

[Name of Fund or Joint Programme]

GENERIC ANNUAL PROGRAMME¹ NARRATIVE PROGRESS REPORT

REPORTING PERIOD: 1 JANUARY – 31 DECEMBER 2011

Programme Title & Project Number	Country, Locality(s), Thematic/Priority Area(s) ²			
 Programme Title: Non-communicable diseases prevention, healthy life styles and food safety Project; ID 00077013 - Non-communicable diseases prevention- Komanski Most Programme Number (<i>if applicable</i>) SI 1.2.6 MPTF Office Project Reference Number:³ 76863 	(if applicable) Country/Region Montenegro Thematic/Priority: Social Inclusion			
Participating Organization(s)	Implementing Partners			
 Organizations that have received direct funding from the MPTF Office under this programme UNDP 	 National counterparts (government, private, NGOs & others) and other International Organizations UNICEF, Ministry of Labor and Social Welfare (MLSW) 			
Programme/Project Cost (US\$)	Programme Duration			
MPTF/JP Contribution: USD 66,713 (2010 EFW funds)	Overall Duration(months)18months			
Agency Contribution UNDP 4.842 USD	Start Date ⁴ (<i>dd.mm.yyyy</i>)17 Nov 2010			
Government Contribution (<i>if applicable</i>)	End Date (or Revised End Date) ⁵ $June date$	2012 (revised)		
Other Contributions (donors) (<i>if applicable</i>)	Operational Closure Date ⁶ Dec	ember 2012		
TOTAL: 71,555 USD	Expected Financial Closure Date Dec	ember 2012		
TOTAL: 71,555 USD Programme Assessment/Review/Mid-Term Eval.	Expected Financial Closure Date Dec Report Submitted B			

Email address: 0

¹ The term "programme" is used for programmes, joint programmes and projects.

² Strategic Results, as formulated in the Performance Management Plan (PMP) for the PBF; Sector for the UNDG ITF.

³ The MPTF Office Project Reference Number is the same number as the one on the Notification message. It is also referred to "Project ID" on the MPTF Office GATEWAY

⁴ The start date is the date of the first transfer of the funds from the MPTF Office as Administrative Agent. Transfer date is available on the $\frac{\text{MPTF Office GATEWAY}}{^{5}}$ As per approval by the relevant decision-making body/Steering Committee.

⁶ All activities for which a Participating Organization is responsible under an approved MPTF programme have been completed. Agencies to advise the MPTF Office.

The project focuses on support to the gradual de-institutionalization of residents either by providing families with support to enable re-integration of beneficiaries or by placing beneficiaries in family-like forms of care, such as small group homes or accommodation with support. The Project is directly contributing towards reducing social exclusion of persons with disabilities and improvement of their quality of life - one of the main social inclusion outcomes of Integrated UN Programme 2010-2016, more specifically towards the Outcome 1.2 "Social norms are changed in order to facilitate age and gender sensitive inclusive attitudes and practices towards vulnerable and excluded populations; SL 1.2.6.Non-communicable diseases prevention, healthy life styles and food safety – mental health and deinstitutionalization".

Formatting Instructions:

- The report should not exceed 10-15 pages. Include a list of the main abbreviations and acronyms that are used in the report.
- Number all pages, sections and paragraphs as indicated below.
- Format the entire document using the following font: 12point _ Times New Roman and do not use colours.
- The report should be submitted in one single Word or PDF file.
- Annexes can be added to the report but need to be clearly referenced, using footnotes or endnotes within the body of the narrative.

NARRATIVE REPORT FORMAT

I. Purpose

- Provide the main objectives and expected outcomes of the programme.
- Explain how the Programme relates to the applicable Strategic (UN) Planning Framework guiding the operations of the Fund/ JP^2

The aim of this Project is to support the process of developing a Transformation Plan of the Institute "Komanski Most" (residential institution for adults with severe intellectual disability) into a Centre of Support to Adults. The plan focuses on the gradual de-institutionalization of residents either by providing families with support to enable re-integration of beneficiaries or by placing beneficiaries in family-like forms of care, such as small group homes or "accommodation with support". A number of measures need to be undertaken to address the many current shortfalls of the Institution, including the lack of standards that define types and quality of services, the lack of capacity of staff, as well as the insufficient budget allocations for staff, services, and assistance to beneficiaries and families. A communication strategy would be a fundamental part of the transformation plan in order to make the public aware of the fundamental rights of persons with disabilities and perceive the Institution as a support centre rather than a closed institution. Finally the Project is directly contributing towards reducing social exclusion of persons with disabilities and improvement of their quality of life- one of the main social inclusion outcomes of the Delivering as One strategic framework with the Government, the Integrated UN Programme.

II. Resources

Financial Resources:

- Provide information on other funding resources available to the project, if applicable. Please refer to information on the <u>Annual Reporting Cover Page</u>.
- Provide details on any budget revisions approved by the appropriate decision-making body, if applicable.
- Provide information on good practices and constraints related to the management of the financial aspects of implementing the programme, including receipt of transfers, administrative bottlenecks and/or other issues affecting the financial management of the programme.

Human Resources:

- National Staff: Provide details on the number and type (operation/programme).
- International Staff: Provide details on the number and type (operation/programme)

The funds were received by UNDP in December 2010 and no activities were implemented in 2010. Implementation of the activities began in 2011 and therefore the results are reported in the 2011 Annual Report.

The project funded 20% of national staff as Project Manager on a service contract paid from UNDP contribution (TRAC). The UN Country Fund resources were not used for funding of this position. Technical assistance was provided through engagement of two consultants:

- 1. a national legal expert who had provided the legal advice in terms of:
 - Review of legislation in the area of mental health/rights of adults with disabilities in Montenegro (and comparative analysis with selected EU countries, and to Review of and inputs to draft Komanski Most Transformation Plan in the area of legislative reform
 - Provision of inputs to the plan of transformation of Komanski Most in the area of legislation. The plan will define the purpose and objectives of the transformation, expected results, activities, including communication and fund-raising strategies, coordination and management, monitoring and evaluation, timeframe and budget;

• Proposing policy and legislative options to the Ministry of Labor and Social Welfare in the short, medium and long run in order to enable the establishment of family and community-based services, in the form of a Final Consultancy Report;

The fee paid to the national expert was USD 4,775.

- 2. international expert whose main tasks were as follows
 - To carry out situation analysis of the institution, including an assessment of the beneficiaries' mental health needs, stock and flow analysis, and expected changes in the demographics, assessment of personnel profiles and training needs as well as financial and infrastructural capacities of the institution;
 - To enhance professional capacity of Komanski Most management and senior personnel on the provision of community-based alternative care to adults with learning disabilities in order to facilitate their contribution to the development of the transformation plan – by organizing and facilitating a study visit to an EU country with well developed community-based services for adults with learning disabilities;
 - To coordinate the development of a transformation plan of Komanski Most the plan defines the purpose and objectives of the transformation, expected results, activities, including communication and fund-raising strategies, coordination and management, monitoring and evaluation, timeframe and budget.
 - To propose policy options to the Ministry of Labour and Social Welfare in the short, medium and long run in order to enable the establishment of family and community-based services, in the form of a Final Consultancy Report;

The consultants' fee was USD 22,130.

III. Implementation and Monitoring Arrangements

- Summarize the implementation mechanisms primarily utilized and how they are adapted to achieve maximum impact given the operating context.
- Provide details on the procurement procedures utilized and explain variances in standard procedures.
- Provide details on the monitoring system(s) that are being used and how you identify and incorporate lessons learned into the ongoing programme, including corrective actions that may have been taken.
- Report on any assessments, evaluations or studies undertaken.

The procurement of consultancy services has been carried out in accordance with UNDP regulations and rules.

The consultancy was carried out within the period 19th August 2011 – 15th February 2012. The activities were carried out by the consultants under the primary supervision of UNDP Project Manager and secondary supervision of UNICEF Project Manager and in close cooperation with the Ministry of Labor and Social Welfare (MLSW) and Institute Komanski Most. MLSW, as a main Governmental partner had formed a Working Group (WG) whose task was to work on development of Transformation Plan for Komanski Most Institute. The consultants' engaged were preparing their inputs for the WG's consideration and review. In addition, the international consultant had actively participated in the WGs' sessions and had guided the process of design of Komanski Most Institute Transformation Plan.

Day to day monitoring of project implementation is carried out by the UNDP Project Manager in close consultation with UNICEF.

the International consultant produced the final report which includes analysis of the situation, description of activities implemented and outputs provided by consultant and recommendations on policy options to the Ministry of Labor and Social Welfare in order to enable the establishment of family and community-based services for persons with learning disabilities.

IV. Results

- Provide a summary of Programme progress in relation to planned outcomes (strategic results with reference to the relevant indicator) and outputs; explain any variance in achieved versus planned outputs during the reporting period.
- Report on the key outputs achieved in the reporting period, including the number and nature of the activities (inputs), outputs and outcomes, with percentages of completion and beneficiaries.
- Explain, if relevant, delays in programme implementation, the nature of the constraints, actions taken to mitigate future delays and lessons learned in the process.
- List the key partnerships and collaborations, and explain how such relationships impact on the achievement of results.
- Other highlights and cross-cutting issues pertinent to the results being reported on.
- Provide an assessment of the programme based on performance indicators as per approved programme document using the template in Section VI, providing clear evidence on the linkages of outputs and outcomes achieved, if applicable.
- Qualitative assessment of overall achievement with reference to the applicable strategic results indicator.

The key results achieved within the Project could be summarized as follows:

a. Preparation of the draft of Transformation Plan in close co-operation with main stakeholders

The preparation of the draft Transformation plan was one of the key activities of the Project and one of the main deliverables of the consultants engaged.

Prior to actual drafting of the plan a situation analysis of the institution was carried out. It included institutional capacity assessment of Komanski Most; assessment of mental health needs of residents, stock and flow analysis, and expected changes in the demographics, assessment of personnel profiles and training needs as well as financial and infrastructural capacities of Komanski Most.

In addition, the meetings were held with key policy makers in order to reach a consensus on the transformation of Komanski Most. Meetings with the Ministry of Labor and Social Welfare officials were organized to understand their position and vision, including key challenges and thus ensure adoption of the Master Plan. Meetings with staff of Komanski Most were organized together with meetings with residents and their relatives. Following the extensive consultative process the transformation Plan was drafted. The plan included definition of the purpose and objectives of the transformation, expected results, activities, communication and fund-raising strategies, coordination and management, monitoring and evaluation, timeframe and budget

Moreover, the Plan includes personnel training needs, including reorganization of the workforce, and establishment of internal and external evaluation and monitoring procedures. One of the important dimensions of the Plan is the approach towards the "re-branding" of Komanski Most from a 'residential' institutional into the future Resource Center.

b. Capacity building of main stakeholders by organizing study tour to Finland

Study visit to Finland was organized and large overview on community-based services for adults with learning disabilities was made; The members of the Study tour were personnel of the Komanski Most Institute (5 members) and the Senior Advisor of Ministry of Labor and Social Welfare (1 member). The participants were introduced with a successful process of deinstitutionalization, including transformation of institutions for people with intellectual and developmental disabilities.

The professional staff were introduced with new practical methods of social rehabilitation and education, including supported employment, alternative communication, sexual education, specialized rehabilitation of persons with autism, challenging behavior, and others. In terms of increasing sustainability of community based services, the participants were also presented the successful models of effective cooperation between state, municipalities and civil organizations;

c. Training for staff of Komanski Most and Social Centers

Prior to training module(s) development, a training needs analysis was carried out based on conversations and interviews with key staff of Komanski Most Institute. The staff was provided overall training in rights and inclusion, and also specific training in certain areas of every-day care and support. Together with the staff the plan of training was elaborated. It has encompassed two modules:

- <u>Interdisciplinary module</u> for all staff including: the themes on UN Convention on Rights of People with Disabilities, Definition of Intellectual Disability, Adaptive Behavior and Mental Health, Health, motivation and well-being in staff and professional rehabilitation on work place, etc.
- <u>Special modules</u> for staff divided into two training groups on the topics of (i) Behavioral disorders, challenging behavior, stereotypes (*ii*) Alternative communication (*iii*) Sexual education *and* (*iv*) Work with persons with extensive needs in support

The training was conducted in the period 29.11. to 03.12.2011 in Komanski Most.

The aim of the training was to increase capacities of the staff of Komanski Most and Centers for social work on their role in the transformation process. Also it was focused on processes, contents and outcomes of work with persons with disabilities, as well as changes in attitudes and values. The training brought participants up to date with modern approaches and best practices in the international experience in de-institutionalization.

The Project was implemented in continuous and open dialogue both with staff of Komanski Most, the Ministry of Labor and Social Welfare, the Working Group and also with persons with disabilities themselves and their families.

Participatory approach was used in all activities. The implementation of the project was based on principles of partnership and ownership of development processes by the local stakeholders with strengthening of their capacity to effectively manage all proposed changes. People with disabilities were involved as much as it was possible through interviews and discussions.

V. Future Work Plan (if applicable)

- Summarize the projected activities and expenditures for the following reporting period (1 January-31 December 2011), using the lessons learned during the previous reporting period, including outputs that were not achieved in 2011.
- Indicate any major adjustments in strategies, targets or key outcomes and outputs planned in 2011.

The majority of the planned activities had been completed in this reporting period. The submission of the final draft of the Transformation Plan will be no later than 31st March 2012. The total expenditures as of 31 December is 57,029 USD with utilization of nearly 80%. The MDTF utilization rate is 78% (5).

The remainder of the resources will be used for the final consultants' payments and translation/editing of the Plan and for procurement of equipment / tools for the occupational therapy for the beneficiaries of the Komanski Most Institute (as planned in the Social Inclusion Annual Work Plan).

VI. INDICATOR BASED PERFORMANCE ASSESSMENT

	Performance Indicators	Indicator Baselines	Planned Indicator Targets	Achieved Indicator Targets	Reasons for Variance (if any)	Source of Verification	Comments (if any)
Outcome 1 ⁷							
Output 1.1	The Plan and the Strategy accepted by MoH and plan implementation initiated	Current level and quality of services provided to beneficiaries of Komanski Most below EU and UN standards	Transformation Plan and Communication Strategy developed and submitted to the Ministry for approval.	Draft Master Plan for Transformation of Komanski Most Institution along with draft Communication Strategy was developed and submitter to the Government for their review.	Due to delay in activities caused by late start of the project as well as due to delays in feedback by the Government, the final draft of the Transformation plan will be produced during the first quarter of 2012	Master Plan prepared Consultant's Report prepared	
	Indicator 1.1.2						
Output 1.2	Indicator 1.2.1						
	Indicator 1.2.2						

⁷ For PBF: Either country relevant or PMP specific.