#HorizonEU

**THE EU RESEARCH & INNOVATION PROGRAMME**

2021 – 2027

**HEALTH NCP MEETING**

**13 December 2022**

European Commission

Research and Innovation

# HEALTH
## 3rd NCP meeting

*Disclaimer: information not legally binding*

# MEETING WITH MS TEAMS

**Make sure you are correctly identified** (COUNTRY – full name)
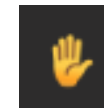
**Respect confidentiality**

Please keep your microphone muted and your camera off during the meeting

**How to ask the floor?**

Please use the raise hand function
Unmute your mic once the chair invites you to take the floor
Avoid using the Chat function to start discussions

European Commission

# Agenda (1)

- Welcome & Introduction
- How we work together in Horizon Europe & Who does what?
- HE Health Work Programme 2023

***Networking lunch***

- Refresher on Gender Equality provisions in Horizon Europe
- Lump sum funding
- Blind evaluation

# Agenda (2)

- International Cooperation:

    - Swiss participation
    - UK participation

- Other cross-cutting issues

- Statistics on the calls 2021 and 2022

- HNN3.0, update for NCPs on the upcoming activities
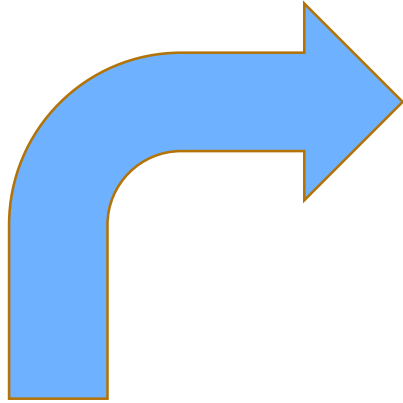
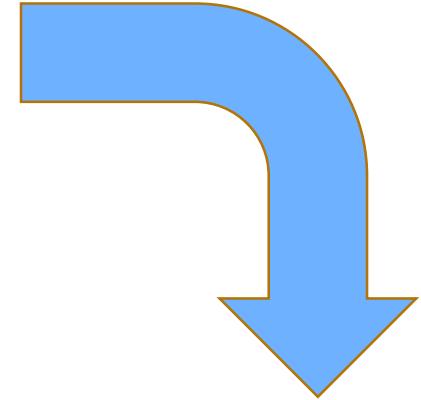- A.O.B.

***End of the meeting***

# Welcome & Introduction

# Who does what?
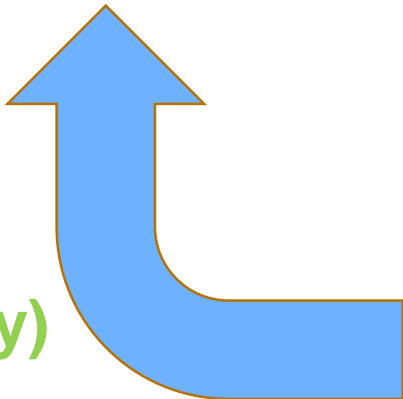## – strong cooperation of 'Parent DG' and Agencies

**EC 'Parent DG'**

**Policy needs
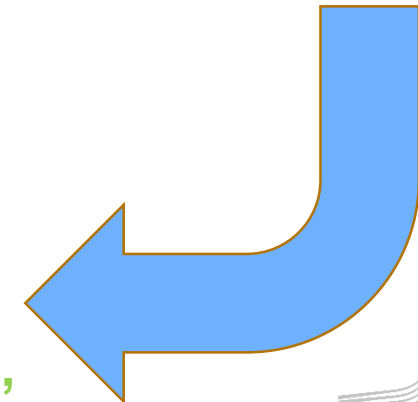(Strategic planning)**

**Policy design
(Work programmes)**

**Monitoring / Evaluation of
scientific, economic and
societal impacts**

**HADEA (mainly)**

**Policy implementation
(Programme): Evaluations and
project management, InfoDays,
Policy feedback**

European Commission

# How we work together in Horizon Europe & Who does what?

## Your correspondent

- Séverine Romain in the EC DG RTD

## Communication

- [EC-HE-NCP-HEALTH@ec.europa.eu](mailto:EC-HE-NCP-HEALTH@ec.europa.eu)
- List of contact points per topic – 'Hot line' for NCPs – please keep the functional mailbox in copy
- Request for participation at National InfoDays

## Collaborative workspace – CircaBC

- https://circabc.europa.eu/ui/group/2e84bac8-9959-4e72-998c-15985abbae47

## Meetings

- Organised jointly by HaDEA and the EC

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# HE Health Work Programme 2023

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**Horizon Europe – Cluster 1 ‚Health'**

# Timelines for calls (WP 2023-2024, Topics/Calls in 2023)

- Opening of call: 12 January 2023

- Closure of calls (deadlines)

  - single-stage call: 13 April 2023

- Informing applicants of shortlisted proposals

  - single-stage call: early August 2023

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# Horizon Europe - Keep informed & Get involved

**HorizonEU**

- Register to receive the latest updates of developments

    → via **EC portal for *Funding & Tenders Opportunities***.

    https://ec.europa.eu/info/funding-tenders/opportunities/portal

**Horizon Europe Work Programmes** (link) **and Programme Guide** (link)

**Horizon Europe website**: http://ec.europa.eu/horizon-europe

**EU-funded Health Research and Innovation:** https://ec.europa.eu/info/research-and-innovation/research-area/health-research-and-innovation_en

European Commission

# HE NCP Portal



## The Portal

https://www.horizon
europencpportal.eu/

## The Campus

https://courses.horizoneuropencpportal.eu/

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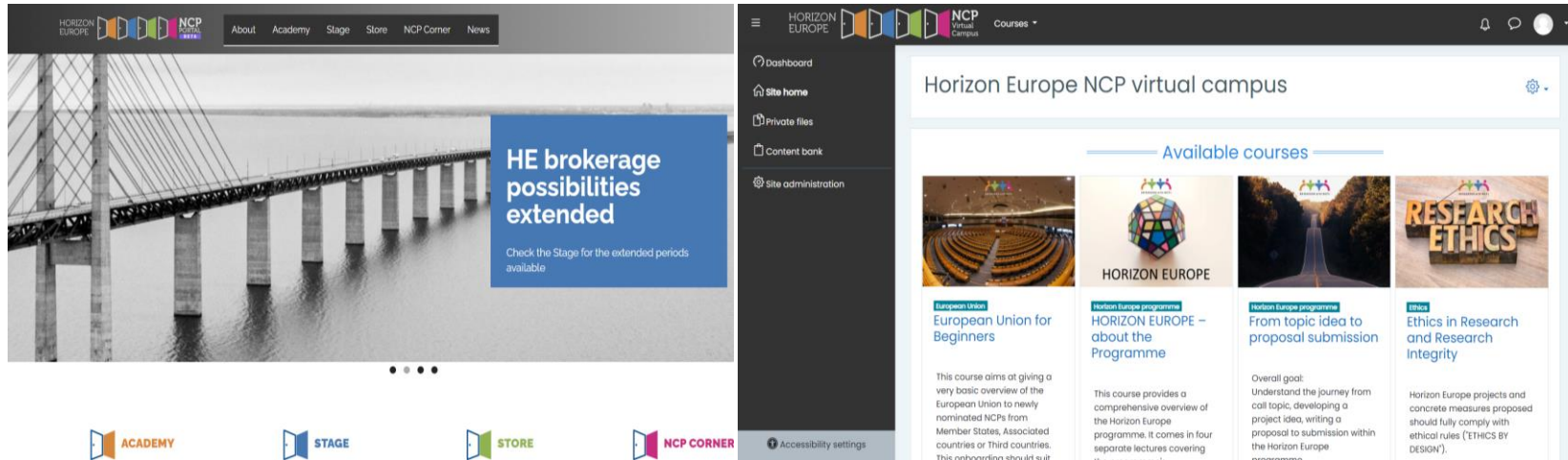
# Staying healthy in a rapidly changing society

*Disclaimer: information not legally binding*

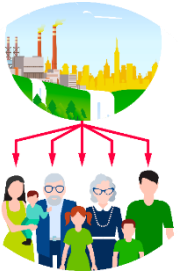# Destination 1: Staying healthy in a rapidly changing society

**Citizens of all ages stay healthy and independent in a rapidly changing society thanks to healthier lifestyles and behaviours, healthier diets, healthier environments, improved evidence-based health policies, and more effective solutions for health promotion and disease prevention.**

- Key Strategic Orientation: 'Creating a more resilient, inclusive and democratic European society'

- Impact areas:
    - Good health and high-quality accessible health care
    - High quality digital services for all ages
    - Sustainable food systems from farm to fork on land and sea
    - Climate change mitigation and adaptation

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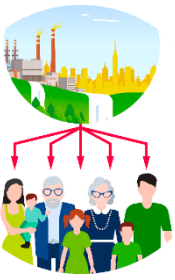
# Destination 1: Expected impacts

- **Citizens adopt healthier lifestyles and behaviours**, make healthier choices and maintain longer a healthy, independent and active life with a reduced disease burden, including at old ages or in other vulnerable stages of life.

- **Citizens adopt new tools, digitally enabled solutions and evidence-based health and care services to prevent and delay progression of age-related diseases.**

- **Citizens** are able and **empowered** to manage better their own physical and mental health and well-being, monitor their health, and interact with their doctors and health care providers.

- **Citizens´ trust in knowledge-based health interventions and in guidance from health authorities is strengthened**, including through improved health literacy, resulting in increased engagement in and adherence to effective strategies for health promotion, diseases prevention and treatment.

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# Destination 1: Topics in 2023

- HORIZON-HLTH-2023-STAYHLTH-01-01: single stage
  **The Silver Deal - Person-centred health and care in European regions**

- Closure: 13 April 2023
- Instrument: RIA
- Total: 40M€
- Project size: 15-20 M€

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European Commission

# The Silver Deal
# - Person-centred health and care in European regions

## Expected outcome (contributing to **all of the following** elements)

- **Citizens and patients will get effective, preventive, integrated, coordinated, evidence-based and people-centred high-quality health and care services** to identify and tackle or prevent multi-morbidities, frailty, biologically or mentally reduced capacities, (sensory) impairments, dementia and/or neurodegeneration, fostering mental and physical health, wellbeing and quality of life.

- **Primary and community based health and care services will be better equipped** to early identify people at risk of developing non-communicable diseases (NCDs) and multi-morbidities.

- **Older people will be empowered to take an active role in the management of their own physical and mental health**, as well as increase their social interactions and wellbeing.

- **Citizens, all relevant stakeholders, public authorities, cities and rural environments, as well as health care providers will be engaged** to ensure the introduction to and the integration of age-friendly, mental and physical health promoting innovative care pathways and digitally enabled solutions into the daily life and wellbeing of the ageing population.

European Commission

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# The Silver Deal
# - Person-centred health and care in European regions

**Scope** (address **all of the following** elements)

- **Consolidate high-quality effective, integrated, innovative and digitally enabled person-centred health and long-term care services and solutions**, both in primary care, hospital and home settings, around older people's needs for physical and mental health, care and wellbeing, strengthened disease prevention, rehabilitation and for staying active and healthy as they age.

- Such integrated and holistic solutions could include, but are not limited to, **integrated care solutions,** serious games, connected wearables, ambient sensors, social robots, assistive technologies, age-friendly environments, diagnostic screenings, self-monitoring devices, robotics and others, tackling age-related physical and mental diseases and co-morbidities.

- Develop and **provide** evidenced-based new approaches, **coordinated care models and pathways, for delivering effective, person-centred health and long-term care solutions.**

- **Support adoption and market innovation of novel health and care solutions**, for older age related health conditions, through large-scale testing and deployment piloting, guidance on relevant HTA and CE procedures, demonstrating cost-effectiveness, as well as through stakeholder involvement and policy collaboration on European, local, regional, and international level.

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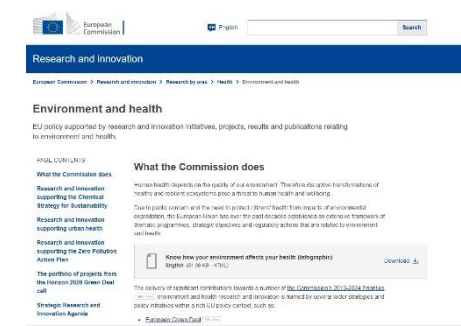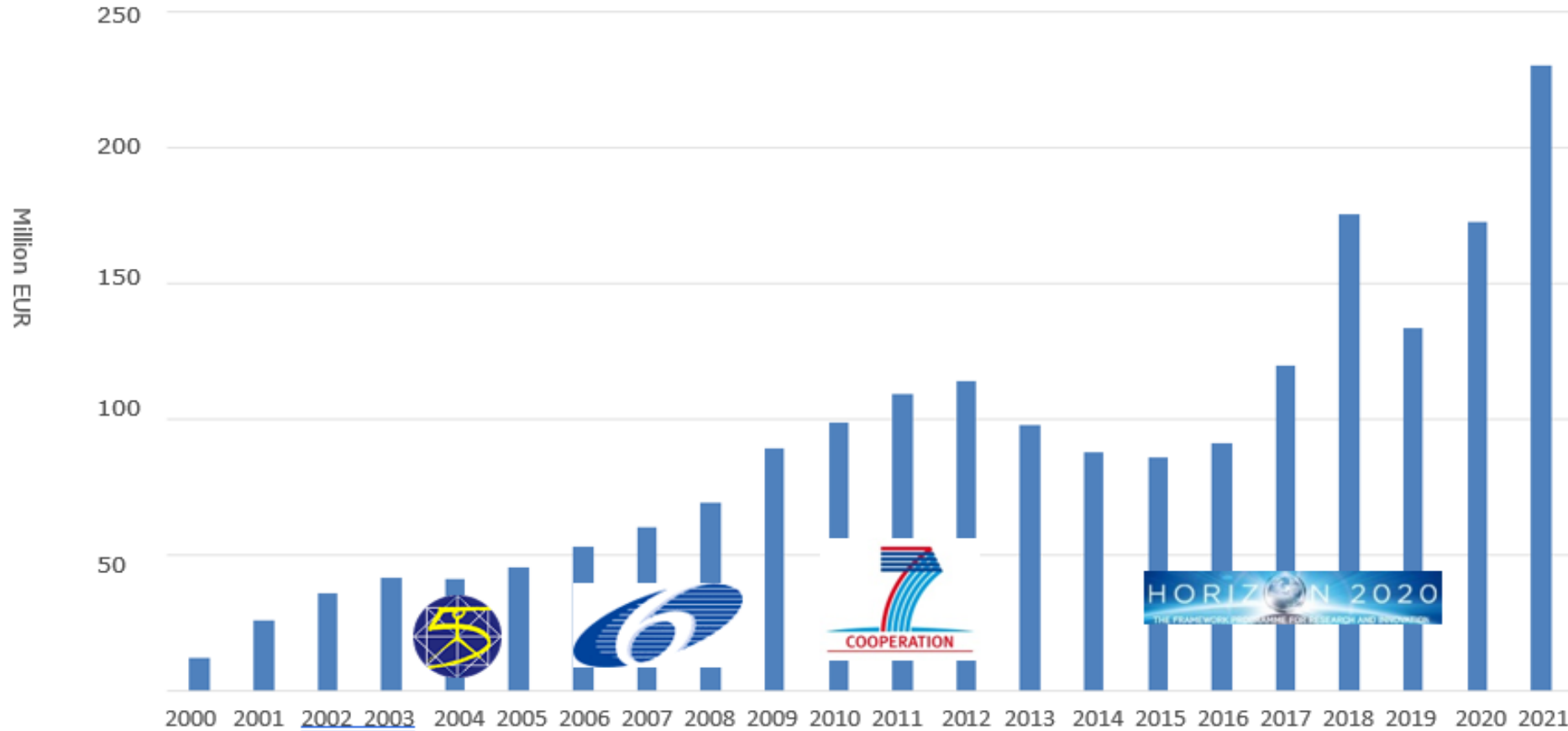
**DESTINATION 2**

# Living and working in a health-promoting environment

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# EU Environment and Health research 2000-2021

https://ec.europa.eu/info/research-and-innovation/research-area/health-research-and-innovation/environment-and-health_en



347 projects; €1.4 bn EU contribution

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# Destination 2: Living and working in a health-promoting environment
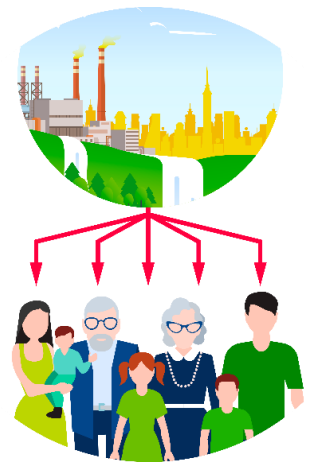
**The environment we live and work in is a major determinant of our health and well-being. Environmental factors are estimated to account for almost 20% of all deaths in Europe.**

- Destination 2 → filling knowledge gaps in the understanding of the impacts on our health and well-being of those environmental, occupational and socio-economic risk factors that have the most significant or widespread societal impacts.

- International cooperation is welcomed; collaboration between projects under the same call is requested.

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# Destination 2: Policy context
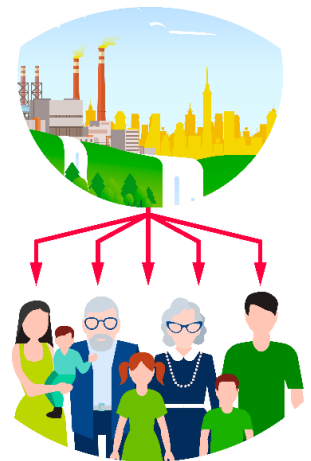
- Results will support the EU's environment and health policies and overarching policy frameworks such as:

  - ➤ the European Green Deal;

  - ➤ the Chemical Strategy for Sustainability;

  - ➤ the Zero Pollution Action Plan and Package;

  - ➤ the Climate Adaptation Strategy;

  - ➤ the EU Strategic Framework on Health and Safety at Work;

  - ➤ the WHO European Environment and Health Process (EHP).

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# Destination 2: Expected impacts

- **Policy-makers** and **regulators** are **aware** and **well informed** about environmental, socio-economic and occupational risk factors as well as health-promoting factors across society;

- The upstream **determinants of disease are known**, **understood** and **reduced**;

- The **health threats and burden** resulting from hazardous chemicals and air, water and soil pollution and contamination is **substantially reduced**;

- **Living and working environments** in European cities and regions are **healthier**, more **inclusive, safer, resilient and sustainable**;

- The **adaptive capacity and resilience** of populations and health systems in the EU to climate and environmental change-related health risks is **strengthened**;

- **Citizens' health and well-being is protected and promoted**, and premature deaths, diseases and inequalities related to environmental pollution and degradation are prevented;

- Environmental, occupational, social, economic, fiscal and health **policies and practices** at the EU, national and regional level are **sustainable** and **based on solid scientific evidence**;

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# Destination 2: Topics in WP 2023

HORIZON-HLTH-2023-ENVHLTH-02-01:

**Planetary health: understanding the links between environmental degradation and health impacts**

**Closure: 13.04.2023**
Total: 30M€
Project size: 5-6M€

HORIZON-HLTH-2023-ENVHLTH-02-02:

**Evidence-based interventions for promotion of mental and physical health in changing working environments (post-pandemic workplaces)**

**Closure: 13.04.2023**
Total: 30M€
Project size: 5-6M€

HORIZON-HLTH-2023-ENVHLTH-02-03:

**Health impacts of endocrine-disrupting chemicals: bridging science-policy gaps by addressing persistent scientific uncertainties**

**Closure: 13.04.2023**
Total: 40M€
Project size: 6-7M€

HORIZON-HLTH-2023-ENVHLTH-02-04:

**Global coordination of exposome research**

**Closure: 13.04.2023**
Total: 3M€
Project size: 3M€

European Commission

# Planetary health: understanding the links between environmental degradation and health impacts

## Expected outcome

- **Climate and environmental policies** are supported with **better knowledge** on the **Earth natural systems** and **human health interactions**;

- **Sustainable planetary health policies** which foster co-benefits to human health and the health of ecosystems are supported with **robust evidence**;

- **Cross sectorial** and **multidisciplinary scientific collaborations**, including expertise in **public health and One Health**, are established;

- **Public authorities** rely on **indicators** about the **impacts on human health** of **changes** or **degradation of natural systems** to support adaptation and mitigation strategies to natural hazards;

- **Policymakers** have **better tools** to improve the predictive capability and **preparedness** as well as to envision **prevention** strategies to deal with the impacts on human health of changes or degradation of ecosystems;

- **Citizens** are **engaged** and **informed** about the impact of natural systems' degradation on human health and **behaviours** aiming at the conservation of ecosystems are **promoted**.

European Commission

# Planetary health: understanding the links between environmental degradation and health impacts

## Scope

- Providing evidence for **health and wellbeing impacts of planetary changes**, considering a systems thinking framework or a fragmentary approach (impacts of climate change and biodiversity loss on human health);

- Improving the understanding of **human–ecological systems interactions** and **ecosystem-mediated effects on human health and well-being**;

- Providing methodological approaches  to **identify and prioritise threats for public health** caused by **environmental degradation**;

- Investigating how **infections agents** can **spread** via the **environment**, enhancing **monitoring strategies**;

- Lay the foundations for **integrated surveillance systems** considering established monitoring systems and using available and newly collected data;

- Explore **implications of planetary health** for **health systems** and **public health**;

- Advance knowledge and actions to **reduce the burden of non-communicable diseases** while **reducing the environmental pressure** in areas like **nutrition, physical activity, and mobility**;

- **Improved health impact assessment approaches** accounting for environmental externalities and estimating the cost and benefits of interventions versus no action.

European Commission

# Evidence-based interventions for promotion of mental and physical health in changing working environments (post-pandemic workplaces)

## Expected outcome

- **Public authorities and regulators** are supported with **evidence-based guidance** to design occupational health policies;

- **Public authorities, employers, organisations and social partners** are better supported with **tools, evidence-based intervention options and guidelines** to promote mental and physical well-being and health in the workplace;

- **Public authorities and the scientific community** have access to **FAIR data and robust evidence** on direct links between **psychosocial and physical risk factors** at the workplace and specific **health outcomes**;

- **Public authorities, regulators and social partners** are informed by evidence on the **costs, benefits, sustainability** and expected **challenges** of available **solutions**;

- **Public authorities and employers** take advantage of the **best available knowledge** to **support interventions** and **solutions** on the design of the **built working environment**;

- **Public authorities and employers** develop adequate measures to **prevent and reduce** the **negative outcomes** of exposure to **psycho-social and physical risk factors** in the workplace and support recovery;

- **Workers** are more **protected** against **work-related hazards** and **informed** about effective **prevention approaches** based on specific and appropriate measures and health enhancing behaviours;

- **Workers** living with a chronic disease and/or recovering from a mental of physical health problem are **supported to continue/return to work**.

# Evidence-based interventions for promotion of mental and physical health in changing working environments (post-pandemic workplaces)

## Scope

- Provide **adequate and robust data on the impact** that the **ongoing changes in the workplace** are having on the **mental and physical health** of different categories of workers and working sectors;

- Generate **evidence** on **mental health** and on **mental well-being** at the **workplace** and how changing work organisation due to the twin transitions and the pandemic affects workers' work-life balance and work ability;

- Generate **evidence** on the importance of **risk factors** in the development of **chronic and acute diseases**;

- Increase the **understanding** of the **links** between different **health-promoting factors** in the working-built environment and **physical and mental health outcomes**, and how these may be mutually reinforcing;

- Explore the **health impacts of changing working times**, including excessive and atypical working hours and work in different time zones that blur work from leisure time, limiting recovery;

- Provide **recommendations** for effective **interventions** to **prevent occupational risks** and **support** the **mental and physical health and well-being** at individual, organisation and policy levels, including an analysis on their cost-effectiveness, sustainability and barriers to implementation at national and/or EU level;

- Advance the development of a **scientific framework** addressing **occupational safety and health (OSH)** across policies and sectors and support new and sustainable (future-proof) tools, guidelines and policies concerning the evaluation and design of physical and psychosocial work environment;

- Provide **tools and approaches** to **anticipate new OSH risks**.

# Health impacts of endocrine-disrupting chemicals: bridging science-policy gaps by addressing persistent scientific uncertainties

## Expected outcome

- **Public authorities and regulators** are supported with **evidence** to implement the **EU Framework on Endocrine Disruptors** as well as the **Chemicals Strategy for Sustainability** and EU legislation on plant protection products;

- **Public authorities** improve risk assessment, management and communication via access to FAIR data and more robust evidence on causal links between EDC exposure and health outcomes;

- The **research community** has access to better data on the role of EDCs and other factors to better understand their **individual** or **combined** health impacts;

- **Public authorities and the scientific community** capitalise on the latest methodologies to advance the understanding of the health impacts of EDC exposures;

- **Public authorities, employers and citizens** rely on practical evidence-informed guidelines for exposure prevention and reduction;

- **Citizens** are **engaged** and **informed** about the health impact of exposures to EDCs and risk-preventing behaviours are promoted.

European Commission

# Health impacts of endocrine-disrupting chemicals: bridging science-policy gaps by addressing persistent scientific uncertainties

## Scope

- Studying the **impact of EDCs** on **target organs**, in **multi-organ models**, on **physiological barriers** and on **interactions with microbiota**;

- Elucidating **health endpoints for which insufficient data exists**, like disturbances in the development and functioning of the nervous and CV systems, immune system, fertility, etc.;

- Providing **better biological and imaging biomarkers** to predict EDC-mediated health outcomes;

- Gaining better insights into the **developmental origins of health and disease**, and assessing the occurrence and relevance of **multi- and transgenerationally inherited effects**;

- Gaining better insights into the **most sensitive windows of susceptibility**, during which exposure is of particular importance for health effects;

- Gaining a better understanding of the effects of chemicals and mixtures on **underlying mechanistic crosstalk** between **endocrine axes**, **endocrine pathways and other key biological systems**;

- Improving the **understanding of chemical mixture effects**, including with other toxins and at low doses;

- Investigating **biological effects of realistic mixtures** for a more detailed understanding of the **endocrine effectome**;

- Exploiting **non-mammalians as test organisms** to predict effects or raise concern on potential effects in humans;

- Exploiting **systems biology** to understand **how exposure to an EDC results in an altered phenotype.**

European Commission

# Global coordination of exposome research

## Expected outcome

- **Environment and health research community**, **research-policymaking authorities**, **research funders** and **other relevant stakeholders** work together at the European and international level towards **establishing** a medium-long-term **Global Human Exposome Network**;

- **Environment and health research community**, **authorities working at the science-policy interface** and **research funders** provide **options** for **functioning, financing and governance** of a medium-long-term **Global Human Exposome Network**;

- **Relevant stakeholders** profit from a **strengthened coordination** and **collaboration globally** among different fields of research and innovation with relevance to deciphering the **human exposome**;

- A **roadmap and a R&I agenda for international cooperation** in specified areas of exposome research and innovation are made available to the **relevant international stakeholders**;

- The **coordination of research initiatives**, **infrastructures**, **facilities** and **resources** in the area of the Exposome in Europe is **supported and reinforced**;

- The **interoperability and harmonisation between data and studies** is increased **facilitating the exchange and use of information** across research disciplines and groups.

European Commission

# Global coordination of exposome research

## Scope

- Proposal for a common agreed **conceptual framework for the exposome**;

- Proposal for options for a **global governance structure** for a **Global Human Exposome Network** taking advantage of and connecting to the existing research infrastructures and services in the area of the Exposome at the European level;

- **Agreed technologies** needed to **decipher the external and internal exposome**, support longitudinal studies and potential for international cooperation;

- Proposal for **data mining**, **analysis**, opportunities for **harmonisation**, **interoperability**, and **standardisation** in **data collection, knowledge storage and transfer**, and bioinformatics needs at the European and global level;

- **Cooperation between population and patient cohorts**, integrating a large number of variables and comprehensive environmental datasets, and biobanks, also covering the perinatal period;

- **Facilitation** of the **regulatory uses of results** including for regulatory science and risk assessment.

DESTINATION 3

# Tackling diseases and reducing disease burden

# Destination 3: Tackling diseases and reducing disease burden

**Communicable and non-communicable diseases cause the greatest amounts of premature death and disability in the EU and worldwide.**

Destination 3 → addressing an urgent need for research and innovation to develop new prevention measures, public health interventions, diagnostics, vaccines, therapies, antimicrobials and their alternatives, as well as to improve existing prevention strategies to create tangible impacts, taking into account sex/gender-related issues.

- Key Strategic Orientation: 'Creating a more resilient, inclusive and democratic European society'

- Impact areas:
  - Good health and high-quality accessible health care
  - A resilient EU prepared for emerging threats
  - Climate change mitigation and adaptation
  - High quality digital services for all

European Commission

*Disclaimer: information not legally binding*

# Destination 3: Expected impacts

- **Health burden of diseases in the EU and worldwide is reduced** through effective disease management, including through the development and integration of innovative diagnostic and therapeutic approaches, personalised medicine approaches, digital and other people-centred solutions for health care.

- **Premature mortality from NCDs is reduced** by one third (by 2030), **mental health and well-being is promoted**, and the voluntary targets of **the WHO Global Action Plan for the Prevention and Control of NCDs 2013-2020 are attained (by 2025)**, with an immediate impact on the related disease burden (DALYs).

- Health care systems benefit from **strengthened research and innovation expertise, human capacities and know-how for combatting communicable and non-communicable diseases**, including through international cooperation.

- Citizens benefit from **reduced (cross-border) health threat of epidemics and AMR pathogens, in the EU and worldwide**. In particular, the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases are contained and hepatitis, water-borne diseases and other communicable diseases are being combated.

- Patients and citizens are **knowledgeable of disease threats, involved and empowered to make and shape decisions for their health, and better adhere to knowledge-based disease management strategies and policies** (especially for controlling outbreaks and emergencies).

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# Destination 3: 8 topics in 2023 – Single stage
## (6 RIAs and 2 CSAs)

- HORIZON-HLTH-2023-DISEASE-03-01: **Novel approaches for palliative and end-of-life care for non-cancer patients**
- Closure: **13.04.2023**
- Instrument: RIA
- Budget: 50M€
- Project size: 6-7M€

- HORIZON-HLTH-2023-DISEASE-03-03: **Interventions in city environments to reduce risk of non-communicable disease (Global Alliance for Chronic Diseases - GACD)**
- Closure: **13.04.2023**
- Instrument: RIA
- Budget: 20M€
- Project size: 3-4M€

- HORIZON-HLTH-2023-DISEASE-03-04: **Pandemic preparedness and response: Broad spectrum anti-viral therapeutics for infectious diseases with epidemic potential**
- Closure: **13.04.2023**
- Instrument: RIA
- Budget: 50M€
- Project size: 7-8M€

European Commission

# Destination 3: 8 topics in 2023 – Single stage
## (6 RIAs and 2 CSAs)

- HORIZON-HLTH-2023-DISEASE-03-05: **Pandemic preparedness and response: Sustaining established coordination mechanisms for European adaptive platform trials and/or for cohort networks**
- Closure: **13.04.2023**
- Instrument: CSA
- Budget: 3M€
- Project size: 1-2M€

- HORIZON-HLTH-2023-DISEASE-03-06: **Towards structuring brain health research in Europe**
- Closure: **13.04.2023**
- Instrument: CSA
- Budget: 1M€
- Project size: 1M€

- HORIZON-HLTH-2023-DISEASE-03-07: **Relationship between infections and non-communicable diseases**
- Closure: **13.04.2023**
- Instrument: RIA
- Budget: 30M€
- Project size: 6-7M€

*Disclaimer: information not legally binding*

European Commission

# Destination 3: 8 topics in 2023 – Single stage
## (6 RIAs and 2 CSAs)

- HORIZON-HLTH-2023-DISEASE-03-17: **Pandemic preparedness and response: Understanding vaccine induced-immunity**
- Closure: **13.04.2023**
- Instrument: RIA
- Budget: 20M€
- Project size: 7-8M€

- HORIZON-HLTH-2023-DISEASE-03-018: **Pandemic preparedness and response: Immunogenicity of viral proteins of viruses with epidemic and pandemic potential**
- Closure: **13.04.2023**
- Instrument: RIA
- Budget: 50M€
- Project size: 7-8M€

*Disclaimer: information not legally binding*

European Commission

# HORIZON-HLTH-2023-DISEASE-03-01: Novel approaches for palliative and end-of-life care for non-cancer patients

## Expected outcome

- **Reduced health-related suffering and improved well-being and quality of life of patients** in need of palliative and end-of-life care and their professional and family caregivers.

- **Patients** have early and better **access to palliative or end-of-life care services** of higher quality and (cost) effectiveness.

- **Patients and their professional and family caregivers** are able to engage meaningfully with the **improved evidence-based and information-driven palliative care joint decision-making process.**

- **Health care providers and health policymakers** have access to and use the **improved clinical guidelines and policy** with respect to pain and/or other symptoms management, psychological and/or spiritual support, and palliative or end-of-life care for patients.

- **Reduced societal, healthcare and economic burden** associated with increasing demands of palliative or end-of-life care services that is **beneficial for citizens and preserves sustainability of the health care systems.**

# HORIZON-HLTH-2023-DISEASE-03-01: Novel approaches for palliative and end-of-life care for non-cancer patients

## Scope

- … **the effectiveness and cost-effectiveness** of **pharmacological and/or non-pharmacological interventions** to improve well-being and quality of life of patients.

- **The legal and ethical aspects** … should be considered and fully addressed.

- Prove **the feasibility** of integrating the proposed interventions in current **pain management, palliative and/or end-of-life care regimes and healthcare systems across Europe.**

- **The views and values of patients and their caregivers** should also be appropriately taken into account **in patient-centred care decisions.**

- Identify and analyse **relationships between sex, gender, age, disabilities, socio-economic factors in health and any other relevant factors** (e.g. ethical, familial, etc.).

- Analyse the barriers and opportunities to re-invigorating and enhancing **timely social inclusion and active engagement of patients in need of palliative and end-of-life care and their caregivers.**

- … **strategies and guidelines of patient-centred communication** for health and social care professionals as well as **standards for evidenced based communication trainings** for caregivers.

- **Randomised clinical trials and observational studies**, targeting different age groups, should be considered.

- Effective contribution of **social sciences and humanities disciplines** is required.

European Commission

# HORIZON-HLTH-2023-DISEASE-03-03: Interventions in city environments to reduce risk of non-communicable disease (Global Alliance for Chronic Diseases - GACD)

## Expected outcome

- **Health care practitioners and providers** in LMICs and/or in HICs serving vulnerable populations have access to and use **specific guidelines to implement health interventions that decrease risk factors of non-communicable diseases (NCDs)** associated with city environments.

- **Public health managers and authorities** have access to improved insights and evidence on the **NCDs caused or impacted by city environments** and which factors influence the **implementation of preventive actions that address risk behaviours** in concerned city populations.

- Adopting an implementation science approach to studying interventions in different city contexts, **researchers, clinicians and authorities** have an improved understanding how **specific interventions can be better adapted to different city environments** and how the **interventions could be scaled within and across cities.**

- **Public health managers and authorities** use **evidence-based strategies and tools for promoting population health** in equitable and environmentally sustainable ways, enabling cities to better address the challenges of rapid urbanisation, growing social inequalities, and climate change.

- **Communities, local stakeholders and authorities** are fully engaged in implementing and taking up **individual and/or structural level interventions and thus contribute to deliver better health.**

European Commission

# HORIZON-HLTH-2023-DISEASE-03-03: Interventions in city environments to reduce risk of non-communicable disease (Global Alliance for Chronic Diseases - GACD)

## Scope (1)

- … **implementation research** with the potential to **reduce the risks of NCDs in cities in LMICs and/or vulnerable populations in HICs**.

- Select **one or more city/ies** in which the research will be conducted.

- Select **one or more evidence-based interventions** known to reduce NCD risk factor(s) associated with city environments.

Theme 1 interventions: **Behavioural change interventions** - innovative approaches to helping people live in cities maintain good physical and mental health despite infrastructural, environmental, climate, and social challenges (e.g., programmes and policies that target alcohol and tobacco use, sleep, exercise promotion, healthful nutrition, etc).

Theme 2 interventions: **Interventions that focus on modifying the built environment** to improve its health-promoting potential - proposals should aim to inform urban design such that it reduces NCD risks (e.g., by improving a city's walk- or bike-ability, increasing green space to reduce the health impacts of air pollution or extreme heat, reducing environmental toxins, etc).

*Proposals are intended for research that helps guide the implementation and/or scale up of the proposed intervention. Therefore, the execution of infrastructural interventions (e.g., constructing bike lanes or housing, etc.) is not in the scope of this topic.*

European Commission

# HORIZON-HLTH-2023-DISEASE-03-03: Interventions in city environments to reduce risk of non-communicable disease (Global Alliance for Chronic Diseases - GACD)

## Scope (2)

- **Adapt these intervention(s)** for selected **study population(s) based in one or more city/ies**, taking into account the unique **social, political, economic, and cultural context(s)**.

- Provide a **research plan** for investigating how to promote the **uptake and/or scale-up of the intervention(s) in the selected study population(s),** using validated implementation research frameworks.

- Have an appropriate **strategy for measuring both implementation research outcomes and real-world effectiveness outcomes and indicators** (related to NCD prevention and, if feasible, planetary health and/or non-health sectors).

- Demonstrate a **commitment to stakeholder engagement** … and … **to planetary health …**

- Provide a **sustainability plan or describe a pathway to sustain the proposed intervention** …

- … should be **gender-responsive and consider socioeconomic, racial or other factors** …

- Effective contribution of **social sciences and humanities disciplines** is required.

# HORIZON-HLTH-2023-DISEASE-03-04: Pandemic preparedness and response: Broad spectrum anti-viral therapeutics for infectious diseases with epidemic potential

## Expected outcome

- **The scientific and clinical communities** have an increased **knowledge on viruses with epidemic potential** and in particular a **better understanding of different potential mechanisms** of action for the **development of broad-spectrum anti-viral therapeutics** for these viruses.

- **The scientific and clinical communities** have access to **novel approaches for the development of anti-viral therapies** for emerging and re-emerging infections in the context of epidemic and pandemic preparedness.

- **The scientific and clinical communities** have access to **experimental broad-spectrum anti-viral candidates** against emerging or re-emerging viral infections for further clinical investigation.

- **A diverse and robust pipeline of broad-spectrum anti-viral drug candidates** is available for emerging and re-emerging viral infections, increasing therapeutic options for clinical deployment in case of an epidemic or pandemic.

# HORIZON-HLTH-2023-DISEASE-03-04: Pandemic preparedness and response: Broad spectrum anti-viral therapeutics for infectious diseases with epidemic potential

## Scope

- … to develop and advance **broad-spectrum anti-viral compounds** and … **novel approaches to the development of such compounds,** which target viruses with high epidemic or pandemic potential for the EU.

- … cover **viruses for which there are no currently available effective therapeutics or for which the therapeutics available are sub-optimal,** and are expected to **incorporate state-of-the-art screening technology and innovative approaches to identify new targets for antiviral compound development.**

- **Preclinical work and proof-of-concept/first-in-human studies** and **early safety and efficacy trials** for testing new or improved anti-viral therapeutics (Phase IIb/III phase trials will not be supported).

- **Innovative delivery systems and suitable safety profiles** for broad use should be considered when possible.

- … **novel approaches and widely applicable workflows** (e.g. artificial intelligence) for rapid and reliable identification of broad-spectrum anti-viral therapeutics.

- Attention should be paid to **critical social factors such as sex, gender, age, socio-economic factors, ethnicity/migration, and disability.**

# HORIZON-HLTH-2023-DISEASE-03-05: Pandemic preparedness and response: Sustaining established coordination mechanisms for European adaptive platform trials and/or for cohort networks

## Expected outcome

- **The research community** sustains appropriate coordination mechanisms **1) among different EU-wide adaptive platform trials** and/or **2) among established cohorts** in Europe and beyond with a view for better pandemic preparedness and response.

- **The adaptive platform trial and/or the cohort networks** maximise coordination and harmonisation of their respective studies within their relevant network for **maximum research efficiency and optimal evidence generation.**

- **The European adaptive platform trial and/or the cohort networks** coordinate with the **European Pandemic Preparedness Partnership,** and are well connected to each other and to relevant other regional and global initiatives.

*Disclaimer: information not legally binding*

# HORIZON-HLTH-2023-DISEASE-03-05: Pandemic preparedness and response: Sustaining established coordination mechanisms for European adaptive platform trials and/or for cohort networks

## Scope

- … maintaining and strengthening existing strategic **coordination mechanisms across adaptive platform trials and across cohort studies in Europe and beyond** …

- … address proper **connections with relevant European initiatives and organisations** (e.g., the European Pandemic Preparedness Partnership, HERA, EMA, ECDC).

- … a **trusted and proactive environment …** that supports the timely exchange of research results, allows for discussion … and … ensure cooperation and synergy within each network.

- … a **common approach for the European clinical research** to enable pragmatic solutions to shared challenges across European clinical trials and/or cohorts …

- … an **optimal use of resources**, based on a sound scientific approach and maximising the value added for the generation of scientific evidence …

- Involving **relevant European stakeholders** … as well as relevant **non-European networks and stakeholders** (e.g., representatives from regulatory authorities, industry, policymakers, patient organisations, etc.).

- Promoting the **visibility and attractiveness of European adaptive platform trials and/or cohorts** for clinical investigators in Europe and beyond

European Commission

# HORIZON-HLTH-2023-DISEASE-03-06: Towards structuring brain health research in Europe

## Expected outcome

- **Policymakers, funders and other relevant stakeholders** identify and agree on the governance structure and implementation modalities, allowing for an **efficient establishment of a potential future partnership.**

- **Policymakers, funders and other relevant stakeholders** build on the **knowledge gathered in past studies performed at EU and national level.**

- **Policymakers, funders and other relevant stakeholders** identify and agree on **common research priorities and research needs,** also taking into consideration developments at the international level where relevant.

- **Policymakers, funders and other relevant stakeholders** develop and align **national and regional research strategy plans** with long-term sustainability in mind.

- **Policymakers and funders** commit to providing financial support that will allow for a **comprehensive, impact-driven structuring of the field of European brain health research.**

European Commission

# HORIZON-HLTH-2023-DISEASE-03-06: Towards structuring brain health research in Europe

## Scope

- **… a structured system of exchange of information** between policymakers, funders, and other relevant bodies in order to establish synergies and avoid duplication of efforts … and **pave the way for a possible future partnership.**

- **… a strategic research and innovation agenda,** taking into account the efforts already undertaken by EU-supported actions.

- **… plans for a governance structure of a future partnership**, as well as **implementation modalities with long-term sustainability** in mind (under the leadership of an EU Member State or Associated Country).

- **… a broad geographical representation of European countries** and plan for **inclusion of all main related research initiatives, as well as key organisations and associations.**

- **…engaging with global organisations,** as well as with **global initiatives and research organisations** in the field.

- Elaborate on **platforms and tools for use by the research community**, including on how they can best complement, integrate with each other.

- Effective contribution of **social sciences and humanities disciplines** is required.

European Commission

# HORIZON-HLTH-2023-DISEASE-03-07: Relationship between infections and non-communicable diseases

## Expected outcome

- **All players along the health care value chain** are provided with new knowledge for **a better understanding of the links (e.g. causalities) between infectious diseases (IDs) and NCDs and comorbidities,** including knowledge on host risk factors that impact the development of disease progression for NCDs and/or IDs.

- **Researchers and clinicians** are provided with a robust evidence base that will contribute to the development of **new or improved tools to diagnose and prevent the development and aggravation of NCDs** as well as **early treatment and management of patients suffering from co-morbidities following an ID.**

- **Healthcare practitioners** have access to knowledge to guide them **on preventive measures, on early identification of diseases onset and of those patients at risk of developing severe disease progression, and on the optimal treatment of patients.**

European Commission

# HORIZON-HLTH-2023-DISEASE-03-07: Relationship between infections and non-communicable diseases

## Scope

- … elucidate and provide **a better understanding of causative links between infections and NCD onsets, and/or the impact of infections on the exacerbation of existing NCDs or vice versa,** in children and/or adults.

- **… analysis of genetics, immune status, immune or inflammatory responses, microbiome, lifestyle and/or other relevant** factors (e.g. differences in age, sex/gender, vaccination status, ethnicity) should be integrated to get information for **prevention, early diagnosis, risk factors,** and to better understand **causative links** as well as the **progression of those NCDs.**

- … address **any infection including those with pandemic potential** (viral, bacterial, or fungal) with NCDs of major importance (research on cancer is excluded).

- Special attention should be given to **vulnerable individuals**, such as those with known existing preconditions.

- **Preclinical research, observational studies and/or clinical studies** can be considered for this topic.

European Commission

# HORIZON-HLTH-2023-DISEASE-03-17: Pandemic preparedness and response: Understanding vaccine induced-immunity

**Expected outcome** (contributing to **one or several of the following** elements)

- The scientific and clinical communities have an increased knowledge of **vaccine-induced immunity** and, in particular, a better understanding of **factors that affect the magnitude, breadth, nature and duration of immunity to vaccine antigens**.

- The scientific and clinical communities have an increased knowledge of the durability and breadth of vaccine-induced immunity in **vulnerable populations and older age groups**.

- The scientific and clinical communities have an increased knowledge of **correlates of protection for pathogens with epidemic potential** to allow the development of effective vaccines.

- The scientific and clinical communities have an increased knowledge of the **characteristics that influence vaccine effectiveness** to allow for novel approaches for the development of vaccines for emerging and re-emerging infections, including antigenic variants, in the context of epidemic and pandemic preparedness.

# HORIZON-HLTH-2023-DISEASE-03-17: Pandemic preparedness and response: Understanding vaccine induced-immunity

**Scope** (address **one or several of the following** elements)

- Understand the **factors that affect vaccine durability and strength** to improve the global vaccine research and development pipeline for emerging and re-emerging viral infections.

- Study the **magnitude and breadth of initial immune responses and the duration of immunity after vaccination** with different vaccine types (mRNA, vector, inactivated, subunit, attenuated,…).

- Assess **how different factors** (e.g. sex, age and/or life style, genetic and molecular factors, pre-existing conditions or chronic infections) **affect the immune response** in humans.

- Identify **correlates of protection** that can be used to develop vaccines against viruses with a high epidemic or pandemic potential.

European Commission

# HORIZON-HLTH-2023-DISEASE-03-18: Pandemic preparedness and response: Immunogenicity of viral proteins of viruses with epidemic and pandemic potential

**Expected outcome** (contributing to **one or several of the following** elements)

- The scientific and clinical communities have an increased knowledge on viruses with epidemic and pandemic potential and in particular a **better understanding of viral targets for vaccine development**.

- The scientific and clinical communities have access to **novel approaches for the prevention and treatment for emerging and re-emerging infections** in the context of epidemic and pandemic preparedness.

- The scientific and clinical communities have access to **experimental vaccine candidates against emerging or re-emerging viral infections** for further clinical investigation.

- A **diverse and robust pipeline of vaccine candidates** is available for emerging and re-emerging viral infections, increasing therapeutic options for clinical deployment in case of an epidemic or pandemic.

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# HORIZON-HLTH-2023-DISEASE-03-18: Pandemic preparedness and response: Immunogenicity of viral proteins of viruses with epidemic and pandemic potential

**Scope** (address **one or several of the following** elements)

- Identify **targets for optimal vaccine design** for those pathogens where **information on host-pathogen interaction and viral surface structures is already available**, with particular attention to:

  > *Hendra and Nipah Virus, Lassa virus, Crimean Congo haemorrhagic fever virus, Rift Valley fever virus, Ebola virus, Dengue virus, Yellow Fever virus, Zika virus, West Nile fever virus and Chikungunya virus (not included: coronavirus and influenza)*

- Identify **key antigenic targets** for the priority pathogens as mentioned above.

- Improve or, if necessary, establish **animal models** for the testing of vaccine candidates where alternative models are not available.

- Characterise the **immunogenicity of antigenic targets** in appropriate animal or alternative models and in pre-clinical tests.

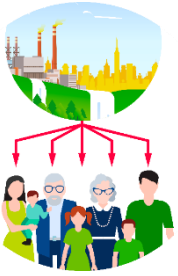- Include, if possible, **proof-of-concept studies in humans** of the vaccine candidate.

**DESTINATION 4**

# Ensuring access to innovative, sustainable and high-quality health care

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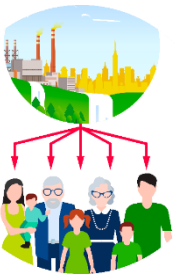
European Commission

# Destination 4: Ensuring access to innovative, sustainable and high-quality health care

**Health systems need to become more effective, efficient, accessible, sustainable and resilient.**

- Key Strategic Orientation: '*Creating a more resilient, inclusive and democratic European society*'.

- Impact areas:
  - *Good health and high-quality accessible health care;*
  - *A resilient EU prepared for emerging threats;*
  - *Climate change mitigation and adaptation;*
  - *High quality digital services for all;*
  - *A competitive and secure data economy.*

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# Destination 4: Expected impacts

- Health care systems provide **equal access** to **innovative, sustainable and high-quality health care** thanks to the **development and uptake of safe, cost-effective and people-centred solutions**, with a focus on **population health, health systems resilience** and **improved evidence-based health policies**;

- **Effective, efficient, accessible, resilient** and **sustainable health care services** and -**systems**, with emphasis on **health promotion** and **disease prevention** enable **shifting from hospital-centred to community-based, people-centred and integrated health care structures**;

- **Health care providers** are equipped with **skills and competences suited for future needs** and **health care systems** are **modernized, digitally transformed** and **equipped with innovative tools, technologies and digital solutions**;

- **Citizens** are **empowered in their own health management**, **informal carers are supported** and **specific needs of more vulnerable groups are addressed**;

- Health policy and systems adopt a holistic approach for the evaluation of health outcomes in the context of public health interventions.

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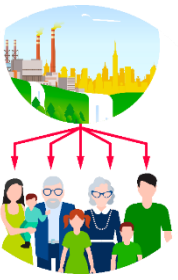
# Destination 4: Topics in 2021

- HORIZON-HLTH-2023-CARE-04-01:
  **Maintaining access to regular health and care services in case of cross-border emergencies**
- Closure: **13.04.2023**
- Instrument: RIA
- Tot: 20M€
- Project size: 4-6M€

- HORIZON-HLTH-2023-CARE-04-02:
  **Resilience and mental wellbeing of the health and care workforce**
- Closure: **13.04.2023**
- Instrument: RIA
- Tot: 20M€
- Project size: 4-6M€

- HORIZON-HLTH-2023-CARE-04-03:
  **Environmentally sustainable and climate neutral health and care systems**
- Closure: **13.04.2023**
- Instrument: RIA
- Tot: 20M€
- Project size: 4-6M€

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# Maintaining access to regular health and care services in case of cross-border emergencies

**Expected outcome** (contributing to **several of the following** elements)

- **Decision-makers** have access to **modelling tools** and **foresight studies** for anticipating regular and unplanned health and care demand during large-scale cross-border emergencies;

- **Decision-makers** and **providers** can **better facilitate and manage access** to regular health and care delivery during cross-border emergencies; and **avail of management frameworks** including organisational models for handling both unplanned and regular health and care needs;

- **Health and care professionals** have access to **training** on how to deliver regular health and care services during cross-border health emergencies;

- **Health and care professionals, citizens and patients** access **advanced digital tools** enabling managed access to regular health and care services complemented by other modes of health and care delivery (e.g., telemedicine);

- **Patients** can be **involved in the design and production of health and care delivery models** during cross-border emergencies and can benefit from better access;

- **Health and care providers** and **professionals** have access to **knowledge and data** on, and **innovative solutions to combat, decreasing demand** for regular health and care services resulting from an ongoing emergency.

# Maintaining access to regular health and care services in case of cross-border emergencies

## Scope (address **several of the following** elements)

- **Analysis, evaluation, cost studies** of different epidemics or other emergencies **response measures** in Member States and Associated Countries aimed at maintaining access to regular health and care services.

- **Development of innovative tools and models** for maintaining access to regular health and care services during cross-border emergencies.

- **Development and implementation of digital tools** and of effective communication strategies based on digital health literacy studies.

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European Commission

# Resilience and mental wellbeing of the health and care workforce

**Expected outcome** (contribute to **several of the following** elements)

- **Health and care workers** receive **support** , and access to **tools and guidance** that enhances their wellbeing and ability to adapt to changing working conditions;

- **Decision- and policymakers, employers and social partners** in the health and care sectors have **knowledge of, and solutions to prevent and manage,** the specific risks for health and care professionals and informal carers;

- **Funders of health and care provision** have access to e**vidence, novel approaches** and **cost-effective recommendations** for interventions supporting the mental health and well-being of health and care workers;

- **Policymakers cooperate** with relevant **stakeholders.**

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European Commission

# Resilience and mental wellbeing of the health and care workforce

**Scope** (address **all of the following** elements)

- Collect and analyse **new evidence** and **data generation**;

- Develop **action-oriented recommendations** to policymakers, employers, social partners and relevant civil society organisations at the appropriate levels (EU, national, regional, local) based on evidence generated by the proposed action;

- Develop, or identify, **innovative solutions** (including digitally enabled ones), **organisational models** and **management approaches**;

- Develop **financing and resource allocation models**;

- Carry out **testing and validation activities** for new or improved solutions.

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European Commission

# Environmentally sustainable and climate neutral health and care systems

**Expected outcome** (contribute to **all of the following** elements)

- **Policy and decision makers, providers of health and care, health and care workers** and **citizens** have **increased knowledge** on how today's health and care systems are not environmentally sustainable;

- **Policy and decision makers** and **providers of health and care** services have access to **innovative solutions**, **organisational models,** and **guidelines and recommendations**;

- **Monitoring and reporting of carbon emissions and pollution** is **mainstreamed** through a life-cycle approach and with standard methods in the health and care systems.

European Commission

# Environmentally sustainable and climate neutral health and care systems

**Scope** (address **all of the following** elements)

- **Research and innovative solutions** for **decarbonisation** of hospitals and other care providers.

- **Research and innovative solutions** for **increased circularity** of hospitals or other care providers that integrate the zero-pollution ambition.

- **Research and innovative solutions** for **decarbonisation** and greening of **supply chains** and material inflows.

- Development of a **framework** to measure and benchmark the **environmental footprint** of the health and care sectors or improving infrastructures for relevant collecting, sharing, accessing and processing of data.

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European Commission

**DESTINATION 6**

# Maintaining an innovative, sustainable and globally competitive health industry

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European Commission

# Destination 6: Maintaining an innovative, sustainable and globally competitive health industry

**The health industry is a key driver for growth and has the capacity to provide health technologies to the benefit of patients and providers of health care services.**

- Key Strategic Orientation: '*Promoting an open strategic autonomy by leading the development of key digital, enabling and emerging technologies, sectors and value chains*'.

- Impact areas
  - *A competitive and secure data-economy,*
  - *Industrial leadership in key and emerging technologies that work for people,*
  - *High quality digital services for all,*
  - *Good health and high-quality accessible health care,*

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European Commission

# Destination 6: Expected impacts

- Health industry (including SMEs) is more competitive and sustainable, assuring EU leadership and strategic autonomy in medical supplies and digital technologies.

- Health industry is working more efficiently along the value chain.

- European standards ensuring safety and quality of healthcare, as well as effectiveness and interoperability of health innovations.

- Swift uptake of innovative health technologies and services.

- Reliable and timely access to key manufacturing capacity (e.g. vaccines and medical radioisotopes).

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European Commission

# Destination 6: Topics in 2023 – Single stage

- HORIZON-HLTH-2023-IND-06-01:
  **Supporting the uptake of innovative Health Technology Assessment (HTA) methodology and advancing HTA expertise across EU**
- Closure: 13 April 2023
- Instrument: CSA
- Total: 5M€
- Project size: 5M€

- HORIZON-HLTH-2023-IND-06-02:
  **Expanding the European Electronic Health Record exchange Format to improve interoperability within the European Health Data Space**
- Closure: 13 April 2023
- Instrument: RIA
- Total: 8M€
- Project size: 3-5M€

- HORIZON-HLTH-2023-IND-06-04:
  **Modelling and simulation to address regulatory needs in the development of orphan and paediatric medicines**
- Closure: 13 April 2023
- Instrument: RIA
- Total: 25M€
- Project size: 4-6M€

- HORIZON-HLTH-2023-IND-06-05:
  **Mapping the hurdles for the clinical applications of Advanced Therapy Medicinal Products (ATMPs)**
- Closure: 13 April 2023
- Instrument: CSA
- Total: 3M€
- Project size: 3M€

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European Commission

# Destination 6: Topics in 2023 – Single stage

- HORIZON-HLTH-2023-IND-06-07:
  **Development and harmonisation of methodologies for assessing digital health technologies in Europe**
- Closure: 13 April 2023
- Instrument: RIA
- Total: 15M€
- Project size: 7-8M€

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European Commission

# Supporting the uptake of innovative Health Technology Assessment (HTA) methodology and advancing HTA expertise across EU

**Expected outcome** (contributing to **all of the following** elements)

- **Identification** of the most innovative **HTA methods** developed by EU-funded projects, and **endorsement by HTA bodies** of such methods;

- **Dissemination** among EU HTA bodies of robust innovative HTA methods and tools;

- **Harmonisation of HTA expertise** across EU though the development of a **training programme** in accordance with **Regulation (EU) 2021/2282** and based on the methodological **guidelines of the Coordination Group on HTA**;

- Contribution to a successful **implementation of the HTA regulation** as well as to building an **EU methodological HTA framework.**

# Supporting the uptake of innovative Health Technology Assessment (HTA) methodology and advancing HTA expertise across EU

## Scope

Two strands of activities should be tackled in the proposals:

- Implementation of innovative **HTA methods**;
- Advancing **HTA expertise** across the EU and Associated Countries.

(Applications should address **all of the following** elements):

- Identification of **innovative methods and tools**;
- Identification of **barriers to the uptake** of these methods;
- **Use cases to facilitate the endorsement** by HTA bodies of innovative methods;
- Development of an **implementation plan** including supporting tools and training modules;
- Recommendations for **broader dissemination**.

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# Expanding the European Electronic Health Record exchange Format to improve interoperability within the European Health Data Space

**Expected outcome** (contributing to **all of the following** elements)

- European Health Record (EHR) **stakeholders** (e.g. **developers, suppliers, integrators, and operators**) have at their disposal and use fit-for-purpose **standards, guidelines, and toolsets for prioritised health information domains** to address interoperability of EHRs

- **Stakeholders** have at their disposal **better quality and better integrated health datasets** within the European Health Data Space, to foster innovations in the health sector and leverage the potential of new analytics solutions such as AI and big data, get new insights and detect trends from aggregated data, including for cross-border health threats

- **Citizens** are provided with an **expanded access to their health data**, also across borders, and **innovative digital services** for high-quality health and care across the EU

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European Commission

# Expanding the European Electronic Health Record exchange Format to improve interoperability within the European Health Data Space

**Scope** (address **all of the following** elements)

- Research, develop and validate **harmonised interoperability formats** for sharing data in specific priority health information domains that should be selected with reference to the EU policies and priorities

- Leverage and scale up the potential of EHR through enhanced interoperability to **improve quality, safety, and efficiency of patient care**, enforce patients' right to **data portability**

- Address **semantic interoperability** for prioritised information domains so that the transmitted health record contains standardised coded data.

- **Maximise synergies with relevant initiatives**, activities and programmes, building upon previous and linking to on-going actions

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European Commission

# Modelling and simulation to address regulatory needs in the development of orphan and paediatric medicines

**Expected outcome** (contributing to **all of the following** elements)

- **Developers** and **regulators** have access to **robust modelling** and **simulation tools** to accelerate the effective development of **orphan** and/or **paediatric** medicinal products.

- **Clinical researchers**, **developers** and **regulators** use accurate computational models to improve the **statistical robustness in clinical trials** intended for **small populations** and guide cost-        effective **clinical trial designs**.

- **Clinical researchers** and **regulators** have access to **accurate in-silico tools** for assessing the actionable use of **real-world data** and for successfully estimating the **risk-benefit** effects in **clinical trials for small populations**.

- **Regulators** develop **guidance** for the use of **validated computational models** to support a robust **extrapolation framework** and facilitate the **safety and efficacy assessment** in the process of **regulatory appraisal** of orphan and/or paediatric medicinal products.

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# Modelling and simulation to address regulatory needs in the development of orphan and paediatric medicines

## Scope (address **all of the following** elements)

- **Assess the utility of mature computational models**, to support the design of innovative clinical trials for small populations and regulatory decisions on the development of orphan and/or paediatric medicines;

- **Calibrate and optimise mature computational models** to enhance their clinical performance, by using relevant sources of patient data;

- **Assess** the validated in-silico models for their **capability to increase the statistical robustness, improve the risk/benefit assessment** in small population clinical trials, and for their **accuracy to predict and extrapolate the therapeutic effects**;

- **Benchmark diverse computational models** by showcasing their performance and credibility in use cases representing well-justified group(s) of **rare and/or paediatric diseases** with commonalities, **excluding rare cancers and rare infectious diseases.**

- **Set-up the criteria for the performance and credibility assessment** to progress on regulatory qualification and acceptability.

- **Develop and disseminate standards** for the design, performance assessment and reporting of modelling and simulation tools with an emphasis on those of high regulatory value.

- Demonstrate the **availability of the relevant data** to address the requirements of the topic.

# Mapping the hurdles for the clinical applications of Advanced Therapy Medicinal Products (ATMPs)

**Expected outcome** (contributing to **all of the following** elements)

- Aspects of **regulation, policy, safety, efficacy, manufacturing, organisation, infrastructure, decision-making, and commercialisation** are identified

- **EU regulatory frameworks are adapted to novel scientific progress** (platform approaches, genome editing, interface with medical devices, AI)

- **Competent authorities in the MS can propose adapted pricing and reimbursement schemes** that allow European citizens to benefit from novel ATMPs

- Academic and SME developers and manufacturers of ATMPs have an **increased knowledge of the regulatory aspects**

- Decentralised **manufacturing** of ATMPs is **consistent across health care centres**

*Disclaimer: information not legally binding*

European Commission

# Mapping the hurdles for the clinical applications of Advanced Therapy Medicinal Products (ATMPs)

**Scope** (address **all of the following** elements)

- **Map the** regulatory, safety and efficacy assessment, manufacturing, organisational and infrastructural **needs to improve translation of ATMPs**
- Address g**aps and uncertainties** in regulatory and policy aspects for complex ATMPs;
- Address p**redictivity of preclinical data** for safety and efficacy testing of ATMPs
- Tackle **Decision-making processes relating to ATMPs** (assessment of their values, long-term safety and effectiveness, new pricing and reimbursement, etc.);
- Improved **knowledge of regulatory processes** for academic developers;
- Involve **regulatory authorities, HTA bodies, clinicians, ethics committees** and **patients**

*Disclaimer: information not legally binding*

# Development and harmonisation of methodologies for assessing digital health technologies in Europe

## Expected outcome (contributing to **all of the following** elements)

- **Policymakers** dispose of a **methodological framework** and **standardised approaches** for **assessing digital health technologies**, that helps making **evidence-based decisions** regarding the introduction of digital health technologies in health and care systems with added value for patients and society.

- **Regulators** have access to robust, scientifically underpinned **evaluation methodologies**.

- **EU citizens** gain **faster access** to safe and well-performing **person-centred digital technologies** and are **empowered** through these tools.

- **Health technology developers** are better informed and dispose of **more guidance** on the **evidence** needed to demonstrate the **added value of digital health technologies** and have **better insights** in market predictability.

- (Digital) **Health Industry**/digital health technology developers and **HTA bodies** can **contribute** to the development of **EU harmonised Health Technology Assessment (HTA) rules** based on **common principles**.

- Improved **cross-border use and interoperability** of **digital health tools and services** throughout the EU and Associated Countries.

- **Increased trust** in digital health technologies and **better integration** of **digital health tools and services** in health and care systems.

*Disclaimer: information not legally binding*

# Development and harmonisation of methodologies for assessing digital health technologies in Europe

## Scope (address **all of the following** elements)

- Develop and/or expand a **general methodological framework** and **standardised approaches** to assess digital health technologies with a particular **focus** on criteria such as **privacy**, **cybersecurity**, **data quality**, **data storage and handling**, **interoperability** etc.;
- **Test robustness** of developed methodologies on **min. 3** different digital health technology use cases;
- **Collect best practice** for common approaches in methodology for digital health technology assessment and develop an **open access European repository** for evaluation methods, studies, results and evidence of digital health technologies and services;
- **Pilot** the development of **common specifications** to the **harmonisation of assessment frameworks** (pre-market and post-market phases) throughout the EU and Associated Countries;
- **Include end-users** of digital health technologies (be it professionals, care users or citizens), developers of digital health technologies, producers of health services, regulators and governments;
- Contribute to a **framework to evaluate and monitor** whether the **uptake and use** of digital health services contribute to the overall goals of the health and care system;
- Comply with relevant requirements proposed in the **European Health Data Space** (EHDS) legal provisions;

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European Commission

**DESTINATION 5**

# Unlocking the full potential of new tools, technologies and digital solutions for a healthy society

Disclaimer: information not legally binding

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# Destination 5: Unlocking the full potential of new tools, technologies and digital solutions for a healthy society

**Technology is a key driver for innovation in the health care sector. It can provide better and more cost-efficient solutions with high societal impact, tailored to the specific health care needs of the individual.**

- Key Strategic Orientation: '*Promoting an open strategic autonomy by leading the development of key digital, enabling and emerging technologies, sectors and value chains*'.

- Impact areas:
  - *High quality digital services for all,*
  - *Health technologies, new tools and digital solutions are applied effectively thanks to their inclusive, secure and ethical development, delivery, integration and deployment in health policies and health and care systems,*
  - *A competitive and secure data-economy,*
  - *Industrial leadership in key and emerging technologies that work for people*
  - *Good health and high-quality accessible health care.*

*Disclaimer: information not legally binding*

# Destination 5: Expected impacts

- Europe's scientific and technological expertise and know-how, its capabilities for innovation in new tools, technologies and digital solutions, and its ability to take-up, scale-up and integrate innovation in health care is world-class.

- Citizens benefit from targeted and faster research resulting in safer, more sustainable, efficient, cost-effective and affordable tools, technologies and digital solutions.

- The EU gains high visibility and leadership in terms of health technology development.

- The burden of diseases in the EU and worldwide is reduced through the development and integration people-centred solutions for health care.

- Both the productivity of health research and innovation, and the quality and outcome of health care is improved.

- Citizens trust and support to innovative technologies for health care.

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# Destination 5: Topics in 2023 – Single stage

- HORIZON-HLTH-2023-TOOL-05-01: **Clinical trials of combined Advanced Therapy Medicinal Products (ATMPs)**
- Closure: 13 April 2023
- Instrument: RIA
- Tot: 50M€
- Project size: 8-10M€

- HORIZON-HLTH-2023-TOOL-05-04: **Better integration and use of health-related real-world and research data, including genomics, for improved clinical outcomes**
- Closure: 13 April 2023
- Instrument: RIA
- Tot: 35M€
- Project size: 8-10M€

- HORIZON-HLTH-2023-TOOL-05-03: **Integrated, multi-scale computational models of patient patho-physiology ('virtual twins') for personalised disease management**
- Closure: 13 April 2023
- Instrument: RIA
- Tot: 50M€
- Project size: 8-10M€

- HORIZON-HLTH-2023-TOOL-05-05: **Harnessing the potential of real-time data analysis and secure Point-of-Care computing for the benefit of person-centred health and care delivery**
- Closure: 13 April 2023
- Instrument: IA
- Tot: 35M€
- Project size: 8-10M€

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# Destination 5: Topics in 2023 – Single stage

- HORIZON-HLTH-2023-TOOL-05-08: **Pandemic preparedness and response: In vitro diagnostic devices to tackle cross-border health threats**
- Closure: 13 April 2023
- Instrument: IA
- Tot: 40M€
- Project size: 5-7M€

- HORIZON-HLTH-2023-TOOL- 5.09: **Developing a Data Quality and Utility Label for the European Health Data Space**
- Closure: 13 April 2023
- Instrument: CSA
- Tot: 4M€
- Project size: 4M€

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# Clinical trials of combined Advanced Therapy Medicinal Products (ATMPs)

**Expected outcome** (contributing to **all of the following** elements)

- Healthcare providers get **access to innovative combined ATMP treatment options** with demonstrated health benefits for unmet medical needs;

- **Developers and manufacturers** of combined ATMPs obtain **scientific evidence on** the proposed therapeutic approach;

- **Patients benefit from advanced therapies** delivered through the combined ATMPs;

- EU companies get a **better market position** in the field of combined ATMPs.

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# Clinical trials of combined Advanced Therapy Medicinal Products (ATMPs)

**Scope** (address **all of the following** elements)

- **Phase 2 CTs of combined ATMP** with**:**
  - **Technologies ready to undergo interventional clinical trials** in patients/end users assessing the usability and clinical performance;
  - Technologies with **safety/performance** profiles that should undergo **clinical validation** in view of their **inclusion into** guidelines for specific clinical pathways;
- Delivery of **safe and clinically validated combined ATMPs** compliant with current EU regulatory requirements;
- **Consultation/interaction with competent regulatory agencies**, such as EMA, national regulatory agencies and HTA bodies.

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# Integrated, multi-scale computational models of patient patho-physiology ('virtual twins') for personalised disease management

**Expected outcomes** (contributing to **all of the following** elements)

- Clinicians and other healthcare professionals have access to and/or use **validated multi-scale computational models of individual patients** for delivering optimised and cost-effective patient management strategies superior to the current standard of care.

- Healthcare professionals benefit from **enhanced knowledge of complex disease onset and progression** by recourse to validated, multi-scale and multi-organ models.

- Clinicians and patients benefit from new, improved personalised **diagnostics**, medicinal products, devices, **therapeutic strategies** tailored to individual **patient** pathophysiology.

- **Citizens and patients** have access to **validated 'virtual twin' models** enabling the **integration of citizen-generated data with medical** and other **longitudinal health data**, and benefit from **early detection** of disease onset, **prediction** of disease progression and **treatment options**, and **effective disease management**.

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# Integrated, multi-scale computational models of patient patho-physiology ('virtual twins') for personalised disease management

**Scope** (address **all of the following** activities)

- Develop **multi-scale** and **multi-organ**, **dynamic**, interoperable, modular **computational models**, capable of accurately **simulating the individual patient patho-physiology**, spanning different anatomical scales from molecular to cell, tissue, organ and systems).

- Advance the state of the art in multi-scale modelling by employing **diverse modelling methodologies** as a means for **modelling the healthy state**, **disease onset, progression**, **treatment** and **recovery** with the necessary **diverse data types**.

- **Integrate** standardised **spatiotemporal multi-scale models** as a basis for developing personalised 'virtual twin' models reflecting patient's individual characteristics. This must be driven by **active involvement of end users, usability** must be demonstrated.

- **Validate** multi-scale patient-specific models, generate **evidence** on delivering clinically meaningful, real-world observations for diseases under study. **Utility vis-à-vis current practice** must be shown and an **exploitation strategy** elaborated.

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# Better integration and use of health-related real-world and research data, including genomics, for improved clinical outcomes

**Expected outcome** (contributing to **most of the following** elements)

- Better **linkage of health data from various sources**, based on **harmonised approaches** applicable **across certain disease areas** and national borders

- Access to advanced **digital tools** for **health data integration, management and analysis** in a secure, cost-effective and clinically meaningful way for **improved health outcomes**

- Advanced **understanding of the risk factors, causes, development and optimal treatment** in disease areas through **integration of genomics with other health data**

- **Data-driven solutions** and **better evidence base** for addressing healthcare challenges

- **Data-driven patient-focused health interventions** for improved disease prevention, diagnosis, treatment and monitoring towards better patient outcomes and well-being

- **Increased trust** in the re-use of health data for research and healthcare

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# Better integration and use of health-related real-world and research data, including genomics, for improved clinical outcomes

**Scope** (address **all of the following** elements)

- Identification of the **barriers to health data integration and access** and of specific **existing tools, technological solutions** and agreements addressing those barriers

- **New approaches** to assemble large, easily findable and lawfully accessible high-quality datasets **integrating multiple types of health data** leading to improved clinical outcomes

- **New techniques, support tools**, mechanisms and modalities to enable **GDPR compliant access to sensitive personal data**, including genomics, allowing for their **re-use across borders and integration** of different types of data relevant to human health

- **Data management** approaches for cross-border distributed **data storage and processing**, including joint data governance piloted among several clinical centres across Europe

- **Data analytics platform** applying **distributed learning and AI** to query and aggregate data securely from multiple sources and for multiple use cases

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# Harnessing the potential of real-time data analysis and secure Point-of-Care computing for the benefit of person-centred health and care delivery

**Expected outcome** (contributing to **all of the following** elements)

- **Healthcare professionals** benefit from secure, highly performant Point-of-Care computing technologies and devices to enable **continuous monitoring and/or fast real-time health status checks** in clinical settings and workflows

- **Patients and clinicians** benefit from wider access to **real-time diagnosis, screening, monitoring and treatments**

- **Quicker reaction times and improved patient safety** in care settings

- **Researchers and healthcare professionals** have more opportunities to **use, extract value from and contribute to the uptake of real-time health data**

- **Health and care settings** benefit from **reduced energy consumption**

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# Harnessing the potential of real-time data analysis and secure Point-of-Care computing for the benefit of person-centred health and care delivery

**Scope** (address **all of the following** elements)

- Develop and validate **compact, cost- and energy-efficient, extended reality-enabled and other Point-of-Care devices and systems**, to be integrated into clinical settings;

- Develop and validate **instruments, continuous monitoring systems and/or analysis algorithms for the analysis of biological samples**, enabling detection of biomarkers in body fluids and tissues in clinical settings;

- Develop and validate **imaging systems with a high spatial resolution down to the cellular level allowing for immediate clinical interventions**;

- Advance the use of **Point-of-Care computing, data modelling, extended reality and/or machine learning/AI technologies applied to diagnosis and risk assessment** in cases requiring very fast, near to real-time response times in clinical settings and workflows.

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# Pandemic preparedness and response: In vitro diagnostic devices to tackle cross-border health threats

**Expected outcome** (contributing to **all of the following** elements)

- The scientific and clinical communities, including health care providers and payers, as well as regulators, health systems and patients **benefit from innovative diagnostic solutions that are better suited to tackle cross-border health threats**.

- The scientific and clinical communities have access to **novel and improved methodologies for detection of pathogens with pandemic potential** in humans and for timely discovery of other health threats, such as chemical, radiological and nuclear threats, including considerations on detection in animals and environmental conditions (One Health approach).

- A **diverse and robust pipeline of in vitro diagnostics** is available, increasing options for clinical deployment in case of an epidemic or pandemic.

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# Pandemic preparedness and response: In vitro diagnostic devices to tackle cross-border health threats

**Scope** (address **all of the following** elements)

- Develop and advance on **new in vitro diagnostics relevant for detecting and characterising cross-border health threats**, incl. pathogens with pandemic potential, chemical, radiological and nuclear threats;

- Develop **proof-of-concept/early studies** linked e.g. to performance evaluation of new diagnostics that facilitate screening, detection of the presence or exposure to a cross-border health threat or determination of infectious/disease status through human samples;

- Develop **data-driven diagnostic and prognostic platforms with AI and other advanced data analytics functionalities**, adaptable to respond to new and multiple pathogens/threats, e.g. covering prototype viruses;

- Develop **innovative systems** linked to high sensitivity/specificity profiles **adaptable for broader use**, e.g. portable, faster, more compact or accurate devices and technologies;

- Develop **innovative diagnostics sampling methods** or samples bringing a significant improvement, such as less invasive sampling methods.

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# Developing a Data Quality and Utility Label for the European Health Data Space

**Expected outcome** (contributing to **all of the following** elements)

- **Data Users** are able to identify the most relevant datasets that meet their specific needs through better defined datasets with **a label describing the quality and utility dimensions of the datasets**;

- **Data holders** have **clear specifications for dataset quality and utility labelling** to comply with the requirements proposed in the EHDS legal provisions;

- **Public funders** ensure that the datasets, for which they provided funding for the creation and curation of, are more widely available, **furthering their reuse**;

- **The European Commission** has access to a **set of specifications for the data quality and utility label** supporting the implementation of the EHDS legal provisions.

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# Developing a Data Quality and Utility Label for the European Health Data Space

**Scope** (address **all of the following** elements)

- Develop a **data quality and utility framework** to articulate the characteristics and the potential usefulness of datasets;

- Support **data holders** in identifying and addressing areas of **improvement;**

- Take into account the **various needs of data users** whilst at the same time avoid becoming an excessive burden on data holders;

- Develop a **framework (set of technical specifications)** for the data quality and utility label that supports the implementation of the EHDS legal provisions;

- Develop **recommendations for the successful implementation and adoption** of the data quality and utility label and maturity model.

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# Refresher on gender equality provisions in Horizon Europe

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# Refresher on gender equality plans & other gender equality provisions in Horizon Europe

Cluster 1 NCP Event – 13/12/2022

*Anne Pépin*
*Senior Policy Officer, Gender Sector*
*Unit D4-Democracy & European Values*
*DG Research & Innovation*

# Gender equality: a strengthened crosscutting priority in Horizon Europe

- **Article 7(6)** and **Recital 53** of [Framework Regulation](#)
- **Articles 2(2)(e)** and **6(3)(e)** of the [Specific Programme](#)

Gender Equality Plan (GEP): **Eligibility Criterion**

Integration of the gender dimension in R&I content: **Award Criteria**

Gender balance: **Ranking Criteria** – for *ex aequo* proposals

+ Researchers can declare their gender along three categories: **woman, man, non-binary**

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# Eligibility Criterion

**Gender Equality Plan (applicable from calls with deadlines in 2022 onwards)**

Participants (as Beneficiaries and Affiliated Entities) that are **public bodies, research organisations** or **higher education institutions*** established in a Member State or Associated Country **must have a gender equality plan** in place, fulfilling **mandatory process-related requirements:**

- A self-declaration is requested at proposal stage (based on a self-declaration questionnaire in the Participant Register)

- Included in the legal entity validation process

\* Private-for-profit entities (incl. SMEs), NGOs, CSOs, as well any types of organisations from non-associated third countries, are exempted for the criterion. See legal categories definitions in the Funding & Tenders Portal

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HORIZON EUROPE ELIGIBILITY CRITERION

# To be done by the LEAR

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# If the organisation is already registered

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### EU Programmes

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| Asylum, Migration and Integration Fund (AMIF) | Border Management and Visa Instrument (BMVI) | Customs Control Equipment Instrument (CCEI) | Connecting Europe Facility (CEF) | Citizens, Equality, Rights and Values Programme (CERV) | Creative Europe (CREA) |
| Customs Programme (CUST) | Digital Europe Programme (DIGITAL) | Europe Direct (ED) | European Defence Fund (EDF) | European Parliament (EP) | EU Anti-fraud Programme (EUAF) |
| European Solidarity Corps (ESC) | Erasmus+ Programme (ERASMUS) | EU4Health Programme (EU4H) | European Social Fund + (ESF) | European Maritime, Fisheries and Aquaculture Fund (EMFAF) | Euratom Research and Training Programme (EURATOM) |
| Fiscalis Programme (FISC) | Innovation Fund (INNOVFUND) | Internal Security Fund (ISF) | Horizon Europe (HORIZON) | Single Market Programme (SMP) | Social Prerogative and Specific Competencies Lines (SOCPL) |
| EU External Action | Interregional Innovation | Justice Programme | Protection of the Euro | Pilot Projects and | Programme for the |

### News

**Information Session on the call for proposals Information and awareness raising campaigns on the risks of irregular migration in third countries and within Europe AMIF-2022-TF1-AG-INFO**

Recording of the information session for the call: Information and awareness raising campaigns on the risks of irregular migration in third countries and within...

20 May, 2022

**The amendment to the Horizon Europe Work Programme 2021-2022 was adopted**

The Commission adopted this amendment on 10 May 2022. Please read the related Press Release. The updates to calls for proposals and topics are available under t...

18 May, 2022

**We need your feedback to improve the Portal services**

The team behind the Portal wants to know your opinion. In this short survey you are invited to share your experience. Let us shape a better service together!

All news ›

### Events

**The Gender Equality Plan eligibility criterion in Horizon Europe: Who is concerned? How to comply with it?**

📅 23 Jun 2022   ⏱ 14:30

**Avoiding errors in declaring personnel costs in Horizon 2020 grants**

📅 22 Jun 2022   ⏱ 10:00

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| NCP Test Company E | 934187892 | | Validated | Actions ⚙ |
| NCP Test Research Org D | 934188086 | | Validated | Actions ⚙ |
| NCP test SME C | 934188280 | | Validated | Actions ⚙ |
| NCP Test Company B | 934525646 | | Validated | Actions ⚙ |
| NCP Test University A | 934526519 | | Validated | Actions ⚙ |
| Test - Hegyvarine Nagy Agnes | 954905831 | | Declared | Actions ⚙ |
| THE BRUSSELS OFFICE SA | 958300443 | BE0476213184 | Validated | Actions ⚙ |
| Development Workshop - Angola | 986338681 | Not Applicable | Declared | Actions ⚙ |

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| NCP Test Company B | 934525646 | | Val... | |
| NCP Test University A | 934526519 | | Val... | Actions ⚙ |
| Test - Hegyvarine Nagy Agnes | 954905831 | | Declared | Actions ⚙ |
| THE BRUSSELS OFFICE SA | 958300443 | BE0476213184 | Validated | Actions ⚙ |
| Development Workshop - Angola | 986338681 | Not Applicable | Declared | Actions ⚙ |

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PIC 934187795

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Edit Organisation Data

| | |
|---|---|
| Legal name | **NCP Test University F** |
| Business name | **NCP Test University F** |
| Address | **Test Street 1** |
| Postal code | Postal code |
| P. O. box | |
| City | **Test City** |
| Registration country | **Namibia** |
| Phone | **+123456789** |
| Fax | |
| Website | |
| Official language | **German** |

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✏ Edit Legal Information

## Legal Information

| | |
|---|---|
| Legal entity status | **a legal person** |
| Legal form | **FOUNDATION** |
| VAT number | |
| Legal register | **not applicable** |
| Registration number | **not applicable** |
| Registration date | **01/01/1900** |
| Legal entity type | **public body** |
| Legal entity qualification | **non-profit** |
| Is it a civil society organisation | |
| International organisation | **No** |
| Research organisation | **No** |
| Large research infrastructure | |

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## Legal Information

| Legal entity status | ○ a natural person | ● a legal person | ✓ |

| Legal form * | FOUNDATION | ✓ |

| VAT number * | VAT number | 🔘 not applicable ✓ |

| Legal register | not applicable | ✓ |

| Registration number | not applicable | ✓ |

| Registration date | 01/01/1900 | ✓ |

| Legal entity type | ○ private entity | ● public body | ✓ |

| Legal entity qualification | ● non-profit | ○ for profit |

| Is it a civil society organisation | ○ Yes | ○ No |

Cancel    Submit

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## NCP Test University F
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Need help?

| Organisation Data | Legal Information | Authorised users / LEAR | Bank Accounts | Financial capacity | Messages 3 | Documents | SME |

### Legal Information

| | | | |
|---|---|---|---|
| Legal entity status ⓘ | ○ a natural person  ● a legal person | | ✓ |
| Legal form * ⓘ | FOUNDATION | | ✓ |
| VAT number * ⓘ | VAT number | 20 | ⬤ not applicable ✓ |
| Legal register ⓘ | not applicable | 305 | ✓ |
| Registration number ⓘ | not applicable | 36 | ✓ |
| Registration date ⓘ | 01/01/1900 📅 | | ✓ |
| Legal entity type ⓘ | ○ private entity  ● public body | | ✓ |
| Legal entity qualification ⓘ | ● non-profit  ○ for profit | | |
| Is it a civil society organisation ⓘ | ○ Yes  ○ No | | |

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| | | |
|---|---|---|
| Is it a civil society organisation ⓘ | ○ Yes  ○ No | |
| International organisation * ⓘ | ○ Yes  ● No | ✓ |
| Research organisation ⓘ | ○ Yes  ● No | ✓ |
| Large research infrastructure ⓘ | ○ Yes  ○ No | |
| Secondary/Higher education establishment ⓘ | ● Yes  ○ No | |

## Gender equality plan

| | | |
|---|---|---|
| Gender equality plan ⓘ | ○ Yes  ○ No | ✏ Change GEP |

## Erasmus Charter

The Erasmus Charter for Higher Education (ECHE) provides the general quality framework for European and international cooperation activities that a higher education institution (HEI) may carry out within Erasmus +.

Erasmus Code ⓘ

Application Reference Number ⓘ

ECHE Valid ⓘ          **from to**

## FP7 Indirect Cost Method (ICM)

If you are registering for FP7 participation, please indicate the relevant FP7 Indirect Cost Method for your organisation.

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Is it a civil society organisation ⓘ — Yes   No

International organisation * ⓘ — Yes   ● No   ✓

Research organisation ⓘ — Yes   ● No   ✓

Large research infrastructure ⓘ — Yes   No

Secondary/Higher education establishment ⓘ — ● Yes   No

Gender

### Gender equality plan (GEP) ✕

Do you have a gender equality plan? *    Yes   ● No

✕ Cancel    ✓ OK

✏ Change GEP

Erasmu

The Erasmus Charter for Higher Education (ECHE) provides the general quality framework for European and international cooperation activities that a higher education institution (HEI) may carry out within Erasmus +.

Erasmus Code ⓘ

Application Reference Number ⓘ

ECHE Valid ⓘ     from to

FP7 Indirect Cost Method (ICM)

If you are registering for FP7 participation, please indicate the relevant FP7 Indirect Cost Method for your organisation.

Cancel    Submit

# Gender equality plan (GEP)

Do you have a gender equality plan? *     ○ Yes    ○ No

Please provide answers to all the questions below. This is an obligation for all types of legal entities.

Please note that for public bodies, research organisations and higher and secondary education institutions from Member States and Associated Countries, having a Gender Equality Plan is an eligibility criterion, meaning that without it, an organisation in one of these categories will not be allowed to participate in a Horizon Europe funded project (applicable to calls with deadlines in 2022 and beyond).

This is a self-assessment and you are not required at this stage to upload your Gender Equality Plan document. The declaration will be considered an official statement and by selecting "yes" you are formally confirming that your organisation has a Gender Equality Plan and that this document is signed by senior management and available on your organisation's public website.

Failure to provide the Gender Equality Plan if/when requested, may lead to exclusion from the list of successful applicants, or - in case of signed grant agreement - may lead to grant termination and/or recoveries of amounts paid.

Does your GEP fulfil the following four minimum process-related building blocks?

Public GEP:the GEP is a formal document published on the Institution's website and signed by the top management *     ○ Yes    ○ No

Dedicated resources:commitment of resources and gender expertise to implement it *     ○ Yes    ○ No

Data collection and monitoring: sex/gender disaggregated data on personnel and students and annual reporting based on indicators *     ○ Yes    ○ No

Training: Awareness raising/trainings on gender equality and unconscious gender biases for staff and decision-makers *     ○ Yes    ○ No

Recommended areas to be covered and addressed via concrete measures and targets:

Content-wise, which of the following recommended thematic areas does your Gender Equality Plan address, using concrete measures and targets?

Work-life balance and organisational culture *     ○ Yes    ○ No

Gender balance in leadership and decision-making *     ○ Yes    ○ No

**✕ Cancel**     **✔ OK**

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My Project(s)

My Formal Notification(s)

My Expert Area

**Gender equality plan (GEP)**                                                                  ✕

**Do you have a gender equality plan? ***                                   ● Yes    ○ No

Please provide answers to all the questions below. This is an obligation for all types of legal entities.

Please note that for public bodies, research organisations and higher and secondary education institutions from Member States and Associated Countries, having a Gender Equality Plan is an eligibility criterion, meaning that without it, an organisation in one of these categories will not be allowed to participate in a Horizon Europe funded project (applicable to calls with deadlines in 2022 and beyond).

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Public GEP:the GEP is a formal document published on the Institution's website and signed by the top management *                    ● Yes    ○ No

Dedicated resources:commitment of resources and gender expertise to implement it *                    ● Yes    ○ No

Data collection and monitoring: sex/gender disaggregated data on personnel and students and annual reporting based on indicators *                    ● Yes    ○ No

Training: Awareness raising/trainings on gender equality and unconscious gender biases for staff and decision-makers *                    ● Yes    ○ No

Recommended areas to be covered and addressed via concrete measures and targets:

Content-wise, which of the following recommended thematic areas does your Gender Equality Plan address, using concrete measures and targets?

Work-life balance and organisational culture *                    ● Yes    ○ No

Gender balance in leadership and decision-making *                    ● Yes    ○ No

✕ Cancel    ✓ OK

Change GEP

Cancel    Submit

# Gender equality plan (GEP)

this document is signed by senior management and available on your organisation's public website.

Failure to provide the Gender Equality Plan if/when requested, may lead to exclusion from the list of successful applicants, or - in case of signed grant agreement - may lead to grant termination and/or recoveries of amounts paid.

Does your GEP fulfil the following four minimum process-related building blocks?

| | | |
|---|---|---|
| Public GEP:the GEP is a formal document published on the Institution's website and signed by the top management * | ● Yes | ○ No |
| Dedicated resources:commitment of resources and gender expertise to implement it * | ● Yes | ○ No |
| Data collection and monitoring: sex/gender disaggregated data on personnel and students and annual reporting based on indicators * | ● Yes | ○ No |
| Training: Awareness raising/trainings on gender equality and unconscious gender biases for staff and decision-makers * | ● Yes | ○ No |

Recommended areas to be covered and addressed via concrete measures and targets:

Content-wise, which of the following recommended thematic areas does your Gender Equality Plan address, using concrete measures and targets?

| | | |
|---|---|---|
| Work-life balance and organisational culture * | ● Yes | ○ No |
| Gender balance in leadership and decision-making * | ● Yes | ○ No |
| Gender equality in recruitment and career progression * | ● Yes | ○ No |
| Integration of the gender dimension into research and/or teaching content * | ● Yes | ○ No |
| Measures against gender-based violence including sexual harassment * | ○ Yes | ● No |

For additional information and guidance on the Horizon Europe Gender Equality Plan eligibility criterion please check  here

**x Cancel**   **✓ OK**

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Is it a civil society organisation    ⓘ    ○ Yes    ○ No

International organisation *    ⓘ    ○ Yes    ● No    ✓

Research organisation    ⓘ    ○ Yes    ● No    ✓

Large research infrastructure    ⓘ    ○ Yes    ○ No

Secondary/Higher education establishment    ⓘ    ● Yes    ○ No

## Gender equality plan

Gender equality plan    ⓘ    ● Yes    ○ No    ✏ Change GEP

## Erasmus Charter

The Erasmus Charter for Higher Education (ECHE) provides the general quality framework for European and international cooperation activities that a higher education institution (HEI) may carry out within Erasmus +.

Erasmus Code    ⓘ

Application Reference Number    ⓘ

ECHE Valid    ⓘ    **from to**

## FP7 Indirect Cost Method (ICM)

If you are registering for FP7 participation, please indicate the relevant FP7 Indirect Cost Method for your organisation.

Cancel    Submit

# If the organisation still has to register

European Commission

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Key steps
Reference documents
Participant register
Partner search

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Find calls for proposa

Horizon4Ukraine    Brexit info    Report fraud

Search calls for proposals and tenders by keywords, programmes…    Search

## EU Programmes

Asylum, Migration and Integration Fund (AMIF)

Border Management and Visa Instrument (BMVI)

Customs Control Equipment Instrument (CCEI)

Connecting Europe Facility (CEF)

Citizens, Equality, Rights and Values Programme (CERV)

Creative Europe (CREA)

Customs Programme (CUST)

Digital Europe Programme (DIGITAL)

Europe Direct (ED)

European Defence Fund (EDF)

European Parliament (EP)

EU Anti-fraud Programme (EUAF)

European Solidarity Corps (ESC)

Erasmus+ Programme (ERASMUS)

EU4Health Programme (EU4H)

European Social Fund + (ESF)

European Maritime, Fisheries and Aquaculture Fund (EMFAF)

Euratom Research and Training Programme (EURATOM)

Fiscalis Programme (FISC)

Innovation Fund (INNOVFUND)

Internal Security Fund (ISF)

Horizon Europe (HORIZON)

Single Market Programme (SMP)

Social Prerogative and Specific Competencies Lines (SOCPL)

EU External Action (RELEX)

Interregional Innovation Investments (I3)

Justice Programme (JUST)

Protection of the Euro against Counterfeiting Programme (PERICLES)

Pilot Projects and Preparatory Actions (PPPA)

Programme for the Environment and Climate Action (LIFE)

## News

**Information Session on the call for proposals Information and awareness raising campaigns on the risks of irregular migration in third countries and within Europe AMIF-2022-TF1-AG-INFO**

Recording of the information session for the call: Information and awareness raising campaigns on the risks of irregular migration in third countries and within…

20 May, 2022

**The amendment to the Horizon Europe Work Programme 2021-2022 was adopted**

The Commission adopted this amendment on 10 May 2022. Please read the related Press Release. The updates to calls for proposals and topics are available under t…

18 May, 2022

**We need your feedback to improve the Portal services**

The team behind the Portal wants to know your opinion. In this short survey you are invited to share your experience. Let us shape a better service together!

All news >

## Events

**The Gender Equality Plan eligibility criterion in Horizon Europe: Who is concerned? How to comply with it?**

23 Jun 2022    14:30

**Avoiding errors in declaring personnel costs in Horizon 2020 grants**

22 Jun 2022    10:00

All events >

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ℹ   The participant register is now multilingual! Select your preferred language from the top right corner of the Portal.

## Participant Register

🛟 Need help?

If you want to participate in a call for proposals or in a call for tenders with eSubmission, your organisation needs to be registered and have a 9-digit Participant Identification Code (PIC). Please quote your PIC in all correspondence with the Commission.

The register contains all participants of EU programmes.

### Is your organisation already registered? PIC search

Please check whether your organisation has already been registered. If so, no need to register it again.

Search a PIC

### Register your organisation

To register your organisation or as a natural person, you need to login into the Portal or, if you are a new user, create your account.

Check what information you need to register in the Online Manual - and keep it to hand during the registration procedure. To start registration, click on the button below.

Register your organisation

You can suspend the registration process at any time: the data entered can be saved as draft and you can continue your registration later. To return to your registration, please log in and get into My Organisation(s) in the My Area section. Incomplete, draft registrations are automatically deleted after one year.

Additionally, for actions where the SME status is an eligibility criterion (like, e.g. the SME Instrument) you must also carry out the SME self-assessment.

Should your project or tender be successfully evaluated, the registered data will be verified by the Validation Service team before the signature of the Grant Agreement or of the Framework Contract.

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## Participant 's Register

Need help?

| 1 Identification | 2 Organisation Data | 3 Legal Information | 4 Authorised Users | 5 Summary | 6 Success |
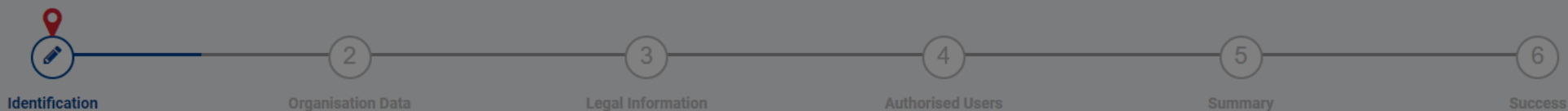
## Identification

### Welcome to the Participant Register

The Registration wizard will guide you through the registration process.

- Please have the relevant documents at hand, to make sure you fill in everything correctly.
- Registration will take 5-10 minutes. The system will automatically save your information if in case you need to close the wizard. Your data will be restored the next time when you re-enter the page.
- Your/organisation PIC number will be displayed at the end, when registration is completed. PIC: Participant Identification Code

OK

not applicable

500

Website    Website

Save

Review the Form

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# Participant 's Register

Need help?

① Identification — ② Organisation Data — ③ Legal Information — ④ Authorised Users — ⑤ Summary — ⑥ Success
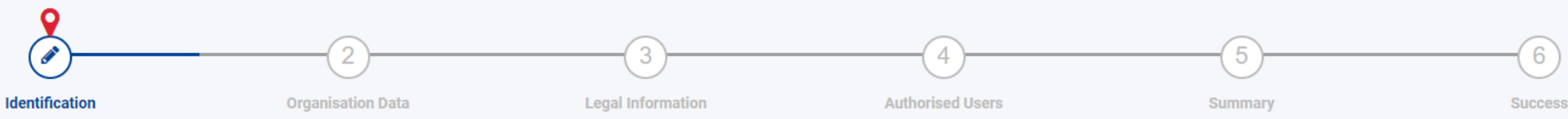
## Identification

| | |
|---|---|
| Legal name * ❶ | My Organisation Ltd. `220` |
| Registration country * ❶ | Belgium |
| Registration number ❶ | Registration number `50` |
| VAT number ❶ | VAT number `20` ⬤ not applicable |
| Website ❶ | Website `500` |

✓ Save

Next

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# Participant 's Register

🛟 Need help?

✓ — ✏ — ③ — ④ — ⑤ — ⑥

Identification    **Organisation Data**    Legal Information    Authorised Users    Summary    Success
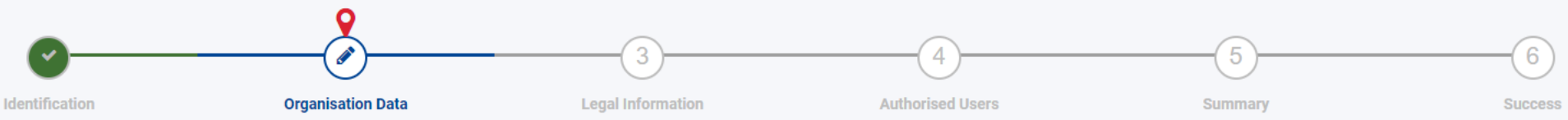
## Organisation Data

| | |
|---|---|
| Legal name | **My Organisation Ltd.** ✏ |
| Business name  ⓘ | [Business name] 400 |
| Address * ⓘ | rue de la Loi 226 |
| Postal code * ⓘ | 1000 35 |
| P. O. box ⓘ | [P. O. box] 30 |
| City * ⓘ | Brussels 111 |
| Registration country | **Belgium** ✏ |
| Phone * ⓘ | +32470000000 18 |
| Fax ⓘ | [Fax] 30 |
| Website | ✏ |

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# Participant 's Register

Need help?

Identification — Organisation Data — **Legal Information** — 4 Authorised Users — 5 Summary — 6 Success

## Legal Information

### Legal Information

Legal entity status  ○ a natural person  ● a legal person

Legal form *  `- - Select One - -`

VAT number  ✎

Legal register  `Legal register`  319

Registration number  ✎

Registration date  `dd/mm/yyyy`

Legal entity type  ● private entity  ○ public body

Legal entity qualification  ○ non-profit  ● for profit

SME Self-Declaration  ○ Yes  ● No

Save   Saved at: 09:14:36 23/06/2022   Review the Form   Previous   Next

# Funding & tender opportunities
Single Electronic Data Interchange Area (SEDIA)

**European Commission**

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## Participant 's Register

🛟 Need help?

① Identification ✓ —— ② Organisation Data ✓ —— ③ Legal Information ✎ —— ④ Authorised Users —— ⑤ Summary —— ⑥ Success

## Legal Information

### Legal Information

Legal entity status  ⓘ      ○ a natural person    ● a legal person

Legal form * ⓘ      ` - - Select One - - `  ⇕

VAT number      ✎

Legal register ⓘ      `Legal register`                                    319

Registration number      ✎

Registration date      `dd/mm/yyyy`  📅

Legal entity type ⓘ      ● private entity    ○ public body

Legal entity qualification ⓘ      ○ non-profit    ● for profit

SME Self-Declaration ⓘ      ○ Yes    ● No

✓ Save    Saved at: 09:14:36 23/06/2022         Review the Form         Previous    Next

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My Organisation(s)

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My Expert Area

Registration number ✏

Registration date                    dd/mm/yyyy 🗓

Legal entity type ⓘ              ● private entity    ○ public body

Legal entity qualification ⓘ     ○ non-profit    ● for profit

SME Self-Declaration ⓘ           ○ Yes    ● No

Is it a civil society organisation ⓘ   ○ Yes    ● No

International organisation ⓘ       ○ Yes    ● No

International Organisation of European Interest
for H2020 (IOEI H2020) ⓘ          ○ Yes    ● No

International Organisation of European Interest
for Digital Europe (IOEI Digital Europe) ⓘ   ○ Yes    ● No

International European Research Organisation
for Horizon Europe (IERO Horizon Europe) ⓘ   ○ Yes    ● No

Research organisation ⓘ           ○ Yes    ● No

Secondary/Higher education establishment ⓘ   ○ Yes    ● No

## Gender equality plan

Gender equality plan ⓘ           ○ Yes    ○ No         ✏ Change GEP

Save    Saved at: 09:14:36 23/06/2022                    Review the Form              Previous    Next

# Mandatory GEP process requirements

## Public document

- Formal document
- Signed by top management
- Published on the institution's website
- Disseminated through institution

## Dedicated resources

- Funding for gender equality positions or teams
- Reserved time for others to work on gender equality

## Data collection and monitoring

- Data on sex or gender of staff across roles and leadership
- Annual reports and evaluation of progress and outcomes

## Training and capacity building

- For decision-makers and staff
- Tackle unconscious gender biases of people and decisions

*Disclaimer: information not legally binding*

European Commission

# Recommended GEP content areas



| Work-life balance and organisational culture | Gender balance in leadership and decision-making | Gender equality in recruitment and career progression | Integrating gender into research and teaching | Gender-based violence, including sexual harassment |

**Essential factors for gender equality in R&I**

European Commission
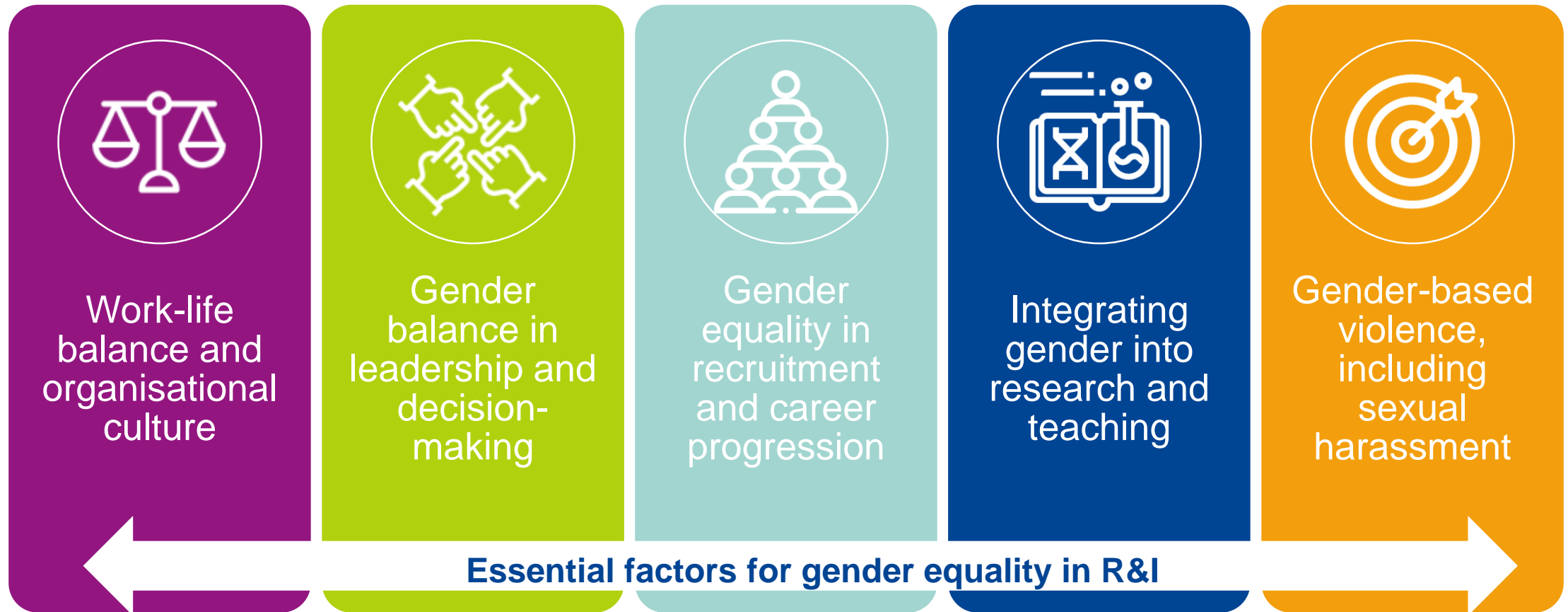
*Disclaimer: information not legally binding*

# The eligibility criterion steps

Horizon Europe applicants asked to declare that their organisation has a GEP that meets the criterion*

The GEP must be in place for signature of the Grant Agreement

Eligibility compliance checks on beneficiaries during Horizon Europe

An equivalent strategic document may meet the GEP eligibility criterion

The Grant Agreement commits beneficiaries to action, in line with their GEP

* Declaration to be made by the LEAR in the Participant Register through the GEP questionnaire

*Disclaimer: information not legally binding*

European Commission

# Supporting GEP practice and knowledge

- Dedicated webinar on 23/06/2022: **The Gender Equality Plan eligibility criterion in Horizon Europe: Who is concerned? How to comply with it?**

- EIGE-RTD 'Gender Equality in Academia and Research Tool' (**GEAR tool**) updated

- Activities and material by FP7 and **H2020 SwafS gender projects**

- **Pilot EU 'knowledge & support facility on institutional change through GEPs'**

  ✓ Detailed Horizon Europe Guidance on Gender Equality Plans published 28/09/2021
  ✓ Online trainings to countries with higher amount of organisations without GEPs
  ✓ Online mutual learning workshops, building on European Universities Alliances

- Upcoming Horizon europe EU Gender Equality Competence Facility

*Disclaimer: information not legally binding*
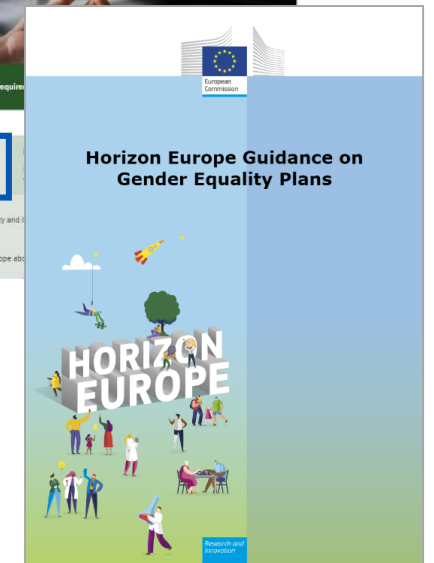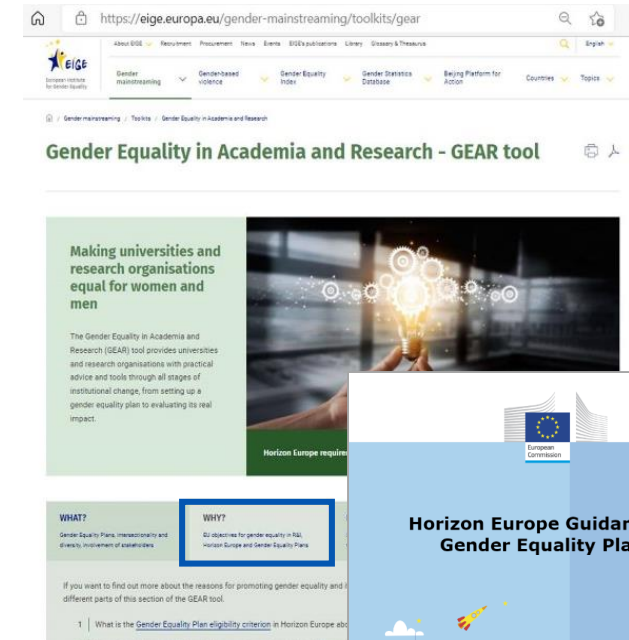
# **Award Criteria:** Integration of the gender dimension

## **EXCELLENCE criterion for RIAs/IAs**

✓ Clarity and pertinence of the **project's objectives**, and the extent to which the proposed work is ambitious, and goes beyond the state-of-the-art.

✓ **Soundness of the proposed methodology**, including the underlying concepts, models, assumptions, inter-disciplinary approaches, **appropriate consideration of the gender dimension in research and innovation content**, and the quality of open science practices including sharing and management of research outputs and engagement of citizens, civil society and end users where appropriate.

*Proposals aspects are assessed to the extent that the proposed work is within the scope of the work programme topic*

*Disclaimer: information not legally binding*

# Integration of the gender dimension in R&I content

**Gender dimension** | *Addressing the gender dimension in research and innovation entails taking into account sex and gender in the whole research & innovation process*

**Under Horizon Europe the integration of the gender dimension into R&I content is mandatory unless the topic description explicitly includes a sentence such as the following:**

*"In this topic the integration of the gender dimension (sex and gender analysis) in research and innovation content is not a mandatory requirement."*

## Why is taking into account the gender dimension important?

- Every cell is sexed and every person is gendered
- **Brings added value of research in terms of excellence, rigor, reproducibility, creativity and business opportunities**
- Brings an in-depth understanding of **all people's needs, behaviours and attitudes**
- Goods and services better suited to the needs of all citizens
- **Enhanced societal relevance of research and innovation**

*Disclaimer: information not legally binding*

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# Gendered Innovations: How inclusive analysis contributes to research and innovation

**Policy Review Report** **released 25/11/2020**

➤ 15 **case studies** in: health (prescription drugs, chronic pain, systems biology), AI & robotics climate change, energy, transport, urban planning, waste management, agriculture, taxation, venture funding) and building on Horizon 2020-funded projects

➤ **Refined methodologies** on the integration of sex/gender based analysis, and intersectional analysis, in R&I content, including field-specific methods

➤ **Policy recommendations** for Horizon Europe
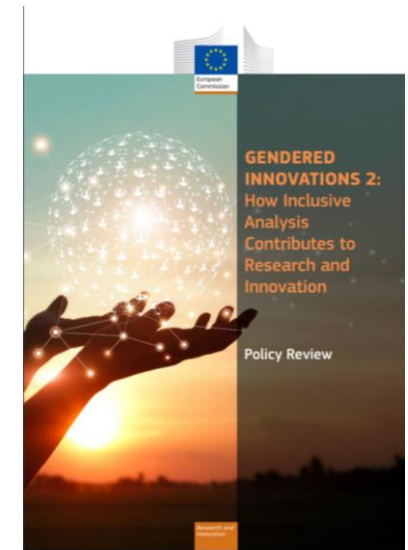
**Guidance and links to other resources in:**

- **Horizon Europe Programme Guide** (section on *Gender equality and inclusiveness)*
- ERC SyG GENDHI (Gender & Health Inequalities: from embodiment to health care cascade)
- Horizon 2020 projects GE Academy, ACT, GENDER-NET Plus

*Disclaimer: information not legally binding*

# Ranking Criteria for ex aequo proposals

**Method to establish the priority order**

For each group of proposals with the same score, starting with the group achieving the highest score and continuing in descending order:

1. Aspects of the call that have not otherwise been covered by more highly ranked proposals

2. Scores on 'Excellence' then on 'Impact' (for IAs, scores on 'Impact' then 'Excellence')

3. **If necessary, the gender balance among the researchers named in the researchers table in the proposal, will be used as a factor for prioritisation**

4. Geographical diversity

…

*Disclaimer: information not legally binding*

# Inclusive approach to gender identity

**Researchers can declare their gender along three categories: woman, man, non-binary**

### Researchers involved in the proposal

Include only the researchers involved in the proposal, (see below definition of 'researcher'). You do not need to include in the table the identity of other persons involved in the proposal who are not researchers.

'Researchers are professionals engaged in the conception or creation of new knowledge. They conduct research and improve or develop concepts, theories, models, techniques instrumentation, software or operational methods. (Frascati Manual 2015)'

Include also person in charge of the proposal if a researcher.

| Title | First Name | Last Name | Gender | Nationality | E-mail | Career stage[1] | Role of researcher (in the project) | Reference Identifier | Type of identifier |
|---|---|---|---|---|---|---|---|---|---|
| | | | [Woman]<br><br>[Man]<br><br>[Non-binary] | | | [Category A – Top grade researcher]<br><br>[Category B – Senior researcher]<br><br>[Category C – Recognised researcher]<br><br>[Category D – First stage researcher] | [Leading]<br><br>[Team member] | | [ORCID]<br><br>[Researcher Id]<br><br>[Other - specify] |

*Disclaimer: information not legally binding*

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# Useful Resources

Disclaimer: information not legally binding

# Gender Equality in R&I policy webpage

https://ec.europa.eu/info/research-and-innovation/strategy/gender-equality-research-and-innovation_en

*Disclaimer: information not legally binding*

European Commission

# Thank you!

For questions and further information on gender equality provisions, please contact:
**RTD-GENDERINRESEARCH@ec.europa.eu**

## #HorizonEU

**http://ec.europa.eu/horizon-europe**

# Lump sum funding in Horizon Europe

*Disclaimer: information not legally binding*

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# Why do we use Lump sum funding?

## Reducing the financial error rate

- Following the ECA annual reports 2019 and 2020, there is wide agreement that the error rate in the R&I Framework Programmes must be reduced
- Lump sums are a key measure to achieve this in Horizon Europe

## Significant simplification potential

- Lump sums remove the obligation to report actual costs and resources
- Easier to use for beneficiaries with limited experience
- Funding based on reimbursement of real costs remains complex and error-prone. Little scope for further simplification
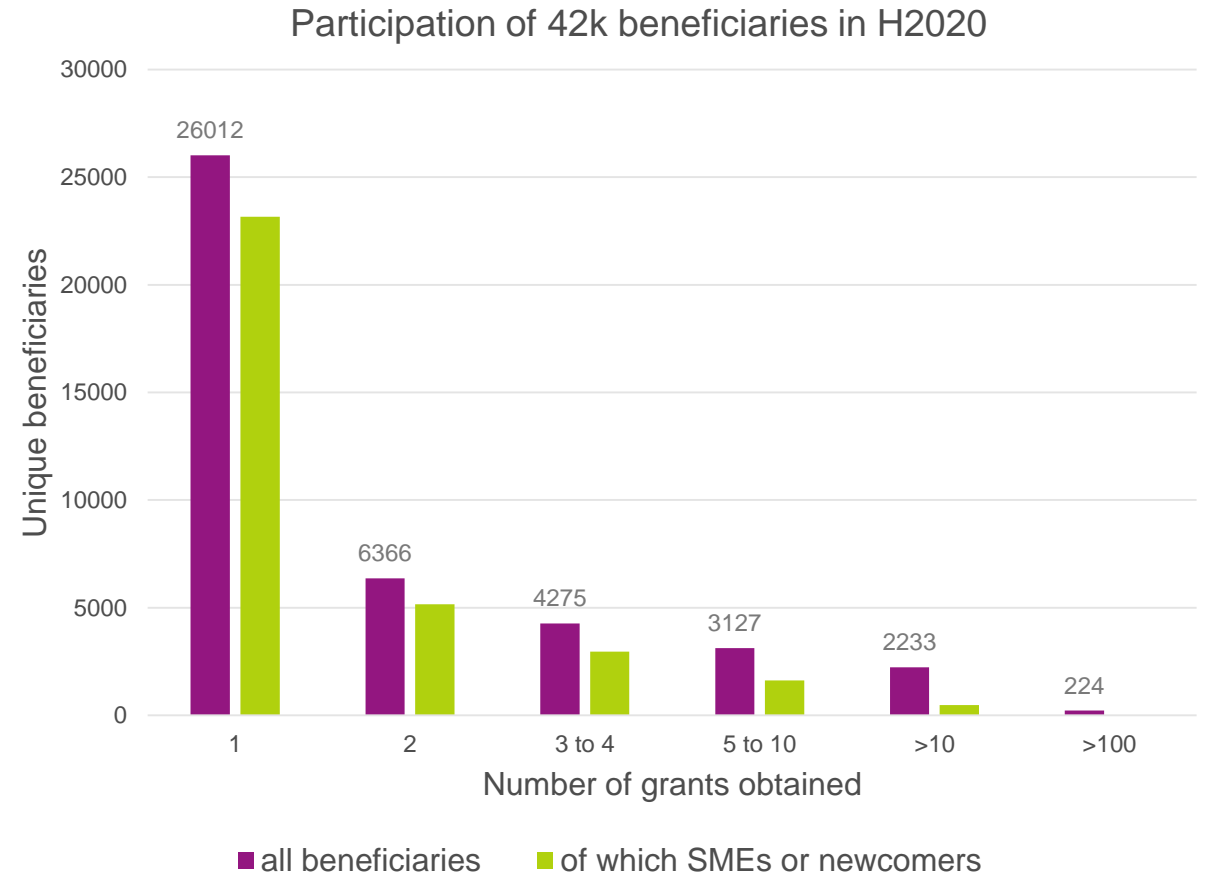
## Focus on content

- Focus less on financial management and more on content

# Why do we use Lump sum funding?

## Easier access to the programme

- Very small share of beneficiaries have more than 100 grants:

  - Large entities
  - Dedicated staff and procedures to deal with actual costs

- Vast majority of beneficiaries have only 1 or 2 grants per programme

  - Most of them SMEs or newcomers
  - Little or no previous experience
  - Need a simple funding model

**Participation of 42k beneficiaries in H2020**



- all beneficiaries
- of which SMEs or newcomers

European Commission

# Basic principles

- **Lump sum grants follow the standard approach as much as possible**

  same: templates, evaluation criteria, payment scheme, technical reporting

- **One lump sum share per work package and beneficiary**

- **Very simple financial reporting**

- **Lump sum shares paid upon completion of work packages**

| | WP1 | WP2 | WP3 | WP4 | WP5 | WP6 | WP7 | WP8 | Total |
|---|---|---|---|---|---|---|---|---|---|
| Beneficiary A | 250.000 | | | 50.000 | 300.000 | 250.000 | | 300.000 | 1.150.000 |
| Beneficiary B | | 250.000 | 350.000 | 50.000 | | | 100.000 | 150.000 | 900.000 |
| Beneficiary C | 100.000 | 100.000 | | 50.000 | | 280.000 | | | 530.000 |
| Beneficiary D | | 120.000 | | 50.000 | | | 100.000 | 150.000 | 420.000 |
| Total | 350.000 | 470.000 | 350.000 | 200.000 | 300.000 | 530.000 | 200.000 | 600.000 | **3.000.000** |

Shares of the lump sum per beneficiary

Share of the lump sum per WP

Lump sum = Maximum grant amount

European Commission

# Writing a lump sum proposal

- To write a lump sum proposal, applicants:

  - Use the standard Horizon Europe application form;

  - Present the objectives and methodology of their project and address the expected outcomes and impacts as in any Horizon Europe proposal;

  - Describe in detail the activities covered by each work package.

- To define and justify the lump sum, applicants must provide a **detailed budget table** with cost estimations.

- The detailed budget table is an **Excel file**. Applicants download it from the online submission system, fill it and submit it as an annex to the Part B application form.

European Commission

# Writing a lump sum proposal – detailed budget

- In the detailed budget table, applicants provide **cost estimations for each cost category** per beneficiary (and affiliated entity if any) and per work package.

- The cost estimations must be an **approximation of their actual costs.** They:

    - are subject to the same eligibility rules as in actual costs grants
    - must be in line with applicants' normal practices
    - must be reasonable / non-excessive
    - must be in line with and necessary for the proposed activities.

- The cost estimations are used to generate in the detailed budget table a **breakdown of lump sum shares** per work package and per participant.

- Details and instructions on how to fill in the lump sum detailed budget table are provided in the Funding & Tenders portal.

# Project design – Work packages

**Work package distribution**

> **As many as needed but no more than what is manageable**

A work package (WP) is a major sub-division of the work plan of the project.

- A single activity is not a WP
- A single task is not a WP
- A % of progress is not a WP (e.g. 50 % of the tests)
- A lapse of time is generally not a WP (e.g. activities of year 1)

Work packages with a long duration may be split along the reporting periods (e.g., Management, Dissemination and Exploitation, etc.). In this way, the relevant activities can be paid at the end of the reporting period.

European Commission

# Evaluation of a lump sum proposal

- Your proposal will be evaluated by independent experts against the **standard evaluation criteria**: excellence, impact, and implementation.

- The cost estimations will be assessed against the proposed activities under the **implementation** criterion.

- Experts will:
  - ensure that the cost estimations are **reasonable and non-excessive**
  - evaluate whether the proposed resources and the split of the lump sum **allow completing the activities described in the proposal**.

- If the experts find overestimated costs, they make **concrete recommendations** on the budget that are recorded in the Evaluation Summary Report. This will be reflected in a modified lump sum amount in the grant agreement.

- Cost estimations that are clearly overestimated or underestimated lead to a **decreased score** under the implementation criterion.

European Commission

# Resources available

One dedicated **lump sum page** on the Funding &Tenders Portal with:

| | |
|---|---|
| **Guidance documents** | • What do I need to know? & Quick guide<br>• Frequently asked questions<br>• Detailed guidance for applicants and beneficiaries<br>• Lump sum briefing slides for experts |
| **Reference documents** | • Model Grant Agreement Lump Sum<br>• Decision authorising the use of lump sum contributions under the Horizon Europe Programme |
| **Studies** | • European Commission assessment (October 2021)<br>• European Parliament (STOA) study on lump sums in Horizon 2020 (May 2022) |
| **Events** | • Future events<br>• Past events and recordings |
| **Funding opportunities** | • List of Horizon Europe topics using lump sum funding |



HORIZON EUROPE

Lump Sum Grants
in Horizon Europe
Why do we need them
and how do they work
in practice?

European Commission

# Next steps

## Improvements

- Higher page limit for lump sum proposals (from work programme 2023)
- Improved Excel tool for lump sum budget table
- Collection of best practices from lump sum beneficiaries (coming soon)

## General

- Continuous monitoring of lump sum grants, adjustments if necessary
- Stepwise phasing in:
  - 27 lump sum topics in 2022
  - First significant wave of lump sum topics in 2023-2024

European Commission

# Pilot on Blind evaluation

- In HE WP 2023-2024, all first-stage calls will be evaluated blindly, except one call for Widening, (legal basis on article 28 of HE Regulation.

- With this pilot we want to tackle some understandable concerns that the evaluation process could be **perceived** as biased towards well-known organisations in countries with better performing Research and Innovation systems (a recent independent study has not revealed such a bias).

- The pilot aims to identify whether the **implementation** of blind evaluation within our legal requirements and operational context creates any difficulties. If this is not the case, it might lead to a modified approach, with a greater use of blind evaluations, which could effectively mitigate the risk of **real, potential or perceived reputational bias**.

*Article 28*

**Award criteria and selection**

1. A proposal shall be evaluated on the basis of the following award criteria:

(a) excellence;

(b) impact;

(c) quality and efficiency of the implementation.

2. Only the criterion referred to in point (a) of paragraph 1 shall apply to proposals for ERC frontier research actions.

3. The work programme shall lay down further details concerning the application of the award criteria laid down in paragraph 1 including any weighting, thresholds and where relevant rules for dealing with *ex aequo* proposals, taking into consideration the objectives of the call for proposals. The conditions for dealing with *ex aequo* proposals may include, but shall not be limited to, the following criteria: SMEs, gender, and geographical diversity.

4. The Commission and other funding bodies shall take into account the possibility of a two-stage submission and evaluation procedure and where appropriate, anonymised proposals may be evaluated during the first stage of evaluation based on one or more of the award criteria referred to in paragraph 1.

# Key facts

- It will be launched in the WP 2023-24

- **All two-stage calls** in 2023 and 2024 should take part in the pilot (except justified cases)

- It will only concern the **first stage application** of two-stage calls

- **NEW admissibility criterion**: Applicants submitting a proposal under the blind evaluation pilot must not disclose their **organisation names, acronyms, logos nor names of personnel** in Part B of their first-stage application.

**No identification data** can be mentioned by applicants in the proposal's **Part B**, otherwise **inadmissible proposal**

European Commission

# Process

The concept of Blind evaluation requires that experts in the SEP evaluation session do not know the consortium structure and the applicant(s) involved. To accomplish this, the following safeguards are in place:

## Part A

- **Will not be transmited to evaluators**.

## Part B

- If proposals **include any identification** of the applicant in Part B, the proposal will be declared **inadmissible** and will be **rejected.**

European Commission

# International Cooperation

# International Cooperation in R&I

## Global approach to Research and Innovation

### WHAT IS THE AIM OF THE GLOBAL APPROACH TO RESEARCH AND INNOVATION (R&I)?

To preserve openness in research and innovation international cooperation while promoting a level playing field and reciprocity underpinned by fundamental values.

To strengthen multilateral partnerships to deliver new solutions to green, digital, health and innovation challenges.

### HOW WILL THIS BE ACHIEVED?

Modulating bilateral cooperation in line with European interests and values and EU's open strategic autonomy.

Accelerating sustainable and inclusive development, and the transition to resilient, knowledge-based societies and economies in low and middle-income countries.

Using a *Team Europe* approach, with actions by the EU, its financial institutions and Member States.
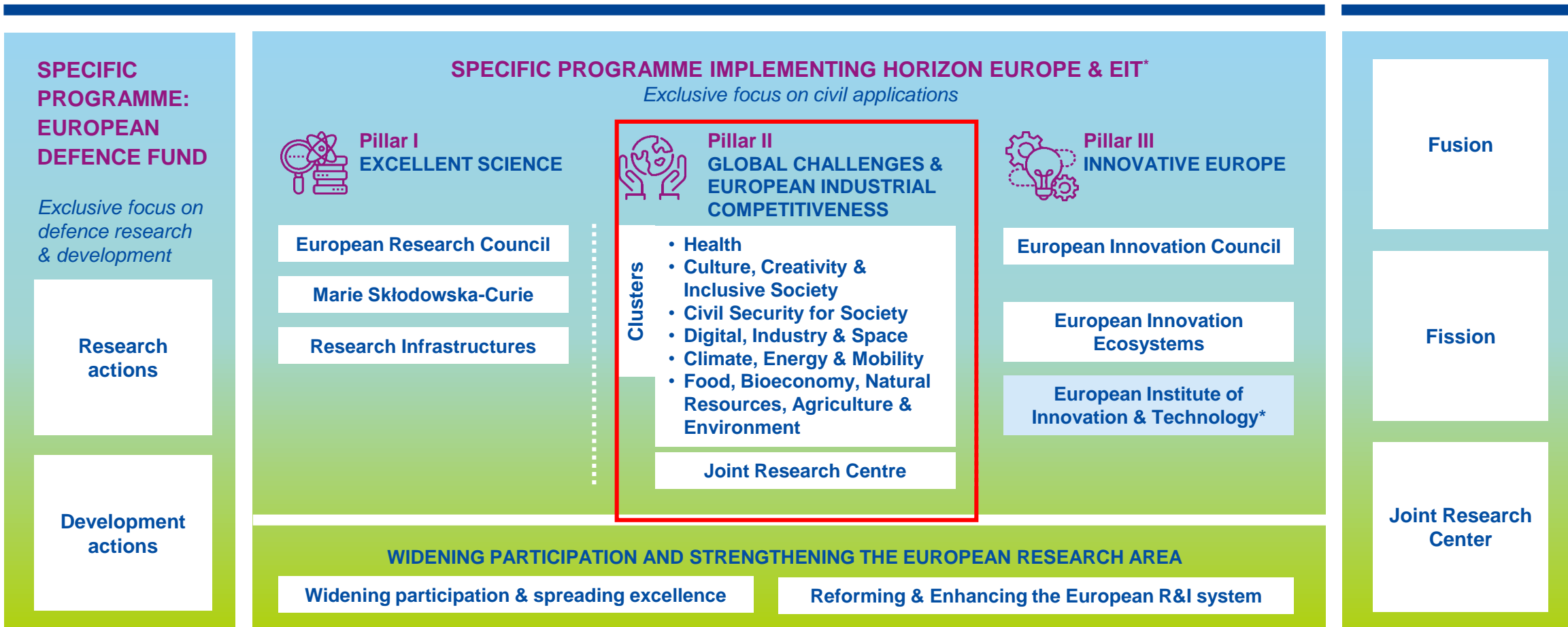
*COM(2021) 252

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# Guiding principles:

✓ Commitment to openness

✓ Values & Principles

✓ Pursuit of a level playing field and reciprocity

✓ Pool global efforts to tackle global challenges

# International Cooperation in Horizon Europe

## HORIZON EUROPE

## EURATOM

### SPECIFIC PROGRAMME: EUROPEAN DEFENCE FUND

*Exclusive focus on defence research & development*

Research actions

Development actions

### SPECIFIC PROGRAMME IMPLEMENTING HORIZON EUROPE & EIT*
*Exclusive focus on civil applications*

**Pillar I EXCELLENT SCIENCE**

European Research Council

Marie Skłodowska-Curie

Research Infrastructures

**Pillar II GLOBAL CHALLENGES & EUROPEAN INDUSTRIAL COMPETITIVENESS**

**Clusters**

- Health
- Culture, Creativity & Inclusive Society
- Civil Security for Society
- Digital, Industry & Space
- Climate, Energy & Mobility
- Food, Bioeconomy, Natural Resources, Agriculture & Environment

Joint Research Centre

**Pillar III INNOVATIVE EUROPE**

European Innovation Council

European Innovation Ecosystems

European Institute of Innovation & Technology*

**WIDENING PARTICIPATION AND STRENGTHENING THE EUROPEAN RESEARCH AREA**

Widening participation & spreading excellence

Reforming & Enhancing the European R&I system

Fusion

Fission

Joint Research Center

* The European Institute of Innovation & Technology (EIT) is not part of the Specific Programme

European Commission

# International Cooperation in Horizon Europe

- ✓ Openness

- ✓ Access to EU funding

- ✓ Targeted international cooperation actions

- ✓ Safeguarding EU interests

# International Cooperation in Horizon Europe

## Openness

✓ Horizon Europe 'by-default' open to almost all countries

✓ Non-discriminatory: researchers and innovators of any nationality can apply for grants (MSCA, ERC...)

✓ Association to the programme:

- 16 Countries associated to HE: Albania, Armenia, Bosnia and Herzegovina, Faroe Islands, Georgia, Iceland, Israel, Kosovo, Moldova, Montenegro, North Macedonia, Norway, Serbia, Tunisia, Turkey, Ukraine

- In the "process of Association": Morocco, UK

- Negotiations under way: New-Zealand, Canada...
list-3rd-country-participation_horizon-euratom_en.pdf

## Access to Horizon Europe funding

✓ Automatically eligible for EU funding ("Beneficiaries")

- Low- and middle-income countries (see list).
- Countries associated to Horizon Europe

✓ Non-associated third countries not eligible for EU funding ("Associated partners")

- Exceptions on a case-by-case basis +  specified in topic calls

✓ Co-funding mechanisms

- E.g. Canada, Monaco, China, Switzerland… (Guide CFM on F&T Portal)

## Targeted international cooperation actions (1/2)

- Flagging of call topics specifically relevant for international cooperation in the work programmes, e.g. in
  - Strategic thematic areas (topics)
  - Geographical areas (countries/region's)
  - Multilateral initiatives
  - Collaboration with key partners
- WP 23-24: 22% INCO flagged topics ; Filters on F&T Portal – for International Cooperation, Africa and Mediterranean

## Targeted international cooperation actions (2/2)

- Cooperation with Africa and MED under the HE 'Africa Initiative' and new 'Mediterranean Initiative'.

-  Cooperation with China in line with the ongoing discussions on the Joint Roadmap for the future of EU-China cooperation in science, technology, and innovation through  a more nuanced and transactional approach:

  - Cooperation on Food, Agriculture and Biotechnology (FAB) and Climate Change and Biodiversity (CCB) research flagship initiatives. Chinese participants will be funded by the Ministry of Science and Technology of the People's Republic of China.

  - Article 22.6 applies to limit Chinese participation in innovation actions.

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## Safeguarding EU interests

### Article 22.5

In a limited number of cases,

- For actions related to Union strategic assets, interests, autonomy or security, **limit to cooperation between identified eligible countries'**

- For duly justified and exceptional reasons, **exclude the participation of legal entities established in eligible countries** that are **directly or indirectly controlled** by non-eligible third countries or by legal entities of non-eligible third countries from individual calls for proposals, or make their participation subject to conditions set out in the work programme.

## **Safeguarding EU interests**

### **Article 22.6**

- Additional eligibility criteria based on specific policy requirements or the nature and objectives of the action, including the number and the type of legal entity and the place of establishment.

### **Articles 39.6 and 40.4**

- Provisions on exploitation, dissemination and right to object to transfer of ownership and licenses to non-associated third-country entities in line with EU interest

European Commission

# Countries under sanction – **Russia and Belarus**

- Work Programme '23-'24 - prohibition provision in the General Annexes to the WP

  - For legal entities established in Russia, Belarus, or in non-government controlled territories of Ukraine

  - Exceptions on case-by-case basis

  - Exempted are Marie Skłodowska-Curie fellowships

  See also EU Sanctions Map

# International cooperation in Horizon Europe Work Programme 2023-24

| | Topics total | Topics (ex Other Actions) | International cooperation encouraged | % |
|---|---|---|---|---|
| **Cluster 1: Health** | 53 | 44 | 7 | 16% |
| **Cluster 2: Culture, creativity and inclusive society** | 66 | 56 | 15 | 27% |
| **Cluster 3: Civil Security for Society** | 44 | 42 | 9 | 21% |
| **Cluster 4: Digital Industry and Space** | 159 | 130 | 22 | 17% |
| **Cluster 5: Climate, Energy and Mobility** | 219 | 191 | 38 | 20% |
| **Cluster 6: Food, Bioeconomy, Natural resources, agriculture, and environment** | 189 | 179 | 51 | 28% |
| **TOTAL** | **730** | **642** | **141** | **22%** |

European Commission

# Thank you!

For more info:
- Commission Communication on the Global Approach to research and innovation: https://ec.europa.eu/commission/presscorner/detail/en/ip_21_2465
- Horizon Europe: https://ec.europa.eu/info/research-and-innovation/funding/funding-opportunities/funding-programmes-and-open-calls/horizon-europe_en
- Commission's website on international R&I cooperation: https://ec.europa.eu/info/research-and-innovation/strategy/international-cooperation_en

Follow us:
- Commissioner Mariya Gabriel: @GabrielMariya
- DG Research and Innovation: @EUScienceInnov

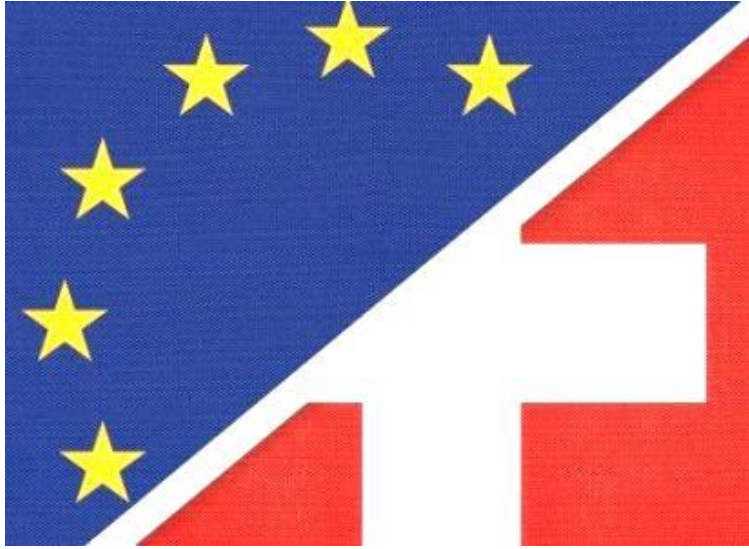European Commission

# Status of Switzerland in Horizon Europe



For the submission of proposals in Horizon Europe and other related programmes and initiatives Switzerland is treated as non-associated third country.

This status may change anytime but applies now.

Regular updates @ www.horizon-europe.ch

# Swiss Entities



Regular updates from SERI

↳ www.horizon-europe.ch

Factsheet

| | |
|---|---|
| Role as "**Associated Partners**" | **National** Funding (not from the EC) |
| **No** signature of the EU Grant Agreement | No Coordination But **Work Package Lead possible** |

# Participants in Horizon Europe

## BENEFICIARIES
### with EU funding

| Member States | Associated Countries |
|---|---|
| Third Countries with low-income | Third Countries foreseen in the call |

## THIRD PARTIES
### without EU funding

| Affiliated Entities | Associated Partners* |
|---|---|
| In-kind Contribution | Subcontractors |

\* Costs are not eligible and cannot be charged on the Beneficiary.

Relevant date: signature of the GA

# Third Country "Associated Partners"

**Key points and basics:**

– Cooperate with one Beneficiary or the whole Consortium
– Implement tasks as described in Annex 1
– Possible lead of Work Packages
– Costs not eligibile for EU funding
– PIC number, but no validation
– No access to the Funding & Tenders Portal
– Budget in the column "Financial Contribution"

Swiss entities participate in **collaborative projects** as Third Party "**Associated Partners**".

# Grant Agreement Obligations

**No signature**
of the
Grant Agreement

**The Beneficiary or the whole consortium is responsible for Associated Partners to fulfill these Grant Agreement obligations**

– Proper implementation (art. 11)
– Conflict of interest (art. 12)
– Confidentiality and security (art. 13)
– Ethics (art. 14)
– Visibility (art. 17.2)
– Specific rules (art. 18)
– Information (art. 19)
– Record-keeping (art. 20)
– OLAF, etc (art. 25)

# Contact us!
## health@euresearch.ch

# Horizon Europe:
# UK Participation and UK Horizon Europe Guarantee Scheme

Slides happily shared!

**9 Dec 2022**
**Jo Frost**
*Horizon Europe UK National Contact Point (NCP) for Health (for Industry)*
jo.frost@iuk.ukri.org

**UK NCP Newsletter Sign-Up**

UK Research and Innovation

# Horizon Europe and UK Association Process

- Horizon Europe is the EU's Research and Innovation funding programme and runs from 2021-2027

- Horizon Europe has an agreed budget of €95.5Bn plus Associated Country contributions (Associated Countries are Countries that have signed an agreement with the EU which means that organisations from the Associated Country can receive Horizon Europe funding, and take part in and coordinate projects)

- In Dec 2020, **the UK-EU Trade and Cooperation Agreement (TCA) set out that the UK will Associate to Horizon Europe**

- However, there have been some delays and **the UK association has not been completed yet**

- **The UK is currently a 'candidate Associated Country'** and is listed as a country in the process of association in the European Commission's List of Participating Countries in Horizon Europe

- The UK government's priority remains association to Horizon Europe

- The UK government stands ready to formalise UK association as soon as possible

- Timing for association not known

# Status of UK Association and UK Guarantee (as at 9 Dec 2022)

- **The UK is currently a 'candidate Associated Country'** in the process of association to Horizon Europe

- **At the Horizon Europe application stage**: As stated in the **European Commission's Q&A on UK Participation in Horizon Europe** UK organisations are fully eligible to APPLY for Horizon Europe funding as a beneficiary as if they are from an Associated Country. **UK organisations must request EU funding on the Horizon Europe Proposal.** UK organisations can be coordinator on proposals. UK organisations can lead work packages and tasks.

- **At the Horizon Europe award stage:**

  - **If the UK association has been completed by then**: UK organisations will be funded by the European Commission for the amount requested in the original Horizon Europe Proposal. UK organisations can coordinate projects. UK organisations can lead work packages and tasks.

  - **If the UK association has not been completed by then**:

    - **UK organisations can continue in consortium to do the work outlined in the proposal.** UK organisations **can** lead work packages and tasks. UK organisations **cannot** be the coordinator, so if the proposal had a UK coordinator, a different coordinator would need to be assigned.

    - UK organisations change status to 'associated partners' in the EU consortium. UK organisations do not sign the Grant Agreement, but can (and normally do) sign the Consortium Agreement. UK organisations don't count towards the eligibility conditions for the minimum number of countries in a Horizon Europe project.

    - **UK organisations will not (normally) be funded by the European Commission.**

    - **The UK government has guaranteed funding for successful applicants to Horizon Europe**, who are unable to sign grant agreements with the EU prior to formalisation of the UK's association to the programme. The guarantee is currently for proposals with a Horizon Europe submission deadline before the end December 2022. The scope of the guarantee is regularly reviewed, and the UK government has made an overarching commitment* that there will be no gap for UK organisations which are part of successfully evaluated Horizon Europe proposals. There is no further peer review for the UK Guarantee because the European Commission has reviewed the proposals already. As at 31 Oct 2022 over 900 UK Horizon Europe Guarantee Grants have been issued worth >£500 million.

**UK Research and Innovation**

> **It is a requirement of the UK Guarantee that UK applicants have been included on the original Horizon Europe grant proposal as a 'beneficiary' requesting funding from Horizon Europe with a defined budget**

*UK Government Research and Development Roadmap (p43) and UK Government Policy Paper (July 2022)

# Useful European Commission Guidance on UK Participation

The **European Commission's Q&A on UK Participation in Horizon Europe**
confirms **UK eligibility to apply to Horizon Europe** prior to formalisation of the UK Association and states:

"**The UK is expected to become an associated country to…Horizon Europe.** The UK will therefore have the same rights and obligations as other countries associated to the Programme."

"**All aspects of the UK association to Horizon Europe were agreed on 24 December 2020…**
**No additional negotiations are foreseen**."

"**UK applicants are treated as if the UK is an associated country throughout the process, from admissibility and eligibility to evaluation, up until the preparation of grant agreements**."
(UK NCP comment: **This means that UK organisations can and should request funding on Horizon Europe proposals**)

"**However, grant agreements can only be signed if the association has come into force.** The same treatment is also granted to any applicants from other associated countries currently engaged with the European Commission in an active process of association."

UK Research and Innovation

# Useful UK Government Documents

**UK Government Research and Development Roadmap** (July 2020, page 43)

- "It is our ambition to fully associate to both programmes [Horizon Europe and Euratom R&D]. **During any gap, we would provide funding to UK partners who are successful in bidding to programmes open to third country participation**"

- "**If we do not formally associate to Horizon Europe… We will make funding available to allow UK partners to participate in European schemes open to third countries**"

**UK Government Policy Paper** (July 2022)

- "the **Horizon Europe Guarantee** – If we are unable to associate, we will fund applications that are submitted to a Horizon Europe funding call with an EU final call deadline date before the point of non-association, are successful in the EU evaluation and meet the eligibility criteria of the guarantee. This includes those where grant signature dates fall beyond the end of 2022. This would pick up where the current guarantee has left off, so there is no gap, and no eligible successful applications would go unfunded"

- "**Third Country\* Participation** - Around two-thirds of Horizon Europe calls are open to UK researchers and companies as Third Country applicants, as part of consortia with at least 3 other applicants from EU member states or associated countries, provided they bring their own funding. As this is a priority for businesses and researchers, **the government will fund all eligible UK entities participating in any such consortia signing grant agreements before 31 March 2025**. The government will consider our approach to funding for Third Country Participation beyond this date and make an announcement by October 2024"

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\*A Third Country is a country that is not an EU Member State or Associated Country

# Tips

- **UK organisations should continue to apply as a beneficiary from an Associated Country** (not an Associated Partner)
  **and ask for money from the European Commission (EC) on their Horizon Europe Proposals**
  It is important that UK organisations request EC funding on Horizon Europe Proposals for two reasons:

  - **If the UK does associate by the time the consortium reaches the award stage**, then EC will fund the UK organisation the amount of money requested on the proposal.
    ⚠ If the UK organisation has not requested any money on the original Horizon Europe proposal,
    the UK organisation will not get EC funding!

  - **If the UK association is not complete by the time the consortium reaches the award stage**, the UK organisation can apply to the UK guarantee. The maximum grant from the UK guarantee is normally the amount of EC funding requested on the original Horizon Europe proposal.

    ⚠ If the UK organisation has not requested any money on the original Horizon Europe proposal,
    then they will not be eligible for the UK government guarantee and will not get UK government funding!

- **Coordination:** UK organisations can be coordinator at the application stage. However if the UK association is not formalised by the award stage the (admin) coordination would need to be passed to a different participant. Applicants may wish to have a back-up plan for which non-UK organisation would take over (admin) coordination if needed. The UK can still lead scientific work/work packages and tasks.

- **Eligibility Criteria:** At the Horizon Europe application stage UK organisations count towards the minimum eligibility requirements. However if the UK association is not formalised by the award stage the UK would not count towards the minimum requirements. **Therefore suggest consortia have 1 MS + 2 MS or non-UK AC without needing to count the UK.**

UK Research and Innovation

# Most Important Points To Remember…

- UK applicants and their collaborators should keep applying to Horizon Europe

- On Horizon Europe proposals UK organisations should:
  - be treated as a beneficiary from an Associated Country
  - must request funding from the EU/Horizon Europe

- Horizon Europe evaluation is not affected by the current situation
  - The European Commission and evaluators treat the UK as an Associated Country during the application and evaluation process
  - For the 2021 and 2022 Health Calls: 22% success rate for proposals with UK participants* (higher than 18% success rate across all proposals)

- The UK government has guaranteed funding for successful applicants to Horizon Europe

Please stay up to date by signing up for the UK National Contact Point newsletter on Cluster 1 Health

**UK Research and Innovation**

* Data source: Horizon Europe Dashboard – R&I proposals section as at 29/11/22

**UK Research and Innovation**

**Thank you**

🐦 @Health_NCP_UK     ✉ ncp-health@iuk.ukri.org

# Other cross-cutting issues

# Background and purpose of the 'Clinical study/ies'

- **Clinical studies are** usually **complex** but the main types of **challenges** that can hinder their timely and efficient implementation **are well-known**.

- With **appropriate planning**, securing the availability of the necessary **intelligence** and **resources**, consortia can overcome the expected challenges.

- Two intertwined **objectives:**

  - Guide applicants in **designing** scientifically **sound** and operationally **feasible** clinical studies

  - Provide a structured overview for expert evaluators on the **robustness** of various aspects of the required **planning** of clinical studies.

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# Definition of clinical study

For the purpose of the template, **clinical study means:**

- any systematic prospective or retrospective collection and analysis

- of health data obtained from individual patients or healthy persons in order

- to address scientific questions related to the understanding, prevention, diagnosis, monitoring or treatment of a disease, mental illness, or physical condition.

It **includes** but it is **not limited to:**

- clinical studies as defined by Regulation 536/2014 (on medicinal products),

- clinical investigation and clinical evaluation as defined by Regulation 2017/745 (on medical device)

- performance study and performance evaluation as defined by Regulation 2017/746 (on in vitro diagnostic medical devices).

# Instructions to applicants on the use of the 'Clinical study template'

**Full title: Template for essential information to be provided for proposals including clinical trials/studies/investigations/cohorts**

- Applicants who submit proposals including clinical studies must provide information on the planned clinical studies in a **structured format**.

  o Section headings must not be changed.

  o No other chapters or annexes may be added to the template.

- If several clinical studies are planned, each of them must be described separately.

- There are **no page limits** for the template.

- Information outside the scope of the template will not be taken into account in the evaluation.

- Information provided in the template does not need to be repeated elsewhere in the proposal but can be referred to.

- Ethics considerations, risks and mitigation measures have to be addressed in the respective section of the proposal and NOT in this template.

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# Artificial intelligence

- Experts must answer an additional question as part of their individual evaluations on whether the activities proposed involve the **use and/or development of AI-based systems and/or techniques**.

- If you answer 'yes' to this question, you must **assess the technical robustness** of the proposed AI-system as part of the excellence criterion (if applicable).

- In addition, your answer to this question will help us to with the **proper follow-up** of any aspects related to **Artificial Intelligence** in projects funded under Horizon Europe.

(*) Technical robustness refers to technical aspects of AI systems and development, including resilience to attack and security, fullback plan and general safety, accuracy, reliability and reproducibility.

AI-based systems or techniques should be, or be developed to become:

- **Technically robust**, **accurate and reproducible**, and able to deal with and inform about possible failures, inaccuracies and errors, proportionate to the assessed risk posed by the AI-based system or technique.
- **Socially robust**, in that they duly consider the context and environment in which they operate.
- **Reliable and function as intended**, minimizing unintentional and unexpected harm, preventing unacceptable harm and safeguarding the physical and mental integrity of humans.
- Able to provide a suitable explanation of its **decision-making process**, whenever an AI-based system can have a significant impact on people's lives.

# Other aspects

**New thresholds** for each criterion will be 4 (Excellence), 4 (Impact) and 3 (Implementation).
The cumulative threshold will be 12.

**Experts:** We need to constantly renew our pools of evaluators.
Please, encourage experts to register on the [funding and tenderers portal](#)

# Statistics on the calls 2021 and 2022

# WP 2021–2022 – CLUSTER 1 IN A NUTSHELL

- Overall budget 2021-2022(calls): €**1848**

- Calls: **25**

- Topics: **54**

- Number of proposals submitted*: **1.714**

- Number of participants in submitted proposals*: **21.820**

- Number of proposals retained for funding: **222**

- Number of participants in proposals retained for funding : **3.034**

- Number of experts involved in the evaluations: **1070**

*including stage 1 only of 2 stages calls + ineligible/inadmissible proposals*

# CLUSTER 1 –HEALTH WP 2021-2022 -CALLS

| | 2021 (€) | 2022 (€) | Total (€) |
|---|---|---|---|
| **Destination 1.** Staying healthy in a rapidly changing society | 69 | 220 | 289 |
| **Destination 2.** Living and working in a health-promoting environment | 330 | 20 | 350 |
| **Destination 3.** Tackling diseases and reducing disease burden | 263 | 227 | 490 |
| **Destination 4.** Ensuring access to innovative, sustainable and high-quality health care | 70 | 170 | 240 |
| **Destination 5.** Unlocking the full potential of new tools, technologies and digital solutions for a healthy society | 115 | 155 | 270 |
| **Destination 6**. Maintaining an innovative, sustainable and globally competitive health industry | 44 | 69 | 113 |
| **Emergency Covid call** | 96 | | |
| **TOTAL** | **987** | **861** | **1848** |

# TYPE OF ACTIONS

| Type of actions | Topic |
|---|---|
| HORIZON-COFUND | 3 |
| HORIZON-CSA | 13 |
| HORIZON-IA | 1 |
| HORIZON-PCP | 1 |
| HORIZON-PPI | 1 |
| HORIZON-RIA | 35 |
| Total | 54 |

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# Participation in submitted proposals

# OVERALL PARTICIPATION

## Country participation

- MS 83%
- UK 7%
- AC 4%
- TC 4%
- CH 2%

Legend: ■ MS ■ UK ■ AC ■ TC ■ CH
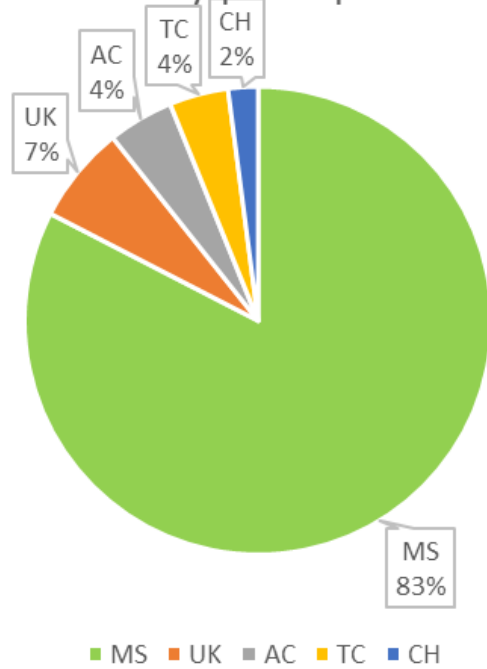
**Total participants: 21.820**

## Type of participants

- Higher or Secondary Education 37%
- Public Body 6%
- Other 13%
- Research Organisation 21%
- Private for Profit 23%

Legend: ■ Public Body ■ Other ■ Research Organisation ■ Private for Profit ■ Higher or Secondary Education
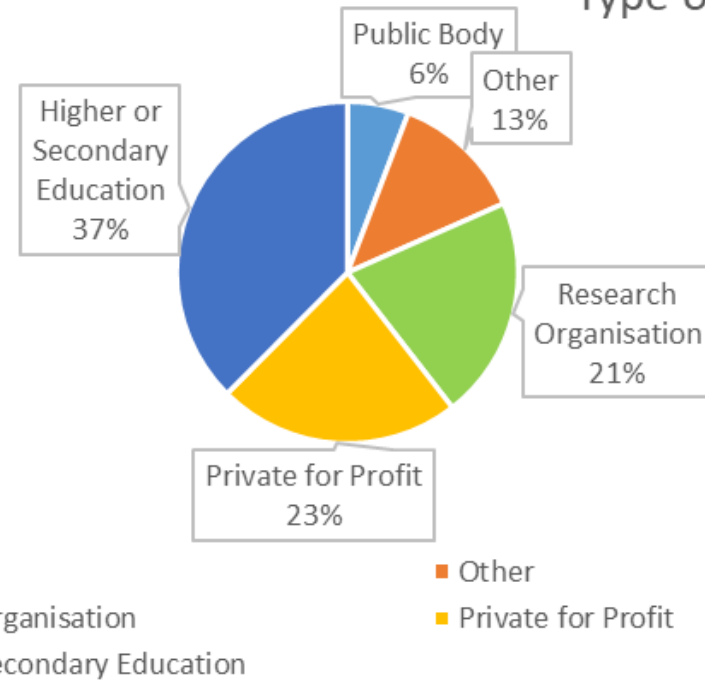
# MEMBER STATES - PARTICIPATION IN PROPOSALS*
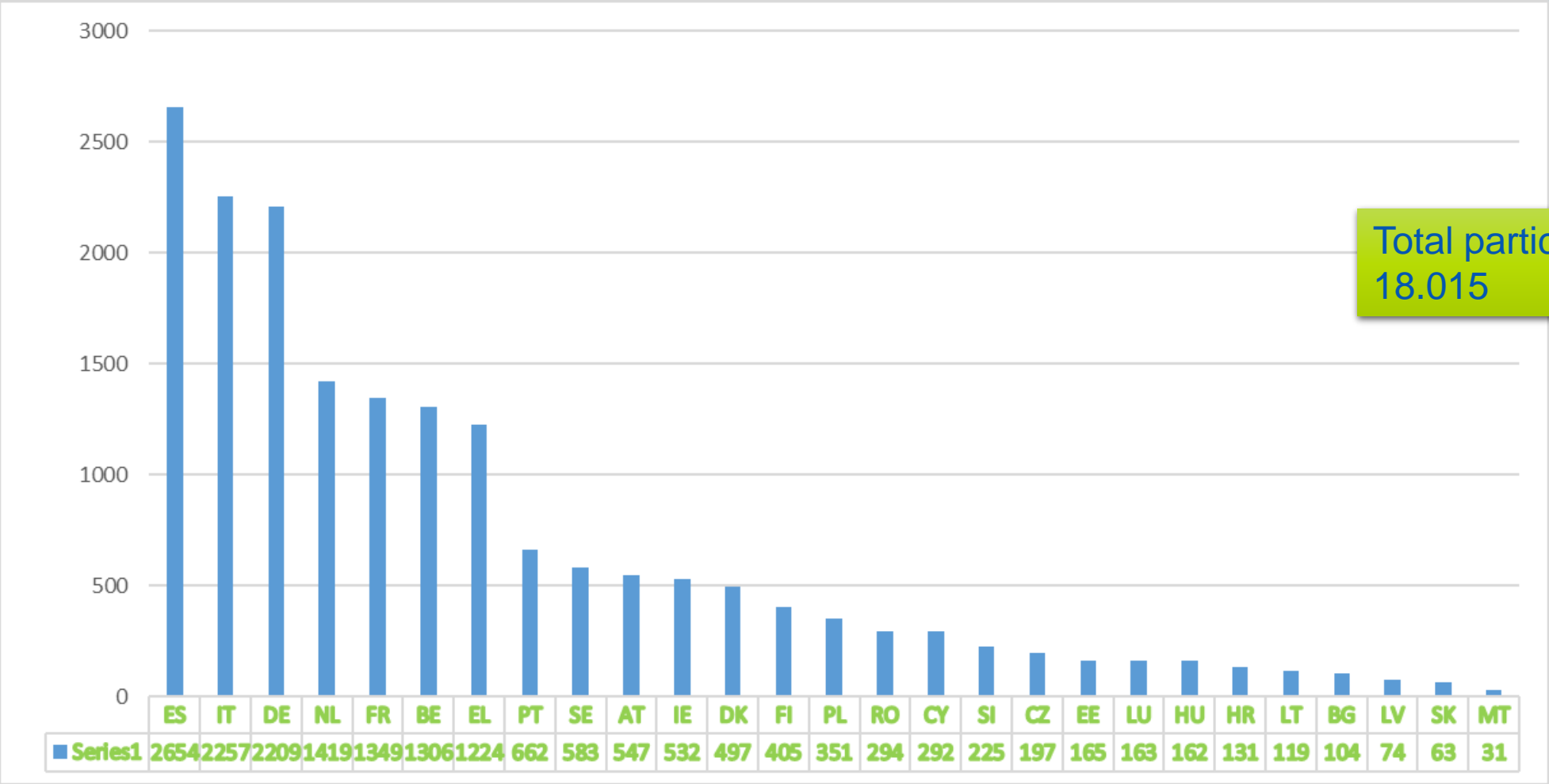


Total participation : 18.015

| | ES | IT | DE | NL | FR | BE | EL | PT | SE | AT | IE | DK | FI | PL | RO | CY | SI | CZ | EE | LU | HU | HR | LT | BG | LV | SK | MT |
|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| Series1 | 2654 | 2257 | 2209 | 1419 | 1349 | 1306 | 1224 | 662 | 583 | 547 | 532 | 497 | 405 | 351 | 294 | 292 | 225 | 197 | 165 | 163 | 162 | 131 | 119 | 104 | 74 | 63 | 31 |

*excluding stage 2 (2-stage calls)*

# ASSOCIATED COUNTRIES-UK-CH - PARTICIPATION IN PROPOSALS*
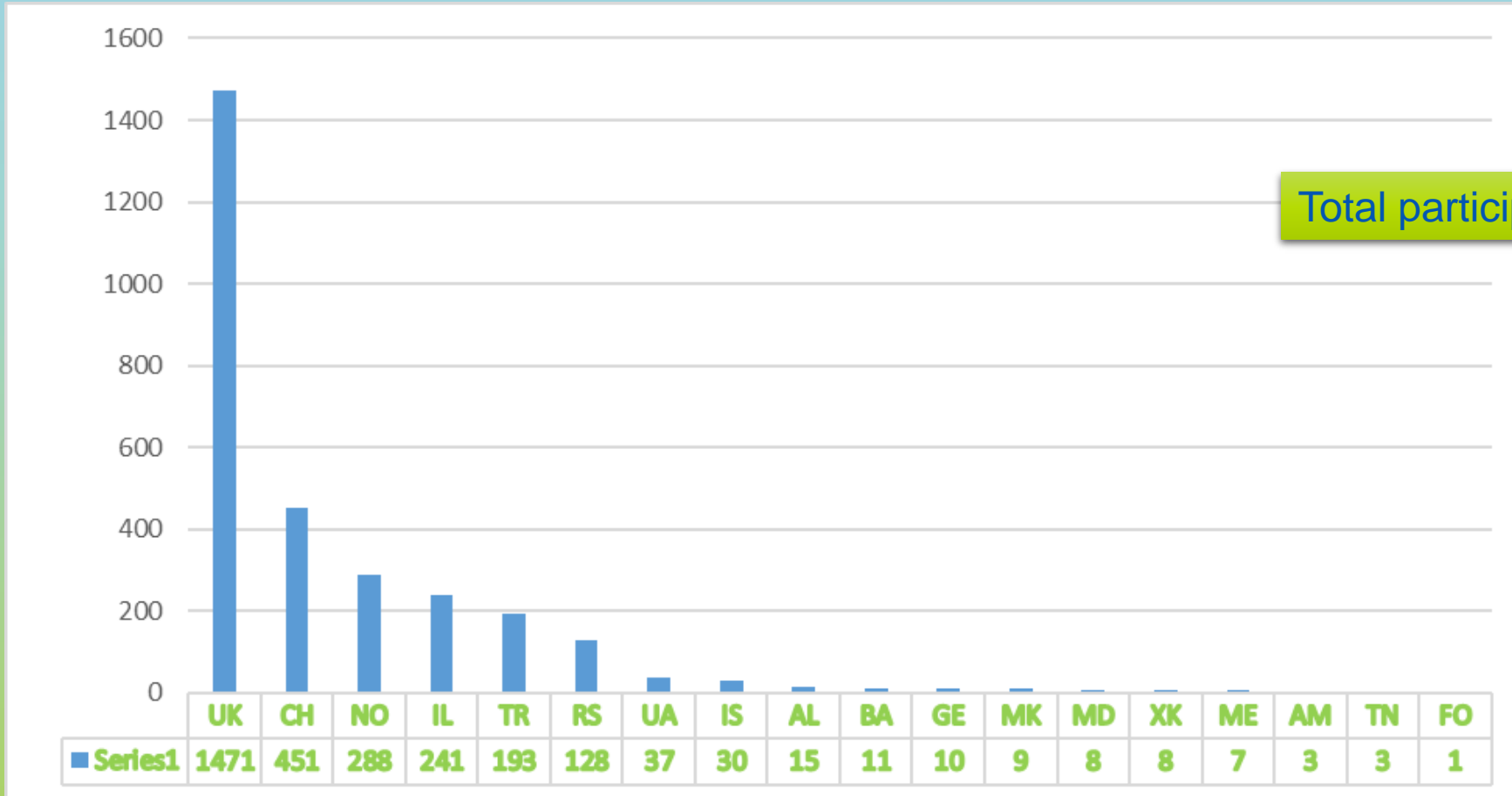
Total participation : 2.914

| ■Series1 | UK | CH | NO | IL | TR | RS | UA | IS | AL | BA | GE | MK | MD | XK | ME | AM | TN | FO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 1471 | 451 | 288 | 241 | 193 | 128 | 37 | 30 | 15 | 11 | 10 | 9 | 8 | 8 | 7 | 3 | 3 | 1 |

*excluding stage 2 (2-stage calls)*

European Commission
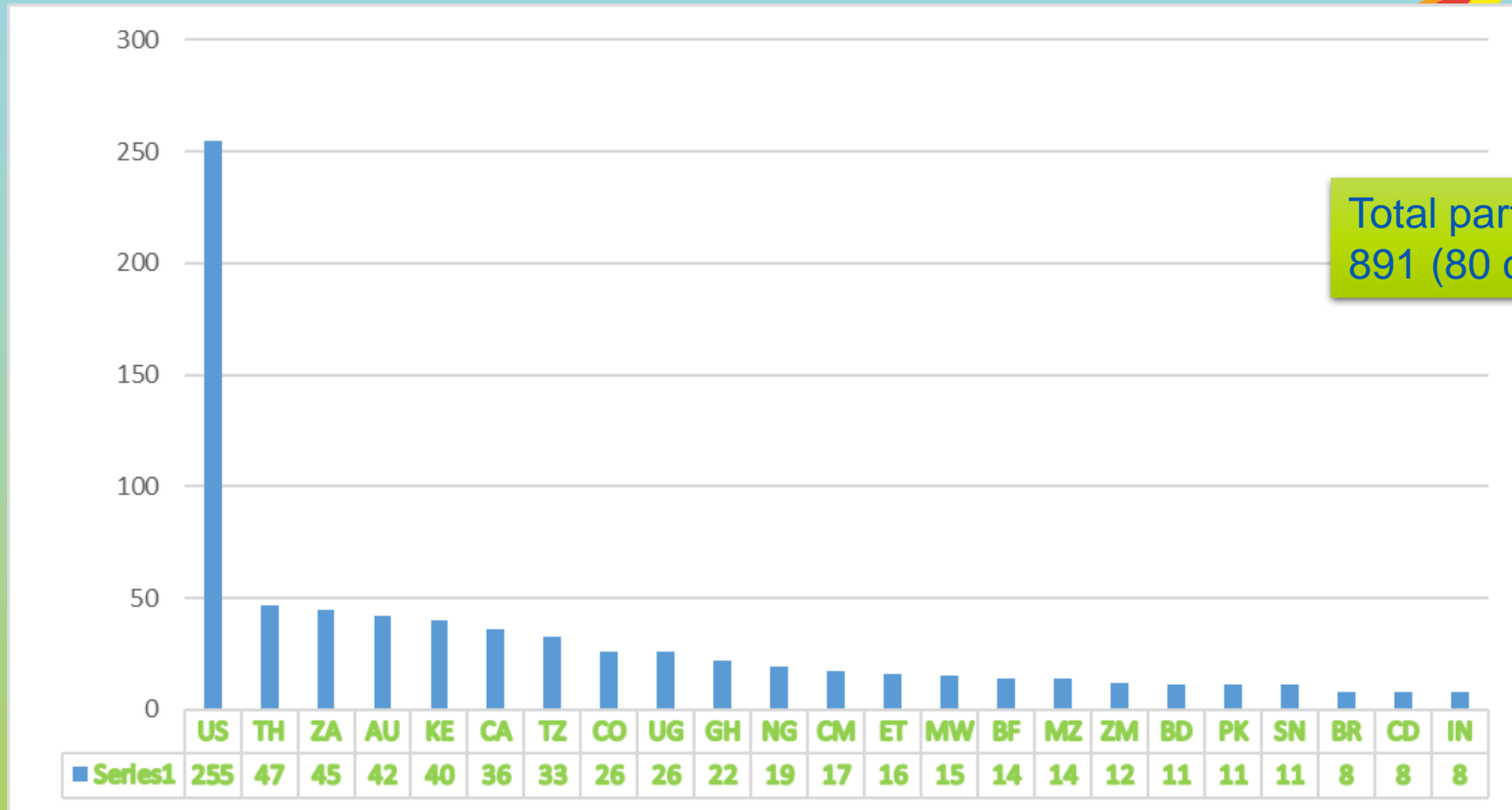
# Proposals retained for funding

# PROPOSALS RETAINED FOR FUNDING

## TYPE OF ACTIONS

| Type of actions | Topic | Eligible proposals evaluated | Retained for funding |
|---|---|---|---|
| HORIZON-COFUND | 3 | 3 | 3 |
| HORIZON-CSA | 13 | 46 | 12 |
| HORIZON-IA | 1 | 7 | 3 |
| HORIZON-PCP | 1 | 3 | 1 |
| HORIZON-PPI | 1 | 1 | 0 |
| HORIZON-RIA | 35 | 1633 | 203 |
| **Total** | **54** | **1693** | **222** |

European Commission

# PROPOSALS RETAINED FOR FUNDING
## OVERALL PARTICIPATION



Research Organisation 23%

Higher or Secondary Education 38%

Public Body 8%

Private for Profit 19%

Other 12%

- Higher or Secondary Education
- Other
- Private for Profit
- Public Body
- Research Organisation

Total participants: 3.034

TC 4%

UK 8%

AC 4%

CH 2%

MS 82%

- AC
- CH
- MS
- TC
- UK

European Commission
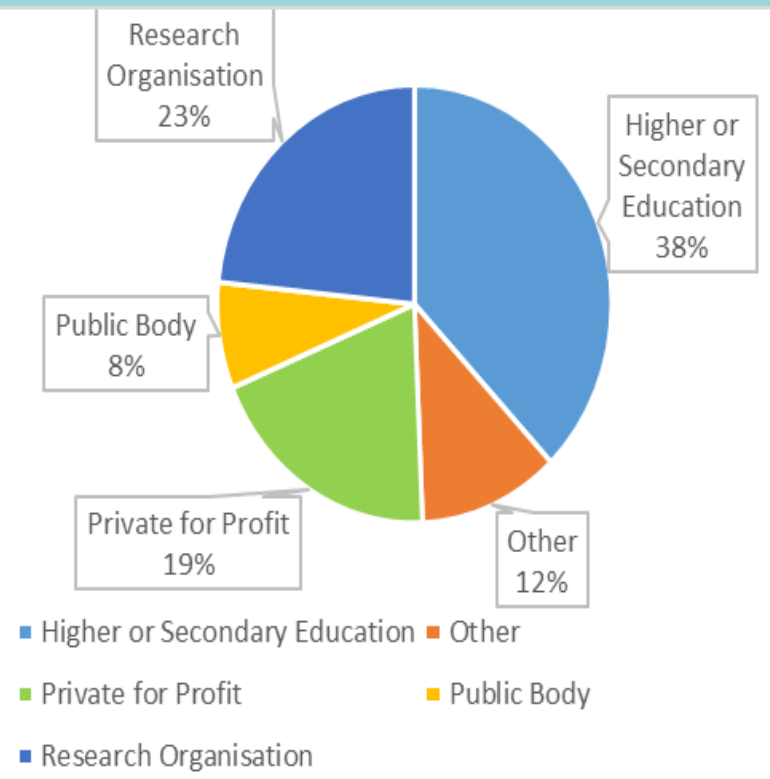
# PROPOSALS RETAINED FOR FUNDING

# COUNTRY PARTICIPATION – MEMBER STATES
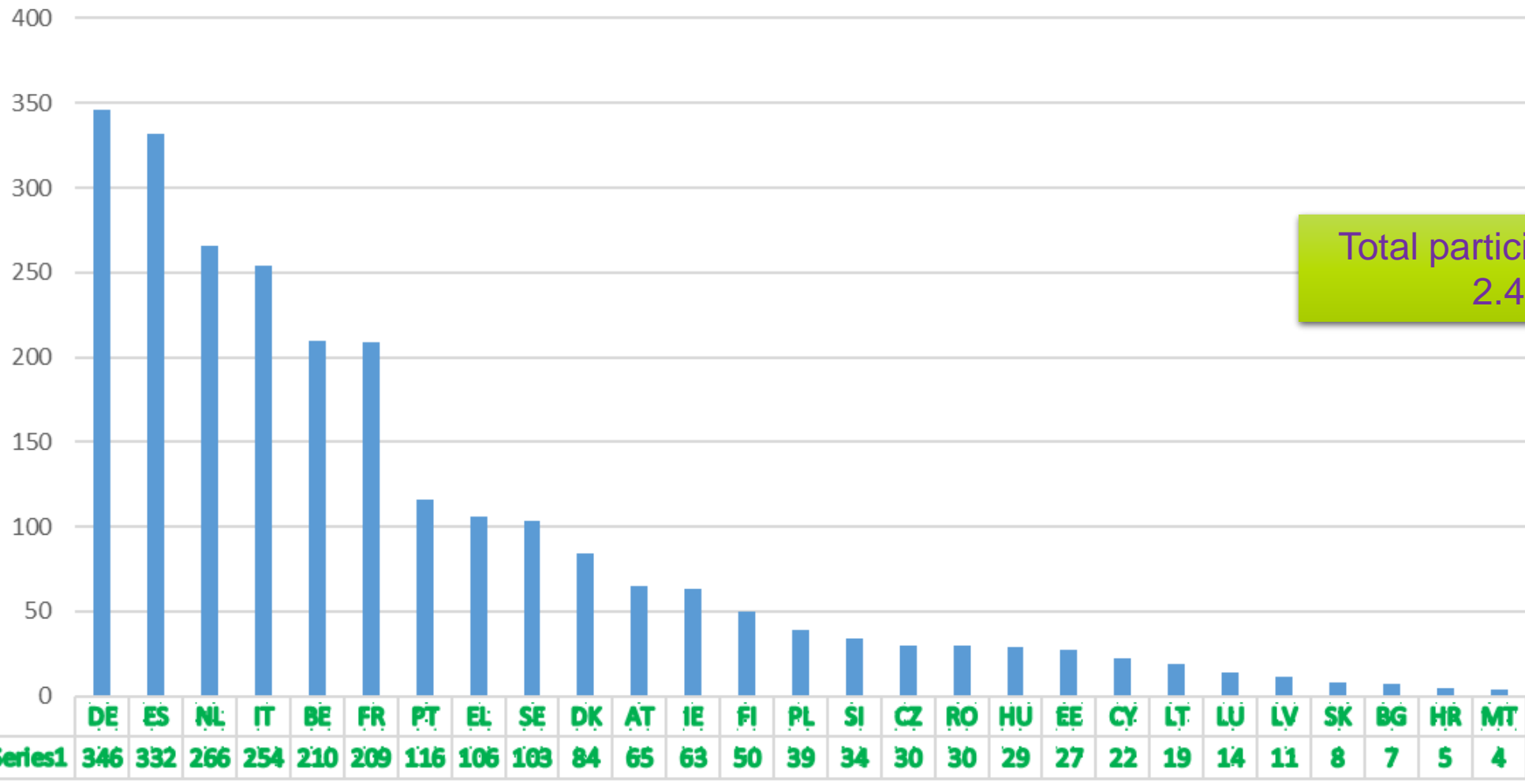
Total participants MS: 2.483

| | DE | ES | NL | IT | BE | FR | PT | EL | SE | DK | AT | IE | FI | PL | SI | CZ | RO | HU | EE | CY | LT | LU | LV | SK | BG | HR | MT |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Series1 | 346 | 332 | 266 | 254 | 210 | 209 | 116 | 106 | 103 | 84 | 65 | 63 | 50 | 39 | 34 | 30 | 30 | 29 | 27 | 22 | 19 | 14 | 11 | 8 | 7 | 5 | 4 |

European Commission

# PROPOSALS RETAINED FOR FUNDING

# COUNTRY PARTICIPATION – AC - UK - CH



Total participants AC: 134

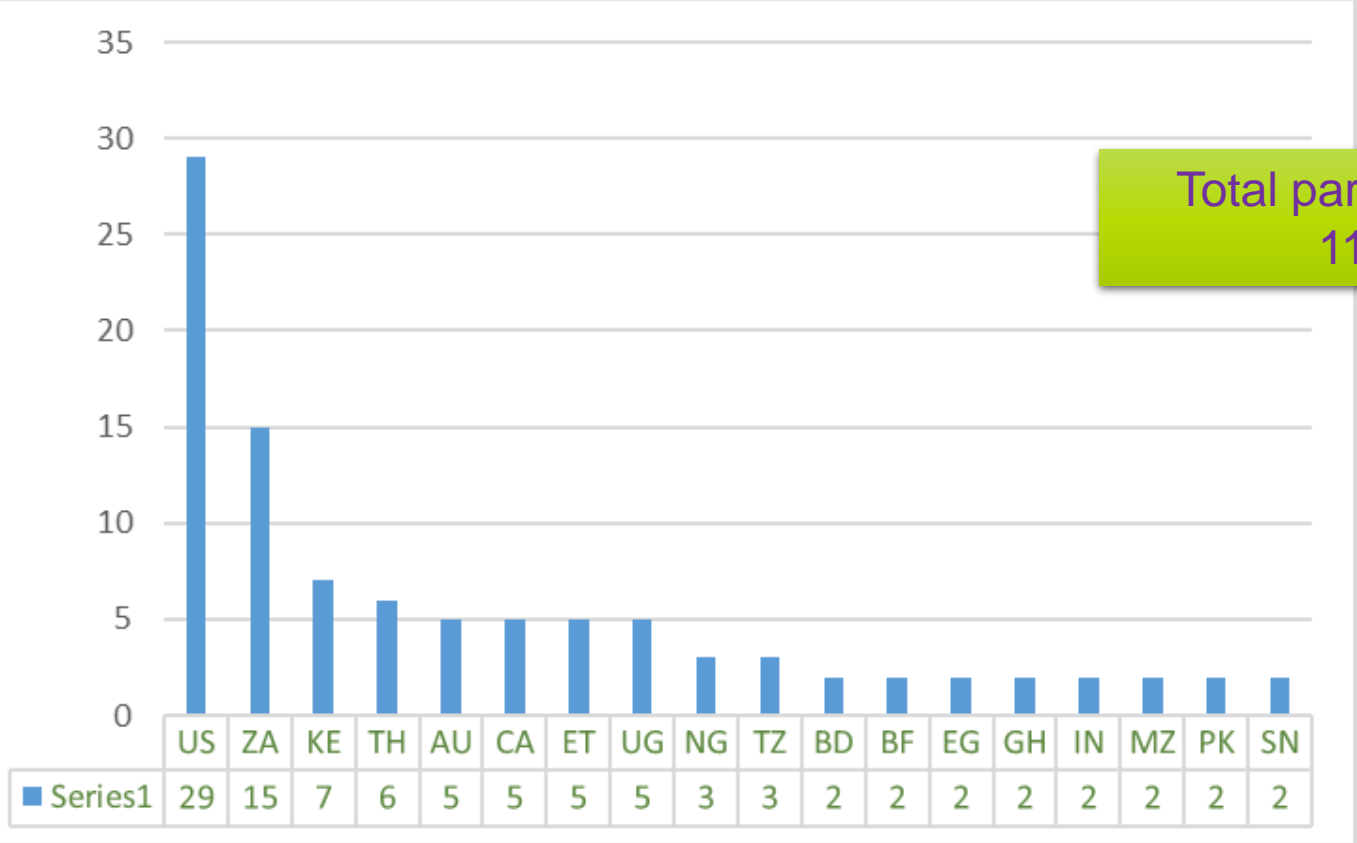| | UK | CH | NO | IL | TR | RS | IS | UA | GE | XK | AL | MD | MK |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| ■ Series1 | 235 | 68 | 56 | 35 | 16 | 11 | 6 | 3 | 2 | 2 | 1 | 1 | 1 |

European Commission
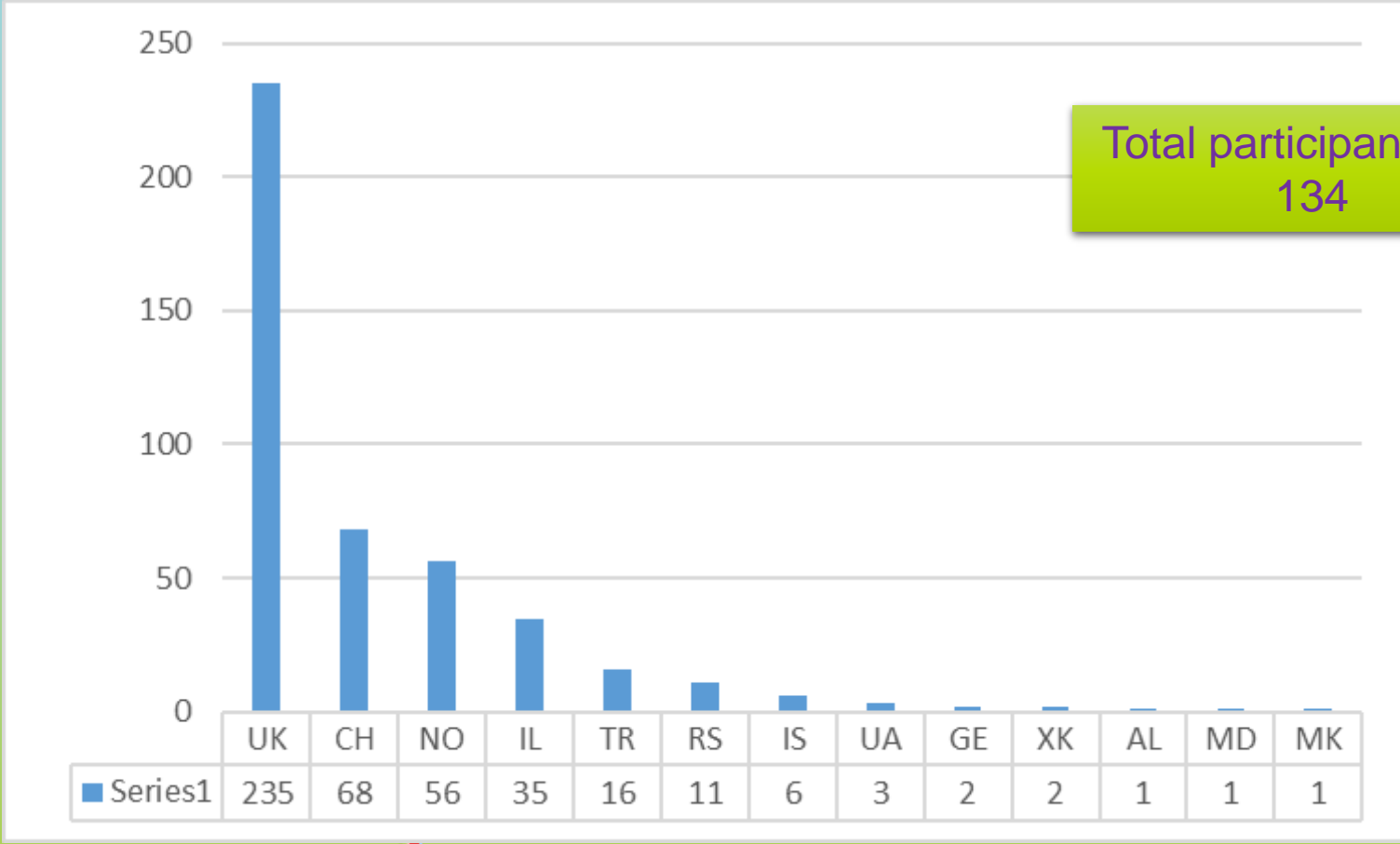
# PROPOSALS RETAINED FOR FUNDING

# THIRD COUNTRY PARTICIPATION



Total participants
114

1 participation:
AR, BJ, BR, CM, CO, GA, GI, HT, JE, KG, MG, MW, PE, SZ, TW

| Series1 | US | ZA | KE | TH | AU | CA | ET | UG | NG | TZ | BD | BF | EG | GH | IN | MZ | PK | SN |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 29 | 15 | 7 | 6 | 5 | 5 | 5 | 5 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |

European Commission

# PROPOSALS RETAINED FOR FUNDING
# COUNTRY COORDINATOR
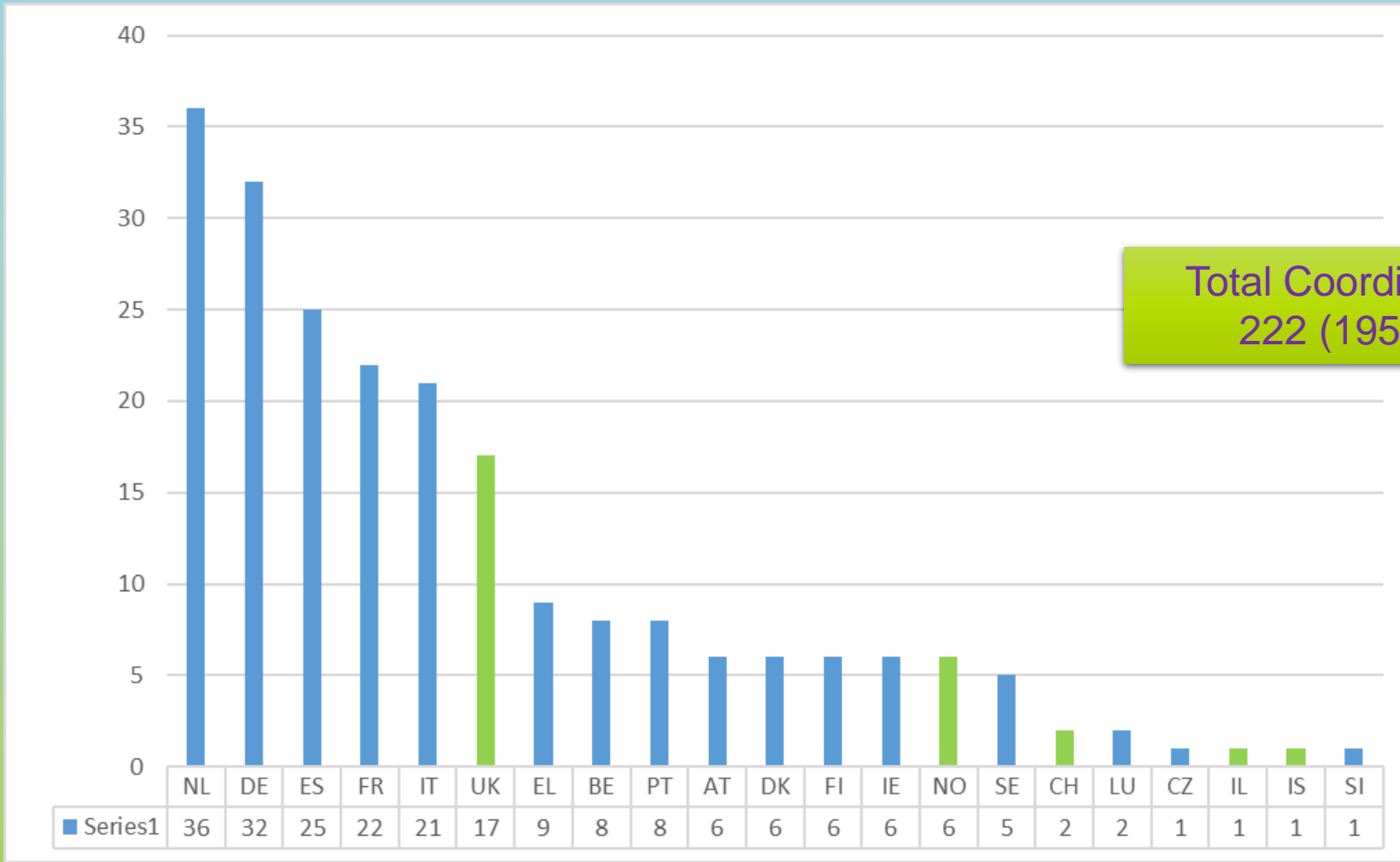


Total Coordinators :
222 (195 MS)

Coordinators from UK were replaced
during Grant Agreement Preparation

| | NL | DE | ES | FR | IT | UK | EL | BE | PT | AT | DK | FI | IE | NO | SE | CH | LU | CZ | IL | IS | SI |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Series1 | 36 | 32 | 25 | 22 | 21 | 17 | 9 | 8 | 8 | 6 | 6 | 6 | 6 | 6 | 5 | 2 | 2 | 1 | 1 | 1 | 1 |

European Commission

# WP 2021- CALL RESULTS

| | Eligible proposals evaluated | Proposals retained for funding | Overall success rate |
|---|---|---|---|
| **Destination 1.** Staying healthy in a rapidly changing society | 64 | 8 | 12.5% |
| **Destination 2.** Living and working in a health-promoting environment | 81 | 17 | 20.9% |
| **Destination 3.** Tackling diseases and reducing disease burden | 229 | 37 | 16.1% |
| **Destination 4.** Ensuring access to innovative, sustainable and high-quality health care | 83 | 10 | 12% |
| **Destination 5.** Unlocking the full potential of new tools, technologies and digital solutions for a healthy society | 81 | 17 | 20.9% |
| **Destination 6.** Maintaining an innovative, sustainable and globally competitive health industry | 14 | 6 | 42.8% |
| **+ Emergency Covid call** | 56 | 9 | 16% |
| **Total** | **608** | **104** | |

# WP 2022 - CALL RESULTS

| | Eligible proposals evaluated | Proposals retained for funding | Overall success rate* |
|---|---|---|---|
| **Destination 1*.** Staying healthy in a rapidly changing society | 472 | 35 | 7.4%* |
| **Destination 2.** Living and working in a health-promoting environment | 10 | 5 | 50% |
| **Destination 3*.** Tackling diseases and reducing disease burden | 296 | 35 | 11.8%* |
| **Destination 4.** Ensuring access to innovative, sustainable and high-quality health care | 15 | 6 | 40% |
| **Destination 5*.** Unlocking the full potential of new tools, technologies and digital solutions for a healthy society | 210 | 20 | 9.5%* |
| **Destination 6.** Maintaining an innovative, sustainable and globally competitive health industry | 82 | 14 | 17% |
| **Total** | **1085** | **115** | |

*Includes 2 stages calls
** + 3 Ad-hoc grants

# A.O.B.

# Thank you!

## # HorizonEU

**http://ec.europa.eu/horizon-europe**