovascular diseases.

The planned PDP No 3 'Development of a single healthcare professional registry' and SGS No 1 were cancelled.

The programme shall support the outcome 'Access to health care services for vulnerable groups improved' (Outcome 2) by way of four pre-defined projects, one call for project proposals and one SGS.

The first PDP under Outcome 2, entitled 'Strengthening the TB control in Romania through the implementation of the WHO END TB Strategy 2016-2020' (PDP No 5) shall focus on strengthening the TB control and surveillance system and network in Romania. It shall decrease the hospitalization period, involving family doctors in TB diagnostic and monitoring and improving the diagnostic and treatment results through universal access to rapid diagnostic and complete and correct treatment regimes. The project builds on the results of the TB-project supported by the RO19 programme under the Norwegian Financial Mechanism 2009-2014.

The second PDP under Outcome 2, entitled 'Increased performance regarding diagnosis and treatment of children's cancer by improving technical equipment, purchase of devices, medical personnel training and development of guidelines' (PDP No 6) shall focus on the improved diagnosis and treatment of children's cancer through the acquisition of equipment, training programmes for health professionals in using the equipment and improving their diagnostic and therapeutic skills as well as developing and implementing guidelines for diagnosis and treatment in paediatric oncology according to European standards.

The third PDP under Outcome 2, entitled 'Support for the development of Community Mental Services for children and adolescents' (PDP No 7) will carry out a National survey on the incidence of mental health disorders among children and adolescents; early intervention measures through training and awareness raising of families and professionals; and diagnostic services and treatment for children who are at risk.

The fourth PDP under Outcome 2, entitled 'Strengthening the capacity to address antimicrobial resistance (AMR) and healthcare associated infections (HAI) in Romania' (PDP No 8) will develop a National Action Plan to combat AMR and HAI and elaborate standards and protocols, AMR testing, HAI surveillance and antibiotic stewardship in selected hospitals, as well as professional guidelines, training and capacity-building for health professionals.

The call for project proposals under Outcome 2 will support measures for improving access to healthcare for vulnerable groups, including Roma, with a focus on awareness raising, capacity-building and educational campaigns.

The SGS under Outcome 2 (SGS No 2) targets NGOs to provide outreach services to remote and vulnerable populations, such as Roma, in order to complement the interventions made under the PDPs and the call for project proposals.

2. Eligibility

2.1 Eligible applicants:

Outcome(s)	Modality	Eligible applicants (project promoters)	Eligible partners Romania	Eligible partners Donor States
Outcome 2 Access to health care services for vulnerable groups improved	Call for proposals	Public entities	Public entities, NGOs, private entities	Any public or private entity, commercial or non-commercial, as well as non-governmental organisations established as a legal person in one of the Donor States.
Outcome 2 Access to health care services for vulnerable groups improved	Small grant scheme	NGOs	Public entities, NGOs, private entities (general practitioners).	Any public or private entity, commercial or non-commercial, as well as non-governmental organisations established as a legal person in one of the Donor States.

2.2 Special rules on eligibility of costs:
In accordance with Article 8.5.4 of the Regulation, the indirect costs of entities from Romania acting as project promotes or project partners shall be calculated in accordance with Article 8.5.1 (c) of the Regulation.

3. Bilateral relations
3.1 Bilateral relations
The Programme shall contribute to strengthening bilateral relations between Romania and the Donor States.

The Programme shall as appropriate facilitate donor partnership projects by carrying out, inter alia, match-making events and activities in conjunction with launching calls for proposals, as well as by encouraging donor partnership projects in call texts.

The further use of the funds for bilateral relations allocated to the programme shall be agreed in the Cooperation Committee

4. Selection of projects and financial parameters
4.1 Open calls and availability of funds (including number of calls, duration of calls, and estimated size):

Call number	Outcome(s)	Indicative timing for launching the calls	Total amount available (€)	Maximum grant amount per project (€)	Minimum grant amount per project (€)
Call for proposals No 1	Outcome 2	2019	12,500,000	1,000,000	500,000
SGS#2	Outcome 2	2019	1,500,000	200,000	50,000

4.2 Selection procedures:
The project evaluation and award of grants shall be in accordance with Article 7.4 of the Regulation. The Programme Operator shall assess applications received for compliance with the administrative and eligibility criteria. Applicants whose applications are rejected at this stage shall be notified and given ten working days from the date of notification to appeal that decision.

All applications that pass the administrative and eligibility verification shall be subject to a technical and financial evaluation by external (to the Programme Operator) and independent experts contracted by the Programme Operator. Each application shall be scored by three experts, against the selection criteria announced with the call for proposals/SGS. The experts shall separately score the applications on the basis of the documents provided in the applications. For the purpose of ranking the projects, the average of the scores awarded by the experts shall be used. The result of the experts' evaluation shall be a ranking list that forms the basis of the Selection Committee's (SC) discussion.

The SC shall consist of three voting members. Two members shall represent the Programme Operator and one member shall be external to the PO. The representative(s) of the FMC, the DPP, the FMO and the NFP shall be invited to participate in the SC as observers. The SC shall recommend the projects to be funded and may modify the ranking of the projects in justified cases. The justification for the

modifications shall be detailed in the minutes of the meetings and all affected applicants shall be informed in writing about the justification for the modification.

Grants shall be awarded by the Programme Operator to projects on the basis of the ranking list (including reserve list) approved by the Selection Committee. The list with the selected projects will be published on the Programme Operator's website.

4.3 Project grant rate:
Grants from the programme may be up to 100% of total eligible expenditure of the project. In the case of projects where the Project Promoter is an NGO or a social partner, as defined in Article 1.6 of the Regulation, the project grant rate may be up to 90% of eligible expenditure of the project. The project grant rate shall in all cases be set at a level that complies with the State Aid rules in force and takes into account any and all other forms of public support granted to projects. Any remaining costs of the project shall be provided or obtained by the Project Promoter.

5. Additional mechanisms within the Programme
5.1 Pre-defined projects
There will be seven pre-defined projects under the programme:

1) "Strengthening the National Network of Primary Health Care Providers to improve the Health Status of the Population, children and adults (including vulnerable population)"

Project Promoter:	National Institute of Public Health (NIPH)
Donor project partner(s):	Norwegian Institute of Public Health (NIPH) Norwegian Directorate of Health (HDIR)
Other project partner(s):	The National Institute for Maternal and Child Health - Allessandrescu – Rusescu (INSMC) World Health Organisation
Total maximum eligible costs:	€ 8,800,000
Project grant rate:	100.00 %
Maximum project grant amount:	€ 8,800,000

Programme outcome the project contributes to: 'Policies and services for the prevention of diseases improved'.

The project will support increased access to health in 7 counties through health promotion and integrated preventive services, such as community centres. The project will deliver a model of good practice for community health care, bringing health services (especially preventive and health promotion) close to the people in vulnerable communities. The involvement of relevant international organisations as project partners shall be considered and proposed to the FMC for approval.

Project activities shall include:

- A European Health Examination Survey (EHES) and a health needs assessment at local level will be carried out;
- A model of integrated services at community level as well as guidelines for family doctors and community nurses will be developed;
- The "PREVENT" IT solution will be expanded with e.g. modules for reproductive health, oral health, hygiene, injuries and a communication tool;
- New instruments for community care providers will be developed, such as care protocols and standardised recording forms contributing to the development of county health profile, and health promotion materials will be developed and disseminated;

- Training will be carried out for health professionals and community teams, including training of trainers (ToTs);
- New school health cabinets will be created, refurbished and staffed.

2) "Strengthening at National Level the Capacity of the Romanian Health Sector to Implement Organized Screening for Cancers Amenable To Cost-Effective Early Detection Interventions (CEDICROM 2)"

Project Promoter:	The Oncology Institute "Prof. Dr. Ion Chiricuta", Cluj-Napoca (IOCN)
Donor project partner(s):	University Hospital Oslo/Cancer Registry of Norway
Total maximum eligible costs:	€ 2,000,000
Project grant rate:	100.00 %
Maximum project grant amount:	€ 2,000,000

Programme outcome the project contributes to: `Policies and services for the prevention of diseases improved`.

The project will support integrated preventive and curative medical services in primary medical services for marginalized, vulnerable groups provided at the level of communities. Project activities shall include:

- Roll-out of preventive and curative medical services in 7 determined counties for marginalized, vulnerable groups;
- Follow-up and ensure treatment of all cervical lesions found both in CEDICROM 1 and CEDICROM 2 projects (mobile unit treatment);
- Door to door information campaign;
- Access to preventive medical services for cervical cancer prevention at community level;
- HPV vaccination and HPV and “Babes-Papanicolaou” screening tests integrated in family doctors’ medical services packages assisted by mobile units.

3) "Creating a register to track left ventricular remodeling result of acute myocardial infarction in order to prevent cardiac failure"

Project Promoter:	Heart Institute "Niculae Stancioiu" Cluj-Napoca
Donor project partner(s):	Haukeland University Hospital University Hospital of North Norway
Other project partner(s):	Heart Institute Timisoara Emergency County Hospital Oradea
Total maximum eligible costs:	€ 2,500,000
Project grant rate:	100.00 %
Maximum project grant amount:	€ 2,500,000

Programme outcome the project contributes to: `Policies and services for the prevention of diseases improved`.

The project, implemented as a pilot project in 8 counties in the western part of Romania, will support the establishment of a cardiac insufficiency registry based on the Norwegian registry in cardiovascular diseases and develop a risk model that will identify and influence the population at risk with an objective to reduce the burden of cardiovascular diseases. The project will also increase the survival rate of patients who have suffered an acute myocardial infarction by acquisition of medical equipment, by

training professional medical staff and by identifying and promoting a proactive therapeutic approach towards patients at risk of heart failure.

Project activities shall include:

- Early stage and accurate treatment, utilizing the equipment that will be acquired through the project;
- Training of medical professionals;
- Creating a registry tracking patients from the first day after revascularization;
- Carry out awareness and prevention campaigns.

4) "Strengthening the TB control in Romania through implementation of the WHO END TB Strategy 2016-2020"

Project Promoter:	"Marius Nasta" Pneumology Institute
Donor project partner(s):	LHL Tuberculosis Foundation, Norway (LHL)
Total maximum eligible costs:	€ 11,176,470
Project grant rate:	100.00 %
Maximum project grant amount:	€ 11,176,470

Programme outcome the project contributes to: 'Access to health care services for vulnerable groups improved'.

The project shall support the Romanian TB control and surveillance system and network, with an aim to decrease the hospitalization period, involving the family doctors in TB diagnostic and monitoring through the implementation of PAL strategy, and improving diagnostic and treatment results through universal access to rapid diagnostic and complete and correct regimes.

Project activities shall include:

- Ensuring universal access to early diagnosis of TB;
- Support for roll-out of the ambulatory care patient centred approach in line with WHO recommendations;
- Increasing the political commitment through advocacy and lobby activities (including the necessary changes in legislation);
- Increasing the engagement of communities, civil society organizations, and all public and private care providers through IEC and advocacy activities;
- Increasing the TB infection control through implementation of the IC measures at the level of the TB units;
- Increasing TB awareness in Romania among patients, vulnerable groups and general population.

5) "Increase performance regarding diagnosis and treatment of cancers in children by improving technical equipment, purchase of modern devices, medical personnel training and development of guidelines"

Project Promoter:	The Oncology Institute "Prof. Dr. Ion Chiricuta", Cluj-Napoca (IOCN)
Donor project partner(s):	Norwegian Directorate of Health (HDIR)

Other project partner(s):	Oncology Institute Bucharest Children Hospital Louis Turcanu Timisoara Regional Institute of Oncology Iasi
Total maximum eligible costs:	€ 3,750,000
Project grant rate:	100.00 %
Maximum project grant amount:	€ 3,750,000

Programme outcome the project contributes to: 'Access to health care services for vulnerable groups improved'.

The project shall focus on the improved diagnosis and treatment of children's cancer through the acquisition of equipment, training programmes for health professionals in using the equipment and improving their diagnostic and therapeutic skills as well as developing and implementing guidelines for diagnosis and treatment in paediatric oncology according to European standards.

Project activities shall include:

- Developing and implementing national guidelines for diagnosis and treatment of cancer in children using radiotherapy;
- Purchasing and installing of high-quality medical equipment for diagnosis and treatment of paediatric cancer;
- Training physicians to use chemotherapy or irradiation to treat children with cancer at four regional hospitals;
- Awareness raising on using radiotherapy for treating children with cancer.

6) "Support for the Development of Community Mental services for children and adolescents"

Project Promoter:	National Centre of Mental Health and Anti-drug Action (CNSMLA)
Donor project partner(s):	Norwegian University of Science and Technology (Trondheim) - The Regional Academic Community for Autism, ADHD, Tourette's Syndrome and Narcolepsy (RFM)
Total maximum eligible costs:	€ 2,500,000
Project grant rate:	100.00 %
Maximum project grant amount:	€ 2,500,000

Programme outcome the project contributes to: 'Access to health care services for vulnerable groups improved'.

The project shall support raising awareness and improving capacities of community members, parents, professionals in primary care, education and social protection field to better support children at risk and/or with mental health disorders, develop appropriate community mental health services for children with mental health disorders, and improve access to health care services for children with mental health disorders.

Project activities shall include:

- development and implementation of a national awareness raising campaign tackling stigma around mental health, the main barrier in accessing support services;
- development of positive parenting skills and empowerment of parents to identify early signs of emotional risk in their children and to make timely referrals to specialised services;

- capacity building for professionals in primary care, education and social protection sectors for timely identification and referral of children at risk of developing a mental health disorder/ with mental health disorders;
- elaboration of a national study on the incidence of mental health disorders among children and adolescents, especially pervasive developmental disorders;
- elaboration of 8 standards for mental health community services developed and implemented;
- capacity building for professionals in mental health field in order to treat children with mental health disorders – pervasive disorders, ADHD, anxiety disorders, depression, attachment disorders;
- mental health service delivery for children diagnosed with a mental health disorder in 6 selected pilot community mental health centres.

7) "Strengthening the capacity to address antimicrobial resistance (AMR) and healthcare associated infections (HAI) in Romania"

Project Promoter:	National Institute of Infectious Diseases “Professor Dr.Matei Bals”
Donor project partner(s):	Norwegian Institute of Public Health (NIPH)
Total maximum eligible costs:	€ 1,761,494
Project grant rate:	100.00 %
Maximum project grant amount:	€ 1,761,494

Programme outcome the project contributes to: 'Access to health care services for vulnerable groups improved'.

The project shall support monitoring of Anti-Microbial Resistance (AMR) and Hospital Acquired Infections (HAI) and stewardship on antibiotics prescription through developing National Strategy and National Action Plan, elaboration standards and protocols, AMR testing, HAI surveillance and antibiotic stewardship in public hospitals, as well as professional guidelines, training and capacity-building for health professionals.

Project activities shall include:

- Development of National Strategy and National Action Plan to combat AMR and HAI;
- Developing the operational tools (guidelines and procedures) to ensure an effective and sustainable implementation of NAP: guideline regarding to microbiological diagnosis and antibiotic resistance testing, guideline regarding epidemiological surveillance and guideline regarding antibiotic stewardship;
- Training of personnel involved in surveillance of healthcare associated infections and monitoring the use of antibiotics and antibiotic-resistance, using e-learning platforms for specific subjects;
- An information and education campaign and awareness-raising for antibiotic use in primary health care and by the general public.

5.2 Financial Instruments

Not applicable.

6. Programme Management

6.1 Payment flows

The Programme Operator shall ensure that payments to projects are made in a timely manner. Interim and final payments to the projects shall be based on approved project reports.

Payments of the project grant shall take the form of advance payments, interim payments and a final payment. The level of advance payment to projects shall be set out in the project contract. The maximum level of advance payment shall be linked to the project duration as follows:

Project implementation duration	Advance payment	Maximum value of interim payments	Final payment
Public entities			
≤18 Months	50%	50%	N/A
>18 Months	25%	75%	N/A
Private entities			
≤18 Months	50%	40%	10%
>18 Months	25%	65%	10%

The first advance instalment shall be paid following the signature of the project contract. Subsequent payments shall be paid after the approval of project interim reports. The final payment will be paid after approval of the final report, where applicable.

An advance payment of a percentage of the total grant amount shall be paid within one month from the submission of a request after signature of the project contract. The interim payments shall be paid within one month after the approval of project interim reports.

Upon approval of the final project report a final balance payment, if applicable, shall be made within one month.

The approval of project interim and final reports shall take place within two months from the submission of the required information.

Notwithstanding the above description of the financial flows, the Programme Operator shall ensure that, in the case of projects implemented by or in partnership with international organisations, or a body or an agency thereof, advance payments and all subsequent payments to the project from the Programme are sufficient to ensure that pre-financing requirements can be met and that all payments due to the international organisation, or a body or an agency thereof, are made without delay.

The periodicity of reporting periods, and deadlines for reporting will be further detailed in the description of the Programme Operator's management and control systems.

6.2 Verification of payment claims

Project promoters shall submit interim and final project reports containing information on project progress and incurred expenditure.

In line with point i) of Article 5.6.2 of the Regulation incurred expenditure reported shall be subject to administrative verifications before the report is approved. Verifications to be carried out shall cover administrative, financial, technical and physical aspects of projects, as appropriate and be in accordance with the principle of proportionality.

Additionally, in line with point ii) of Article 5.6.2 of the Regulation on–the-spot verifications of projects, which may be carried out on a sample basis, shall be carried out.

The detailed procedure for verification will be further detailed in the description of the Programme Operator's management and control systems.

6.3 Monitoring and reporting

The Programme Operator shall monitor, record and report on progress towards the programme's outcomes in accordance with the provisions contained in the legal framework. The Programme Operator shall ensure that suitable and sufficient monitoring and reporting arrangements are made with the project promoters in order to enable the Programme Operator and the NFP to meet its obligations to the donors.

The Programme Operator shall in the Annual and Final Programme Reports, report on the implementation of the 'Plan for enhancing of the management capacity of the Programme Operator', submitted in accordance with the Memorandum of Understanding.

When reporting on progress achieved in Annual and Final Programme Reports, the Programme Operator shall disaggregate results achieved as appropriate and in accordance with instructions and templates received from the FMO.

6.4 Programme administrative structures

Not applicable.

7. Communication

The Programme Operator shall comply with Article 3.3 of the Regulation, the Information and Communication Requirements in Annex 3 of the Regulation and the Communication plan for the programme.

8. Miscellaneous

Not applicable.