TRANSFORMING HEALTH AND CARE SYSTEMS

Deliverable N. 6.8

Public Call documents: call text, guidelines for applicants, proposal templates – 2024

WP6

Co-funded by the European Union

Funded by the European Union under the Horizon Europe Framework Programme - Grant Agreement Nº: 101095654.

Document Summary

Deliverable Number	6.8
Deliverable Name	Public Call documents: call text, guidelines for applicants, proposal templates - 2024
Type	Report
Dissemination level	Public
Work Package	WP6
Lead Beneficiary	RCN
Contractual delivery date	31/12/2023
Actual delivery date	26/08/2024
Grant Agreement Number	101095654
Project name	European Partnership on Transforming Health and Care Systems
Acronym	THCS
Start date of the project:	01/01/2023
Duration	84 months

Contributors

- RCN
- IT MOH
- ZonMw
- ANR
- NCBR

Co-funded by the European Union

DISCLAIMER

Funded by the European Union under the Horizon Europe Framework Programme - Grant Agreement Nº: 101095654.

Executive Summary

The European Partnership on Transforming Health and Care Systems (THCS) brings the opportunity to coordinate and optimize research and innovation efforts in Europe and its partner countries supporting the much-needed transformation of health and care systems.

In this view, the Annual Work Plan 2024 of the THCS Partnership foresees the launch of a Joint Transnational Call for Proposals focusing on the need to improve the implementation of personalised prevention strategies in health and care services, also to make them person-centred and better adjusted to people's needs while supporting effective and appropriate use of existing IT and digital-based technologies supporting prevention strategies in health and care services.

In February 2024, the THCS Partnership launched the Joint Transnational Call “Innovate to Prevent: Personalized Prevention in Health and Care Services” aiming to support the implementation of innovative person-centred health and care models addressing prevention strategies, with the key help of existing IT and digital technologies and services, as well as existing and emerging data. The ultimate goal is to improve health and care system dimensions such as quality, efficiency, equity, and sustainability. Improving the quality of preventive services will lead to improving the quality of life of citizens and patients, as well as reducing the burden and costs for the entirety of health and care services.

This deliverable presents the Call text, the guidelines for applicants and the proposal templates

Co-funded by
the European Union

Table of contents

Co-funded by the European Union

1 Introduction

The European Partnership on Transforming Health and Care Systems (THCS) brings the opportunity to coordinate and optimize research and innovation efforts in Europe and its partner countries supporting the much-needed transformation of health and care systems.

In this view, the Annual Work Plan 2024 of the THCS Partnership foresees the launch of a Joint Transnational Call (JTC) for Proposals focusing on the need to improve the implementation of personalised prevention strategies in health and care services, also to make them person-centred and better adjusted to people's needs while supporting effective and appropriate use of existing IT and digital-based technologies supporting prevention strategies in health and care services. The topic of the Joint Transnational Call was identified by vote of the Funding Agency Board (FAB) October 2023. The options for the vote were selected following a brainstorming phase and in accordance to the priorities identified in the THCS SRIA. The brainstorming phase included:

- organization of 2 online Brainstorming meetings, with the participation of THCS Consortium Partners, European Commission Services (EC Services), and selected guests from relevant EU and International initiatives in the Health and Care sector;
- promotion of 1 online survey, open to the whole THCS Consortium;
- organization of 1 FAB Brainstorming meeting, open to Funding Agencies only.

Following the vote, WP6 in collaboration with the coordination team and WP7, drafted the public and confidential call documents. The FAB was invited to provide feedback on two major drafts of the call text and one draft of the auxiliary call documents. Additionally, EC Services provided feedback on two major drafts of the call text and the final draft of the auxiliary call documents.

As a result, THCS launched in February 2024 the Joint Transnational Call 2024 "Innovate to Prevent: Personalized Prevention in Health and Care Services" aiming to support the implementation of innovative person-centred health and care models addressing prevention strategies, with the key help of existing IT and digital technologies and services, as well as existing and emerging data. The ultimate goal is to improve health and care system dimensions such as quality, efficiency, equity, and sustainability. Improving the quality of preventive services will lead to improving the quality of life of citizens and patients, as well as reducing the burden and costs for the entirety of health and care services.This deliverable presents the Call text, the guidelines for applicants (Annex 1 to Call text) and the proposal templates.

Co-funded by the European Union

2 Methodology

Starting from the strategic and structural priorities indicated in the THCS SRIA, the coordination team and WP6 Leader (Research Council of Norway) organised a series of digital brainstorming sessions. The WP6 leader designed five options for the topic of the JTC2024 and organised a digital vote following the single transferrable vote system. The vote resulted in Digital health in health and care services, with Health and care systems as preventive and health promotive services as the second choice. WP6 Leader (Research Council of Norway) started to design the final topic of JTC2024 and the scope of the Call. In doing so, special care was taken to underpin the topic with the appropriate structural priorities/building blocks identified in the THCS SRIA. During this process, and in consultation with the coordination team and EC Services, it became evident that a topic solely focused on digital health would be too broad and not sufficiently well defined within the scope of THCS. The decision was then made to combine the winning topic with the runner up.

Two rounds of written consultations have been conducted with the Research and Innovation Funding Organizations (RFOs) to gather feedback and inputs on the content of the call text as well as the type of funding instrument to be used, projects size and duration ensuring an alignment on the call topic and with regional/national rules and possibilities of each RFO.

The Call text was then shared in December 2023 and January 2024 with EC Services and HADEA to gather comments on it and subsequently with the FAB for their final comments.

The pre-announcement of the JTC2024 “Innovate to Prevent: Personalized Prevention in Health and Care Services” was published in the THCS website on 12 February 2024 and the Call text and the templates for the submission of the Intent to Apply on 23 February 2024. Minor amendments to the Call text were added on 5 March, 8 March, 22 March and 16 May.

Co-funded by the European Union

3 Annexes

Annex 1. Call text JTC2024 “Innovate to Prevent: Personalized Prevention in Health and Care Services”

Annex 2. Guidelines for Applicants

Annex 3. Templates for submission of the Intent to Apply and Full proposal

Co-funded by the European Union

Co-funded by the European Union

Call for transnational proposals 2024

Innovate to Prevent: Personalised Prevention in Health and Care Services

Call text

DEADLINES

Submission deadline for obligatory "Intent to apply": 16 April 2024, 14:00 CEST

Central submission deadline for proposals: 21 May 2024, 14:00 CEST

Electronic proposal submission

For further information, visit our website:

https://www.thcspartnership.eu

or contact the

THCS Joint Call Secretariat:

thcs@zonmw.nl

Contents

1. History of changes

Page	Change
61	Corrections to Poland – NCBR's national/regional eligibility rules.
92	Corrections to Sweden – Vinnova's national/regional eligibility rules.
16	Correction to the eligibility rules for the consortia. In the exceptions, a reference to a limitation that was removed from the final draft was inadvertently left in.
28	Corrections to Portugal – FCT's national contacts
67	Corrections to Portugal – FCT's national/regional eligibility rules.
82	Corrections to Spain – ISCIII's national/regional eligibility rules.
Multiple pages	Updated the deadline for proposal submission from 14 May to 21 May wherever mentioned in the call text.

2. Introduction and background

2.1 What is a European Partnership?

Co-funded European Partnerships are instruments implemented in Horizon Europe as Programme Co-fund Actions. These partnerships are involving EU countries, with research and innovation funders and other public authorities at the core of the consortium. The Partnership instrument is open to all EU Member States, as well as to countries associated to Horizon Europe. It is open also to non-EU countries that can participate at their own costs. In a co-funded Partnership driven by cash contribution the core activity is the funding of Research and Innovation projects on a specific field. The European Commission is directly involved in the governance of the Partnership and contributes by co-funding 30% of all eligible costs.

2.2 The European partnership on Transforming health and care systems (THCS)

The health and care systems of Europe are under a lot of strain and need to transform to be able to respond to people's future needs. The COVID-19 pandemic has highlighted even further the need to rethink and redesign health and care services.

The Transforming Health and Care Systems (THCS) initiative has been established as a European partnership under Horizon Europe, co-funded by the European Commission (https://www.thcspartnership.eu/). The aim of THCS is to coordinate and optimize research and innovation efforts in Europe and its partner countries supporting health and care systems transformation.

2.3 Background

Europe's health and care systems are under a lot of strain and need to transform to respond to people's current and future needs. A stronger emphasis on prevention, supported by an improved use of tools and data for a better quality of service, is crucial to address the increasing shortage of health and care workers, to meet the demands of an ageing population and reduce the workload of health and care professionals.

Disease prevention is highly cost-effective and crucial to improving population health and quality of life, reducing strain and costs on health and care systems dedicated to treatment and disease management, and encompasses actions under all layers of prevention. Integrating personalised prevention strategies, including risk prediction, within health and care planning and delivery is a key priority in moving towards a person-centred health and care system, both in non-hospital settings before the diseases require hospitalisation for patients and at later stages. However, effective models lack wide implementation across different countries and settings, as well as consideration of possible contextual barriers and facilitators, dependent on the context.

In this context, there is rapid, data-driven innovation in preventative management models that use diagnostic instruments, including new Information Technologies (IT) and digital technologies, that could be applied in prevention strategies, and help increase the quality, effectiveness and

sustainability of health and care services. These include, for example, smart devices, communication technologies, the Internet of things, big data, omics data, artificial intelligence (AI) and robotics. Existing and emerging IT and digital technologies could help transform preventative services and solutions. At the same time, there are many complex barriers to consider for the adoption of IT tools and digital technologies in health and care settings, such as the lack of appropriate legal frameworks, complex regulatory requirements, prohibitive costs or financial incentives, end-user digital awareness/skilfulness and cultural resistance to change in clinical practice.

3. Ambition of the call

The second JTC addresses the need to improve the implementation of personalised prevention strategies in health and care services, also to make them person-centred and better adjusted to people's needs while supporting effective and appropriate use of existing IT and digital-based technologies supporting prevention strategies in health and care services.

Potential proposals will assess practical implementation needs and challenges, such as barriers concerning resources, quantification of benefits and utility, sustainability issues, stakeholder engagement, geographical limitations, equity of access, and inequalities, with a view to supporting the uptake of those models that more effectively help address successful prevention strategies.

This call will address the added value of increasing the development and uptake of promising health and care organisational models specifically supporting prevention and their transferability and scalability across different health and care contexts and governance settings. This includes increasing use of the relevant IT and digital technologies to help achieve better outcomes in health and care systems.

The main challenge is not the shortage of workable practices in general, but rather the transferability of solutions, which have been successful in specific contexts, to be scaled-up into prevention models in more organisations, regions, and countries where they could be adapted and implemented into regular use. The call will focus on the opportunity, but also the challenges, faced by health and care professionals in making proper use of prevention strategies, with particular emphasis on the appropriate use of IT and digital solutions. Furthermore, this includes supporting citizen and patient involvement and engagement, and improving the access to and responsible use of data following the FAIR principles[1], including emerging data sources (e.g. omics). Finally, proposals should inform decision-making processes and appropriate use of relevant IT and digital technologies for the reduction of the health and care workforce burden.

The challenges are complex and can be answered with a wide variety of Research and Innovation (R&I) projects and concepts. These include applied, innovative research as well as development of strategies, testing, implementing, and assessing interventions and solutions in the different partner countries and in different health and care contexts and settings. Suggested research and innovation

[1] https://open-research-europe.ec.europa.eu/for-authors/data-guidelines#fairdata

topics are further described below.

The funding organisations that have agreed to fund the joint call for transnational research and innovation projects are listed in Annex I. The call will be launched simultaneously by the funding organisations in their respective countries and is coordinated centrally by the THCS Joint Call Secretariat.

4. Aim of the call

This call aims to support the implementation of innovative person-centred health and care models addressing prevention strategies, with the key help of existing IT and digital technologies and services, as well as existing and emerging data. The ultimate goal is to improve health and care system dimensions such as quality, efficiency, equity, and sustainability. Improving the quality of preventive services will lead to improving the quality of life of citizens and patients, as well as reducing the burden and costs for the entirety of health and care services.

Proposals should leverage the diversity in how disease prevention services are delivered in Europe and provide a clear view of applicable scale-up for innovations across different countries and health and care settings. This entails mutual learning opportunities, considering that although the increasing challenges faced by health and care systems are common in the EU and beyond, innovative models in prevention could be organised differently, and have different approaches to integrating IT and digital technologies. Proposals should consider contextual barriers and facilitators that are linked to different roles, tasks, education, and skills of health and care professionals, the involvement of citizens, patients and caregivers and the contribution of other key stakeholders. Potential proposals should also address the challenges in adopting IT tools and digital technologies in health and care ecosystems, particularly the contingent needs to overcome legal, financial, cultural, technological, and educational barriers, as well as barriers to adaptation to the local context by stakeholders.

The call aims to address the transformative process that helps integrate personalised preventive strategies in innovative organisational models directly impacting the health and care systems. For this reason, actions on primary prevention will not be in the scope of this call.

5. Scope of the call

The proposals, in the scope of this call, will be focused on secondary, tertiary, and quaternary prevention:

"Secondary prevention is associated with early detection of a disease which may result in improved chances for positive health outcomes."[2]

The projects in this area will aim to build up, implement and upscale organisational models, supported by the integration of existing IT and digital technologies, and novel data sources, in order to anticipate

2 European Commission, Health Promotion and Disease Prevention Knowledge Gateway, https://knowledge4policy.ec.europa.eu/health-promotion-knowledge-gateway/promotion-prevention_en

the identification of individuals in the earliest phase of disease more effectively than existing health and care systems. This includes taking advantage of interventions that predict, reduce, delay, and avoid the development of diseases.

"Tertiary prevention is associated with services that promote better quality of life for those living with disease."[2]

The projects within this area will aim to build up, implement and upscale organisational models, supported by the integration of IT and digital-based solutions with other existing solutions, to optimise patient management both in hospital and home settings. The purpose is to reduce worsening of disease, improve the efficacy of therapies to manage the prevention of complications and further damage, and at the same time reduce the burden on the health care systems and improve access to services.

"Quaternary prevention is related to avoiding over-medicalisation of patients, protecting them from unnecessary interventions and suggesting ethical alternatives."[2]

The projects within this area will aim to build up, implement and upscale organisational models, supported by the integration of existing IT and digital-based technologies, with solutions that tailor therapies for those patients who require personalised treatment.

5.1 Essential elements

The research and innovation activities of the submitted projects should provide a broad range of knowledge and implementation-ready solutions for the use of data in prevention.

Proposals must address the economic and social impact of the proposed models, solutions, or approach.

Proposals are required to address legal, financial, technological, and educational barriers to the implementation of the project outcome(s), as well as barriers to adaptation to the local context by stakeholders. Proposals should outline a clear strategy and roadmap from project output to implementation.

Proposals are required to address necessary skills required of all relevant stakeholders, including health and care professionals and end-users.

Proposals should address how end-users will be involved in the project. End-users may be the general public, patients, clinical professionals, policy makers, etc.

Proposals must show how the project will be linked to the policy context and wider eco-systems. This includes cooperation and coordination between stakeholders, across the boundaries of traditional health and care domains, locally or regionally, involving end-users, health and care professionals, and/or other stakeholders e.g., health and care system owners, when relevant.

Especially with respect to implementation approaches, relevant industry and end-user organisations

should be partners in the consortium. The embedding of the endeavour into organisational strategies will raise the transformational power of the consortium. If the consortium has a commercial component, the workplan needs to include the development of business plans and reflect the reaching out to relevant wider ecosystems.

5.2 Research and innovation areas particularly relevant to this call include:

a) Public health research: A field of study that aims to protect and improve the health of people and their communities. It involves the systematic collection and analysis of data to understand health challenges and develop solutions to predict (e.g., through screening programmes), prevent or control disease or injury, promote healthy lifestyles, and informed choices.
b) Health economics: This area studies the allocation of healthcare resources and the financial implications of health decisions. It's concerned with issues like cost-effectiveness, efficiency, value, and behaviour in the production and consumption of health and healthcare.
c) Health Technology Assessment (HTA): A multidisciplinary process that uses systematic research methods to evaluate the properties, effects, and/or impacts of health technologies. It often plays a crucial role in determining reimbursement and coverage decisions for new technologies.
d) Health psychology: This field of study concerns itself with the psychological factors related to health behaviours, including behaviours promoting health, preventing illness and how people respond to becoming and being ill. Health psychology also relates to the interplay between people's cognition and behaviour and health and care systems
e) Service research: Service research is a multidisciplinary scientific field where one studies how social factors, financing systems, organizational structures and processes, technology, and personnel behaviour affect access to services, the quality and costs of the services, and ultimately health, welfare, and quality of life for the citizens.
f) Health Technology Research (HTR), which is an interdisciplinary field of study that aims to implement new technologies to improve the delivery of healthcare services and to achieve better health outcomes. The field includes a wide range of research areas such as medical devices, diagnostics, genomics, digital health, telemedicine, mobile health, electronic health records and others.

5.3 Examples of research and innovation activities that are particularly needed:

The second JTC will be a research and innovation action addressing different components related to the need to support the implementation and transferability of innovative health and care models focusing on prevention in different countries and settings, with the help and successful integration of IT tools and digital technologies.

The call will support projects that address the aim mentioned above, built on:

- Validation, customisation and adoption of innovative health and care prevention models based on integrating existing IT and digital technologies and novel data sources with medical

technologies for health and care prevention strategies.
- Demonstration and pilot activities for implementation, improvement and transferability of preventive practices already identified.
- Proof of concept of the efficacy of implementing new preventive models into different health and care settings.

The projects shall include, but not be limited to, the following key elements:

- The immediate and probable applications for prevention strategies. Demonstrate viable up-scaling methods and promote the adoption of evidence-based prevention models and the integration of IT and digital technologies.
- Addressing the barriers to access to prevention services for vulnerable groups, which often have reduced access to conventional health and care services or groups with low digital literacy (e.g., older people, people with co-morbidities, low socioeconomic status, etc.) that may not afford, be able or willing to engage with new models supported by digital health technologies.
- Fostering a receptive culture in health promotion and disease prevention among professional and clinical staff, the public, patients, and other stakeholders.
- Ensuring and reinforcing trust of the citizens in health data (re-)use for public health purposes.
- Impact on the workforce in implementing the models (e.g., how is the workload reduced, and how do their activities better meet the patient needs)
- standard measures and indicators that will improve health and care data use and quality in prevention strategies
- End users' perspective and the usability of project outcomes in the establishment, implementation, and up-scaling of prevention models.

5.4 Proposals will be rejected if they:

a) Predominantly concern development of new technological solutions, without a focus on integration of the solutions, organisational models or implementation in the health and care systems.
b) Have a predominantly clinical, pre-clinical/bio-medical component or
c) Are purely epidemiological studies mapping the extent of and causal factors behind illnesses, without a focus on solutions, models or implementation in the health and care systems.
d) Solely concern social/welfare services and do not address issues in the health and care services.
e) Do not take into consideration an ecosystem-wide approach and/or fail to consider end-users' perspective (see Guidance for Applicants for details).
f) Predominantly concern actions on primary prevention.

6. General conditions for participation

6.1 Type of partners

Joint research proposals may be submitted by applicants belonging to one of the following categories

(according to national/regional regulations; certain categories may not be eligible for funding by a specific funding organisation, please see Annex I):

- **Academia** – research teams working at universities, universities of applied sciences, other higher education institutions or research institutes;
- **Clinical/public health sector** – research teams working at hospitals/public health and/or other health care settings and health organisations;
- **Companies** – private companies of all sizes;
- **Operational stakeholders** – e.g. citizens and/or citizen representatives, local communities, schools, municipalities, local/national NGOS, consumer organisations. Operational stakeholders should be in a position to provide useful knowledge to the consortium, ensure the consortium's research is useful and translatable to their (or other) organizational contexts, and/or influence decision making or create change within their organisations. Operational stakeholders should be engaged in the research process from conception of the study to dissemination.

6.2 Duration of projects

The minimum project duration is 12 months and projects must be designed to be achievable during a maximum funding period of 36 months.

6.3 Type of action

Consortia funded in this THCS call are required to be interdisciplinary and trans-sectoral, including stakeholders from clinical research, public health, bioinformatics, technology, digital health, Ethical, Legal and Social Aspects (ELSA) research, implementation research, health economics research, actors from the public and private sector, and end-users (or experts that can support research on the impact for end-users). Research teams forming a consortium should include investigators from a broad range of relevant scientific disciplines, research fields or sectors, and bring together the necessary expertise to achieve the objectives as well as expected impact of the research proposed.

This call mandates collaborative, transnational research, innovation, and assessment actions. It is compulsory to engage in one or more of the following types of action: applied research, implementation research, piloting, and/or testing. All projects must demonstrate proof of concept(s), validate concepts, models, or solutions, and showcase demonstrations of solutions in relevant health and care ecosystems. Translation to other settings of already adopted solutions is also within scope of this call.

Research supported by THCS must respect fundamental ethical principles. Applicants have to describe any potential ethical aspects of the work to be carried out, and how the project will fulfil applicable requirements of institutional, national and European Union legislation (including the ethical standards and guidelines of Horizon Europe).

The individual project partners of the joint applications should be complementary, and the proposed work should contain novel, innovative, and ambitious ideas with a high application potential for the end-users and/or with a high implementation potential to benefit of end-users. Applicants have to

engage end-users and other stakeholders (e.g. policymakers, healthcare professionals, informal carers, patient representatives, companies and voluntary organisations/NGOs) in the planning, realisation and implementation of the project, in dissemination activities and in the planned utilisation of the results.

Applicants are encouraged to support the involvement in activities promoted by the Partnership: knowledge-building science and policy dialogue, knowledge hub supporting the assessment and transferability of good practices and act as a community-building and exchange forum, strengthening the ecosystem of health and care research and innovation, and creating synergies in the health and care systems research and innovation communities of Europe.

Proposals must clearly demonstrate:

- their contribution to the transition towards more sustainable, efficient, resilient, inclusive, innovative and high-quality people-centred health and care systems equally accessible to all people, for example:
    - providing decision-makers with guidance and instruments supporting the actual adoption and integration of research findings and evidence-based practices into different settings,
    - improving the ability to implement innovation and maximising resources through health and care systems.
- the added value of the transnational collaboration

7. Participating countries and respective funding organisations

The following participating funding organisations have agreed to fund this call for transnational research and innovation projects:

Partner Country	Funding Organisation	Acromym
Austria	Österreichische Forschungsförderungsgesellschaft	FFG
Belgium	Fonds de la Recherche Scientifique	FNRS
Denmark	Innovationsfonden	IFD
Estonia	Sihtasutus Eesti Teadusagentuur	ETAG
France	Agence Nationale de la Recherche	ANR
France	Ministère de la Santé et de la Prévention	Fr MoH
Iceland	Rannsóknamiðstöð Íslands	Rannís
Ireland	Health Research Board	HRB
Israel	Ministry of Health	CSO-MOH

Italy	Agenzia Regionale per la Salute ed il Sociale	AReSS
Italy	Ministero della Salute	IT MOH
Italy	Ministero dell'Università e della Ricerca	MUR
Latvia	Latvijas Zinātnes padome	LZP
Lithuania	Lietuvos Mokslo Taryba	LMT
Malta	Malta Council for Science and Technology	MCST
Netherlands	Zorgonderzoek Nederland	ZonMw
Norway	Norges Forskningsråd	RCN
Poland	Narodowe Centrum Badan i Rozwoju	NCBR
Portugal	Fundação para a Ciência e a Tecnologia	FCT
Portugal	Comissão de Coordenação e Desenvolvimento Regional do Centro	CCDRC
Romania	Executive Unit for the Financing of Higher Education, Research, Development and Innovation	UEFISCDI
Scotland/UK	Digital Health and Care Directorate, Scottish Government	SG
Slovenia	Ministry of Digital Transformation	MDT
Spain	Agencia Estatal de Investigación	AEI
Spain	Instituto de Investigación Marqués de Valdecilla	IDIVAL
Spain	Instituto de Salud Carlos III	ISCIII
Spain	Consejería de Salud y Consumo de la Junta de Andalucía	CSCJA
Sweden	Forskningsrådet för hälsa, arbetsliv och välfärd	Forte
Sweden	Verket for Innovationssystem	Vinnova
Switzerland	Schweizerischer Nationalfonds	SNSF
Switzerland	Schweizerischen Agentur für Innovationsförderung	Innosuisse

8. How to apply

8.1 Eligibility

Joint transnational research and innovation proposals may be submitted to this call by teams working at different entities such as universities (or other higher education institutions) research and knowledge dissemination organisations, non-university public or private research and/or innovation organisations, hospitals or foundations or any healthcare providers, operational stakeholders (e.g. citizens and/or citizen representatives, local communities, schools, municipalities, local/national NGOS, consumer organisations), as well as companies, particularly small and medium-size companies.

The eligibility of the afore-mentioned institutions, organisations, companies, together with details of eligible costs (e.g. personnel, material, consumables, travel money, expenditure) are subject to the administrative requirements of the individual funding organisations participating in this call. **It is strongly recommended to carefully read the country/region specific information regarding eligibility and funding and to contact the respective funding organisations since additional regional/national procedures might be mandatory (Annex I).** Individual representatives from THCS Partnership Governing Board Members, THCS Partnership General Assembly Members or Funding Agency Board Members cannot submit proposals to THCS Joint Calls.

8.2 Eligibility Criteria

Applicants must adhere to the specific regulations of their regional/national funding partner organisations. Therefore, each partner is strongly advised to check carefully the regional/national eligibility rules defined by its own funding organisation, as specified in Annex I. The eligibility of the consortium will be approved by the Call Steering Committee (CSC).

Eligibility rules for the consortia are:

- The consortium must include a minimum of three (3) eligible partners asking for funding from three (3) different EU Member States or Associated Countries whose funding organisations participate in the call. Each of these partners must be eligible and request funding from the respective funding organisation. All three legal entities must be independent of each other.
- Maximum number of partners is nine (9).
- Maximum three (3) eligible partners from the same country.
- For some funding organisations, the maximum number of eligible partners who can be funded in one project is limited to one (see also “Guidelines for Applicants” for individual funding rules).
- The project coordinator must be eligible for funding by a regional/national funding organisation participating in the call.
- Maximum of two (2) collaborators per consortium are permitted. Collaborators are self-funded partners, i.e. partners that do not request funds in this JTC provided from one of the participating funding organisations (i.e. partners from non-funding countries or partners who are not eligible according to national/regional regulations of the participating funding

organisations).

- Exception: To facilitate the integration of patient organisations and companies in consortia, they can be added to a consortium as additional partners. Patient organisations and companies can be added as additional partner(s) either on own funds or by applying for funding, if eligible, from the respective funding organisations. The consortia must follow all of the above-mentioned rules regarding the consortia composition without counting the patient organisations or companies, except for the following rule: within one consortium, no more than three (3) partners from the same country can request funding, including patient organisations and companies. For some funding organisations, the maximum number of eligible partners who can be funded in one project is one.

Each consortium must nominate **a project coordinator** among the participating eligible partners (NOT a collaborator). The project coordinator will represent the consortium externally, will act as contact person for the Joint Call Secretariat (JCS) and will be responsible during the entire process for the internal scientific management such as the application procedure, coordination of consortium agreement drafting, Data Management Plan, gender equality plan, reporting.

Each principal investigator can submit up to **two proposals as mere partner including one as coordinator** (i.e. the coordinator of a proposal can only be partner in another proposal). For some funding organisations, the maximum number of eligible partners who can be funded in one project is limited to one (see also “Guidelines for Applicants” for individual funding rules). Applicants are consequently strongly encouraged to contact their national/regional contact points to check their national/regional eligibility rules before submission (see Annex I).

The following conditions apply for collaborators:

- Secure own funding for participation with clear evidence in the proposal that this is already in place.
- A letter of commitment of the collaborator(s) needs to be included as an annex to the proposal.
- A collaborator cannot be coordinator of a consortium nor work package leader.

8.3 Submission of joint transnational proposal

The call is organised in a one-stage procedure with one Intent to apply (ItA) and one full-proposal document. The full proposal review process will be complemented by a rebuttal stage.

Only consortia who have submitted an Intent to apply (ItA), submitted through the THCS Partnership Online Submission System before, will be permitted to submit a full proposal.

For both, ItA and full-proposal, one joint document (in English) shall be prepared by the partners of a joint transnational proposal and must be submitted to the JCS through the THCS Partnership Online Submission System.

Both, Intent to apply (ItA) and full proposals must be uploaded on the THCS Partnership Online Submission System by the project coordinator.

The deadline for the submission of the Intent to apply (ItA) is April 16, 2024 (14:00 CEST).

The deadline for the submission of the full proposal is May 21, 2024 (14:00 CEST)

No project proposals will be accepted after the submission deadlines. Proposals that do not meet the formal criteria will be rejected from the evaluation process without any further review. The English-language call for proposals is the legally binding version, and proposals must be written in English. All fields in the proposal template must be completed, respecting the page limits and format.

The ItA and the full-proposal template will be available on the THCS website (https://www.thcspartnership.eu/).

If applicable, a proposal should be submitted together with a legal/ethical approval document from the concerned country/region.

Please note that the regional/national funding organisations may require additional documentation from applicants. These are specified in the regional/national regulations. Such additional national/ regional documentation cannot be submitted through the THCS Partnership Online Submission System but must be submitted directly to the relevant funding organisation. It is the responsibility of each project partner to ensure that all the necessary documents are submitted on time to the appropriate recipient. Details can be found in Annex I.

The CSC, which is comprised of all funding organisations participating in the call, will take all lawful steps to ensure confidentiality of the information and documents obtained during the evaluation and selection procedure of the joint call.

There will be an online Information Webinar for applicants on 12 March 15:00-16:30 CET. Interested applicants are encouraged to register for the webinar on the following link: https://www.zonmw.nl/en/form/thcs-webinar-march-12th. The webinar will cover general information about the THCS partnership, explanation of the call topic and call procedure, giving an example project, explanation of the partner search tool. The webinar will conclude with a questions and answers session.

Table 1: Timeline of the application process

February 12, 2024	Pre-announcement of the Innovate to Prevent call
February 23, 2024	Publication of the call
15:00-16:30 CET March 12, 2024	JTC 2024 Information Webinar
April 16, 2024	Deadline for submission of Intent to Apply
May 21, 2024	Deadline for submission of proposals
August 26, 2024	Deadline for coordinators to send their rebuttal letters
September 9-11, 2024	PRP Meeting
September 16-27, 2024	Ethical Evaluation of the selected proposals
October 2024	Final funding recommendation announced to applicants
End of 2024/early 2025	Expected scientific start of funded projects

Regarding the timeline. Please note that the dates may be adjusted by decision of the CSC during the Call process due to workflow needs, response of reviewers and change in internal procedures.

8.4 Financial and legal modalities

Project partners will be funded by their relevant regional/national funding organisation. Eligible costs, funding rules and the type of studies allowed vary between the respective funding organisations (see Annex I). Each project partner must be involved in the budgeting of their planned tasks. For information on the specific funding rules and eligibility criteria of the regional/national funding organisation - Carefully read Annex I and the regional/national announcements of the call. In addition, applicants are strongly advised to contact their relevant funding organisation contact person before submitting a proposal; please note that for some countries/regions it might be mandatory.

Please note that if a partner is found to be non-eligible at any step of the process by one of the funding organisations, the entire proposal will be rejected without further review.

8.5 State aid rules apply

This call for proposals constitutes a funding scheme that is notified to the EFTA (European Free Trade Association) Surveillance Authority (ESA) and must be practised in compliance with the national applicable (EU/EEA (European Economic Area) State Aid rules.

8.6 Further information

For additional information, please contact the JCS, or your regional/national funding organisation Contact Person (see Annex I).

9. Evaluation of proposals and decision

9.1 Formal check of proposals

The THCS Partnership's JCS will check the proposals to ensure that they meet the call's formal criteria (e.g. date of submission; number and legal form of participating partners and countries; inclusion of all necessary information according to the respective templates in English). The JCS will also forward the proposals to the regional/national funding organisations, which will perform an eligibility check of compliance with their respective regulations. Funders can provide some time to comply with the eligibility criteria. Proposals not meeting the formal criteria described above at the end of both eligibility checks will be rejected. Proposals passing this step will be forwarded to the Peer Review Panel for evaluation.

Applicants shall avoid applying for the same activities to different calls. The JCS and regional/national funding organisations will perform cross-checks with other joint transnational calls and national calls (e.g. other EJPs, IHI, EU4Health, ERA-nets and others) and national calls. Double funding is not allowed.

9.2 Peer-review of proposals

The selection of projects is based on the principle of peer review. Experts in the field(s), hereinafter referred to as reviewers, carry out written evaluations and will participate in an online panel meeting. Reviewers operate independently and confidentially, without exchange with third parties. They only have at their disposal the information included in the submitted proposal on the closing date and time of the call.

Each proposal will be reviewed by at least three reviewers with qualifying expertise fitting the topic of the submitted application.

The adequacy of the proposals submitted to the call will be assessed by the reviewers. Proposals considered not relevant to the call topics and objectives by all reviewers will not be discussed during the panel meeting and then will not be considered for funding, regardless of their scientific quality.

The reviewers will assess the proposal and provide a written evaluation form with scores and comments for each evaluation criterion (see evaluation criteria below). The reviewers will meet in a Peer Review Panel (PRP) to discuss all eligible proposals (see Section 9.4 for details on eligibility), to produce an assessment report for each full proposal and a ranking list of proposals recommended for funding based on updated scores defined during the panel meeting. In the event of absence of reviewers, the reviewers' respective proposals will be distributed between the other panel members.

9.3 Rebuttal stage

Prior to the PRP, there is the rebuttal stage. In this stage, each coordinator is provided with the reviewers' assessments. The rebuttal allows applicants to comment on factual error or misunderstandings that may have occurred in the review process and to reply to reviewers' questions. However, issues not related to reviewers' comments or questions cannot be addressed and the work plan cannot be modified at this stage.
The applicants will have a (1) week for this optional response to the reviewers' comments. Answers sent after the notified deadline, or not related with reviewers' comments or questions will be disregarded.

9.4 Evaluation criteria

Scoring system:

0 = Failure. The proposal fails to address the criterion in question or cannot be judged because of missing or incomplete information.

1 = Poor. The proposal shows serious weaknesses in relation to the criterion in question.

2 = Fair. The proposal broadly addresses the criterion, but there are significant weaknesses that need corrections before the project can be realised.

3 = Good. The proposal addresses the criterion in question well, but a number of improvements are necessary.

4 = Very good. The proposal addresses the criterion very well, but minor improvements are possible.

5 = Excellent. The proposal successfully addresses all aspects of the criterion in question.

Evaluation scores will be awarded for each of the three main criteria: excellence, impact, and implementation. Each individual reviewer will independently give scores for each criterion. The three criteria are weighted equally and the maximum overall score of the three evaluation criteria that can be achieved in the remote written evaluation is 15 points. Proposals that after the rebuttal stage have received an overall score below 10 and/or have at least one individual criterion score below 3 (after averaging individual reviewer scores) are ineligible for funding and will not be discussed during the panel meeting. The final score for the proposal for each criterion is agreed upon by the panel members after the PRP discussion.

Evaluation criteria:

1. Excellence

Potential to further the state of the art:

- The extent to which a clear and pertinent need for the project is made plausible.
- The extent to which the proposed work is ambitious, novel, and goes beyond the state-of-the-art, demonstrating the innovation potential and the transformative dimension for health and

care system;
- Novelty and boldness of hypotheses/research and innovation questions;
- Potential for development of new knowledge beyond the current state of the art, including significant theoretical, methodological, experimental or empirical advancement.

The quality of the proposed R&I activities:

- Quality of the research and innovation questions, hypotheses and project objectives, and the extent to which they are clearly and adequately specified;
- Credibility and appropriateness of the theoretical approach, research and innovation design and use of scientific methods. Appropriate consideration of interdisciplinary and intersectoral approaches;
- The extent to which appropriate consideration has been given to societal responsibility, ethical issues and gender dimensions in research and innovation content;
- The extent to which appropriate consideration has been given to embed the project in an ecosystem approach and research appropriate organisational/business models;
- The extent to which appropriate consideration has been given to involvement of stakeholders/end-users;
- The extent to which end-user knowledge and perspectives are appropriately included and ethical concerns regarding user-involvement have been taken into account.

2. Impact

Potential impact of the proposed research and innovation:

- The extent to which the planned outputs of the project address UN Sustainable Development Goals or other important present and/or future scientific and societal challenges;
- The extent to which the planned outcomes have the potential to significantly influence policy decisions and regulations and can contribute to an informed decision-making process, leading to evidence-based policy and regulatory developments;
- The extent to which measures or indicators of project success are described in the application.
- The extent to which the planned outputs of the project address important present and/or future challenges for the sector(s);
- The extent to which the competence developed, and planned outputs of the project will provide the basis for economic and societal value creation in European business and/or development of the public sector;
- The extent to which the potential impacts are clearly formulated and plausible.

Communication, engagement and exploitation:

- The extent to which the measures to maximise the impact of the project are clearly formulated and plausible;
- Quality and scope of communication and engagement activities targeted towards relevant stakeholders/users in an ecosystems-wide approach;
- The extent to which the partners are involved in dissemination and utilisation of the project results;

3. Implementation

The quality of the project coordinator and project consortium:

- The extent to which the project coordinator has relevant expertise and experience and demonstrated ability to perform high-quality research and/or innovation;
- The degree of complementarity of the participants and the extent to which the project consortium has the necessary expertise needed to undertake the research effectively.
- The extent to which the project partners are complementary and essential within the proposed solution value chain/ecosystem;

The quality of the project organisation and management:

- Effectiveness of the project organisation, including the extent to which resources assigned to work packages are aligned with project objectives and deliverables
- Feasibility of time schedule and appropriate access to necessary data and materials;
- Appropriateness of the allocation of tasks, ensuring that all participants have a valid role and adequate resources in the project to fulfil that role;
- The extent to which critical risks, relating to project implementation, are identified and appropriateness of the proposed risk mitigation measures;
- Appropriateness of the proposed management structures and governance;
- Appropriateness of the partners' contribution to the governance and execution of the project.

9.5 Ethical clearance

After the PRP meeting, members of the Ethics Review Board (ERB) will remotely check the full proposals that are recommended for funding by the PRP and selected for funding by the CSC, for alignment with ethical norms and regulations. If necessary, tasks that need to be performed and documents that need to be submitted by the consortium will be listed. The Ethics experts may put forward additional conditions that need to be fulfilled by applicants. Only those proposals approved by both, the CSC and the ERB (complying with all central Horizon Europe and regional/national ethical requirements), will be funded.

9.6 Decision

The final decision, based on the ranking list established by the PRP, available funding and the ethical clearance, will be taken by the CSC. In case several projects with an equal overall score cannot be awarded due to budgetary constraints, the CSC will prioritise according to the following core principles, in the order listed below:

1. Maximisation of the total output in terms of total funded budget in the call and number of funders involved;
   Aim is to allocate as much of the budget as possible and that all funders are involved in the projects funded.
2. Score of Excellence;
   If 1 cannot lead to an optimum selection with the highest budget allocation, the project with the

highest excellence score will be considered first.

3. Maximising inclusion of SMEs;
   If 1 to 2 above cannot lead to a selection, then the involvement of the highest number of SMEs in the proposal will make that it is considered first.
4. Gender balance.
   If 1 to 3 above cannot lead to a selection, then the gender balance among PIs within the consortium will be considered.

Project coordinators having submitted an eligible proposal will be informed about the funding recommendation regarding their proposal by the JCS. The projects coordinators are responsible to communicate this information to their project partners.

10. Conflict of Interest

All necessary steps will be taken by the JCS and the CSC to ensure that there is no conflict of interest (CoI) concerning PRP members for those proposals assigned to them for review. The PRP members will be required to formally declare that no CoI exists at any point in the evaluation process and will sign a confidentiality agreement concerning all documents and the entire process. Any PRP member who breaches the conflict-of-interest rule will be removed from the panel and excluded from the Peer Review Panel members list of the THCS partnership. Projects assigned to that reviewer will be assigned to another reviewer. A first review for conflicts of interest will be performed by the JCS when analyzing the reviewers' publications. After receiving the proposals, reviewers are obliged to indicate whether there is a CoI with any of the researchers or innovation groups in the proposals for review. Reviewers will sign a formal declaration that they will not participate in the call, nor have any conflicting interests regarding the other projects that are reviewed within this call. On top of that it will be asked again during the PRP meeting. In case a CoI might arise at the PRP meeting that specific reviewer will be asked to leave the room when discussing this specific proposal.

11. Redress procedure

Applicants can appeal against the evaluation outcome if they suspect a breach in the application of the evaluation and selection procedures. This redress procedure only covers the procedural aspects of the evaluation and/or eligibility checks, including the regional/national eligibility checks. The redress will not call into question the scientific or technical judgement of appropriately qualified experts. In this case the applicants shall submit their appeal to the JCS via email, up to fourteen (14) calendar days after the date of dispatch of the evaluation outcome email by the call secretariat. The evaluation outcome email containing the results of the evaluation will give information on the appeals procedure, which is described below.

11.1 Admissibility of appeals

For an appeal to be admissible the following conditions must be met:

- The appeal must be submitted by the coordinator of the proposal to which the appeal relates;
- Only one appeal per proposal will be considered;
- The appeal must be submitted via email within the fourteen (14) calendar days deadline.

The appeal must contain the following minimum information:

- The name of the call for proposals;
- The proposal acronym;
- The title of the proposal;
- A description of the alleged breach in the application of the evaluation and selection procedures.

The appeal must demonstrate a procedural irregularity, factual error, manifest error of assessment, misuse of power, or a CoI. Appeals that do not meet the above conditions, or do not deal with the evaluation of a specific proposal or express mere disagreement with the result or the reasoning of the evaluation might be judged as not suitable for redress.

11.2 Procedure

Upon receipt of an appeal, an acknowledgement of receipt will be sent by the call secretariat within seven (7) calendar days. The acknowledgement shall report the redress process and the anticipated date by which a decision on the appeal will be communicated to the appellant. All appeals received by the fourteen (14) calendar days deadline will be processed together and the decision will be communicated to the appellant within 6 weeks from the deadline for submitting the appeals.

12. If your project is funded

12.1 Funding procedure

Partners from the projects on the list of projects approved for funding will subsequently enter into granting arrangements with the relevant funding organisations, according to their applicable grant awarding process and will be funded directly by the respective funding organisations. Projects are expected to start late 2024 (or early 2025).

Funding will be administered according to the terms and conditions of the responsible funding organisations, considering all other applicable regulations and legal requirements.

12.2 Project Start, Consortium Agreement and Data Management Plan

Consortium members of projects selected for funding must fix a common scientific project start date, which will be the reference date for the annual progress reports and final reporting. The common scientific project start date must be stated in the Project Consortium Agreement (CA). Project coordinators will be responsible for drafting the mandatory CA specific to their consortium in order to manage the delivery of the project activities, intellectual property rights (IPR) and decision-making, and to avoid disputes that could compromise the completion of the project. The coordinator is responsible for sending the CA signed by all partners to the JCS. The CA must state that funding and administrative matters are not regulated by the CA and are issues addressed bilaterally between each project partner and its funder in the relevant Grant Agreement (GA). The CA will be made available to the relevant funding organisations. The project consortium is strongly encouraged to sign this CA before the official project start date and, in any case, the CA should be signed no later than six

months after the scientific project start date. Please note that regional and national funding agencies' regulations concerning the requirement for a CA may apply. Further instructions will be provided by the JCS to the coordinators of the projects selected for funding. The Data Management Plan must be submitted to the JCS no later than three months after the scientific project start date (template to be available: https://www.thcspartnership.eu/).

12.3 Inclusion of sex, gender analysis or underrepresented populations

Applicants are strongly encouraged to integrate sex and gender[3] considerations as well as underrepresented populations (e.g. ethnic minorities, people with disabilities), or underrepresented patient sub-groups (e.g. children or elderly). This includes not only the sex distribution of research and innovation teams, but also the inclusion of sex and/or gender analysis in the research and innovation per-se. This applies especially when patients are involved in the proposal. A project is considered sex- and gender-relevant when it concerns individuals or groups of people or when its findings may affect individuals or groups.

12.4 Scientific Data Policy

Proposals should explain how the data, tools, code or algorithms gathered through the project would be available (Findable, Accessible, Interoperable and Re-usable, FAIR) to the wider research and innovation community, even after the end of the project. In addition, THCS expects proposals to develop DMPs according to international state-of-the-art standards for data security (following the FAIR principles, the General Data Protection Regulation (GDPR) and in accordance with Ethical principles for data management). The DMP represents an essential document for the implementation of the research and innovation, as it helps to define the responsibilities of research data management ahead of the start of the project. The consortia of projects selected for funding must submit a detailed DMP (template available on the THCS website). The project coordinator is responsible for sending the complete DMP to the JCS no later than three months after the official start of the project. Guidelines on FAIR data principles and guidance on strategy for data management plan were developed.

12.5 Reporting Requirements and Open Access to publications

On behalf of all participating project partners, each project coordinator shall submit annual scientific progress reports, in English to the JCS, in the first and second year, and a final scientific report of the transnational project at the end of the project duration. A report template will be provided by the JCS stating the scientific progress, the goals that have been met and corrective measures in the event that the annual project plan has not been executed. The project partners' principal investigators may also be required to submit individual reports to their respective funding agency/body in accordance with the respective regional/national regulations. In addition, project coordinators will be asked to present the project results at THCS meetings and may be invited to attend at least two status seminars. Travel expenses to attend these mandatory meetings should be included in the proposal budget plans. In

3 European Commission, Directorate-General for Research and Innovation, Horizon Europe, gender equality – A strengthened commitment in Horizon Europe, Publications Office, 2021, https://data.europa.eu/doi/10.2777/97891

case of events being organised online, all partners of the consortia will be encouraged to participate. Funded project consortia shall participate in follow-up surveys up to two years after the project has officially be ended.

The coordinator must promptly inform the JCS in case of ANY significant changes in the work plan or in the consortium composition. The JCS will inform the relevant funding organisations, who will decide upon the proper action to be taken.

Upon notification, project coordinators are required to deliver a project abstract suitable for communication and dissemination purposes.

In addition, the funding recipients are expected to participate in, and contribute to, any communication activity or evaluation surveys initiated by THCS during the funding period (mandatory) and beyond.

Publication of the scientific outcomes of the project is mandatorily subject to open access, and a corresponding budget should be allocated for this in the proposal's budget plan. Research projects funded through THCS are eligible to publish on Open Research Europe (ORE)[4], an open access publishing platform of the EC.

Importantly, all funding recipients must ensure that all outcomes (publications, etc.) of transnational THCS-funded projects include proper acknowledgement of the THCS and the respective funding partner organisations:

“This project received funding from [name of funding organisations, or an acknowledgment as requested by your regional/national funding organisation] under the frame of Transforming Health and Care Systems, THCS, (GA N° 101095654 of the EU Horizon Europe Research and Innovation Programme)”.

For any oral presentation, the EU emblem should be displayed. Moreover, the beneficiary may not appropriate the EU emblem or any similar trademark or logo, either by registration or by any other means.

13. Confidentiality

The THCS JCS takes all reasonable steps to ensure that information provided in the application is treated confidentially. The proposals will be handled confidentially by the JCS and by the regional/national funding organisations. In selecting the international experts for the PRP, the JCS shall endeavour to avoid any possible CoI. Each expert will have to sign a declaration of confidentiality and absence of CoI. In case of a CoI the reviewer will be withdrawn from evaluating the respective proposal.

4 https://open-research-europe.ec.europa.eu/

14. General data protection regulation

Applicants are informed that their personal data submitted in their application to the call are processed in accordance with article 6.1 (e) and (c) of the General Data Protection Regulation (GDPR) (2016/679), and for the purposes of

- Processing and evaluating the application where processing shall be lawful only if and to the extent that processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller;
- Administering any subsequent funding award;
- Managing the funding organisations relationship with them;
- Analysing and evaluating the call;
- Providing aggregate data to national and European surveys and analyses on the funded projects;
- Complying with audits that may be initiated by the funding organisations and the European Commission (or its agencies).

The CSC may share applicant's data with third parties (some of which may be based outside the European Economic Area) in relation to the above activities including evaluators, auditors and the European Commission (or its agencies).

The members of the CSC may link the data that funding recipients provide in the application with regional/national, bibliographic or external research and innovation funding data which are available through public subscription-based databases (e.g., Scopus, Web of Science, etc.) or other national/open datasets.

Annex I. Regional/national eligibility criteria

1.1 National Contacts

Country	Funding org.	Contact person(s)	Email	Telephone
Austria	FFG	Gerda Geyer	Gerda.Geyer@ffg.at	+43(0)577554205
Belgium	F.R.S. - FNRS	Joël Groeneveld	international@frs-fnrs.be	+32 2 504 9270
Denmark	IFD	Katrine Boeriis	internationale@innofond.dk katrine.boeriis@innofond.dk	+45 6190 5092
Estonia	ETAG	Margit Suuroja	Margit.Suuroja@etag.ee	+372 731 7360
France	ANR	Michael Joulie Florence Guillot Maria Tsilioni	THCS@anr.fr	+33 (0) 1 80 48 83 57 +33 (0) 1 78 09 80 01
France	Fr MoH	Cécile Fragny Virginie Delattre	cecile.fragny@sante.gouv.fr virginie.delattre@sante.gouv.fr	+33 (0)140564076 +33 (0)140566000
Iceland	Rannís	Bylgja Valtýsdóttir	rannis.is@rannis.is	+354 515 5800
Ireland	HRB	Siobhán Hackett	eujointprogrammes@hrb.ie	None
Israel	CSO-MOH	Netta Koren	nettakoren.moh@gmail.com	
Italy	AReSS	Francesco Fera Agata Di Candia	management@aress.regione.puglia.it a.dicandia@aress.regione.puglia.it	Office : +39 080 5403222 Mob.: +39 347 1588361
Italy	IT-MoH	Gaetano Guglielmi Chiara Ciccarelli Simona Bifolchi	g.guglielmi@sanita.it c.ciccarelli@sanita.it s.bifolchi@sanita.it	
Italy	MUR	Aldo Covello	Aldo.covello@mur.gov.it	+393755102431
Latvia	LZP	Maija Bundule Uldis Berkis	Maija.Bundule@lzp.gov.lv Uldis.Berkis@lzp.gov.lv	+371- 26514481 +371-29472349
Lithuania	LMT	Živilė Ruželė	zivile.ruzele@lmt.lt	+370 67614383
Malta	MCST	Annalisa Cartabia Christy Baldacchino	annalisa.cartabia@gov.mt christy.baldacchino.2@gov.mt General inbox:	+356 2360 2152 +356 2360 2158

			eusubmissions.mcst@gov.mt	
Netherlands	ZonMw	Denice Moi Thuk Shung Rik Wisselink	thcs@zonmw.nl	+31703495242 +31703495374
Norway	RCN	Jostein Holmgren Siv Østerås	johol@forskningsradet.no sio@forskningsradet.no	+47 96646834
Poland	NCBR	Marcin Chmielewski	thcs@ncbr.gov.pl	
Portugal	FCT	Pedro Miguel Ferreira Marta Norton	thcs@fct.pt	+351 213 924 445 +351 21 391 1565
Portugal	CCDRC	Sophie Patrício Dora Cabete	ccdrc.projects@ccdrc.pt	239 400 100
Romania	UEFISCDI	Mihaela Manole Nicoleta Dumitrache	mihaela.manole@uefiscdi.ro nicoleta.dumitrache@uefiscdi.ro	0040.21.302.38.63 0040.21.302.38.86
Scotland	Scottish Government	Donna Henderson Andrea Pavlickova	Donna.henderson2@nhs.scot Andrea.pavlickova@nhs.scot	+447807167562 +447767808688
Slovenia	MDT	Alenka Tepina	alenka.tepina@gov.si	+386 1 555 5831
Spain	AEI	Justyna Chojnacka	justyna.chojnacka@aei.gob.es	916038728
Spain	IDIVAL	Paloma Gonzalez Alvarez	Innovacion4@idival.org	
Spain	ISCIII	Cándida Sánchez Barco	cbarco@isciii.es	(+34) 91 822 20 63
Spain	CSCJA		convocatorias.fps@juntadeandalucia.es	
Sweden	Forte	Staffan Arvidsson	staffan.arvidsson@forte.se	+46708342393
Sweden	Vinnova	Anna-Carin Christoffersson Malin Eklund	anna-carin.christoffersson@vinnova.se malin.eklund@vinnova.se	+46 8 473 30 00 +46 8 473 30 00
Switzerland	Swiss National Science Foundation (SNSF)	Priyanka Parmar Clémence Le Cornec	thcs@snf.ch	

Switzerland	Innosuisse	Larissa Beutler	larissa.beutler@innosuisse.ch	+41 58 467 16 05

1.2 Austria - FFG

Austrian Research Promotion Agency (FFG) (acting on behalf of the Federal Ministry, Republic of Austria, Climate Action, Environment, Energy, Mobility, Innovation and Technology) gerda.geyer@ffg.at	
Funding commitment	1,5 Mio €
Minimum/Maximum funding per grant awarded to a project partner	Minimum funding per Austrian participation in a project (1 or more partners): 100.000 €

Eligible institutions	• Companies of any legal form, including
	  ○ Local authorities[5] and autonomous bodies,
	  ○ Non-profit making organisations such as NPOs[6]/ ”Daseinsvorsorger”/ user organisations
	• Institutions of research and knowledge dissemination
	  ○ Universities and universities of applied sciences
	  ○ Non-university research institutions
	  ○ Technology transfer institutions, innovation agents and other research-oriented organisations such as associations with a relevant purpose
	
	Funding rates:

Type of organisation	Research category Industrial research	Research category Experimental development
Small enterprise	80%	60%
Medium-sized enterprise	70%	50%

[5] Activities of local authorities falling within their statutory mandate are not eligible for funding

[6] Non-profit making organisations do not distribute profits to their owners, members or other natural persons or legal entities in accordance with their legal status or articles of association.

	Large enterprise	55%	35%
	Research institutions (non-commercial activities)	85%	60%
	Non-commercial institutions (non-commercial activities)	80%	60%
Organisations excluded from funding	It is not possible to provide funding to undertakings in difficulty[7].		
Additional eligibility criteria	Austria requires the fulfilment of the following Eligibility Criteria for Austrian participants and verifies them by means of an eligibility pre-check): • Registration at the eCall system of the FFG at https://ecall.ffg.at within the submission deadline of the Call; please consult the tutorial at https://ecall.ffg.at/Cockpit/Help.aspx; participant's cost information has to be filled in the FFG ecall proposal prior to submission deadline; • For companies: upload of the balance sheets of the last two years in the FFG eCall within the submission deadline; • FFG experts will check the financial potential (credit rating and liquidity) of the participating enterprises. Declaration of SME Status for associations and sole traders		
Eligible costs	Eligible costs must be allocable directly to the project. This means that: • they are incurred additionally to the normal operating costs during the funding period • they are in accordance with the Funding Contract • they can be evidenced by receipts For details on the eligibility of costs see the Cost Guidelines.		

[7] Undertakings in difficulty as defined in the General block exemption Regulation (EU), Allgemeine Gruppenfreistellungsverordnung (ABl. L 187 S. 19, idF ABl. L 270/39 vom 29.07.2021)

Submission of the proposal at regional/national level	Yes, see additional eligibility criteria If more than 1 Austrian partner participate in the same proposal, they will nominate one of the Austrian partners to act as the national coordinator. The duties of the national coordinator are listed in the « Leitfaden für kooperative F&E Projekte, Transnationale Ausschreibungen », Chapter 2.1 and Chapter 2.3. Contrary to Chapter 2.2 it is not mandatory that 1 enterprise must be part of the European project consortium, consequently, also the given percentages of effort of the partners are not applicable.
Submission of additional information at regional/national level	Yes, see additional eligibility criteria • For enterprises: upload of the balance sheets of the last two years in the FFG eCall within the submission deadline; • Declaration of SME Status for associations and sole traders
Further guidance	The national rules on eligible costs for Austrian participants are available from the FFG webpage at https://www.ffg.at/recht-finanzen/kostenleitfaden, Kostenleitfaden 3.1 (Cost Guidelines). Legal background for funding: FFG Technologie-Richtlinie. More information can be found in the Guidelines « Leitfaden für kooperative F&E Projekte, Transnationale Ausschreibungen » and on the FFG Call webpage under www.ffg.at/THCS_Call2

1.3 Belgium - F.R.S. - FNRS

Fonds de la Recherche Scientifique (F.R.S. - FNRS) **Joël Groeneveld (+32 2 504 9270)** **international@frs-fnrs.be**	
Funding commitment	300,000 euros
Minimum/Maximum funding per grant awarded to a project partner	300,000 euros
Eligible institutions	All eligibility rules and criteria can be found in the PINT-MULTI regulations. This call is co-funded (See article III.6). Please note that personnel costs (Article III.6) have an annual average cap of 80,000 EUR for this call.

Organisations excluded from funding	Please note that the F.R.S.-FNRS only funds Basic research (low Technology Readiness Level) carried out in a research institution from the "Fédération Wallonie-Bruxelles". The F.R.S.-FNRS will not fund industrial partners or any activity related to the private sector. Nevertheless, partners funded by the F.R.S.-FNRS can be in a consortium where there are also partners from the private sector.
Additional eligibility criteria	All eligibility rules and criteria can be found in the PINT-MULTI regulations.
Eligible costs	All eligibility rules and criteria can be found in the PINT-MULTI regulations. This call is co-funded (See article III.6). Please note that personnel costs (Article III.6) have an annual average cap of 80,000 EUR for this call.
Submission of the proposal at regional/national level	Applicants to F.R.S.-FNRS funding must provide basic administrative data by submitting an administrative application on e-space within 5 working days after the general deadline of the THCS call to be eligible. Please select the "PINT-MULTI" funding instrument when creating the administrative application. Proposals invited to the second stage will be able to complete the pre-proposal form and provide information for the full proposal upon validation by the F.R.S.-FNRS.
Submission of additional information at regional/national level	
Further guidance	https://www.frs-fnrs.be/fr/calendrier-des-appels

1.4 Denmark - IFD

Innovation Fund Denmark (IFD)

internationale@innofond.dk

Funding commitment	1.000.000 €
Minimum/Maximum funding per grant awarded to a project partner	Both a maximum funding amount and maximum funding rates apply. The maximum funding amount is 300.000 € per partner and (if there is more than one Danish partner) 500.000€ per project. Additionally, maximum funding rates apply according to IFD's Guidelines.
Eligible institutions	All public and private organizations (for profit and not for-profit)
Organisations excluded from funding	
Additional eligibility criteria	
Eligible costs	• Salaries; • Equipment (equipment, materials, etc.); • Other project-related costs (events, transportation, travel, audit costs, etc.), • External services (consultancy costs, subcontracting or services); Overhead (for the applicable rate please refer to the IFD's Guidelines)
Submission of the proposal at regional/national level	Usually 2-4 weeks after the proposal submission deadline, Danish applicants will receive and invitation to upload the proposal to the e-grant system. Private companies will be requested further documentation, which can be found under Documents.

Submission of additional information at regional/national level	
Further guidance	Link to IFD Guidelines: https://innovationsfonden.dk/sites/default/files/2022-03/Guidelines%20for%20international%20programmes%202.%20marts%202022%20.pdf Additional documents: https://innovationsfonden.dk/en/p/international-collaborations

1.5 Estonia - ETAG

Estonian Research Council (ETAG) **Margit Suuroja** **Margit.Suuroja@etag.ee** **+372 731 7360**	
Funding commitment	300 000 EUR
Minimum/Maximum funding per grant awarded to a project partner	150 000 EUR if the Estonian participant is a partner in a consortium. 300 000 EUR if the Estonian participant is coordinating a consortium.
Eligible institutions	The Host Institution may be any legal entity that is registered and located in Estonia and has an Estonian bank account. If the Host Institution is a for-profit institution, the State aid and de minimis aid regulations must be taken into account.
Organisations excluded from funding	

Additional eligibility criteria	The Principal Investigator: 1. must have an updated public profile in the Estonian Research Information System (ETIS) by the submission deadline; 2. must hold a doctoral degree or an equivalent qualification. The degree must be awarded by the submission deadline of the grant application at the latest; 3. must have published at least three articles that comply with the requirements of Clause 1.1 of the ETIS classification of publications, or at least five articles that comply with the requirements of Clauses 1.1, 1.2, 2.1 or 3.1, within the last five calendar years prior to the proposal submission deadline. International patents are equalled with publications specified under Clause 1.1. A monograph (ETIS Clause 2.1) is equalled with three publications specified in Clause 1.1 if the number of authors is three or fewer. If the applicant has been on pregnancy and maternity or parental leave or performed compulsory service in the Defence Forces, or has another good reason, they can request the publication period requirement to be extended by the relevant period of time. If the Principal Investigator has received the PhD degree outside Estonia, its correspondence to an Estonian doctoral degree must be recognised by either the Estonian ENIC-NARIC Center or the Host Institution in accordance with the Regulation of the Government of the Republic of April 6, 2006, No. 89 "Evaluation and academic recognition of documents proving foreign education and the name of the qualification awarded in the foreign education system terms and conditions of use". The Funding Organisation may ask for a relevant Evaluation Report. If several Estonian institutions participate in a proposal, all institutions must have a Principal Investigator who meets the national eligibility requirements. If human research or animal testing are intended in the project, a positive resolution by the Human Research Ethics Committee or the Authorisation Committee for Animal Experiments must be submitted to the Funding Organisation by the start of the relevant activities.

Eligible costs	**Direct costs** 1. Personnel costs are monthly salaries with social security charges and all other statutory costs of the project participants, calculated according to their commitment and in proportion to their total workload at their Host Institution. 2. Other direct costs are: - travel costs that may cover expenses for transport, accommodation, daily allowances and travel insurance only for travels abroad; - consumables and minor equipment related to the project; - publication and dissemination of project results; - organising meetings, seminars or conferences (room rent, catering); - fees for participating in scientific forums, conferences and other events related to the project; - patent costs; - all other costs that are identifiable as clearly required for carrying out the project (e.g. translation, copy editing, webpage hosting, etc.) and comply with the eligible costs. **Subcontracting costs** should cover only additional or complementary research related tasks (e.g. analyses, conducting surveys, building a prototype, etc.) performed by third parties. The activities and budget should be described in the proposal. Core project tasks should not be subcontracted. Subcontracting costs may not exceed 15% of the total costs. **Indirect costs (overhead)** may not exceed 15% of the personnel costs and should cover the general expenses of the Host Institution. Costs for equipment and services intended for public use (e.g. a copy machine or a printer that is publicly used, phone bills, copy service, etc.) should be covered from the overhead. Double funding of activities is not acceptable. If several Estonian institutions participate in one proposal, the sum of their requested budgets may not exceed the maximum contribution of the respective national Funding Organisation

	indicated in the call documents. EU Regulations on State aid and de minimis aid must be taken into account when requesting funding.
Submission of the proposal at regional/national level	No
Submission of additional information at regional/national level	After the submission deadline (after the preproposal deadline) and upon the notice from the Funding Organisation, the Host Institution must confirm to the Funding Organisation in the written form that the project can be carried out on their premises in Estonia and that they will employ the Principal Investigator during the proposed project, should the project receive funding. If the Host Institution is a for-profit institution, the State aid and de minimis aid form must be filled in also.
Further guidance	https://etag.ee/wp-content/uploads/2022/07/Vastavusnouded-RV-uhiskonkurssidel_-EN_veebr.2023.pdf

1.6 France - ANR

Agence Nationale de la Recherche THCS@anr.fr	
Funding commitment	1 500 000 €
Minimum/Maximum funding per grant awarded to a project partner	• Minimum: 15 000 € • Maximum for a partner: 300 000 € • Maximum for a coordinator: 350 000 €

Eligible institutions	ANR may fund research organisations and undertakings, as defined by the EC regulation on State aid for research, development and innovation (see the ANR funding regulations for further reference). As for research organisations, only those that have their primary establishment in France may be funded. As for undertakings, those that have their real head office in an EU member State and having an establishment (primary or secondary) in France may be funded. Within this framework, public research institutions (such as EPST, EPIC, Universities) as well as foundations can apply, in general for up to 100% of direct costs. This list is not comprehensive and funding rates vary. Enterprises may also be eligible: Funding rates vary based on the types of research and types of enterprises. For fundamental research, maximum funding rates are 45% of total costs for SMEs, 30% for larger companies. Please consult https://anr.fr/fr/rf/ for full details. Private partners are asked to indicate their SIRET number in the pre- and full-proposal template (partner description: “Project Consortium”, “Other information”).
Organisations excluded from funding	Healthcare institutions. Please see with the French Ministry of Health.
Additional eligibility criteria	• Submission of the proposal at the national level: No • Submission of other information at the national level (e.g. bioethics approval): No • ANR prohibits double applications and double funding and will not finance projects or parts of projects that have been funded through other calls. ANR will cross-check the proposals submitted to ANR through the national and international calls for possible demands of double funding. • Large clinical trials are not funded by ANR.
Eligible costs	Eligible costs and rates of funding depend on the type of partners. Among others, eligible costs may include the following: personnel costs; equipment costs; consumables and animal costs; travel and subsistence costs; sub- contracting costs. For public research organisations, only personnel costs of fixed-term contracts are eligible (except for an EPIC in partnership with

	an enterprise). The ANR heading for «overheads» in the ANR financial regulations is «frais d'environnement». 14.5% of the total eligible costs must be applied for if the partner is a public research organisation (or other organisation funded at "marginal" costs), or up to 68% of the total personnel costs and up to 7% of other costs for partners funded at full economic cost (such as enterprises). Please refer to ANR's financial regulations ("Règlement financier" ANR: https://anr.fr/fr/rf/) for full details.
Submission of the proposal at regional/national level	No
Submission of additional information at regional/national level	No
Further guidance	Funding regulations: https://anr.fr/fr/rf/ ACCESS TO GENETIC RESOURCES AND BENEFIT-SHARING: Funded Partners participating in projects falling within the scope of the regulations on access to genetic resources and benefit-sharing (Nagoya protocol) will be required to provide evidence to demonstrate compliance with these obligations and must ensure that all data relating to such genetic resources or associated traditional knowledge are kept in order to demonstrate that the necessary due diligence has been exercised.

1.7 France - Fr MoH

Ministère chargé de la santé / French Ministry of Health - Fr MoH

cecile.fragny@sante.gouv.fr

virginie.delattre@sante.gouv.fr

Funding commitment	€4 500 000
Minimum/Maximum funding per grant awarded to a project partner	Minimum funding per grant awarded to a partner : 10 000 €
Eligible institutions	French ministry of Health (Fr MoH) funds French healthcare institutions defined by public health regulation articles L.611-1 and further, L.6141-1 and further, L6161-1 and further (*établissements de santé*), L6133-1 to 8 (*groupements de coopération sanitaire*), L6323-3 (*maisons de santé*) and L6323-1 (*centres de santé*) of the *Code de la Santé Publique.* They can apply for up to 100% of total costs.
Organisations excluded from funding	French user organisations are not directly eligible. They can be funded as sub-contractor of a French partner and if they fulfil the eligibility criteria of the EC.
Additional eligibility criteria	A partner must be composed of a physical leader and of a health care institution, which manages the financing. The physical leader must be contractually linked to a healthcare institution and get its approval to be part of the project. For example, leaders can be private health professionals if they have a binding agreement with a French healthcare institution. Minimum funding per awarded to a partner : 10 000 € They is no maximum funding per partner. Fr MoH will avoid double funding and will not finance projects or parts of projects that have been funded through other calls.
Eligible costs	Funds are reserved for the exclusive use of French healthcare institutions involved in the project. Transfer for part of these funds to other French structures, organisations or physical or legal person may be allowed provided they are not eligible for funding by another financing body of the partnership. The healthcare institution would also have to demonstrate that they do not have the necessary skills. If so, public tenders rules including call of bides applies. Investment expenses giving rise to depreciation are not eligible. Management costs up to 10% of personal expenses are eligible.
Submission of the proposal at regional/national level	The certificate and budget grid available on Fr MoH website page must be fulfilled and send before submission deadline. See online for further instructions.

Submission of additional information at regional/national level	
Further guidance	Funds delegation will be performed through budgetary circulars of the Fr MoH. Funds will be allowed regarding project progression.

1.8 Iceland - Rannis

Icelandic Centre for Research (Rannis) rannis.is@rannis.is	
Funding commitment	€300.000
Minimum/Maximum funding per grant awarded to a project partner	No minimum/Maximum 300.000€
Eligible institutions	University, Research organisation, SME, User organisations
Organisations excluded from funding	None
Additional eligibility criteria	HANDBOOK FOR THE STRATEGIC RESEARCH AND DEVELOPMENT PROGRAM 2020-2023 SOCIETAL CHALLENGES
Eligible costs	Salaries, operating expenses, publishing expenses, equipment, sub-contracting, overhead
Submission of the proposal at regional/national level	Yes, submission system is being prepared and will be ready in the coming weeks.

Submission of additional information at regional/national level	
Further guidance	https://www.rannis.is/media/markaaetlun-samfelgagslegar-askoranir/SRDP_SC-Handbook-2020-2023.pdf

1.9 Ireland - HRB

Health Research Board (HRB)
eujointprogrammes@hrb.ie

Funding commitment	€430,000 (inclusive of overheads) for partners This may be raised to €530,000 if funding a coordinator
Minimum/Maximum funding per grant awarded to a project partner	€430,000 (inclusive of overheads) for partners This may be raised to €530,000 for coordinators
Eligible institutions	Recognised HRB Host Institutions (Policy on Approval of HRB Host Institutions).
Organisations excluded from funding	Any organisation that is not a HRB Host Institution (see above). HRB does not fund Enterprise organisations. Organisations providing services for the project can be paid by the Host Institution via running costs. Any procurement activities should adhere to national and EC procurement guidelines.
Additional eligibility criteria	Irish Partner(s) are not eligible for HRB funding for: • Proposals involving basic biomedical research. • Research intended to create human embryos solely for the purposes of research or for the purposes of stem cell procurement, including by means of somatic cell nuclear transfer. • Applications from individuals applying for, holding, or employed under funding received from the tobacco industry; • Applications from individuals applying for, holding, or employed under funding received from the alcohol industry and related actors.

	Please see HRB's dedicated scheme page on HRB's funding page for guidance and FAQs specific to applicants based in Ireland.
Eligible costs	Funding available is inclusive of overheads and pension contributions and will cover research-related costs, including: • Salary related costs • Direct running costs • Patient and Public Involvement (PPI) costs • Small equipment costs (€10,000) • Travel • FAIR data management costs • Dissemination and knowledge exchange costs For consortium coordinators, the additional €100,000 must be allocated to coordination-specific activities and cannot cover equipment or consumables. For more information, please see HRB's guidance on the dedicated scheme page on HRB's funding page.
Submission of the proposal at regional/national level	There is no requirement to submit the proposal to HRB. See below for additional documentation that will be required.
Submission of additional information at regional/national level	The below documentation is required on submission (links and templates are provided on HRB's funding page): • New applicants to HRB for Joint Transnational Calls must submit a short form at submission to provide details on PI's track record for eligibility checks. • Applicants will have to complete HRB's Budget and Deliverables templates. A letter of support will be required at submission stage for any Lead Applicants who do not have a permanent post at a HRB Host Institution. Please refer to the guidance on the HRB scheme page for further information.
Further guidance	All Irish partners who are undertaking feasibility and/or interventional studies must adhere to the HRB Clinical Trial and Interventions Research Governance Policy. HRB grant holders are required to submit grant reports as outlined in their grant contracts and the most recent HRB General Terms and Conditions for Research Awards. These include Annual and Final reports. See HRB's funding page for detailed guidance.

1.10 Israel - CSO-MOH

Chief Scientist office, Ministry of Health (CSO-MOH) http://www.health.gov.il/	
Funding commitment	Up to 300,000 €, depending on budget availability
Minimum/Maximum funding per grant awarded to a project partner	Up to 140,000 € Additional 20,000 € for coordination
Eligible institutions	
Organisations excluded from funding	
Additional eligibility criteria	Position in a university, research center or hospital. Research authority must approve position prior to submission. PI should hold a Ph.D., M.D., D.M.D., D. Sc or equivalent degree and employed by an eligible institution. Research will not be funded simultaneously by CSO-MOH on more than one grant (Era-NET or national). Researchers can not apply for more than one grant from any ERA-NET funded by CSO-MOH or submit more than one proposal for any programme.
Eligible costs	Materials and consumables; Travel and hosting (up to 10%); No salaries for applicants; No heavy equipment, Institutional overhead 10%.
Submission of the proposal at regional/national level	Prior to submission, researchers will submit to CSO-MOH an abstract approved by their research authority including budget distribution. No submission of abstract can result in declaration of the consortium as ineligible.

Submission of additional information at regional/national level	If the application involves human or animal experiments, bioethics approvals must be submitted with the application or up to 4 months later.
Further guidance	Please see detailed instructions of application at the national level and reporting at http://www.health.gov.il/research-fund

1.11 Italy - AReSS

Agenzia Regionale per la Salute ed il Sociale (ARESS) **management@aress.regione.puglia.it**	
Funding commitment	€60.000
Minimum/Maximum funding per grant awarded to a project partner	Maximum funding per awarded to a partner: AReSS has a maximum funding per partner for this call: a research team can be funded with a maximum amount of 30.000 € for a coordinating Partner and 15.000 € for a simple partner.
Eligible institutions	AReSS can finance only legal persons with legal and/or operational headquarters in Puglia falling into the following categories: • SMEs • Universities (public and private) • Research institutions (public and private) • Research organizations (public and private) in compliance with the EU Reg. no. 651/2014 of the European Commission - 17 June 2014. • Other private subjects who carry out research activities in the sector of interest for the tender as well as end users whose contribution is functional to the achievement of the project objectives Patient organisation can be funded as a partner if they perform research activities. Otherwise, patient organisation can be funded as sub-contractor of an Italian partner and if they fulfil the

	eligibility criteria of the EC. AReSS cannot finance natural persons.
Organisations excluded from funding	
Additional eligibility criteria	Maximum funding per awarded to a partner: AReSS has a maximum funding per partner for this call: a research team can be funded with a maximum amount of 30.000 € for a coordinating Partner and 15.000 € for a simple partner. • Submission of the proposal at the national level: No • Submission of other information at the national level (e.g. bioethics approval): No • AReSS will avoid double funding and will not finance projects or parts of projects that have been funded through other calls. • AReSS will cross-check the proposals submitted to AReSS through the national and international calls for possible demands of double funding. • Large clinical trials are not funded by AReSS.
Eligible costs	
Submission of the proposal at regional/national level	
Submission of additional information at regional/national level	

Further guidance	Decreto-Legge 22 giugno 2012, n. 83, convertito, con modificazioni, dalla Legge 7 agosto 2012, n. 134, articoli 60, 61, 62 e 63 di cui al Titolo III, Capo IX "Misure per la ricerca scientifica e tecnologica" Decreto Ministeriale n. 1314 del 14 dicembre 2021 - Nuovo sistema di concessione delle agevolazioni del MUR alle attività di ricerca Decreto Ministeriale n. 1368 del 24 dicembre 2021 - Modificazioni all'articolo 15 del decreto n. 1314 del 14 dicembre 2021

1.12 Italy - IT-MoH

Italian Ministry of Health (IT-MoH) coordination@thcspartnership.eu	
Funding commitment	6.000.000
Minimum/Maximum funding per grant awarded to a project partner	Max 400.000 per project. Anticipated number of fundable proposals: 15.
Eligible institutions	Only IRCCS (Istituti di Ricovero e Cura a Carattere Scientifico) researchers are eligible to apply.
Organisations excluded from funding	Universities, other research Institutes, companies
Additional eligibility criteria	Simultaneous PI participation in different 2023 JTCs funded by the Ministry of Health is not allowed. No more than two Italian PIs (Principal Investigators) are eligible to apply for the same project. Italian PAOs can be funded as a sub-contractor of an IRCCS if they fulfil the eligibility criteria of the EC. The maximum cost eligible for a sub-contract is 25.000 Euros (from the IRCCS Budget). Italian PAOs can still participate in Consortia as “Collaborators” with their own funds.

Eligible costs	Direct Costs: • Personnel (only temporary contracts, max 50%); • Consumables; • Animals; • Equipment (only on hire); • Travel (max 10%); • Documentation (Max 1%) Indirect Costs: • Overhead (max 10%, included in the total); Other indirect costs are not eligible. Transfer of eligible funds abroad is not allowed. **Subcontracts are allowed only upon approval, by presenting via Workflow – code ER, a request together with the National preelegibility form, the latest 20 days before the deadline of the pre-proposal submission.**
Submission of the proposal at regional/national level	In order to expedite the eligibility check process, the Ministry of Health will grant an eligibility clearance to the applicant prior to the submission of the proposals. To this end, it is mandatory that the applicants fill out and return to the IT-MoH a pre-submission eligibility check form through their IRCCS, using WFR System-> ER communication code, before submitting their proposal to the Joint Call Secretariat. It is strongly recommended that the form, completed and duly signed, is returned at least 10 working days before the proposal submission deadline. Applicants will be sent written notification of their eligibility status. Changes in acronyms and budgets provided in the pre-submission eligibility check are not allowed. The pre-eligibility form can be downloaded here: https://www.salute.gov.it/imgs/C_17_pagineAree_4441_0_file.pdf
Submission of additional information at regional/national level	
Further guidance	Submission of annual scientific and financial reports at the national level will be required according to the rules of the Ministry of Health (Ricerca Corrente). Further information on the rules of the Ministry of Health can be requested to the national contact persons.

1.13 Italy - MUR

Ministero dell'Università e della Ricerca (MUR) Aldo.covello@mur.gov.it	
Funding commitment	€2 000 000
Minimum/Maximum funding per grant awarded to a project partner	Minimum funding per project: € 100.000 (not per partner) Maximum funding per project: € 250.000 (not per partner)
Eligible institutions	The following entities are eligible for funding, providing that they have stable organization in Italy: 1. Universities; 2. Enterprises; 3. Private and Public research institutions 4. Research organizations (public and private) in accordance with EU Reg. n. 651/2014 of the European Commission - June 17, 2014.
Organisations excluded from funding	
Additional eligibility criteria	**Legal/administrative/financial conditions** The participant must not be defaulting with regard to other funding received by the Ministry. The participant must not have requested/got any other funding for the same research activities. The participant must respect the Italian law "D.Lgs. n 159 del 6/09/2011 e successive modificazioni ed integrazioni". The participant must not be subject to bankruptcy proceedings as of art. 5, comma 4, letter b) of DM 593/2016 or must not be a company in difficulty according to the definition under number 18) of article 2 "Definitions" of Regulation (EU) no. 651/2014. The participant must follow the obligations laid down in the contributory and social security regulations (DURC). The judicial and pending records of the legal representative of the participant are negative. **Financial conditions** For any participant, with the exception of public universities and public research institutions (Enti pubblici di ricerca), the following financial criteria, calculated using the data reported in the last approved balance sheet, must be fulfilled.

	CN > (CP – I)/2 Where: CN = net assets (Capitale netto) CP = sum of the costs of all the projects for which public funding has been requested by the participant during the year. I = sum of the contributions received, approved or requested for the same projects. OF/F < 8% Where: OF = financial charges (Onerifinanziari) F = turnover (Fatturato)
Eligible costs	All activities classifiable as Basic research, Industrial research and Experimental development are eligible for funding. Furthermore, Basic Research and Industrial research activities must be predominant with respect to Experimental development activities (in terms of costs). All costs incurred during the lifetime of the project under the following categories are eligible: Personnel, Equipment, Consulting and equivalent services, Travels, Consumables and Overheads. Overheads ("Spese generali") shall be calculated as 25% of the direct costs. Dissemination and coordination costs are to be included in the overheads. The amount of funding which can be granted to each beneficiary is calculated multiplying the eligible costs for the funding rates listed in the following table: Basic research: 70% Industrial research: 70% Experimental development: 25% On request of applicants a pre-payment may be done, equal to 80% of the total funding after the signature of the grant agreement. The remaining 20% will be paid at the end of the project. Private partners requesting the pre-payments need to provide MUR with a bank guarantee. Beneficiaries who doesn't request the pre-payments will be paid after each financial and progress report**.**

Submission of the proposal at regional/national level	In addition to the project proposal, which shall be submitted at European level, the Italian participants are requested to submit further documentation to MUR, through the national web platform, available at the following link: https://banditransnazionali-miur.cineca.it These national additional documents must be submitted by the same deadline established for the proposal phase submission as defined in the international call. Any participant who does not submit its national documents by the deadline of the proposal phase will be considered not eligible for funding. The complete list of criteria and provisions legally valid, which must be respected by all the Italian participants, is included in the "Avviso integrativo nazionale", to be published on the dedicated web page on MUR website: http://www.ricercainternazionale.miur.it/era/european-partnership-2021-27/thcs.aspx
Submission of additional information at regional/national level	
Further guidance	Information available at http://www.ricercainternazionale.miur.it/era/european-partnership-2021-27/thcs.aspx

1.14 Latvia - LZP

Latvian Council of Science (LZP) **lzp@lzp.gov.lv**	
Funding commitment	€600 000
Minimum/Maximum funding per grant awarded to a project partner	Maximum funding for a Latvian partner eligible for funding by LCS is 100.000 EUR/ per year Maximum 2 partners funded by LCS per project allowed

Eligible institutions	1) Research institutions registered in the Latvian Registry of Scientific Institutions, e.g. - Research Institutes - Universities And must have the status of Research and knowledge dissemination organization (Regulation EC 651/2014) 2) Business enterprises entered in the Latvian Commercial registry as companies, assumed they are eligible to do the specific research and have specific capacity and resources to do the research in Latvia and have their main activity in Latvia. Limitations of EU legislation apply (R651/2014) together with financial reporting requirements, in this case this is state aid. Two previous statements with sworn auditor's approval should be provided and they must reflect the correspondence to the regulation as well as evidence of previous scientific activity and presence of capacity. LCS is funding only legal persons.
Organisations excluded from funding	All entities not listed under eligible institutions are ineligible to be funded by LCS.
Additional eligibility criteria	**To receive funding by LCS, Consortium agreement duly signed should be presented. Enterprises shall provide audited statements of 2 previous closed financial periods on request.** **Audits according to the LCS regulations.**
Eligible costs	Personnel costs incl. taxes; 1. Consumables; 2. Subcontracts (up to 25% of direct costs), needs detailed justification, includes all external services, project core activities cannot be subcontracted; 3. Equipment (only depreciation costs during project directly attributable to project tasks); 4. Replaceable and fully consumable during project elements of equipment (e.g. electrodes); 5. Travels (according to travel plan); Indirect costs (up to 25% of direct costs excluding subcontracting).

Submission of the proposal at regional/national level	No national submission during application process
Submission of additional information at regional/national level	No national submission during application process
Further guidance	Support is provided according to Provisions Nr 259, 26.05.2015 of the Latvian Cabinet of Ministers (http://likumi.lv/ta/id/274671-atbalsta-pieskirsanas-kartiba-dalibaistarptautiskas-sadarbibas-programmas-petniecibas-un-tehnologiju-joma) These provisions should be respected without exceptions. The maximum rates should respect the Provisions. The requirements in the provisions to specific applicant groups must be respected. LCS cannot fund implementation support, nor training activities. LCS is funding only research.

1.15 Lithuania - LMT

Lietuvos mokslo taryba / Research Council of Lithuania (LMT) zivile.ruzele@lmt.lt	
Funding commitment	300 000 Eur
Minimum/Maximum funding per grant awarded to a project partner	Within a single project proposal, the maximum funding for Lithuanian applicants in one project can be up to EUR 150 000 for a single mere Lithuanian partner, up to EUR 200 000 for a Lithuanian coordinator/2 eligible mere partners in a single consortium or up to 250 000 for a Lithuanian coordinator plus 1 eligible mere partner in a single consortium.

Eligible institutions	- Lithuanian research and education institutions: Universities, Research centres (listed in the Register of Ministry of Education, Science and Sports of Republic of Lithuania) - Public health care institutions: University hospitals, other public hospitals. Any private or public legal entity can be associated partner of the eligible institution. Lithuanian patient organization or any private or public legal entity can be funded as a sub-contractor of a Lithuanian eligible partner institution or can be associated partner of the eligible partner institution
Organisations excluded from funding	Non-eligible organisations
Additional eligibility criteria	- Principal investigator must be a scientist (person holding a PhD degree) - Each principal investigator can submit only 1 (one) proposal as project coordinator or as simple partner - A person can apply as a principal investigator, if he is not subject to the restrictions set out in Clause 44.2 and Clauses 76-80 of the general rules for competitive financing of research and dissemination projects of the Lithuanian Research Council or in other legal acts of the Council to consider his applications The minimum work load of the principal investigator in the project must be at least 20 hours multiplied by the duration of the project in months.
Eligible costs	Direct costs: personnel, travel, purchase (assets, services, consumables), subcontracting. Overheads (indirect costs): up to 20 % from direct costs.
Submission of the proposal at regional/national level	Not required

Submission of additional information at regional/national level	Not required
Further guidance	By national contact point National call text that can be found: https://lmt.lrv.lt/lt/kvietimai/

1.16 Malta - MCST

Malta Council for Science and Technology (MCST) annalisa.cartabia@gov.mt	
Funding commitment	€ 500,000
Minimum/Maximum funding per grant awarded to a project partner	The maximum amount that national partner/s can jointly request per project is €500,000.
Eligible institutions	• Malta-based applicants that are Eligible Undertakings, with an Operating Base in Malta, which plans to carry out Fundamental, Industrial Research and/or Experimental Development projects are eligible for funding, subject to the terms and conditions laid out in the latest version of the National Rules for Participation (State Aid). Eligible Undertakings can be: a) a partnership constituted under the Companies Act, being a partnership *en nom collectif*, *en commandite* or a limited liability company; or b) be duly registered as a co-operative society under the Co-Operative Societies Act, c) professional body; d) NGO; or f) Non-profit making entity (including Foundation). • Any Public Entity or Public Research or Knowledge-Dissemination Organisation registered in Malta, that do not carry out an economic activity within the meaning of Article 107 TFEU, will be eligible for funding subject to the terms and conditions laid out in the latest version of the National Rules for Participation (Non-State Aid).

Organisations excluded from funding	Further information can be found in the detailed National Rules accessible from the MCST website: https://mcst.gov.mt/funding-opportunities/
Additional eligibility criteria	Further information can be found in the detailed National Rules accessible from the MCST website: https://mcst.gov.mt/funding-opportunities/
Eligible costs	Eligible costs and rates of funding depend on the type of the Malta-based entities and the funding route chosen. Eligible costs include the following: personnel; instruments, specialised equipment, and research consumables; IP and knowledge transfer activities; travel and subsistence; subcontracted activities; overheads and other operating expenses. Further information can be found in the detailed National Rules accessible from the MCST website: https://mcst.gov.mt/funding-opportunities/
Submission of the proposal at regional/national level	The **national application form together with the required annexes** can be downloaded from the MCST website (https://mcst.gov.mt/funding-opportunities/) and must be sent to **eusubmissions.mcst@gov.mt** by the deadline specified in the detailed National Rules.
Submission of additional information at regional/national level	The **national application form together with the required annexes** can be downloaded from the MCST website and must be sent to **eusubmissions.mcst@gov.mt** by the deadline specified in the detailed National Rules. For any further information and assistance with partner search, applicants can contact the MCST lead call manager Dr Annalisa Cartabia (**annalisa.cartabia@gov.mt**) and/or the alternate call manager Ms Christy Baldacchino (**christy.baldacchino.2@gov.mt**).
Further guidance	Further information and detailed National Rules can be found on the MCST website (https://mcst.gov.mt/funding-opportunities/).

1.17 The Netherlands - ZonMw

Zorgonderzoek Nederland (ZonMw) THCS@Zonmw.nl	
Funding commitment	€1.700.000
Minimum/Maximum funding per grant awarded to a project partner	The maximum financial contribution for Dutch partners in **one project** is €250.000 in total. If a Dutch partner has the coordination role the maximum contribution for the total project is €300.000
Eligible institutions	Universities, universities of applied sciences, health authorities, research institutes, SME, user organisations, NGOs, public sector, municipalities.
Organisations excluded from funding	Large enterprises
Additional eligibility criteria	**End-user involvement :** For Dutch applicant it is mandatory that an end-user organization is involved in the consortium. **State Aid**: No grants will be awarded by ZonMw if this would or could constitute unlawful state aid. Therefore, the following state aid measure applies to this funding round: Exemption Decision for Services of General Economic Interest (SGEI). For the purposes of this call for grant applications, ZonMw will consider proposed project activities as SGEI. This means that there are specific conditions for funding and rules for budgets. Read more here about the specific conditions of the SGEI Exemption Decision. **Note: Together Dutch project partners are expected to co-finance 25% of their total costs.** ZonMw will avoid double funding and will not finance projects or part of projects that have been funded through other calls.

	• ZonMw will cross-check the proposals submitted to ZonMw through the national and international calls for possible demands of double funding.
Eligible costs	The following costs are eligible: - staff costs - Travel costs - material/ equipment and consumer goods - Dissemination and knowledge exchange costs - Datamanagament / data steward - Open access costs with a maximum of € 5000,-/project **There will be a maximum of € 250 000 euro for the Dutch partners in a consortium. Note that if a Dutch partner has the coordinator role the maximum available contribution is €300.000 per project**. For more information, please consult the ZonMw terms and conditions or your national contact person.
Submission of the proposal at regional/national level	**Not at central submission stage.** Only proposals recommended for funding will be invited by ZonMw at a later stage to submit an additional application. - Funded projects will be subject to standard ZonMw Grants Conditions. - Make sure to consult the ZonMw Open Access publication and Data management policies.

Submission of additional information at regional/national level	No
Further guidance	Awarded projects will need to deliver a Consortium Agreement (CA) and a Data Management Plan. With regards to the Consortium Agreement ZonMw requests a copy of the CA, signed by all partners, within 3 months after the project start date.

1.18 Norway - RCN

Norges Forskningsradet (RCN) johol@forskningsradet.no sio@forskningsradet.no	
Funding commitment	22 000 000 NOK (approx. €2 000 000)
Minimum/Maximum funding per grant awarded to a project partner	Maximum €300.000 / Norwegian participant. If the participant has coordinator role, max €400.000.
Eligible institutions	Universities, health authorities, research institutes, SME, industry/large enterprises, user organisations, NGOs, public sector, municipalities.
Organisations excluded from funding	The Research Council cannot award support to an enterprise that is defined as an “undertaking in difficulty” under the state aid rules (see the “Definition of ‘undertaking in difficulty’” on our website). "Enkeltpersonforetak", that is Norwegian companies with sole proprietorship can only participate as subcontractor, and have the role as partner (beneficiary) in projects.
Additional eligibility criteria	Clinical research/trials and translational studies allowing rapid implementation into public health-related decisions or into the clinic are encouraged. All applicants and partners must comply with the State Aid rules. All projects are to be carried out as effective collaboration

	between the partners. Undertakings (companies) that participate in the consortium must also not receive indirect state aid in the form of advantageous conditions for cooperation with the research institutions taking part in the consortium. SME or industry/large enterprise partners are funded with up to 50% of their eligible project costs. Conditions for awarding state aid (forskningsradet.no)
Eligible costs	Described here: What to enter in the project budget (https://www.forskningsradet.no/en/financing/how/budget/). Note that the cost category "Procurement of R&D services" will not be used in this call. Funding to Norwegian SMEs and Industry will be provided according to the State aid rules. More information here: Conditions for awarding state aid (https://www.forskningsradet.no/en/state-aid/)
Submission of the proposal at regional/national level	
Submission of additional information at regional/national level	Yes, after the evaluation process, if the project is retained for funding,
Further guidance	Please refer to the guidelines for applicants.

1.19 Poland - NCBR

Narodowe Centrum Badań i Rozwoju (NCBR) thcs@ncbr.gov.pl	
Funding commitment	1 450 000 EUR

Minimum/Maximum funding per grant awarded to a project partner	Maximum funding per grant awarded to a project partner - 400 000 € per project
Eligible institutions	• Enterprises[8] - Micro, Small, Medium and Large; • Research organisations[9] ; • Groups of entities composed of at least two enterprises, • Groups of entities composed of at least one research organisation and at least one enterprise, • Group of entities composed of at least two research organisations.
Organisations excluded from funding	Other than above
Additional eligibility criteria	• Entities must be established as a legal person[10] and must conduct its business, R&D or any other activity on the territory of the Republic of Poland, confirmed by an entry into the relevant register[11]. • For enterprises it is strongly advised to state in the Pre-proposal application form the KRS number of the enterprise and the size of the enterprise (micro/small, medium, large); • A condition for the participation of a group of entities as the Applicant in the competition is its formal existence on the date of submission of the pre-proposal, confirmed by its members concluding, at least conditionally, agreement on the creation of a group of entities; Please note that group of entities counts as at least two project partners from Poland (it meets the limit on the number of participants from the same country, please refer to call text for details); • Funding quota of Polish participants can be up to 100% for research organisations. In the case of enterprises, funding quota will be decided on a case-by-case basis depending on the size of the company, type of research/development, risk associated with the research activities and commercial perspective of exploitation, under the Regulation of the Minister of Science and Higher Education of 19 August 2020 on criteria and rules on granting state

[8] defined in Annex I to Commission Regulation (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty (hereinafter referred to as “Commission Regulation (EU) No 651/2014”);

[9] Defined in Commission Regulation (EU) No 651/2014;

[10] Legal person (juridical person) - an entity that is capable of having and amend legal rights and obligations within a certain legal system, such as to enter into contracts, sue, and be sued, excluding natural persons;

[11] if applicable.

<table>
<tr><td></td><td>aid by the National Centre for Research and Development, published in Journal of Laws item 1456, 2020;
• Please note that group of entities counts as at least two project partners from Poland (it meets the limit on the number of participants from the same country, please refer to call text for details).</td></tr>
<tr><td>Eligible costs</td><td>The eligible costs shall be the following:

1. personnel costs;

2. operating costs;

3. cost of contractual research; this cost type cannot account for more than 70% of all eligible costs of a project;

4. additional overheads incurred indirectly as a result of the research project; that costs are:

- in case of research organisations exactly 25% of eligible project costs and are counted as a multiplication by percentage given above and the rest of direct costs, excluding subcontracting (3); It means 4 = (1+2)*25%

- in case of enterprises exactly 20% of eligible project costs and are counted as a multiplication by percentage given above and the rest of direct costs; It means 4 = (1+2+3)*20%

Please refer to cost eligibility guide (przewodnik kwalifikowalności kosztów) for details. Guide is available here: https://www.gov.pl/web/ncbr/thcs-ii-konkurs-jtc-2024

<table>
<tr><th></th><th>Large Enterprises</th><th>Medium Enterprises</th><th>Small Enterprises</th><th>Research organizations</th></tr>
<tr><td>Fundamental/Basic Research</td><td>Not eligible</td><td>Not eligible</td><td>Not eligible</td><td>Not eligible</td></tr>
<tr><td>Industrial/Applied Research</td><td>Up to 50 + 5/15/25 (max 75 %)</td><td>Up to 50 + 10 + 5/15/25 (max 80 %)</td><td>Up to 50 + 20 + 5/15/25 (max 80 %)</td><td>Up to 100%</td></tr>
<tr><td>Experimental development</td><td>Up to 25 + 5/15/25 (max 50 %)</td><td>Up to 25 + 10 + 5/15/25 (max 60 %)</td><td>Up to 25 + 20 + 5/15/25 (max 70 %)</td><td>Up to 100 %</td></tr>
</table>

Only Industrial/Applied Research and Experimental Development will be funded. Other type of activities (e.g. coordination, dissemination, management) is not eligible for funding as separate research tasks in the project schedule but can be eligible as part of R&D tasks.</td></tr>
</table>

Submission of the proposal at regional/national level	After international evaluation of full proposals and the selection of projects to be funded, Polish participants will be invited to submit a National Application Form (NAF). The NAFs will be examined for the appropriateness of funding requested. The Polish participants are obliged to use the rate of exchange of the European Central Bank dated on the day of opening of the call.
Submission of additional information at regional/national level	-
Further guidance	Sample documents are available at: https://www.gov.pl/web/ncbr/wniosek-krajowy We encourage you to learn about and use our "PartFinder" (Partner Search Tool), which allows you to match science and industry entities from around the World with each other. The search engine is available at: https://partfinder.ncbr.gov.pl/ Relevant documents: • All proposals must be aligned with national regulations, inter alia: • The Act of 20 July 2018 - Law on Higher Education and Science; • The Act of 30 April 2010 on the National Centre for Research and Development; • The Regulation of the Minister of Science and Higher Education of 19 August 2020 on granting state aid by the National Centre for Research and Development, which is in line with the Commission Regulation (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty (General Block Exemption Regulation); • The Regulation of the Minister of Science and Higher Education of 17 September 2010 on the detailed mode of performance of tasks of the National Centre for Research and Development. • The Regulation of the Minister of Funds and Regional Policy of 1 December 2023, amending the Regulation on granting state aid by the National Centre for Research and Development.

1.20 Portugal - FCT

Fundação para a Ciência e a Tecnologia (FCT) **thcs@fct.pt** **+351 213 924 445**	
Funding commitment	– FCT budget allocation for this call is: 500.000,00€ – Anticipated number of funded research groups: 2-3 – If more than one Portuguese applicant participating in the same international consortium applies for funding by FCT, the combined funding demanded by all the Portuguese applicants may not exceed the maximum financial threshold for proposals with a Portuguese Main Applicant (250 000,00 €) or with a Project Applicant (150 000,00 €). Portuguese Main Applicants and/or Project Applicants in the same international consortium will therefore have to share the funding that will be granted by FCT. – If more than one Portuguese applicant from the same international consortium applies for funding from the Portuguese agencies FCT and CCDRC, the combined budget requested from the two agencies cannot exceed the maximum funding per consortium of 250 000,00 € (Portuguese Main Applicant) or 150 000,00 € (Portuguese Project Applicant). – For information on funding rates, see no. 2 of article 7 of FCT Regulation, as amended by the Regulation no. 5/2024, of 3 January, hereinafter referred to as FCT Regulation, which amends and republishes Regulation no. 999/2016, of 31 October. (*)
Minimum/Maximum funding per grant awarded to a project partner	– The maximum amount of funding to be requested to FCT by a consortium with a Portuguese Main Applicant is 250,000.00 €. – The maximum amount of funding to be requested to FCT by a consortium with a Portuguese Project Applicant is 150,000.00 €.

Eligible institutions	– For information on the type of beneficiaries eligible for FCT funding under this call, see Article 3 of FCT Regulation. – For information on the criteria of beneficiaries' eligibility, see Article 5 of FCT Regulation.
Organisations excluded from funding	
Additional eligibility criteria	– For information on the criteria of projects' eligibility, see Article 6 of FCT Regulation. – FCT and CCDRC, as Portuguese funding agencies on this call, reserve the right to evaluate the possibility of transferring application(s) to the other Portuguese funding agency if an application is considered non-eligible by the funding agency selected by the candidate institution, but is eligible by the other Portuguese funding agency, which will from then on be responsible for managing the application(s). The transfer of applications will be carried out in accordance with the terms set out in the MoU signed between the parties. (**)
Eligible costs	- For the purposes of defining the budget, the terms defined in article 8 of FCT Regulation apply to eligible expenses and in article 9 to non-eligible expenses. - The project's indirect costs are based on the application of a flat rate of 25% of the direct eligible costs. - Excluded from the range of eligible expenses are the salaries and other remuneration supplements of teachers, researchers and other staff with a previously established ndefinite contract with the Public Administration. - Expenditure on adapting buildings and facilities is limited to a maximum of 10% of the project's total eligible expenses. - In accordance with no. 1 of article 7 of the FCT Regulation, the funding to be granted to proposals requesting funding from FCT under this call is non-reimbursable and is based on real costs. As such it must be justified through invoices paid or other accounting documents of similar probationary value, under the terms of no. 5 of article 8 of FCT Regulation. (***)

Submission of the proposal at regional/national level	– Yes, but only for full proposals selected for funding.
Submission of additional information at regional/national level	– Within 10 working days after the deadline for submitting the proposals, a **Statement of Commitment** duly signed by the Researcher in Charge (partner and/or coordinators) and by the legal representantive of the Portuguese Proposing Institution must be sent to: thcs@fct.pt. – The stamp or white seal of the Portuguese Proposing Institution will not be required on a digitally signed Statement of Commitment, as long as it is signed, in the Authenticação.gov application, with professional attributes that identify the functions performed by the signatory. – Portuguese applicants of transnational consortia that do not apply for funding from FCT do not need to submit the Statement of Commitment to FCT.
Further guidance	– If FCT or CCDR Centro reach the limit of the budget that each of the agencies has set for funding projects under THCS Call 2024, before the number of projects recommended for funding by each of these agencies has run out, the projects recommended for funding that lack funding may be transferred to the agency that still has the budget to fund projects. The transfer of projects recommended for funding will be carried out in accordance with the terms set out in the MoU signed between the parties. – The percentage of time dedicated to transnational projects will **not** be added to the percentage of time dedicated to existing national projects. – The information provided in this table is a summary only. Portuguese institutions must follow FCT's Legislation, Regulations and Norms. Therefore, it's necessary to consult the detailed and complete information in the FCT Regulation on Projects Funded Solely by National Funds – For more information, please see the call's page on FCT website (to be specified).

	(*) Reformulated sentence with information added on 19 March (**) Reformulated sentence with information added on 19 March (***) Sentence added on 19 March

1.21 Portugal - CCDRC

Comissão de Coordenação e Desenvolvimento Regional do Centro (CCDRC) ccdrc.projects@ccdrc.pt	
Funding commitment	**400 000€** Anticipated number of funded projects: 2.
Minimum/Maximum funding per grant awarded to a project partner	Maximum funding awarded: **150 000€** - for regional project applicants. This amount must be distributed through all the Centro Region's stakeholders participating in the proposal. **250 000€ -** for regional main applicants. This amount must be distributed through all Centro Region's stakeholders participating in the proposal. If more than one Portuguese applicant from the same transnational consortium request funding from CCDRC and FCT, the combined budget requested from the two agencies cannot exceed the maximum funding per consortium of 150 000,00 € (Portuguese Project Applicant) or 250 000,00 € (Portuguese Main Applicant).
Eligible institutions	• Academia • Clinical/public health sector - **must contact CCDRC in order to assess their eligibility** • Enterprises • Operational stakeholders – **must contact CCDRC in order to assess their eligibility** **Only entities from NUTS II Centro, or the ones that can assure that the investment will be made in Centro Region,**

	can apply to CCDRC's funding. The maximum funding rates to be considered are the following: • Research organisations and Higher Education Institutions (HEI): maximum funding rate – 85% • SME: micro and small enterprises – maximum funding rate 80% | medium enterprises – maximum funding rate 75% • Clinical/public health sector and operational stakeholders – can participate only if partnering up with one (or more) regional institutions from the typologies listed above (maximum funding rate – 85%). **ATTENTION:** The funding rates presented are the maximum (possible) values. • For projects led by **companies,** consult funding rates at article 49 of Regulamento Específico da Área Temática Inovação e Transição Digital. • For projects led by **non-entrepreneurial** entities from the regional research and innovation system (HEI and research organizations), consult funding rates at article 141 of Regulamento Específico da Área Temática Inovação e Transição Digital. **We advise all regional applicants to contact CCDRC's team before applying.**
Organisations excluded from funding	**Large companies will not be considered eligible in the context of this call.**
Additional eligibility criteria	The eligibility of partners, as beneficiary institutions, must be verified in the following articles of Regulamento Específico da Área Temática Inovação e Transição Digital: - For projects led by **companies**, consult article 46 of Regulamento Específico da Área Temática Inovação e Transição Digital to have concrete information about the eligible beneficiaries and the eligibility criteria that must be fulfilled; - For projects led by **non-entrepreneurial entiti**es from the

	regional research and innovation system (HEI and research organizations), consult article 139 of Regulamento Específico da Área Temática Inovação e Transição DigitalI to have concrete information about the eligible beneficiaries and the eligibility criteria that must be fulfilled. When checking eligibility of projects the following articles should also be considered: - For projects led by **companies**, articles 42 and 47 of Regulamento Específico da Área Temática Inovação e Transição Digital; - For projects led by **non-entrepreneurial entities**, article 138 of Regulamento Específico da Área Temática Inovação e Transição Digital. CCDRC and FCT as the Portuguese funding agencies in this call reserve the right to evaluate the possibility of transferring application(s) to the other national funding agency, if an application is considered non-eligible by the funding agency selected by the candidate institution, but is eligible by the other Portuguese funding agency. The transfer of applications will be carried out in accordance with the terms set out in the MoU signed between the parties.
Eligible costs	For eligible costs verify the article 9 of Regulamento Específico da Área Temática Inovação e Transição Digital. The following articles should also be considered: - For projects led by **companies**, article 50 of Regulamento Específico da Área Temática Inovação e Transição Digital; - For projects led by **non-entrepreneurial entities** from the regional research and innovation system (HEI and research. organizations), article 143 of Regulamento Específico da Área Temática Inovação e Transição Digital.
Submission of the proposal at regional/national level	Must be done after the final decisions for approvals at transnational level. Stakeholders will receive instructions on this in due time.

Submission of additional information at regional/national level	When applying to the transnational call, all regional stakeholders must fill in and sign this Declaration: - For projects led by companies: *https://ris3.ccdrc.pt/index.php/ris3-documentacao/declaracao-de-compromisso-thcs-2024-si-i-d/download* - For projects led by non-entrepreneurial entities: *https://ris3.ccdrc.pt/index.php/ris3-documentacao/declaracao-de-compromisso-thcs-2024-saccct/download* The Declaration must be sent within 10 working days after the submission of the pre-proposal to ccdrc.projects@ccdrc.pt
Further guidance	To all other criteria and conditions not explicit in this annex, please consult "Regulamento Específico da Área Temática Inovação e Transição Digital" **(https://diariodarepublica.pt/dr/detalhe/portaria/328-b-2023-223573621?_ts=1700139369853).** If CCDRC or FCT reach the limit of the budget that each of the agencies has set for funding projects under THCS Call 2024, before the number of projects recommended for funding by each of these agencies has run out, the projects recommended for funding that lack funding may be transferred to the agency that still has the budget to fund projects. The transfer of projects recommended for funding will be carried out in accordance with the terms set out in the MoU signed between the parties.

1.22 Romania - UEFISCDI

Unitatea Executiva pentru Finantarea Invatamantului Superior, a Cercetarii, Dezvoltarii si Inovarii (UEFISCDI) mihaela.manole@uefiscdi.ro	
Funding commitment	1.000.000 euro
Minimum/Maximum funding per grant awarded to a project partner	250.000 euro for all Romanian partners in case a Romanian institution is the Coordinator; 200.000 euro for all Romanian partners in case a Romanian institution is not the Coordinator;

Eligible institutions	Eligible entities for funding are universities, public institutions, R&D national institutions, joint-stock companies, SME's and Large companies, NGOs (associations, foundations, etc.), others, with research and innovation within their activities. Funding rates vary in accordance with state aid legislation.
Organisations excluded from funding	Organisations without research and innovation within their activities.
Additional eligibility criteria	
Eligible costs	a. Staff costs; b. Logistics expenses - Capital expenditure ; - Expenditure on stocks - supplies and inventory items; - Expenditure on services performed by third parties cannot exceed 25 % of the funding from the public budget. The subcontracted parts should not be core/substantial parts of the project work; c. Travel expenses; d. Overhead (indirect costs) is calculated as a percentage of direct costs: staff costs, logistics costs (excluding capital costs and cost for subcontracting) and travel expenses. Indirect costs will not exceed 25 % of direct costs.
Submission of the proposal at regional/national level	No

Submission of additional information at regional/national level	No
Further guidance	

1.23 Scotland - SG

Digital Health and Care Directorate, Scottish Government (SG)

donna.hendrson2@nhs.scot; andrea.pavlickova@nhs.scot

Funding commitment	300,000 euro
Minimum/Maximum funding per grant awarded to a project partner	Not applicable
Eligible institutions	Research organisations Innovation centres Health and social care providers Housing providers End users' organisations Voluntary organisations SMEs and for-profit businesses.
Organisations excluded from funding	Large enterprises
Additional eligibility criteria	• Eligible organisations must have establishment in Scotland, and they must have a track of at least 3 years functioning accounts. • Eligible organisations need to demonstrate experience/track of research and innovation development in digital health and care. • Eligible organisations need to demonstrate skills and capability to undertake and/or lead research and innovation development in digital health and care. • SG will avoid double funding and will not finance projects or parts of projects that have been funded through other funding calls, either national or international.

	• Funding sought for the business as usual and large clinical trials will not be considered for funding. • Funding sought for staff time is project specific only e.g., backfill, clinical or other leadership, analytical support, improvement support or project support for duration of improvement project. Funding will not be given and may not be used for operational costs, nor for the procurement of staff time that is reliant on any form of recruitment process. • Eligible projects must directly contribute to the implementation of Scotland's Digital Health and Care Strategy and its Delivery Plan 2022/2023. The technology or technology enabled care service involved must be citizen focused (e.g., Telecare, Video Conferencing, Home & Mobile Health Monitoring, digital applications), with a clear outline of benefits and outcomes to citizens.
Eligible costs	Personnel costs (100% funding rate) for day-to-day management and implementation of the project activities. Travel costs (100% funding rate) to attend project meetings (2 per year) and other relevant project, dissemination and communication activities.
Submission of the proposal at regional/national level	No
Submission of additional information at regional/national level	No
Further guidance	Scotland's Digital Health and Care Strategy: https://www.gov.scot/publications/scotlands-digital-health-care-strategy/ Care in the Digital Age: Delivery Plan 2023/2024: https://www.gov.scot/publications/care-digital-age-delivery-plan-2023-24/pages/1/

1.24 Slovenia - MDT

<table>
<tr><td colspan="2">Ustanovljena Služba Vlade Republike Slovenije za digitalno (MDT)

gp.mdp@gov.si</td></tr>
<tr><td>Funding commitment</td><td>200.000 EUR</td></tr>
<tr><td>Minimum/Maximum funding per grant awarded to a project partner</td><td>/</td></tr>
<tr><td>Eligible institutions</td><td>
<table>
<tr><td>University</td><td>Y</td></tr>
<tr><td>Research organisation</td><td>Y</td></tr>
<tr><td>SME</td><td>Y</td></tr>
<tr><td>Large enterprises</td><td>Y</td></tr>
<tr><td>User organisations</td><td>Y</td></tr>
<tr><td>Other organisations</td><td>S</td></tr>
</table>
Y = yes, eligible for funding

N = no, not eligible for funding

S = special rules apply, contact national /regional funding agency</td></tr>
<tr><td>Organisations excluded from funding</td><td>/</td></tr>
<tr><td>Additional eligibility criteria</td><td>Small and Micro Enterprises, Medium Enterprises, Large Enterprises, Universities and Research Organisations, Primary end-user, Secondary end – user, Tertiary end – user

Percentage of cost covered by public funding (Overall public funding consist of National and EC funding)

Type of organisations :

Small and Micro Enterprises: Industrial Research 80%, Experimental</td></tr>
</table>

	development 60% Medium Enterprises: Industrial Research 75%, Experimental development 50% Large Enterprises: Industrial Research 65%, Experimental development 40% Universities and Research Organisations: Industrial Research up to 80%, Experimental development up to 60% (depends on the size of research organization, the R&D organisation should specify its size (using the same criteria as they apply for an entreprise)) For “end – users” funding rates will be: Primary end-user (only for single individual): 90% Secondary end – user (only for NON – PROFIT organizations): 90% Tertiary end – user (only for NON – PROFIT organizations): 50%
Eligible costs	Personnel costs, costs of instruments and equipment, consultancy and other services (external staff), indirect costs (flat rate 20%)
Submission of the proposal at regional/national level	No.
Submission of additional information at regional/national level	No.

Further guidance	/

1.25 Spain - AEI

Agencia Estatal de Investigación (AEI) Spain

justyna.chojnacka@aei.gob.es

Funding commitment	700.000€
Minimum/Maximum funding per grant awarded to a project partner	The following funding limits for direct costs for a three-years project are considered eligibility criteria. Proposals not respecting these limits could be declared ineligible • **Maximum of two Spanish entities** eligible for the AEI are allowed in the same proposal **only in cases when one of them is acting as Coordinator** (partners eligible for others Spanish Agencies do not count for this maximum). • The **following funding limits** for direct costs are considered eligibility criteria. The direct costs (including subcontracting) in the application **must be rounded to the thousands**. Indirect costs (overheads) must be added to direct costs: 25% of direct costs (including the subcontracting costs). Proposals not respecting these limits could be declared ineligible. • If a Spanish partner eligible for the AEI is NOT coordinator of the transnational project: max **€140.000** • If the consortium IS COORDINATED by an AEI-applicant: max. **€220.000** • If the consortium IS COORDINATED by an AEI-applicant and there is another entity eligible for the AEI in the proposal, the amount for both Partners is: max. **€260.000** • Additional amount of € 30.000 maximum (direct costs) can be requested per proposal if the work plan includes substantial experimental tasks to be carried out by the AEI applicants and which must be clearly justified in the budget.

Maximum funding per project	Maximum DC (€)	IC (25%) (€)	TOTAL (€)
One AEI applicant	140.000	35.000	175.000
One AEI applicant - coordinator	220.000	55.000	275.000

	<table><tr><td>Two AEI applicants- one coordinator</td><td>260.000</td><td>65.000</td><td>325.000</td></tr></table> Centers formed by different Spanish legal entities will be considered as a unique entity, and thus the maximum funding should not exceed the limits per proposal established above (for example, mixed centers). The final funding will take into account the transnational evaluation of the collaborative proposal, the scientific quality of the Spanish group, the added value of the international collaboration, the participation of industry and stakeholders and the financial resources available.
Eligible institutions	• The eligible beneficiaries are non-profit research organizations (such as universities, public research institutions, technological centres and other private non-profit institutions performing RDI activities in Spain) which must comply with the requirements established by this transnational call and with the rules on eligibility defined in the corresponding Spanish national funding instrument "Proyectos de Colaboración Internacional" PCI and the PCI requirements document. • The entities must have been previously beneficiaries of any of the AEI calls. They have to ensure contractual relationship with the Principal Investigator (PI) during all the implementation of the project. **IT IS MANDATORY** for partners eligible for the AEI **to integrate in their consortium a public Spanish primary health care partner eligible for funding by ISCIII, IDIVAL or CSCJA.**
Organisations excluded from funding	For profit entities are excluded. Non-profit foundations must prove they carry out R&I actions. Mere diffusion or communication work packages are not eligible for AEI funding.
Additional eligibility criteria	• Spanish Principal Investigators (PIs) must: o Be eligible to the corresponding PCI (see PCI2023-2 as an example) call and the PCI requirements document o Demonstrate experience as investigators in projects funded by the Plan Estatal I+D+i 2013-2016, Plan Estatal I+D+i 2017-2020, 2021-2023, ERC Grants, European Framework Programmes or other relevant national and international programmes. o Spanish PIs must have a contractual relation with the beneficiary covering the expected total length of the project (2024 – end 2028). Incompatibilities (these must be taken into account when participating in

	different ERA-Nets or other international initiatives): ○ PIs will not be eligible for funding if applying in more than one proposal of this transnational call, in more than one proposal in the same PCI call and in PCI calls of consecutive years. ○ PIs must remain unchanged between the proposal of this transnational joint call and the national PCI call should the proposal be recommended for funding. Important: The applicants shall include the PI's full name and identification number as they appear in their DNI in the application form, as well as the full name of their institution in the original language and the CIF. The DNI and the CIF may be included in the same text box as their Family name and Legal full name of the research organization respectively. Please be aware that **PIs will be declared ineligible if they submit**, as PIs or as coordinators, more than one preproposal to this transnational call, if they have submitted any proposal to another international call which may be funded through Spanish PCI calls in the same or in consecutive years, or if they have obtained a PCI project in the previous year. Financing of two PCI projects, with the same PCI, and in the same or consecutive years, is not allowed.
Eligible costs	• Personnel costs for temporary employment contracts (PI contract excluded). The costs of permanent staff linked to the beneficiary entity or members of the research team will not be considered eligible costs. • Direct costs such as current costs, small scientific equipment, disposable materials, travelling expenses, coordination costs, and other costs that can be justified as necessary to carry out the proposed activities. • Overheads (25 % of all direct costs, including the subcontracting costs). The AEI will avoid double funding and will not grant projects or parts of projects already funded through other national or EU calls.
Submission of the proposal at regional/national level	Submission at the National level is not mandatory at the proposal stage. Submission will be mandatory after the evaluation process for the selected projects.

Submission of additional information at regional/national level	It is very important to check the eligibility before sending the preproposal to avoid unwanted situations and damages to third parties.
Further guidance	• The projects granted by the AEI must be aligned with the main objectives described in the *Plan Estatal de Investigación Científica, Tecnica e Innovación*. and will be funded through the instrument *Proyectos de Colaboración Internacional* (PCI) 2025. • Applicants are encouraged to consult the PCI 2023-2 call text and especially the PCI requirements document on the national call webside, as well as check their eligibility with the National Contact Point prior to the submission. • Submission of proposals at the national level will be required at a later stage. **Important and mandatory acknowledgement:** Any publication or dissemination activity resulting from the granted projects must acknowledge funding by the AEI: "Project (reference nº XX) funded by the Agencia Estatal de Investigación through the PCI (year) call". **Data Protection:** By submitting a grant application to the AEI, the applicants consent to communication of the data contained in the application to other public administrations, with the aim of further processing of the data for historical, statistical or scientific purposes, within the framework of the Organic Law 3/2018, of December 5, on Personal Data Protection and Guarantee of Digital Rights.

1.26 Spain - IDIVAL

Fundación Instituto de Investigación Marqués de Valdecilla (IDIVAL) Innovacion4@idival.org	
Funding commitment	150.000€

Minimum/Maximum funding per grant awarded to a project partner	Max. 100.000€ participating as partner Max. 150.000€ participating as coordinator
Eligible institutions	Institutional eligibility criteria: The eligible institutions are non-profit research organizations and public bodies in the health care sector of the autonomous community of Cantabria, such as Hospitals, Healthcare centers, the ministry of health or the Cantabria Health Service that performs RDI activities in Cantabria. Eligible applicants: Cantabrian Principal Investigators must have a job relationship with the Public Health System of Cantabria, IDIVAL or with the University of Cantabria as a professor linked to health care activity. The research team will be made up of at least three people and could participate researchers from other national or international institutions. The figure of the Co-principal investigator is contemplated, who does not need to meet the requirements for the principal investigator. Incompatibilities: • Principal Investigators are not allowed to apply for funding in more than one proposal under the Joint Call 2024
Organisations excluded from funding	Only will be eligible entities from Cantabria working in the public health sector and legally linked to IDIVAL
Additional eligibility criteria	Proposals must fit within Cantabria's strategic areas defined in the biodynamization plan: https://boc.cantabria.es/boces/verAnuncioAction.do?idAnuBlob=368181
Eligible costs	• Direct costs such as: - Personnel costs for employment contracts hired for the proyect development. - Current costs, small scientific equipment, disposable materials, and other costs that can be justified as necessary to carry out the proposed activities. - Travelling costs incurred directly as a result of the research project. - Equipment corresponding to the research project.

	- Subcontracting special tasks to EU and non-EU countries (i.e. IT services, etc.) is allowed within the limits legally established. • Indirect costs (overheads) or clinical assays, proofs of concept, proofs of principle **are not eligible for funding in this call**.
Submission of the proposal at regional/national level	no
Submission of additional information at regional/national level	no
Further guidance	https://boc.cantabria.es/boces/verAnuncioAction.do?idAnuBlob=368181

1.27 Spain - ISCIII

Instituto de Salud Carlos III (ISCIII) **Full Name: Cándida Sánchez Barco** **E-mail:** cbarco@isciii.es **Phone: (+34) 91 822 20 63**	
Funding commitment	National Programme: Acción Estratégica en Salud (AES 2024) **1.000.000 €** (pending of approval of Spanish State Budget)

Minimum/Maximum funding per grant awarded to a project partner	**Maximum ISCIII funding <u>PER AWARDED SPANISH PROJECT</u>:** • If a Spanish Partner requesting funding to the ISCIII **IS NOT** the Coordinator of the transnational project: • **220.000€** (overheads included), if there is only **one** Spanish Partner requesting funding to the ISCIII in the proposal. • **275.000€** (overheads included), if there are **two Spanish Partners requesting funding to the ISCIII** in the proposal. • If a Spanish Partner requesting funding to the ISCIII **IS** the Coordinator of the transnational project: • **300.000€** (overheads included), if there is only **one** Spanish Partner in the proposal, acting as a coordinator. • **400.000€** (overheads included), if there is one Spanish Partner in addition to the Spanish Coordinator in the proposal, **both requesting funding to the ISCIII.** Overheads according to AES 2024: 25% **Projects' duration**: from 24 months to 36 months The level of funding will take into account the evaluation of the collaborative proposal, the scientific quality of the Spanish group, the added value of the international collaboration, the participation of the primary health care and the financial resources available.
Eligible institutions	A maximum of two different partners requesting funding from ISCIII may participate in the same project proposal. The participation of the public Spanish primary health care is crucial to the success of this call so for that: • The participation in the consortium of at least one Spanish primary health care center is mandatory in this call. Proposals without a public Spanish primary health care center will not be eligible. • Therefore, only projects with at least one Principal Investigator (PI) belonging to an (assigned/affiliated) primary care center participates will be eligible for funding. • In the event that the corresponding primary care center forms an integral part of an Accredited Health Research Institute (IIS) and the PI belongs to (assigned/affiliated) the IIS, the eligible institution will be the Institute. In this case, additional groups from the same IIS might participate in

	the same proposal, taking into account the maximum number of entities by country considered in the eligibility criteria requirements described in the call text. Eligible institutions: • **Accredited Health Research Institutes** (Institutos de Investigación Sanitaria acreditados, **IIS**). Accredited according to the RD 279/2016 (These institutions may manage research via a foundation regulated according to the Spanish Act 50/ 2002, of December 26th). See the list of IIS in this link. • **Hospitals or public health administration of the Spanish National Health System** (SNS) These institutions may manage research via a foundation regulated in accordance to the Spanish Act 50/2002, of December 26th (a copy of the foundation's statutes may be submitted). • **CIBER** team members applying to the call must be from at least two groups belonging to CIBER in two different home institutions and one of these two should be a hospital, primary health care or public health administration of the **SNS** or **IIS**. Please contact Cristina Rodríguez (cristina.rodriguez@ciberisciii.es) for more information related to CIBER's eligibility. • Public Spanish primary health care will be eligible institutions even if they apply independently. This would also apply in the case that the PI from CIBER or from the Accredited Health Research Institutes (IIS) belongs to primary health care. • Non-profit Private health entities and institutions and Public Research Institutions (OPIs) as defined in article 47 of Law 14/2011, of 1 June, in accordance with the provisions of Royal Decree 202/2021, of 30 March. These entities can only participate if they apply together with a public Spanish primary health care partner in the same proposal. It is not allowed for these entities to apply independently, thus there must be two beneficiary Spanish institutions requesting funding to ISCIII in the same proposal. • Applicants from ISCIII are also eligible as Public Research Institution (OPI). Eligibility criteria from AESI 2024 apply. Applicants not related with the National Health System from non-profit research organizations such as universities, technological centres and other private non-profit institutions performing RDI

	activities in Spain must apply for funding to the Agencia Estatal de Investigación (AEI), following their eligibility criteria. It is mandatory to this type of members to integrate in their consortium a public Spanish primary health care partner eligible for funding by ISCIII.
Organisations excluded from funding	NOT eligible institutions: • Those declared by AES 2024 as ineligible to receive funds by ISCIII. Profit private entities are not eligible. • Particularly for this call, it will not be eligible the National Technological Centres and National Centres for supporting technological innovation that are inscribed in the Register according by RD 2093/2008, of 19 December.
Eligibility of PI and team members	Principal investigators (PIs) must hold a PhD degree. • PIs can only participate in one project proposal per call. • PIs belonging to an Accredited Health Research Institutes (IIS) could apply only from the IIS. • The PI and all members of the research group must belong to the eligible institutions in the call. • Only one PI per beneficiary institution may be funded within the same proposal. • PIs that has an ongoing International Collaboration (PCIN) project of the same initiative and purpose that this call and that the project has an ending date after the 31st December 2024 will not be able to apply for this call. This incompatibility will affect only to the PI. And this incompatibility will not apply in the case that the PI participate as coordinator in the new application or in the ongoing project. For additional incompatibilities please review AES 2024. Excluded personnel as Principal Investigator (PI): • Those undergoing a postgraduate training in Health Specialization (MIR, EIR, FIR, QIR, BIR, PIR, RFIR). • Those undergoing research training (e.g. PhD students, or “Río Hortega” contracts). • Those undergoing postdoctoral training (e.g. “Sara Borrell” or “Juan de la Cierva” contracts). • Researchers contracted by a RICORs and platforms funded by ISCIII.

Cost types and their caps	Personnel costs: - Personnel costs will be eligible for contracts with the needed professional category (superior technician, BSc (grado), MSc (máster), PhD (doctor) for the project development accordingly to the published salary tables in ISCIII's webpage / AES2024. Personnel cost will precisely adhere to the salary tables, no other amount will be considered, either upper nor lower. - Contracts for PhD students will be done in the framework of National Subprogramme for Training (scholarships are not eligible). - Personnel costs will NOT be eligible when they correspond to civil servants or the equivalent personnel (as specified in the Art. 3.4 of AES2024) either employed by the beneficiary entities or belonging to the research team. - Personnel costs will be eligible when corresponding to contracts under the frame of Art. 23bis of Law 14/2011, 1st June, following the specifications established in AES2024. • Other eligible costs: Current costs, small scientific equipment, disposable materials, travelling expenses, complementary expenses (use of central and general research support services of the beneficiary entity), publication and dissemination of results and other costs as included in AES 2024 that can be justified as necessary to carry out the proposed activities. • Overheads, according to AES 2024 (25%). • Double funding of the same concept is not allowed. • National applications will be required by ISCIII.
Submission of the proposal at national level	According to the AES 2024, the period stated to present the national application is from September 12th to October 15th. Due to administrative and legal regulations, the Institute of Health Carlos III establishes the 31st October 2024 as the national deadline for the decision on fundable project consortia which includes Spanish partners to be funded by ISCIII, which must present their national application in the period stated in AES 2024. Any concerned applicant in a proposal for which no final decision has been made by the deadline of 31/10/2024, could be declared not fundable by ISCIII.

Submission of additional information at regional/national level	As specified by AES 2024.
Submission of financial and scientific reports at the national level	Only for proposals funded by the ISCIII (please check the ISCIII website)
Submission of a pre-eligibility form needed at national level	In order to expedite the eligibility check process after the proposal submission it is mandatory that all applicants submit a **CVA-ISCIII**. In the case of the IPs of public primary health care it will be mandatory also a certificate signed by the legal representative of their entities. A template of this certificate can be downloaded in their link **Certificado Vinculación IP Atencion Primaria** These documents shall be submitted by the PI before the proposal submission deadline to cbarco@isciii.es indicating her/his full name and proposal acronym in the email subject line. The checking of these documents will be done during the eligibility checking process after the proposals submission.
Requirements on data and repositories	• Researchers funded by ISCIII must make public the human genomic data, as well as relevant data (phenotype and exposition data) generated inside the funded project and will use open access repositories. Researchers must also make public all the necessary information for the interpretation of these genomic data, including lab protocols, data instruments survey tools. Regarding genomic data it is understood: association of complete genomes (GWAS), matrixes of polymorphism of a single nucleotide (SNP) and sequence of genome, and transcriptomic, metagenomic, epigenomic and gene expression data. The researchers whose projects are funded by ISCIII are recommended to store their scientific data at the "ELIXIR Core Data Resources", or if non-European repositories or data bases are to be used they must be certified by ELIXIR or the US National Center for Biotechnology Information (NCBI). • ISCIII may not fund any project that may require a repository and/or a data base without a plan ensuring sustainability and decommissioning after the end of funding.
Requirements for clinical studies	Spanish groups that are involved on the performance of a clinical trial in the proposal, **are recommended to include** in their team a member from their scientific node of the EU Clinical Trials Network (SCReN or ECRIN-ERIC) or if it does not exist, a member from the personnel of their Clinical Research Supporting Platform of their institutions (UIC).

Use of Research infrastructures and platforms	Researchers funded by ISCIII are encouraged to make use of the resources available through the European Research Infrastructures and the Spanish Platforms funded by ISCIII for supporting the biomedical and health R&I.
Acknowledgements	Any publication, data base, product or event protected with IPR or not, resulting from the granted project must acknowledge "Award no. XX by Instituto de Salud Carlos III (ISCIII) through AES 2024 and within the ERA4Health Partnership" even after the end of the project, including other specific acknowledgments that could be requested by ISCIII to the granted project. For more information please see ISCIII's ROR here.

1.28 Spain - CSCJA

Consejería de Salud y Consumo de la Junta de Andalucía (CSCJA) **Email: convocatorias.fps@juntadeandalucia.es**	
Funding commitment	500.000,00 €
Minimum/Maximum funding per grant awarded to a project partner	125.000€, 250.000€ if coordinator (including 21% indirect costs)
Eligible institutions	Eligible organisation must be Andalusian Non-profit entities registered as Agents of the Andalusian Knowledge System (Registro de Agentes Andaluces del Conocimiento) with research and innovation activity in Biomedicine and Health Sciences, ie: Research managing foundations of the Andalusian Public Health System Eligibility criteria established in Orden de 10 de agosto de 2023 de la Consejería de Salud y Consumo de la Junta de Andalucía.
Organisations excluded from funding	Organisations not fulfilling eligibility criteria
Additional eligibility criteria	• Principal investigators must be linked through a civil servant, statutory or labour relationship with the applicant or performing centre. For Health Research Institutes (Institutos de Investigación Sanitaria, IIS), the link may be with any of the public or private law entities that are part of the IIS provided that

	the entity meets all the specific requirements determined in each action, and, in any case, be personnel assigned to the IIS. • More than one partner from Andalusia may participate in the same project • A PI can only participate in one application per call. • For receiving regional funding, the final funding decision issued by the corresponding program's decision-making body must be accredited. • The duration of the projects shall be determined by the corresponding JTC. In any case, this period shall be stated in the award resolution.
Eligible costs	a. **Goods and services:** consumables, bibliographic material, equipment rentals, software licenses and external services. b. **Personnel costs:** specifically hired for the project, including salaries, employer Social Security contributions, legally established compensation and other duly justified expenses derived. c. **Travel, accommodation and subsistence** according to the maximum amounts of compensation for service established in Decree 54/1989, of March 21, on compensation for service of the Junta de Andalucía, exclusively for people who are part of the research group or hired under the funded project. Exceptionally, any expense outside these amounts, or for people other than those listed before, must be authorised by the granting body. d. **Registration fees for congresses or conferences** for the presentation and dissemination of the results. Publication costs e. **Other expenses** duly justified and necessary for carrying out the project. f. **Indirect costs** 21% g. **Subcontracting costs**: cannot exceed 50% of the funding and need prior authorization from the granting body. Nor Scientific aspects nor the management of the project should be subcontracted. The following are not considered eligible expenses - Equipment or Equipment repair and maintenance - Items or amounts that, after analysis, are not considered justified - Amounts paid to persons participating in the project, with the exception of expenses necessary for special attention to patients that involve compensation for their participation in the project not derived from an employment relationship. The sum of the funding or income received for the same purpose may in no case exceed the cost of the funded activity.

Submission of the proposal at regional/national level	• The deadline for the submission of regional applications will be established in the regional call and will be informed through the website of the Regional Ministry of Health and Consumer Affairs. • Regional applications must be submitted to the General Secretariat of Public Health and R&D&I in Health exclusively by telematic means (please see section 10.c Orden de 10 de agosto de 2023)
Submission of additional information at regional/national level	• Beneficiaries must submit financial and scientific reports to Consejería de Salud y Consumo de la Junta de Andalucía (please see section 22.b) 3º and 25.f) 1º Orden de 10 de agosto de 2023) • Additionally, for projects involving invasive procedures on human beings, their biological material and/or clinical data, a favourable report or a document accrediting the request for its evaluation by the Biomedical Research Ethics Committee has to be provided The documents to be provided are detailed in section 14 of the Orden de 10 de agosto de 2023).
Further guidance	The projects must respect the fundamental principles established in national and international declarations, protocols and conventions on research ethics, as well as respect the requirements established in national and regional legislation in the field of biomedical research, development and innovation, personal data protection and bioethics. When the results are not susceptible to protection of industrial or intellectual property rights, the scientific publications resulting from the funding granted must be made available in open access, in accordance with article 37 of Law 14/2011, of June 1.

1.29 Sweden - Forte

Swedish Research Council for Health, Working Life and Welfare (Forte) Staffan.arvidsson@forte.se	
Funding commitment	15 million SEK (approx. 1.4 million Euro)
Minimum/Maximum funding per grant awarded to a project partner	Maximum 3 million SEK per Swedish partner and project, if coordinator max 4,5 million SEK. Maximum 4,5 million SEK to Swedish partners within the same project.

Eligible institutions	The grants paid out by Forte must be administrated by a Swedish organisation. They need to be a Swedish legal entity with a Swedish organisation registration number. There is an exception, grants may be paid out to a foreign organisation in accordance with governing documents or agreements. An approved administrating organisation must conduct research, which means having a documented research activity and being assessed as capable of taking on commitments in accordance with the general conditions for research grants.
Organisations excluded from funding	An administrating organisation cannot use grants for economic activity. As a general rule, all companies are assumed to conduct economic activity. Associations and other organisations may also be included here, depending on what sort of activity they conduct. For organisations that conduct both economic and non-economic activity, it is possible to be an administrating organisation if grants are used for the non-economic activity. Grants cannot be used for the economic activity. The accounts for the different activities must be kept separate.
Additional eligibility criteria	The main applicant must be employed by a Swedish organisation that is approved as an administrating organisation. However, the main applicant does not need to be employed by the administrating organisation at the time of application. The main applicant must have a doctoral degree.
Eligible costs	Among others, eligible costs may include the following: personnel costs; equipment costs; consumables and travel. The costs of general publication may not be included as direct cost in the application.
Submission of the proposal at regional/national level	Yes, applicants also need to submit their proposals to Forte´s application portal, Prisma.
Submission of additional information at regional/national level	No.

Further guidance	For additional information, please go to: Who can apply for a grant? - Forte (English)

1.30 Sweden - VINNOVA

Sweden's Innovation Agency (VINNOVA) Anna-Carin Christoffersson anna-carin.christoffersson@vinnova.se and Malin Eklund malin.eklund@vinnova.se	
Funding commitment	12 million SEK, approx. 1.1 million euros
Minimum/Maximum funding per grant awarded to a project partner	A Swedish partner may apply for 3 million SEK. If more than one Swedish partner applies for financing, the total amount cannot exceed 4,5 million SEK.
Eligible institutions	Eligible partners are universities, public research institutes, healthcare providers and industry. The grants paid out by Vinnova must be administrated by a Swedish organisation. They need to be a Swedish legal entity with a Swedish organisation registration number. Vinnova's general terms and conditions for funding | Vinnova
Organisations excluded from funding	See Vinnova's general terms and conditions for funding | Vinnova
Additional eligibility criteria	The Swedish participation applying for funding from Vinnova should have at least one partner from a company/industry. If not, the Swedish partners should apply for funding from Forte. Universities, public research institutes and public healthcare providers may receive funding of up to 100 % of their eligible costs, provided that the project is part of their non-economic activities. Small and medium sized companies can apply for up to 80 % of their eligible costs depending on activity or 100% if they are eligible for minor support (EU no. 1407/2013). If minor support is used, you need to include a Minor support certificate. For more detailed information see Rules for funding | State

	support for economic activities | Vinnova
Eligible costs	The eligible cost is defined in: Rules for Vinnova's funding | Vinnova
Submission of the proposal at regional/national level	Yes, according to deadline on webpage of Vinnova For more information and link to the Vinnova e-service see Find the right funding | Vinnova.
Submission of additional information at regional/national level	All information can be found here: Find the right funding | Vinnova.
Further guidance	All information on national eligibility can be found here Find the right funding | Vinnova.

1.31 Switzerland - SNSF

Swiss National Science Foundation (SNSF) **thcs@snf.ch**	
Funding commitment	1'000'000 CHF (approx. €1'000'000)
Minimum/Maximum funding per grant awarded to a project partner	The SNSF provides a minimum grant of 100'000 Swiss francs (ca. 100'000 EUR) per project. The SNSF provides a maximum of 250'000 Swiss francs (ca. 250'000 EUR) annually per applicant for a project, within the overall limit of 1 million Swiss francs (ca. 1 Mio EUR) annually for

	the project as a whole (i.e., SNSF-funded part). Applicants should have in mind that the SNSF anticipates funding approximately 4-5 projects under this call.
Eligible institutions	Pursuant to the Research and Innovation Promotion Act (RIPA) and the legal framework of the SNSF, accredited Swiss Higher Education Institutions according to Higher Education Funding and Coordination Act as well as institutions listed on the list Research Institutes of National Relevance are eligible. Besides these institutions, there are other established research institutions/institutes that are eligible for funding at the SNSF (e.g., list in mySNF in the respective data container). The SNSF exclusively funds basic research carried out for non-commercial purposes; Therefore, the SNSF can provide funding for both basic and applied research as long as they do not have direct commercial objectives. For any inquiries or reassurance, please reach out to the national contact person.
Organisations excluded from funding	Small and Medium-sized Enterprises (SME), large enterprises and user organisations.
Additional eligibility criteria	Applicants must comply with the SNSF Funding Regulations. All Swiss applicants and co-applicants submitting to the SNSF must be eligible for the SNSF Project Funding Scheme. Both applicants and co-applicants must be scientifically independent. Please note that applications submitted by a non-eligible person will not be considered nor evaluated. **Participation of Swiss-based partners requesting financial support from the SNSF is restricted to one project** (Art.7.3, SNSF Regulations on project funding). They may, however, participate in other consortia projects as self-financed partners.

	The maximum number of grants in the project funding scheme for the same funding period from the SNSF is limited to three grants, provided at least one grant is for an EU consortium project or has been granted on the basis of a lead agency, Weave or International Co-investigator scheme evaluation**. Swiss-based investigators who already hold three SNSF grants in project funding cannot request financial support from the SNSF to participate in this call (**Article 13 of the Amended Project Funding Regulations). Proposals with overlapping funding periods with ongoing SNSF projects are only approved if the research projects pursue different goals (Article 17 of the SNSF Funding Regulations). For any inquiries or reassurance, please reach out to the national contact person.
Eligible costs	Eligible costs are outlined in the SNSF Funding Regulations (Art. 28) and the SNSF General Implementation Regulations (Section 2). Project overhead costs cannot be applied for. They are calculated on the basis of the research funding acquired by eligible institutions under eligible funding schemes. Overhead contributions are paid in retrospect at a flat rate to the institutions of the SNSF awardees.
Submission of the proposal at regional/national level	Swiss-based partners must submit full-proposals via mySNF at the same deadline as the consortium application to the Call Secretariat. These submissions are mandatory and do not replace the submission of the consortium application to the Call Secretariat. Please be aware that the SNSF has introduced a new CV format, and Swiss-based partners are required to create an account on the SNSF Portal to ensure their CV is formatted according to the specified SNSF standards. In mySNF, **full-proposal** forms are created by navigating through the following path in the "funding instrument" section:

	Projects -> Partnership -> Transforming Health and Care Systems: Full Proposal. In case of funding, consortia including Swiss partners at the SNSF must submit a data management plan (DMP) on mySNF which complies with the SNSF policy on open research data. **In case of multiple, Swiss-based partners participating in the same consortium**, only one application is to be submitted on mySNF, whereby one Swiss-based partner must act as "corresponding applicant" and the other Swiss-based partners are to be listed as "other applicants". **International partners of the consortium** applying for funding at different funding agencies from the SNSF cannot be declared as "project partners" in the sense of article 11.2 of the SNSF Funding Regulations. For the submission via mySNF, they are to be declared as "consortium partners" instead and must apply for their funding at their respective research funding organization. **Other important information**: Yearly, **financial reports** must be submitted to the SNSF via mySNF. As **final scientific report**, the SNSF requests the submission of the final scientific report submitted to the THCS Call Secretariat. No other scientific reports are requested. **Data management plan:** Applicants will have to complete the DMP on mySNF once the project is approved, regardless of whether a DMP is requested by the consortium. The DMP has to cover the research data, which are collected, observed, generated or reused in the Swiss part of the project and has to comply with the SNSF Open Research Data Policy. Grants will be managed according to standard SNSF rules

	described in SNSF Funding Regulations.
Submission of additional information at regional/national level	**Applicants must complete a two-step pre-registration.** First, as the project coordinator of each project consortium submits a brief 'Intent to apply' to the Call Secretariat by 16 April 2024 (refer to the call document), we kindly request Swiss-based partners to concurrently express their intent to participate in the THCS Partnership Call by sending an email to thcs@snf.ch. Secondly, we ask Swiss-based partners to fill in administrative details of the proposal on the mySNF website in the specified sections: • Responsible Applicant • Project Partners • Applicant's Employment • Basic Data I and Basic Data II Please note that two-step pre-registration which includes email notification and the completion of specific sections on mySNF should be done by 16 April 2024, 17:00 CET. Furthermore, be aware that accessing mySNF website requires a personal account. The SNSF uses the pre-registration information exclusively to prepare the national eligibility check, and it is still possible to change data in mySNF after the pre-register date (i.e., please do not submit the full-proposal on 16 April 2024).
Further guidance	National Regulations:

	○ SNSF Funding regulations ○ General implementation regulations for the Funding Regulations ○ SNSF Regulations on Project Funding

1.32 Switzerland - Innosuisse

Swiss Innovation Agency (Innosuisse) **Larissa.beutler@innosuisse.ch**	
Funding commitment	1.8 Mio
Minimum/Maximum funding per grant awarded to a project partner	-
Eligible institutions	Universities or other higher education institutions Research and knowledge dissemination organisations Non-university public or private research and/or innovation organisations Hospitals or foundations or any healthcare providers End-user organisations Commercial companies: start-ups small and medium-size enterprises and large companies
Organisations excluded from funding	Non-Swiss based Organisations and companies
Additional eligibility criteria	See funding conditions for the THCS Call 2024 on the Innosuisse Website.

Eligible costs	Only costs for the execution of the project plan specified in the application form are eligible. Limits of eligible costs are defined in the funding conditions document on the Innosuisse call webpage. Only costs documented by employment contracts of Swiss project partners or invoices to Swiss project partners will be reimbursed. All expenses must be specified and documented in detail for reporting and auditing purposes.
Submission of the proposal at regional/national level	-
Submission of additional information at regional/national level	Implementation partners with less than 250 FTE requesting more than CHF 1 Mio. funding, have to submit a due diligence form to Innosuisse before the Full proposal deadline. The form can be downloaded from the Innosuisse Call Website.
Further guidance	International calls for proposals (innosuisse.ch)

Annex II. Glossary

This glossary of terms aims to provide clarifying definitions related to the THCS Joint Transnational Call 2024, and are based on

- the glossary to the WHO European Primary Health Care Impact, Performance and Capacity Tool (PHC-IMPACT)
- the Health promotion glossary of terms 2021
- definitions used in the THCS SRIA.

Word	Definition, THCS call 2 2024	Reference
Applied research	Original investigation undertaken to acquire new knowledge. It is, however, directed primarily towards a specific, practical aim or objective. https://www.oecd.org/sti/inno/Frascati-2015-Glossary.pdf	SRIA
Artificial intelligence	Software that is developed with specific techniques and approaches (…) for a given set of human-defined objectives, generate outputs such as content, predictions, recommendations, or decisions influencing the environments they interact with.	Artificial Intelligence Act
Big data	Big data refers to large amounts of data produced very quickly by a high number of diverse sources. Data can either be created by people or generated by machines, such as sensors gathering climate information, satellite imagery, digital pictures and videos, purchase transaction records, GPS signals, and more. It covers many sectors, from healthcare to transport to energy.	EU's Digital Strategy
Carer	Carers (family carers) refer to individuals who provide unpaid care for a member or members of their family, friends or community (5). They can be any relative (spouse, children, daughter- and son-in-law), friend or neighbour who provides a broad range of assistance with personal care or basic activities of daily living to people with functional limitations. They may provide regular, occasional or routine, 'hands-on' care or be involved in organizing care delivered by others, sometimes even at-distance. Carers can live with or separately from the person receiving care. Carers are in contrast with providers associated with a formal service system, whether paid or on a volunteer basis (formal	Link

caregiver) (6, 7).

Context	By synthesising the definitions included in the review (Rogers 2020), the authors generate a broad definition of context. "Context is defined as a multi-dimensional construct encompassing micro, meso and macro level determinants that are pre-existing, dynamic and emergent throughout the implementation process. These factors are inextricably intertwined, incorporating multi-level concepts such as culture, leadership and the availability of resources".	Rogers, L., De Brún, A. & McAuliffe, E. Defining and assessing context in healthcare implementation studies: a systematic review. BMC Health Serv Res 20, 591 (2020) (link)
Decentralised care	In the context of this call, the terms ‘decentralised health and care’ and ‘distributed health and care’ are used interchangeably. See distributed health and care.	
Disease prevention	Disease prevention describes measures to reduce the occurrence of risk factors, prevent the occurrence of disease, to arrest its progress and reduce its consequences once established.	Link
Distributed, decentralized, remote care	Distributed healthcare is the concept of providing health and care services, e.g. monitoring vital signs and diagnostic tests, and moving services closer to the person in need. This way a health and care system can help to keep people healthy by providing the right care and support at the right time. In this call distributed and decentralised health and care have the same meaning.	Healthcare in the Home: How Distributed Health Service Delivery Can Reduce Costs and Improve Outcomes by Philip E. Auerswald - SSRN
Ecosystems	In the THCS Partnership, the term ecosystem at a basic level is used as a broad concept of health and care stakeholders and other related entities, from regulators to end-users, from funders to service providers, from governing bodies to health and care professions, and from NGOs to companies and innovators. Ecosystems can be further defined along different dimensions, i.e. the level and scale of their activities, or the level of maturity. Transformation of health and care systems is dependent on the ability of numerous actors to align	

	their goals and actions so that they are complementary.	
Experimental development	Systematic work, drawing on existing knowledge gained from research and practical experience, that is directed towards: producing new materials, products, and devices; installing new processes, systems, and services; or improving substantially those already produced or installed. OECD: "Frascati Manual 2002: The measurement of scientific and technological activities - Proposed Standard Practice for Surveys on Research and Experimental Development", OECD, Paris, 2002.	SRIA
End-user	Refers to the final users of the research and innovation produced by the project, examples are employees and employers, residents, patients or non-profit organisations, but also health and care authorities, owners and policy makers. A project can have several end-user groups.	
Healthcare settings	A particular setting is a particular place or type of surroundings where something is or takes place, here meaning the surroundings, situation, location, site, where health and/or care is provided.	Link
Health	In this Partnership, "health" is understood according to the WHO definition of 1948 and revised in 1984, namely "the extent to which an individual or group is able to realise aspirations and satisfy needs and to change or cope with the environment. Health is a resource for everyday life, not the objective of living; it is a positive concept, emphasising social and personal resources, as well as physical capacities". Furthermore, the approach to care is inclusive, encompassing formal and informal care as well as health-related social care.	SRIA
Health and care systems	The term implies a broader notion than “health systems” or “healthcare systems” notably encompassing all parts of health systems and health related parts of social care systems.	SRIA

Health and care workforce	Professionals working in the health and care systems.	Link
Health equity	Health equity is the absence of unfair, avoidable or remediable differences in health status among population groups defined socially, economically, demographically or geographically.	Health Promotion Glossary of Terms 2021 (who.int)
Health literacy	Health literacy represents the personal knowledge and competencies that accumulate through daily activities, social interactions and across generations. Personal knowledge and competencies are mediated by the organisational structures and availability of resources that enable people to access, understand, appraise and use information and services in ways that promote and maintain good health and well-being for themselves and those around them. In this call, both personal health literacy and organisational health literacy are addressed.	Health Promotion Glossary of Terms 2021 (who.int)
Health professionals	Health professionals (ISCO-08 22) are professionals who establish and undertake research and develop and apply scientific knowledge in a range of health and related fields including: medicine, complementary medicine, dentistry, optometry, environmental health and occupational health. More details in reference.	Link
Health promotion	Health promotion is the process of enabling people to increase control over, and to improve their health.	Link
Implementation research	Specifically considers context and real-life conditions, and engages concerned population groups, leading to more successful translation and scale-up of public health interventions.	SRIA, link
Innovation	An innovation is a new or improved product or process (or combination thereof) that differs significantly from the unit's previous products or processes and that has been made available to potential users (product) or brought into use by the unit (process).	SRIA and Page 60, point 2.6 in Link

Integrated care	"Integrated health services delivery is defined as an approach to strengthen people-centred health systems through the promotion of the comprehensive delivery of quality services across the life-course, designed according to the multidimensional needs of the population and the individual and delivered by a coordinated multidisciplinary team of providers working across settings and levels of care. It should be effectively managed to ensure optimal outcomes and the appropriate use of resources based on the best available evidence, with feedback loops to continuously improve performance and to tackle upstream causes of ill health and to promote well-being through inter-sectorial and multi-sectorial actions". In the context of this call, terms 'integrated care' and 'integrated health services delivery' are used interchangeably.	Link
Internet of Things	The Internet of Things (IoT) refers to a distributed network connecting physical objects that are capable of sensing or acting on their environment and able to communicate with each other, other machines or computers.	Internet of Things Briefing
Models	In THCS we use the word model to refer to different ways to define, structure or organise different entities and strategies: • Organisational Models: These are conceptual frameworks that an organization uses to understand and explain its structure and operations. • Business Models: A business model describes the logic of how a company creates, delivers, and captures value. It identifies the products or services the business plans to sell, its identified target market, and any anticipated expenses. • Health and Care Models: These models broadly define the way health services are delivered. They outline best practice care and services for a person, population group, or patient cohort as they progress through the stages of a condition, injury, or event. • Disease Prevention Models: These models are a subsection of health and care models used to understand health behaviour and to guide the identification, development, and implementation of	SRIA

interventions for disease prevention.

Organisational health literacy	Is the degree to which organisations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.	Link
Outpatient care	Outpatient consultations/visits include consultations/visits at the physician's office, consultations/visits in the patient's home, consultations/visits in outpatient departments in hospital, but excludes telephone contacts, visits for prescribed laboratory tests, visits to perform prescribed and scheduled treatment procedures e.g., injections, physiotherapy, etc. visits to dentists, visits to nurses.	Link
People-centred	According to the World Health Organisation, person- and population-centredness can be defined as "putting the comprehensive needs of people and communities, not only diseases, at the centre of health systems, and empowering people to have a more active role in their own health".	SRIA
Personal health literacy	Is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.	Link
Personalised prevention	Personalised prevention aims to prevent onset, progression and recurrence of diseases through the adoption of targeted interventions that consider the biological information (e.g. genetic and other biomarkers, demographics, health conditions), environmental and behavioural characteristics, socio-economic and cultural context of individuals. This should be timely, effective and equitable in order to maintain the best possible balance in lifetime health trajectory	PROPHET
Research and innovation (R&I)	Are used according to the common terminology of the framework programme. In funding various activities, and in line with existing national regulations, the categories of basic research, industrial research and experimental development are applied.	SRIA

Resilience	Health systems are resilient when they show “the capacity to absorb, effectively respond, and adapt to shocks and structural changes in a way that allows them to sustain required operations, resume optimal performance as quickly as possible, transform their structure and functions to strengthen the system, and (possibly) reduce their vulnerability to similar shocks and structural changes in the future”. Thus, resilient, and adaptive health systems would be able to protect themselves and human lives from the public health impact of disasters, and are critical to achieving good health outcomes before, during and after disasters.	SRIA, according to the definition developed at an EU level by the Expert Group on Health Systems Performance Assessment,
Telehealth	In this call text the term refers to telemedicine as described by the EC, the provision of healthcare services at a distance.	
Care/ treatment pathways	Care pathway (or care map) refers to an aid (in addition to clinical guideline) that maps the patient pathway through the care system. It plans for the management of patient care that set goals for the patients and provide the sequence of interventions that physicians, nurses and other health professionals should carry out in order to reach the desired goals in a given time period. See also clinical guidelines and clinical protocols.	Link
Value creation	Developing project outcomes in terms of knowledge or goods that can be used in practice. The created value can either it can be used by businesses or public bodies to generate revenues out of it.	
Voluntary organisations/ NGO	Non-profit, voluntary citizens’ groups, principally independent from government, which are organised on a local, national or international level to address issues in support of the public good.	Link
Well-being	Describes a positive state experienced by individuals and societies. Similar to "health", well-being is a resource for daily life and is determined by social, economic and environmental conditions.	Health Promotion Glossary of Terms 2021 (who.int)

Co-funded by the European Union

Joint Transnational Call for Proposals (2024) for

Innovate to Prevent: Personalised Prevention in Health and Care Services

***(THCS Grant* 101095654)**

Guidelines for Applicants

Important Deadlines

Submission of Intent to Apply: 16 April 2024 at 14:00 (CEST)
Submission of proposals: 21 May 2024 at 14:00 (CEST)

For further information, please visit our website: https://www.thcspartnership.eu/

or contact the THCS Joint Call Secretariat (JCS)
For technical questions on the submission tool please use the helpdesk
Other questions can be send to: thcs@zonmw.nl

Background

Co-funded European Partnerships are instruments implemented in Horizon Europe as Programme Co-fund Actions. These partnerships are involving EU countries, with research and innovation funders and other public authorities at the core of the consortium. The Partnership instrument is open to all EU Member States, as well as to countries associated to Horizon Europe. It is open also to non-EU countries that can participate at their own costs. In a Co-funded Partnership driven by cash contribution the core activity is the funding of Research and Innovation projects on a specific field. The European Commission is directly involved in the governance of the Partnership and contributes by co-funding 30% of all eligible costs.

The Transforming Health and Care Systems (THCS) initiative has been established as a European Partnership under Horizon Europe, co-funded by the European Commission (https://www.thcspartnership.eu). The aim of THCS is to coordinate and optimize research and innovation efforts in Europe and its partner countries supporting health and care systems transformation. THCS is a platform for joint programming of national and European regional research and innovation (R&I) programmes putting into action The Strategic Research & Innovation Agenda (SRIA) for transforming health and care systems[1], through dedicated research, development and innovation funding.

To align regional and national research strategies and funding activities, promote excellence, reinforce the competitiveness of European players while fostering EU cooperation – and enhance European collaboration with non-EU countries, 29 funding organisations have agreed to launch the Joint Transnational Call 2024 (JTC2024) for collaborative, innovative research projects co-funded by the European Union. The funding organisations participating in this call particularly wish to promote innovative, interdisciplinary collaboration and encourage translational research proposals.

The JTC2024 aims to address the need to improve the implementation of prevention strategies in health and care services, also to make them person-centred and better adjusted to people's needs while supporting effective and appropriate use of existing Information Technology (IT) and digital-based technologies supporting prevention strategies in health and care services.

Potential proposals will assess practical implementation needs and challenges, such as barriers concerning resources, sustainability issues, stakeholder engagements, geographical limitations and inequalities with a view to supporting the uptake of those models that more effectively help address successful prevention strategies.

This call will address the added value of increasing the development and uptake of promising health and care organisational models specifically supporting prevention and their transferability and scalability across different health and care contexts and governance settings. This includes increasing use of the relevant IT and digital technologies to help achieve better outcomes in health and care systems.

[1] https://www.thcspartnership.eu/kdocs/2101188/sria_thcs-feb2023.pdf

The main challenge is not the shortage of workable practices in general, but rather the transferability of solutions which have been successful in specific contexts, to be scaled-up into prevention models in more organisations, regions, and countries, where they could be adapted and implemented into regular use. The call will focus on the opportunity, but also the challenges, faced by health and care professionals in making proper use of prevention strategies, with particular emphasis on the appropriate use of IT and digital solutions. Furthermore, this includes supporting citizen and patient involvement and engagement, and improving the access to and responsible use of data following the FAIR principles[2], including emerging data sources (e.g. omics). Finally, proposals should inform decision-making processes and appropriate use of relevant IT and digital technologies for the reduction of the health and care workforce burden.

Fostering multidisciplinary teams & intersectoral collaboration toward implementation

The rapidly changing and ageing society and the occurrence of health emergencies are urging countries to efficiently respond to increasing burdens on their health and care systems, and deliver on their common commitment to high-quality health and care services. Furthermore, health and care systems share challenges that require harmonised and coordinated solutions, devised through a process that allows all stakeholders involved to design, research and implement such solutions in an economically, socially, and environmentally sustainable manner, while keeping people at the centre of the system process.

It requires a truly cross-sectoral and multidisciplinary collaboration, including stakeholders from clinical research, public health, bioinformatics, technology, digital health, Ethical, Legal and Social Aspects (ELSA) research, implementation research, health economics research, actors from the public and private sector, and end-users (or experts that can support research on the impact for end-users). Consortia funded in this THCS call are required to be interdisciplinary and trans-sectoral. Research teams forming a consortium should include investigators from a broad range of relevant scientific disciplines, research fields or sectors, and bring together the necessary expertise to achieve the objectives as well as expected impact of the research proposed.

Stakeholder involvement

In the dynamic landscape of healthcare, transformative solutions necessitate an ecosystem approach that extends beyond traditional boundaries. This call for proposals invites innovative projects that demonstrate a profound understanding of this approach, ensuring their alignment with existing policy contexts and the broader ecosystem of health and care.

Proposals must explicitly illustrate their integration within this ecosystem, showcasing effective cooperation and coordination among diverse stakeholders. This includes, but is not limited to, health and care professionals, system owners, and, crucially, the end-users. The emphasis is on transcending the confines of conventional health and care domains, fostering collaboration at local or regional levels.

[2] https://open-research-europe.ec.europa.eu/for-authors/data-guidelines#fairdata

Patient and citizen involvement

Patients and citizen are more than just beneficiaries of healthcare innovations; health and care systems are organised around and for them; they are key informants who provide invaluable insights into the actual needs and challenges faced in healthcare experiences. By actively engaging with this group, applicants can ensure that the projects are grounded in real-world experiences, leading to more relevant and impactful outcomes. Their involvement in e.g. dissemination activities enhances the reach and relatability of the research, while their participation in the utilisation of results ensures that the solutions developed are not only practical but also embraced by those they are meant to serve.

Companies

Enterprises, ranging from start-ups to established corporations in the health and care sectors, act as catalysts for translating research into practical, innovative solutions. Companies play a significant role in the health and care ecosystem by investing in research and development, thus driving forward the frontiers of what is possible in healthcare. Their participation in this ecosystem ensures a continuous flow of new ideas and technologies, which is essential for addressing the evolving challenges in healthcare. Likewise, their understanding of regulatory requirements and market conditions can guide researchers in shaping research agendas and policies that foster a conducive environment for health and care innovation.

Furthermore, companies can act as important disseminators of innovation. By leveraging their networks, they can facilitate the widespread adoption of new solutions, ensuring that the benefits of research and innovation reach a broader audience, including patients, healthcare professionals, and policymakers.

Companies bring the perspective of economic viability, which is crucial for the long-term success of any healthcare innovation. By integrating this perspective into the research and development process, the ecosystem approach ensures that the innovations not only address current healthcare challenges but also are sustainable and adaptable to future needs.

Ecosystem approach

Proposals must show how the project will be linked to the policy context and wider ecosystems. This includes cooperation and coordination between stakeholders, across the boundaries of traditional health and care domains, locally or regionally, involving end-users, health and care professionals, and/or other stakeholders e.g., health and care system owners, when relevant.

The embedding of the endeavour into organisational strategies will raise the transformational power of the consortium. The workplan needs to include the development of business plans and reflect the reaching out to relevant wider ecosystems.

Policy-makers & Healthcare authorities

The impact of project outcomes on policymaking and healthcare authority regulations are crucial aspects of the research process and its subsequent implementation. Although policy-makers and healthcare authorities may not be directly involved in the day-to-day aspects of the projects, the outcomes of the research have the potential to significantly influence policy decisions and regulations. It is essential for the research to be designed with an understanding of current policy and regulatory contexts and an anticipation of future needs. This alignment ensures that the findings of the research are relevant and can effectively inform policy and regulatory changes or the creation of new policies or regulations.

The research outcomes should aim to create synergies within the existing policy and regulatory framework, enhancing the efficacy and efficiency of health and care systems. By demonstrating the practical implications and benefits of the research findings, projects can support decision-makers in addressing current challenges and seizing opportunities for innovation in healthcare. The dissemination of research results could play a crucial role in that sense. By effectively communicating findings to policymakers and healthcare authorities, the research can contribute to an informed decision-making process, leading to evidence-based policy development.

In conclusion, these collaborations are essential not only for the development of the project but also for its successful implementation and sustainability. Proposals should demonstrate how they embed their objectives within the organisational strategies of these end-users, thereby amplifying the transformative potential of the consortium.

Furthermore, the workplan of the proposals must encompass the development of comprehensive sustainability strategies. These plans should reflect a clear strategy for engaging with relevant, wider ecosystems, ensuring that the project's reach and impact are maximized. This approach is anticipated to facilitate the creation of sustainable, user-centred solutions, leading to a meaningful transformation in health and care systems.

Building your proposals

Please take note of the references below that could be helpful:

- A partnering tool supported by THCS is available at https://partfinder.ncbr.gov.pl/
- Public engagement, open access, gender equality, science education, ethics and good governance should be considered. Please visit:
  - the **Responsible Research and Innovation** site of the European Commission: https://rri-tools.eu/
  - The Societal Readiness Thinking Tool – Guide for the steps of including RRI in a project: https://thinkingtool.eu/
  - EC Guide "How to complete your ethics self-assessment": https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/common/guidance/how-to-complete-your-ethics-self-assessment_en.pdf
- Recommendations for patient engagement in research: https://patient-engagement.eu/
- Helpdesk for **Intellectual Property Rights** issues: https://www.iprhelpdesk.eu/
- Information about a **harmonised Data Access Agreement (hDAA)** for sharing and using controlled access data, can be found here (EU-STANDS4PM): https://www.eu-stands4pm.eu/data_access
- Support for the development of a **Data Management Plan**:

  Proposals should explain how data gathered through their project would be available (findable, accessible, interoperable and re-usable) to the wider research community, even after the end of the project. In addition, THCS expects funded projects to develop data management plans (DMPs) according to international state-of-the-art standards for data security (following the **FAIR**

principles[3]**, the General Data Protection Regulation**[4] **and in accordance with ethical principles**[5] **for data management)**. The project coordinator is responsible for sending the complete DMP no later than three months after the official start of the project to the JCS.

Compliance to the DMP must be reported in each annual scientific project progress report.

- Publication of scientific outcomes of the project are subject to **open access** and budget should be allocated for this in the proposal budget plan.

  Examples for guidelines:

  – Science Europe: https://www.scienceeurope.org/media/4brkxxe5/se_rdm_practical_guide_extended_final.pdf https://www.scienceeurope.org/media/411km040/se-rdm-template-3-researcher-guidance-for-data-management-plans.docx

  – Horizon 2020 FAIR Data Management Plan - Annex 1: http://ec.europa.eu/research/participants/data/ref/h2020/grants_manual/hi/oa_pilot/h2020-hi-oa-data-mgt_en.pdf

  – The ELIXIR Research Data Management Kit (RDMkit): https://rdmkit.elixir-europe.org/

Registration

Research project consortia who intend to submit a transnational proposal should as first register at https://prod-thcs.auth.cbim.it/oidc-thcs click on “sign up” and follow the further instructions. The system will open on 23rd February 2024. To register, please complete the different sections as soon as possible.

Submissions

Please read carefully the call text including the relevant central eligibility criteria and the regional/national eligibility and budgetary criteria (as outlined in the annex of this document) before starting your proposal in order to check if you will fulfil the call’s formal requirements.

The call is organised in a one-stage procedure with one Intent to apply (ItA) and one full-proposal document. Both ItA and full-proposal (in English) shall be prepared by the partners of a joint transnational consortium, and must be submitted by only one spokesperson, the coordinator, by uploading it on the electronic submission system (available on 23rd February 2024): the link to the submission tool can be accessed directly from the call page at www.thcspartnership.eu.

Submitting a proposal involves two steps. First, fill out the full-proposal form in Word, where you mainly describe the project. Second, use the electronic submission tool to enter details about each

[3] http://ec.europa.eu/research/participants/data/ref/h2020/grants_manual/hi/oa_pilot/h2020-hi-oa-data-mgt_en.pdf

[4] https://gdpr-info.eu/

[5] http://ec.europa.eu/research/participants/data/ref/h2020/grants_manual/hi/ethics/h2020_hi_ethics-self-assess_en.pdf, http://ec.europa.eu/research/participants/data/ref/h2020/grants_manual/hi/ethics/h2020_hi_ethics-data-protection_en.pdf

partner and their financial plans. After completing the full-proposal form, convert it into one PDF and upload it to the electronic system. Both parts should be completed jointly by all applying consortium partners and need to be started in due time.

Please use the ItA and the full-proposals forms provided on the THCS website (https://www.thcspartnership.eu/). Only proposals using the official templates will be accepted. Please keep in mind that the templates provide indications for section limits. Thus, the proposal document must not be longer than the number of pages indicated in the proposal templates. In addition, the proposal, in a digitally signed PDF-Format file or with a scanned version of the original signature page, to be uploaded to the online tool, must not exceed 8 Megabytes. Proposals exceeding these limitations will be rejected by the online system.

Deadline to submit ItA: **16 April 2024 (14:00, CEST)**

Deadline to submit proposals: **21 May 2024 (14:00, CEST)**

After these deadlines, the electronic submission system will not accept proposals and it will not be possible to amend the proposal or to add further documents.

In case of inconsistencies between the information registered in the online submission tool and the information included in the PDF of this application form, the information registered in the submission tool shall prevail.

For applicants from some regions/countries it may be required to submit the proposal or other information, before the deadline of this call, directly to their relevant regional/national funding organisations. Therefore, applicants are strongly advised to verify the respective regional/country-specific funding organisation regulations and other specific information.

Please Note:

It is mandatory to meet the deadline and to follow the format of the proposal structure.

The Joint Call Secretariat will check the proposals submitted to ensure that they meet the call's formal criteria (e.g. date of submission; number of participating countries; eligibility of the coordinator; type of project partner; inclusion of all necessary information in English and appropriate limits on length). In parallel, the Joint Call Secretariat will forward the proposals to the relevant regional/national funding organisations that will perform a formal check of compliance with their respective eligibility criteria. Proposals not meeting the formal central or regional/national eligibility criteria will be rejected. Proposals passing both checks will be forwarded to independent international scientific experts for evaluation.

It is recommended for potential project consortium coordinators to read the THCS funding organisations' eligibility criteria when looking for potential project consortium partners.

Bearing in mind that most of the management activities take up most of the coordinator's time and given the complexity of the research projects and the number of regions/countries usually involved, project coordinators are reminded of the importance of a well-designed and feasible work plan. Those actions will require that sufficient time is allocated to the project coordinator and also involved principle investigators even before the actual project starting date, e.g. for setting up the project consortium and recruiting the necessary personnel.

Project partners are strongly advised to read the eligibility criteria of their respective funding organisations (see annex II of this document) and other requirements, and to contact their respective funding agency prior to submitting the application (see also the call text and annex I of this document “List of Regional/National Contacts”).

General Data protection regulation

The following Data Privacy Notice applies:

By applying to the call, applicants consent to the use, processing and retention of their data, in line with the above notice and for the purposes of:

- processing and evaluating the application where processing shall be lawful - only if and to the extent that - processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller;
- administering any subsequent funding award;
- managing the funding organisation's relationship with them;
- analysing and evaluating the call;
- reporting to the European Commission/ European Health and Digital Executive Agency (HaDEA) on the call;
- providing aggregate data to regional/national and European surveys and analyses;
- complying with audits that may be initiated by the funding organisations.

The members of the THCS consortium may share an applicant's data with third parties (some of which may be based outside the European Economic Area) in relation to the above activities including evaluators, auditors and the European Commission (or its agencies).

The members of the THCS consortium may link the data that applicants provide in the application with regional/national, bibliographic or external research funding data which is available through public subscription-based databases (e.g. Scopus, Web of Science, etc.) or other regional, national or open datasets. The members of the THCS consortium may also link the data that applicants provide in their application with future data that applicants provide as part of the ongoing management and reporting.

Data on funding organisations including contact details of Call Steering Committee[6] (CSC) members are kept for the purpose of the call communication. The information will be published with prior consent of the respective management bodies.

Eligible annexes

There will be the possibility to add the following annexes (it is indicated in brackets at which stage the documents have to be provided):

- Annex 1 – Ethical self-assessment (Mandatory) template is provided as annex to the proposal form;
- Annex 2 – Letter of commitment for a project partner participating on own funds (mandatory in the full-proposal stage), to be uploaded as separate file in the submission tool;
- Annex 3 – Supporting letters or endorsement letters in free format (if any), to be uploaded as separate file in the submission tool.

[6] Call Steering Committee: comprises a single representative from each country's/region's funding organisation

Co-funded by the European Union

Transforming Health and Care Systems Partnership

Joint Transnational Call 2024

INNOVATE TO PREVENT: PERSONALISED PREVENTION IN HEALTH AND CARE SERVICES

Intent to Apply form

Important Deadlines

Submission deadline for Intent to Apply: 16th of April 2024 14:00 (CEST)

Submission deadline for proposals: 14th of May 2024 14:00 (CEST)

For further information, visit our website:
http://www.thcspartnership.eu

or contact the **THCS Joint Call Secretariat:**
For technical questions on the submission tool please use the helpdesk
Other questions can be send to: thcs@zonmw.nl

Co-funded by the
European Union

Important notice

- The Intent to Apply aims to provide the Joint Call Secretariat with information on potential proposals that will be submitted. These details will allow the Joint Call Secretariat to adjust the composition of the peer-review panel responsible for the evaluation, ensuring proposals receive a proper and adequate expertise.
- The Joint Call Secretariat may provide guidance to the coordinator on the composition of the consortium. However, the Joint Call Secretariat will not provide feedbacks on the content of the proposal.
- The Intent to Apply is mandatory but will not be evaluated and will not be taken into consideration for establishing the final ranking list and the selection decision.
- The Intent to Apply must be submitted via the online submission system.
- The Intent to Apply is restricted for the needs of the Joint Call Secretariat and involved funding agencies only.
- All fields must be completed.

Checklist for the Coordinator

I declare to have the explicit consent of all applicants on their participation and on the content of this Intent to Apply.

A. General Information

Acronym (max. 15 characters, including spaces)

Project title (maximum 255 characters, including spaces)

Project duration (months, max. 36)

Please indicate five to seven keywords that represent the content and the methodological approach

Keywords

Which type of prevention will your proposal address? (see section 5 of the call text: scope of the call)

- [ ] Secondary prevention
- [ ] Tertiary prevention
- [ ] Quaternary prevention

Research areas addressed by the proposal (multiple choice)
Please tick the appropriate box(es) to specify which of the research areas relevant to the call your application is addressing

- [ ] Public health research
- [ ] Health economics
- [ ] Health Technology Assessment (HTA)
- [ ] Health technology research

Proposal classification (single choice between two main menu and multiple choices in sub menu)

Please tick the appropriate boxes to specify the category of your application. E.g. if your category is applied research tick Research + Applied. Multiple choices are possible

- [ ] Research
  - [ ] Basic
  - [ ] Translational
  - [ ] Applied
  - [ ] Implementation
- [ ] Demonstrator Projects
  - [ ] Proof of concept
  - [ ] Validation of concept

Project abstract (**maximum 4000 characters** including spaces, equivalent to about 1/2 A4 page)

Please give a comprehensive and readable summary of the primary aims and methods of the project (Please base the project abstract on the questions below).

Shortly describe the need for this proposal (**maximum 1000 characters** including spaces)

Shortly describe what the proposal aims to achieve (**maximum 2000 characters** including spaces)

Describe how your proposal is going to contribute to actual transformation of health and/or care in daily practice? (**maximum 1000 characters** including spaces)

B. Project consortium

1. Project coordinator (= Partner 1)

Please note that organizations which label themselves as end-user organizations must fit into the definition as provided by the THCS program (see the Call Text). This has to be reflected in the description of the partner, in the work plan and in the dissemination activities

Organization

Legal name	
Short name	
Type of partner	
...if other:	
Address	
Postal code	
City	
Country	
Website	

Envisaged Funding agency/organisation

Principal investigator (main contact)

Last name	
First name	
Gender	
Title	
E-mail	

2. Project partners applying for funding (max. 9 in total, incl. coordinator)

Please note that organizations which label themselves as end-user organizations must fit into the definition as provided by the THCS program (see the Call Text). This has to be reflected in the description of the partner, in the work plan and in the dissemination activities.

Organization

Legal name

Short name

Type of partner

...if other:

Address

Postal code

City

Country

Website

Envisaged Funding agency/organisation

2. Project partners applying for funding (max. 9 in total, incl. coordinator)

Please note that organizations which label themselves as end-user organizations must fit into the definition as provided by the THCS program (see the Call Text). This has to be reflected in the description of the partner, in the work plan and in the dissemination activities.

Organization

Legal name

Short name

Type of partner

...if other:

Address

Postal code

City

Country

Website

Envisaged Funding agency/organisation

3. Project Collaborators - not applying for funding (max. 2 collaborators in total)

Please remember that each collaborator will have to precisely describe the resources that he/she will dedicate to the project (personnel, material, in kind/in cash , …) and the origin of these resources in the full proposal

Organization

Legal name	
Short name	
Type of partner	
...if other:	
Address	
Postal code	
City	
Country	
Website	

Co-funded by the European Union

Joint Transnational Call for Proposals (2024) for

Innovate to Prevent: Personalised Prevention in Health and Care Services

***(THCS Grant* 101095654)**

Full-proposal application form

Submission deadline for obligatory "Intent to Apply": April 16, 14:00 CEST.

Submission deadline for proposals: May 21, 14:00 CEST.

Electronic proposal submission

For further information, visit our website:

http://www.thcspartnership.eu

or contact the

THCS Joint Call Secretariat:

THCS@zonmw.nl

Important notice

- All fields must be completed.
- The Proposal must be submitted via the online submission system.
- Proposals that do not meet the regional/national eligibility criteria and requirements will be declined without further review.
- In case of inconsistency between the information registered in the submission tool and the information included in the Annexes of this application form, the **information registered in the submission tool shall prevail**.
- Refer to the “GUIDELINES FOR APPLICANTS” for information about the proposal structure.

A. General Information

Project title (maximum 255 characters, including spaces)

Acronym (max. 15 characters, including spaces)

Project duration (months, max. 36)

Total project costs (€)*

Total requested budget (€)*

**Please make sure that the same budgets are entered in the sections that need to be completed online on the financial overview in section 7 of this form. Thousand separators and whole numbers should be used only (e.g. 200.000).*

Keywords

Keywords are automatically filled in from the Intent to Apply. Additional keywords can be inserted

Aim of the call addressed by the proposal

Automatically filled in from the Intent to Apply and can be changed.

Which type of prevention will your proposal address? (see 5. Scope of the call)

☐ Secondary prevention
☐ Tertiary prevention
☐ Quaternary prevention
☐ A combination of …

Research areas addressed by the proposal

Please tick the appropriate box(es) to specify which of the research areas relevant to the call your application is addressing.

☐ Public health research
☐ Health Economics
☐ Health Technology Assessment (HTA):
☐ Health Technology Research (HTR),

Proposal classification

Please select the appropriate boxes to specify the category of your application. E.g. if your category is applied research tick Research - Applied.

☐ Research - Basic
☐ Research - Translational
☐ Research - Applied
☐ Research - Implementation
☐ Demonstrator Projects - Proof of concept
☐ Demonstrator Project - Validation of concept

Project abstract (**maximum 4000 characters** including spaces, equivalent to about 1/2 A4 page)

Please give a comprehensive and readable summary of the primary aims and methods of the project (Please base the project abstract on the questions below).

Shortly describe the need for this proposal (**maximum 1000 characters** including spaces)

Shortly describe what the proposal aims to achieve (**maximum 2000 characters** including spaces)

Describe how your proposal is going to contribute to actual transformation of health and/or care in daily practice? (**maximum 1000 characters** including spaces)

Project consortium

For the project coordinator (also indicated as "partner 1" in this form and as "coordinator" in the online submission forms) and each scientific partner *(others than the coordinator, including* ***also partners participating on own funding****), please fill in the following table. For patient organisations participating in the consortium as partners, lines can be added, if needed.*

Reminder (eligibility criteria and consortium composition: Maximum number of partners is 9, including the coordinator (no more than 3 partners from the same country from at least 2 different funders of the respective

country). Patient organisations and enterprises are not included in this calculation (for more details, please read the Call Text).

Attention: Detailed partner information have to be provided in the online submission form.

	Name and Surname of the Principal investigator	**Institution, Department, full Affiliations**	**City, Country**	**Type of entity:** University, Hospital, Research Institute, SME, Large Industry, Associations, other
Coordinator (= Partner 1)	*Automatically filled in from the Intent to Apply and cannot be changed.*	*Automatically filled in from the Intent to Apply and cannot be changed.*	*Automatically filled in from the Intent to Apply and cannot be changed.*	*Automatically filled in from the Intent to Apply and cannot be changed.*
Partner 2				
Partner 3				
Partner 4				
Partner 5				
Partner 6				
Partner 7				
Partner 8				
Partner 9				
Collaborator 1				
Collaborator 2				

Project coordinator (= Partner 1)

Please note that organisations which label themselves as end-user organisations must fit into the definition as provided by the THCS program (see the Call Text). This will have to be reflected in the description of the partner, in the work plan and in the dissemination activities.

Principal investigator (main contact) *Automatically filled in from the Intent to Apply and cannot be changed.*

Last Name	
First Name	
Gender	*Please select from the drop-down list:* ❑ F (Female) ❑ M (Male) ❑ X (Non-binary)
Title	*Please select from the drop-down list:* ❑ Dr ❑ Mr ❑ Mrs ❑ Ms ❑ Prof.
E-mail	

Organisation

Legal name	*Automatically filled in from the Intent to Apply and cannot be changed*
Short Name	*Automatically filled in from the Intent to Apply and cannot be changed*
Type of partner	*Automatically filled in from the Intent to Apply and cannot be changed*
If other, please specify:	*Automatically filled in from the Intent to Apply and cannot be changed*
Address	*Automatically filled in from the Intent to Apply and cannot be changed*
Postal Code	*Automatically filled in from the Intent to Apply and cannot be changed*
City	*Automatically filled in from the Intent to Apply and cannot be changed*
Country	*Automatically filled in from the Intent to Apply and cannot be changed*
Website	*Automatically filled in from the Intent to Apply and cannot be changed*
Envisaged Funding agency/organisation	*Automatically filled in from the Intent to Apply and cannot be changed*

VAT number	If no VAT number is available, insert main registration number
PIC number	If you want to participate in a project proposal, your organisation need to be registered and have a 9-digit Participant Identification Code (PIC). Please find details below: https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/how-to-participate/participant-register
NACE code	Please find details here https://nacev2.com/en
Other personnel participating in the proje (please provide last and first names and positions, 1 line per person)	

Department

Full name	If not applicable, write "Not applicable" and insert the address information of the organisation)
Address	
Postal Code	
City	
Country	

B. Project partners

Project partners applying for funding, min. 3 - max. 9 in total, including coordinator.
Please note that organizations which label themselves as end-user organizations must fit into the definition as provided by the THCS program (see the Call Text). Later on in the full proposal this has to be reflected in the description of the partner, in the work plan and in the dissemination activities.

Principal investigator (main contact)

Last Name	
First Name	

Gender	*Please select from the drop-down list* ❑ F (Female) ❑ M (Male) ❑ X (Non-binary)
Title	*Please select from the drop-down list:* ❑ Dr ❑ Mr ❑ Mrs ❑ Ms ❑ Prof.
E-mail	

Organisation

Legal name	
Short Name	
Type of partner	*Please select from the drop-down list:* ❑ Academia (research teams working in universities, other higher education institutions or research institutes) ❑ Healthcare and/or social welfare service provider ❑ Large companies ❑ Non-profit private partner (for instance NGO's) ❑ Patient organisations ❑ Other ❑ Small or medium enterprises
If other, please specify:	
Address	
Postal Code	
City	
Country	
Website	
Envisaged Funding agency/organisation	*Please select from the drop-down list*
VAT number	If no VAT number is available, insert main registration number
PIC number	If you want to participate in a project proposal, your organisation need to be registered and have a 9-digit Participant Identification Code (PIC). Please find details below: https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/how-to-participate/participant-register

NACE code	Please find details here https://nacev2.com/en
Other personnel participating in the project (please provide last and first names and positions, line per person)	

Department

Full name	If not applicable, write "Not applicable" and insert the address information of the organisation)
Address	
Postal Code	
City	
Country	

After filling the concerned partner information, click on "Save and Continue" to filling other partners information

For adding an extra partner, click on "Select to add another card for this section" then "Save and Continue"

For removing a partner, click on "Remove card" in the top right-hand corner

C. Project Collaborators

Project Collaborators - not applying for funding (max. 2 collaborators in total)
Please remember that each collaborator will have to precisely describe in the proposal the resources that he/she will dedicate to the project (personnel, material, in kind/in cash, …) and the origin of these resources.

Principal investigator (main contact)

Last Name	
First Name	

Gender	*Please select from the drop-down list:* ❑ F (Female) ❑ M (Male) ❑ X (Non-binary)
Title	*Please select from the drop-down list:* ❑ Dr ❑ Mr ❑ Mrs ❑ Ms ❑ Prof.
E-mail	

Legal name	
Short Name	
Type of partner	*Please select from the drop-down list:* ❑ Academia (research teams working in universities, other higher education institutions or research institutes) ❑ Healthcare and/or social welfare service provider ❑ Large companies ❑ Non-profit private partner (for instance NGO's) ❑ Patient organisations ❑ Other ❑ Small or medium enterprises
If other, please specify:	
Address	
Postal Code	
City	
Country	
Website	
VAT number	If no VAT number is available, insert main registration number
PIC number	If you want to participate in a project proposal, your organisation need to be registered and have a 9-digit Participant Identification Code (PIC). Please find details below: https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/how-to-participate/participant-register
NACE code	Please find details here https://nacev2.com/en
Other personnel participating in the project (please provide last and	

first names and positions, line per person)	

Department

Full name	If not applicable, write "Not applicable" and insert the address information of the organisation)
Address	
Postal Code	
City	
Country	

For adding an extra collaborator, click on "Select to add another card for this section" then "Save and Continue"

D. Researchers involved in the proposal

Organisation	
Title	*Please select from the drop-down list:* ❑ Dr ❑ Mr ❑ Mrs ❑ Ms ❑ Prof.
First name	
Last name	
Gender	*Please select from the drop-down list:* ❑ F (Female) ❑ M (Male) ❑ X (Non-binary)
Nationality	
Email	
Career stage (as defined in Frascati 2015 Manual):	• Category A Top grade officer/researcher: the single highest grade/post at which management/research is normally conducted. Example: Director/Head of Unit/Full professor or Director of research. • Category B Senior officer/researcher: Managers/Researchers working in positions not as senior as top position but more

	senior than newly qualified doctoral graduates (IsCED level 8). Examples: Programme Managers, associate professor or senior researcher or principal investigator. • Category C Recognised officer/researcher: the first grade/post into which a newly qualified doctoral graduate would normally be recruited. Examples: Project Manager, assistant professor, investigator or post-doctoral fellow. • Category D First stage officer/researcher: Either training contracts or doctoral students at the IsCED level 8 who are engaged as junior project managers, researchers, or researchers working in posts that do not normally require a doctorate degree. Examples: junior training contracts, PhD students or junior researchers (without a PhD).
Contribution in the project	*Please select from the drop-down list:* ❑ High ❑ Low ❑ Medium
Role in the project	*Please select from the drop-down list:* ❑ Principal investigator ❑ Ph.D Candidate ❑ Collaborator
Contract duration	*Please select from the drop-down list:* ❑ Long ❑ Short
Type of identifier	*Please select from the drop-down list:* ❑ Other (please specify) ❑ Google Scholar ❑ ORCID ❑ Researcher ID ❑ Scopus ID
If other, please specify	
Reference identifier	

If Principal Investigator, upload a brief CV (mandatory).

- *Brief CV of each principal investigator (**maximum 4,000 characters** including spaces, equivalent to about 1 A4 page, for each CV*
- *Each partner should be represented by a single Principal Investigator (co-PI are not accepted). Proposals with extra-CVs will be rejected The project coordinator and each principal investigator shall include a description of their main domain of research and a list of the five most relevant publications within the last five years, demonstrating the competence to carry out the project.*

For adding an extra researcher involved, click on "Select to add another card for this section" then

"Save and Continue"

E. Project description – Excellence

1.1 Relevance and scope

Describe how the proposal fits in the scope of the call and highlighting the transformative dimension of the proposed work for health and care systems (**maximum characters 4000**, including spaces)

1.2 Background, current state-of-the-art in the research field, knowledge needs and preliminary results obtained by the consortium members (In total for these questions, maximum characters: 8000 including spaces).

- Describe the need for your project. Which challenge(s) are you going to tackle with your project? Please indicate technical and/or implementation challenge that is addressed by the proposed work
- Summarise the state of the art of the research and innovation area/field the project aims to contribute to and describe the knowledge needs and challenges that justify the initiation of this project. Please include the overall project objectives.
- Describe the preliminary results obtained by the consortium members and highlight any prior work related to the proposal

1.3 Research and innovation questions.

Describe in more detail the research and/or innovation questions and/or hypotheses. (**Maximum 3000 characters including spaces.)**

1.4 Methodology and approach (In total for these questions, maximum characters: 8000 including spaces).

Make sure that the theoretical approach and/or choice of methods is well accounted for and described in detail, and that it is clear how the methods are adequate for addressing the research and/or innovation questions, hypotheses, and project objectives.

- Describe thoroughly the approach chosen to address the project objectives, research questions/innovation idea(s). In particular, describe how relevant stakeholders/users are integrated in to the project and, if relevant, specify why an interdisciplinary approach has been chosen.

- Describe thoroughly the methodology chosen to address the project objectives, research questions/innovation idea(s). In particular indicate the methods of data collection (Indicate the data that will be collected, the tools used), the statistic plan (calculation of statistical data), the statistical analysis and the timing of data analysis.

- Describe how gender perspectives will be taken into account in the research and/or innovation content.

- Describe the role of social sciences and humanities in the project or provide a justification if you consider that these disciplines are not relevant to your proposed project.

F. Project description – Impact

2.1 Significance and innovation

Make sure you clearly highlight the added value of transnational collaboration and the project's relevance in relation to the impact on the transformation of health and care systems. (In total for these questions, ***maximum characters: 8000 including spaces****).*

- Describe the potential impact on health and on the quality, effectiveness and sustainability of health and care services that the results of your proposed work will have.

- Describe the novelty of the proposal in translating innovation into health and care systems.

2.2 Expected impacts of the proposed research and/or innovation

The description of the potential impact should be project specific and related to the planned research and/ or innovation. General elaborations on the benefits of research and/or innovation in a wider context should be avoided. (In total for these questions, ***maximum characters: 8000 including spaces****).*

- Describe the expected impacts of your project (For example: societal, economic, scientific, policy, etc).

- Building on the description of project objectives and novelty, describe clearly why and how the project outcomes may address important present and/or future (scientific) challenges and have an impact on the research and/or innovation area/field, if successful.

- Describe why and how the project output will create value for the public sector and/or civil society and/or the industry. Describe how your project will affect people's health and/or care in practice.

- Describe how new knowledge and project outputs have the potential to address one or more of the UN sustainable development goals. (https://www.un.org/sustainabledevelopment/)

- When do you expect the results of this projects to be ready for use in daily practice? Please explain.

2.3 Measures for impact maximisation

a. Stakeholder Involvement: the ecosystem approach ***(In total for these questions, maximum characters: 8000 including spaces).*** *Describe the role and contribution of operational stakeholders and other kinds of end-user, if different (e.g. patient organisations, citizens or citizen representatives, local communities, schools, municipalities, local/regional/national NGOs, consumer organisations, companies). If you feel that this is not applicable to your application, please explain why.*

For patient and citizen involvement:
Please provide information about the involvement/contribution of relevant patient organisations within the proposal (if available/applicable). Please provide information on the individuals/groups and the way in which they will be involved. ***Please note that public and patient involvement does not include the recruitment of study participants.*** *This is considered participation rather than involvement.*

Answer the following questions:

- For which type of patients it is relevant to be involved in the project?

- Do you involve patients in your project?

- If yes, please explain how you involve them.

- If not, explain reasoning behind not involving them.

Other stakeholder involvement:

- Describe the role and contribution of other operational stakeholders (SME's, hospitals, municipalities, local/national NGOs, consumer organisations) (**maximum characters 2000, including spaces**)

- Describe the level of involvement of relevant stakeholders for each stage of the project (**maximum characters 1000, including spaces**)

- Explain reasoning behind involving/not involving certain stakeholders (**maximum characters 1000, including spaces**)

- Describe the impact of your project on the different involved stakeholders (**maximum characters 1000, including spaces**)

b. Open Science, data management and data sharing

Develop a data management strategy. Take into account the FAIR data management principles. Include a description of how the data gathered through the project will be available to the wider research community and the sustainability of the research results within the wider research community. (**maximum characters 3000, including spaces**)

c. Exploitation and dissemination of expected results (In total for these questions, maximum characters: 8000 including spaces).

- Describe the target audience and stakeholders/users of the project outputs

- Describe the measures of the consortium to exploit, disseminate and communicate the expected project results.

- Outline the scope and plan for dissemination, communication and engagement activities

- Describe how the stakeholders/users are involved in the dissemination and utilisation of the project results;

- Describe pathways of transfer into practice, e.g. translation of the results into policy recommendations or actions;

- Describe arrangements between participating partners regarding IPR, if applicable.

G. Project description – Implementation:

3.1 Work plan

Briefly summarise the work plan including the objectives, the rationale for improving prevention

strategies in health and care services through the use of use of new Information Technology (IT) and digital-based technologies, for making them person-centred and better adjusted to people's needs. (**maximum characters 3000, including spaces**)

List of work packages

Please use the following table for listing the different work packages and indicating the respective lead partner as well as the total effort in person months required per work package.

WP n°	Work Package Title	Lead Project Partner	Person Months	Start Month	End Month
1					
2					
3					
4					
5					
…	*Add more rows as required*				

Work package description (max. 8 pages)

Please use the following tables for describing individual work package.
Copy this structure as many times required.

WP number	**WP 1**		**Lead Partner**	***Insert name here***
WP title	***Insert title here***			
Partner number	1	2	3	…
Partner name				
Person months				
Start month	***Insert here***		**End month**	***Insert here***

Objectives

Description of work

For adding an extra Work Package, click on "Select to add another card for this section" then "Save and Continue"

Timeline and milestones (maximum 2,000 characters, including spaces)
This section should describe the project timeline and milestones and include a graphic representation of the project time plan and the milestones (Gantt chart). The Gantt chart has to be uploaded with the Pert Diagram (see following section)

Diagram which compiles the work plan, the contribution of the partners to each work package and their interactions (Pert diagram).
Please note that Pert diagram and Gantt chart (see previous section) must be assembled and uploaded in a single PDF document.

Describe the organisation and management structure, i.e. the project governance. *(**Maximum characters 2000, including spaces**)*

Added value of the collaboration in the proposed transnational project
*This section should describe the quality of the transnational research consortium (**maximum characters 4000, including spaces**) and in particular*

a. *the level of expertise of the project coordinator and the individual partner research teams in the field(s) of the proposal (team scientific track record, publications, patents, etc.) to complement the information in the CVs.*
b. *the quality of the collaboration among the research teams and added value of the research consortium with respect to the individual teams. In particular, describe the consortium, the partners*

(including collaborating organisations), their role and complementarity in the context of the proposed project. If partners cover their own costs- please indicate that.

c. *the expected added value of collaboration on scientific and transnational level – sharing of resources, data, know-how etc.*

Outside resources, if applicable

*If you do not have all skills/resources in-house, describe the reasons and how you intend to get them (contributions of members, partner organisations, subcontracting, etc.). If there is subcontracting, please also complete the information in section Detailed financial plan per partner. Please note that core tasks of the Project cannot be subcontracted. (**maximum characters 2000, including spaces**)*

Critical risks for implementation

*Describe possible risks that might endanger achieving the objectives by indicating for each of them the level of likelihood and severity. Describe how these risks will be managed and in particular the proposed risk mitigation measures. (**maximum characters 4000, including spaces**)*

Contribution in person months

Please use the following table for detailing the distribution of work in person months (PM) in different work packages (WP) (adapt if necessary). This table should include all the persons working in the project (PI, researchers, Technicians, PhD, post-docs).
Person months contribution should not be limited to the person months for which funding is requested. For example, person months provided in kind by your research institution should be indicated in this table as well.

Partner n°	Project Partner Name	WP1	WP2	WP3	WP4	WP5	WP…	Total PM
1								
2								
3								
…	*Add more rows as required*							
	Total							

H. Financial Plan – Partners

Important notice.

- *All categories of the costs may not be eligible for all countries (it will be handled according to national regulations (see call text Annex 1 and/or contact the relevant regional/national funding organisation). Please ensure you adhere to any specific national rules.*
- *In addition, specification of co-funding from other sources necessary for the project as well as secured funding of additional collaborators of the consortium should be explained here, if applicable.*
- Thousand separators and whole numbers should be used only (e.g. 200.000).
- Travel and subsistence costs: travel expenses should include the participation of the coordinators and/or national partner leaders at an intermediate and/or a final status symposium to present the results of their projects.
- Other direct costs: please note that e.g. subcontracting, provisions, licensing fees; may not be eligible costs in all countries (will be handled according to legal framework and funding body regulations). Check at the respective national funding organisations.
- Indirect costs (Overhead): funded according to national legal framework and funding body regulations. Check at the respective national funding organisations in Annex 1 of the call text.

Financial plan of project budget (in €1): Please make sure that the same figures are entered in the sections that need to be completed online (submission tool)

*Please note that **not** all types of expenditure are fundable by all funding organisations (see the "Guidelines for Applicants" for details on the eligibility criteria and contact the relevant THCS regional/national funding organisation). Thousand separators and whole numbers should be used only (e.g. 200.000).*
Please adapt the table and add columns in this section, if collaborators or patient organisations are included as partners.

	Coordinator (Partner 1)		**Partner 2**		**Partner 3**		**Partner 4**		**Partner 5**	
PI (group lead)										
Institution										
Country										
Funding organisation										
PROJECT COSTS (€)	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested
Person Months										
Personnel €										
Consumables €										
Equipment €										
Travel €[2]										
Other direct costs €[3]										
Overheads €[4]										
Subcontracting[3]										
TOTAL										

	Partner 6		Partner 7		Partner 8		Partner 9		Collaborator 1	
PI (group lead)										
Institution										
Country										
Funding organisation										
PROJECT COSTS (€)	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested	Total = *requested + in-kind*	Requested
Person Months										
Personnel €										
Consumables €										
Equipment €										
Travel €[2]										
Other direct costs €[3]										
Overheads €[4]										
Subcontracting[3]										
TOTAL										

[1] Those countries whose currency is different than € shall include their national currency in brackets

[2] Travel expenses should include the participation of the coordinator and regional/national partner leads for at least two status seminars to present the project results.

[3] e.g. subcontracting, provisions, licensing fees; may not be eligible costs in all countries (will be handled according legal framework and funding body regulations).

[4] Overhead costs: funding according to regional/national legal framework and funding body regulations. Check the respective funding organisation Annex II “Guidelines for Applicants”

4.1 Budget Justification per partner (in €): (max 9 + collaborators)

Each partner who requests funding as well as each collaborator has to fill in the following budgetary table. Please justify each of the budget items with a short description.

Please note that:

- *Each partner who requests funding as well as each collaborator has to fill in the following budgetary table. Please justify each of the budget items with a short description in the right column. You can use the examples and instructions that are given in purple.*
- Travel and subsistence costs: travel expenses should include the participation of the coordinators and/or national partner leaders at an intermediate and/or a final status symposium to present the results of their projects.
- Other direct costs: please note that e.g. subcontracting, provisions, licensing fees; may not be eligible costs in all countries (will be handled according to legal framework and funding body regulations). Check at the respective national funding organisations.
- Indirect costs (Overhead): funded according to national legal framework and funding body regulations. Check at the respective national funding organisations in Annex 1 of the call text.

Type	**Item Description**	**Total = requested + in-kind**	**Requested**
Personnel € and Person Months (PM) *Please specify (e.g. PhD students, Post Doc researchers, technicians and the number of Person-Months)*			
Consumables *Please specify (e.g. reagents, kits, antibodies, cell culture material, animals, etc.)*			
Equipment *Please specify equipment*			
Travel *Please specify (e.g. allowances, meeting fees, etc.)*			
Other direct costs *Please specify (e.g. animal costs, provisions, licensing fees, patents, publications, etc.)*			
Overheads*			

Subcontracting			
	TOTAL:		

* Please note that there is no common flat rate for the overheads category given by the THCS call. It may vary according to each funding agency's regulations; please check the "Guidelines for Applicants" or contact your relevant funding agency for further information.

For adding an extra partner, click on "Select to add another card for this section" then "Save and Continue"

For removing a partner, click on "Remove card" in the top right-hand corner

Overview of the project financial plan

Please upload the template of the project financial plan (mandatory field)

Download the template at:

https://s3.eu-south-1.amazonaws.com/documenti.cbim.it/THCS_OverviewProjectFinancialPlan.xlsx

I. Ethics

Short description of ethics and legal aspects in your proposal:

In order to complete the ethics self-assessment, please go through the table below and for each section for which your answer is "YES" ***, please add a description of information at the end of each relevant section.*** *Please also provide an overview on related* ***tasks, responsible partners and documents to be provided for each question.***

For more information please see: https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/common/guidance/how-to-complete-your-ethics-self-assessment_en.pdf

Please attach any supporting documents that are already available and, for the documents that are not yet available, indicate when you expect that they will be available. All relevant documents listed in the table and that are not yet available have to be ready to be submitted upon request.

Section 1: Human embryonic stem cells and human embryos		**YES/NO**	**If yes,** **Add description in the appropriate section at the end of the table**
Does this research involve Human Embryonic Stem Cells (hESCs)?			
If YES:	Will they be directly derived from embryos within this project?		
	Are they previously established cells lines?		
	Are the cell lines registered in the European registry		

	for human embryonic stem cell lines?		
Does this research involve the use of human embryos?			
If YES:	Will the research lead to their destruction?		
Does this research involve the use of other human embryonic or foetal tissues / cells?			
Description (mandatory if this section is relevant to your project):			

Section 2: Humans		**YES/NO**	**If yes,** **Add description in the appropriate section at the end of the table**
Does this research involve human participants?			
If YES:	Are they volunteers?		
	Are they healthy volunteers for medical studies?		
	Are they patients for medical studies?		
	Are they potentially vulnerable individuals or groups?		
	Are they children/minors?		
	Are they persons unable to give informed consent?		
Does this research involve interventions (physical also including imaging technology, behavioural treatments, tracking and tracing, etc.) on the study participants?			
If YES:	Does it involve invasive techniques (e.g. collection of human cells or tissues, surgical or medical interventions, invasive studies on the brain, TMS etc.)?		
	Does it involve collection of biological samples?		
Description (mandatory if this section is relevant to your project):			

Section 3: Humans cells / tissues		**YES/NO**	**If yes,** **Add description in the appropriate section at the end of the table**
Does this research involve human cells or tissues? (other than from Human Embryos/Foetuses, see section 1)			
If YES:	Are they human embryonic or foetal cells or tissues?		
	Are they available commercially?		
	Are they obtained within this project?		
	Are they obtained from another project, laboratory or institution?		
	Are they obtained from a biobank?		
Does this research involve interventions (physical also including imaging technology, behavioural treatments, tracking and tracing, etc.) on the study participants?			
Description (mandatory if this section is relevant to your project):			

Section 4: Personal data		**YES/NO**	**If yes,** **Add description in the appropriate section at the end of the table**
Does this research involve processing of personal data?			
If YES:	Does it involve the processing of special categories of personal data (e.g. sexual lifestyle, ethnicity, genetic, biometric and health data, political opinion, religious or philosophical beliefs)?		
	Does it involve processing of genetic, biometric or health data?		

	Does it involve profiling, systematic monitoring of individuals, or processing of large scale of special categories of data or intrusive methods of data processing (such as, surveillance, geolocation tracking etc.)?		
Does this research involve further processing of previously collected personal data (including use of pre-existing data sets or sources, merging existing data sets)?			
Is it planned to export personal data (data transfer) from the EU to non-EU countries?			
Is it planned to import personal data (data transfer) from non-EU countries into the EU or from a non- EU country to another non-EU country?			
Does this research involve the processing of personal data related to criminal convictions or offences?			
Description (mandatory if this section is relevant to your project):			

Section 5: Animals		**YES/NO**	**If yes,** **Add description in the appropriate section at the end of the table**
Does this research involve animals?			
If YES:	Are they vertebrates?		
	Are they non-human primates (NHPs)?		
	Are they genetically modified?		
	Are they cloned farm animals?		
	Are they endangered species?		
Please indicate the species involved:			
Description (mandatory if this section is relevant to your project):			

Section 6: Non-EU countries	YES/NO	If yes, Add description in the appropriate section at the end of the table
In case non-EU countries are involved, do the research related activities undertaken in these countries raise potential ethics issues? Specify the countries involved:		
Is it planned to use local resources (e.g. animal or human tissue samples, genetic material, live animals, human remains, materials of historical value, endangered fauna or flora samples, etc.)?		
Is it planned to import any material (other than data) from non-EU countries into the EU or from a non- EU country to another non-EU country?		
If YES: Specify material and countries involved:		
Is it planned to export any material (other than data) from the EU to non-EU countries?		
Does your activity involve low or lower-middle income countries?		
Could the situation in the country put the individuals taking part in the research at risk?		
Description (mandatory if this section is relevant to your project):		

Section 7: Environment, Health and Safety	YES/NO	If yes, Add description in the appropriate section at the end of the table
Does this activity involve the use of substances or processes (or technologies) that may cause harm to the environment, to animals or plants (during the implementation of the activity or further to the use of the results, as a possible impact)?		
Does this research deal with endangered fauna and/or flora/protected areas?		
Does this activity involve the use of substances or processes (or technologies) that may cause harm to humans, including those performing the activity (during the implementation of the activity or further to the use of the results, or the deployment of the technology as a possible impact)?		
Description (mandatory if this section is relevant to your project):		

Section 8: Artificial Intelligence	YES/NO	If yes, Add description in the appropriate section at the end of the table
Does this activity involve the development, deployment and/or use of Artificial Intelligence-based systems?		
Could the AI based system/technique potentially stigmatise or discriminate against people (e.g. based on sex, race, ethnic or social origin, age, genetic features, disability, sexual orientation, language, religion or belief, membership to a political group, or membership to a national minority)?		
Does the AI system/technique interact, replace or influence human decision-making processes (e.g. issues affecting human life, health, well-being or human rights, or economic, social or political decisions)?		
Does the AI system/technique have the potential to lead to negative social (e.g. on democracy, media, labour market, freedoms, educational choices, mass surveillance) and/or		

environmental impacts either through intended applications or plausible alternative uses?		
Does the AI to be developed/used in the project raise any other ethical issues not covered by the questions above (e.g., subliminal, covert or deceptive AI, AI that is used to stimulate addictive behaviours, life- like humanoid robots, etc.)?		
Description (mandatory if this section is relevant to your project):		

Section 9: Other ethics issues	**YES/NO**	**If yes,** **Add description in the appropriate section at the end of the table**
Are there any other ethics issues that should be taken into consideration?		
Description (mandatory if this section is relevant to your project):		

Section 10: Crosscutting issues – Potential misuse of results	**YES/NO**	**If yes,** **Add description in the appropriate section at the end of the table**
Does this research have the potential for misuse of research results?		
Description (mandatory if this section is relevant to your project):		

J. Checklist for the Coordinator

Checklist for the Coordinator

In order to make sure that your proposal will be eligible for this call, please collect the information required (help provided through the "Call Text", "Guidelines for Applicants" and your regional/national contact points) and tick all the sections below before starting to complete this application form.

General conditions:

☐ The project proposal addresses the **AIM/s** of the call.

☐ I am aware of the **regional/national requirements** of the corresponding funding organisations**.**

☐ The Intent to apply was submitted correctly.

Composition of the consortium:

☐ The project proposal involves at least three partners eligible for funding from three different EU Member States countries, or two EU Member States and at least one Associated Country whose funders participate in the call. All three legal entities are independent of each other.

☐ The project coordinator is eligible to be funded by one of the participating funding organisations.

☐ Max. 2 project partners request funding from the same funding organisation, including patient organisations. For some funding agencies, the maximum number of eligible partners who can be funded in one project is limited to one (see also "Guidelines for Applicants" for individual funding rules).

☐ No more than two partners with own funding are part in the consortia with at least three partners eligible for funding. Patient organisations are not included in this calculation and can be added as additional partners on own funding

☐ If a research group with its own funding is part of the consortium, the respective partner is indicated as a full partner in this proposal template.

Eligibility of consortium partners:

☐ I have checked that no partner of this consortium is a member of the THCS partnership consortium, Peer Review Panel (PRP), Call Steering Committee (CSC) or Call Advisory Board.

☐ I have checked that partners involved in the project proposal and requesting budget are eligible to receive funding from their funding organisation.

☐ If the consortium includes a partner on own funding: For the partner participating with its own funding, a signed (written) statement (commitment letter) is uploaded in the respective section on the online submission tool, declaring that this research group will be able to run the project with its own resources.

K. Additional Annexes

The following Annexes must be uploaded in the submission system a separate pdf files.

1) **Bibliography (maximum 6,000 characters including spaces, equivalent to about one and half A4 page).**

The Annex should provide detailed citations for sources you reference in the proposal.

2) **Relevant Research Projects**

Past and ongoing most relevant research projects of each participating group related to the present topic. Please note that maximum 5 projects per Partner can be indicated by using the following table.

Partner Short name	**Project reference No and Title,Funding programme**	**Period** (start and end date)	**Role** (COO, BEN, OTHER)	**Amount** (EUR)	**Website (if any)**
[name]					
[name]					

3) **Signatures**

Digital signatures or scanned signatures are accepted. These signatures should be from the principal investigators listed in part 2. An official signature of the respective institutions is not necessary.

Please use the following template.

Template for signatures

General Data Protection Regulation

By submitting and signing this application, the applicants consent to the use, processing and retention of their personal data, in accordance with article 6.1 (e) and (c) of the General Data Protection Regulation (GDPR) (2016/679) and for the purposes of:

- processing and evaluating the application where processing shall be lawful only if and to the extent that processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller;
- administering any subsequent funding award;
- managing the Funding Organisations relationship with them;
- analysing and evaluating the call;
- providing aggregate data to national and European surveys and analyses on the funded projects;
- and complying with audits that may be initiated by the Funding Organisations and the European Commission (or its agencies).

The members of the Call Steering Committee (CSC), i.e. representatives of the funding organisations that fund this JTC, may share applicant's data with third parties (some of which may be based outside the European Economic Area) in relation to the above activities including evaluators, auditors and the European Commission (or its agencies).

The members of the CSC may link the data that funding recipients provide in the application with national, bibliographic or external research funding data which are available through public subscription-based databases (e.g. Scopus, Web of Science, etc.) or other national / open datasets.

In addition, the applicants declare their willingness to participate in the research consortium and that they did not receive other public funds to accomplish any tasks described in the project proposal.

Coordinator **Last Name:** **First Name:** **Institution:**	**Stamp and Signature** **Date:**

The project partners below have checked their regional/national regulations. They are informed about the content of this joint application.

Signature Partner 1: _____

Signature Partner 2: _____

Signature Partner 3: _____

Signature Partner 4: _____

Signature Partner 5: _____

Signature Partner 6: _____

Signature Partner 7: _____

Signature Partner 8: _____

Signature Partner 9: _____

Please add further signature positions, if needed.

Annex 4. Checklist for intervention studies

Make use of this checklist in case you plan an intervention study

Please note: this list is only meant to double-check if you have included all relevant information on your interventional study in the proposal.

General:

- The need for the study
- What is the problem to be addressed?
- What is/are the principal research question(s) to be addressed?
- Is there a robust evidence-based rationale/coherent hypothesis for the study
- What outcome are you aiming for and how might this bring about change?
- Describe any risks to the safety of participants involved in the intervention

The Proposed Study

- Describe the planned intervention. Fully describe the intervention in PICO terms (Population/Patient group, Intervention, Comparison group/Control, Outcomes)
- Has any pilot or feasibility work been conducted to be confident that the intervention can be implemented as intended?
- What are the proposed practical arrangements for allocating participants to study groups?
- What are the proposed methods for protecting against sources of bias? e.g. Blinding or masking.
- What are the planned inclusion/exclusion criteria?
- What is the proposed sample size and what is the justification for the assumptions underlying the power calculations? Include for both control and intervention groups, a brief description of the power calculations detailing the outcome measures on which these have been based, and give event rates, means and medians etc. as appropriate.
- What is the planned recruitment rate (overall and per site if relevant)? What evidence is there that the planned recruitment rate is achievable over a given timeframe
- What are the planned Stopping criteria?
- Are you planning to include health economics and/or quality of life measures? If yes, provide full details regarding the type of analysis to be undertaken, the rationale of the design proposed, the personnel who will conduct analysis, power calculations and inclusion/exclusion criteria.
- Have you considered compliance issues, acceptability testing, user involvement, any local or other contextual issues?

Data Collection and Management

- Describe arrangements for day-to-day management and monitoring of the trial e.g. randomisation, data handling, and coordination.
- Will the design chosen really enable you to draw conclusions about effectiveness?