

TERMS of REFERENCE
for
Financial Officer 2

AF-SSHP item 1.2.4

Background

The Republic of Serbia has received a loan from the International Bank for Reconstruction and Development (IBRD) in the amount of EUR 29.1 million equivalent toward the cost of the Second Serbia Health Project (SSHP), Loan No.: 8338-YF, and EUR 25 million equivalent toward the cost of the Additional Financing for the Second Serbia Health Project (AF-SSHP), Loan No.: 8830-YF.

The Project Development Objective (PDO) is to contribute to improving the efficiency and quality of the public health system through the strengthening of: (i) health financing, purchasing, and maintenance systems; (ii) quality improvement systems and management of selected priority non-communicable diseases.

The project includes the following components:

1- Improvement of Health Financing

This component aims to strengthen the performance of the health financing system by supporting introduction of incentives to improve quality and efficiency at the primary care and hospital levels.

2- Improve Access to Quality Health Care

This component is organized around the following main areas: improve access to medicines; strengthening of Health Technology Assessment (HTA); and improving systems for medical equipment maintenance.

3- Strengthening Quality of Service Delivery

This component aims to improve standards of quality and efficiency of care in the Serbian health sector through: (i) strengthening quality improvement systems, (ii) modernizing cancer treatment at selected tertiary facilities.

4- Project management

This component will support the day-to-day Project management, including fiduciary tasks, monitoring and evaluation, audits of Project financial statements. Monitoring the implementation of the proposed reforms, including potential unintended consequences, will be a key function that will be supported under this component.

Scope of Work

Consultant will be hired to provide support to the Component 1 for the Improvement of health financing with the following main responsibilities:

1. Support to project activities related to further implementation and development of the Capitation payment system in primary healthcare level;
2. Analysis of the previous activities related to the introduction of capitation formula as a payment system at the primary health care level and making recommendations for improvement;

3. Support for further training of the staff of the central institutions (MOH, HIF, IPH) related to improvement of Capitation formula, as well as support to primary health care management in capacity building through designing and conducting financial management trainings in line with healthcare financing reform as well as on-site visits.
4. Participation in the development of economic analyses (cost effectiveness analysis, cost-benefit analysis, etc.) and economic evaluations in health care;
5. Supporting the process of revision and further development of the Price list of services on the primary, secondary and tertiary healthcare levels;
6. Support to public health institutions in the transition from line to program budgeting. Cost analysis by programs and development of guidelines for financial management for health care institutions.
7. Participation in improvement of the matrix and system of cost centers in all public health institutions, data analysis and continuous management training for the application of this tool in the management of health care institutions;
8. Performing any other appropriate tasks determined by Coordinator of Component I, PCU Coordinator and/or officials of the Ministry of Health;

Duration of the assignment

This is a full-time position. Duration of this assignment is until end of the project.

Qualifications and requirements

- University degree in the field of economics;
- Minimum four (4) years of professional experience;
- Good command of written and spoken English and Serbian language;
- Previous experience in working in health sector would be an asset;
- Knowledge of Capitation payment system would be an asset;
- Knowledge of Cost Centers tool would be an asset;
- Previous experience in projects financed by IFIs would be an advantage;

Reporting requirements

- Consultant is obliged to report to the Coordinator of Component I, PCU Coordinator/Deputy PCU Coordinator and Ministry of Health officials in the schedule and format agreed;
- Monthly reports to specify the work performed each month including the actual number of days spent and brief description of the tasks performed. This report will be a base for payment and it needs to be submitted at the end of each month.
- Ad hoc reports when required.