



TRANSFORMING HEALTH  
AND CARE SYSTEMS

## **Deliverable N. 1.4**

# **ANNUAL WORK PLAN (2025)**

### ***WP1***



# DOCUMENT SUMMARY

<b>Deliverable Number</b>	1.4
<b>Deliverable Name</b>	ANNUAL WORK PLAN 2 - 2025
<b>Type</b>	R
<b>Dissemination level</b>	PU
<b>Work Package</b>	WP1
<b>Lead Beneficiary</b>	IT MOH
<b>Contractual delivery date</b>	M22
<b>Actual delivery date</b>	M23
<b>Grant Agreement Number</b>	101095654
<b>Project name</b>	European Partnership on Transforming Health and Care Systems
<b>Acronym</b>	THCS
<b>Start date of the project:</b>	01/01/2023
<b>Duration</b>	84 months

**Contributors (if any):** WP leaders

## Disclaimer

Funded by the European Union under the Horizon Europe Framework Programme - Grant Agreement N°: 101095654. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or European Health and Digital Executive Agency (HADEA). Neither the European Union nor the granting authority can be held responsible for them.

## Executive Summary

The **Annual Work Plan** outlines the activities and objectives that the THCS Partnership intends to undertake in its third year of operation. Developed through a structured process, it serves as a guiding document for implementing the strategic goals of the Partnership. The plan provides a clear framework, detailing the operational tasks and specific deliverables that will be carried out during the year.

In addition to outlining the key activities, the Annual Work Plan includes the agreed-upon **budget** and the **allocation of staff effort** required for successful execution. This ensures that all resources are properly aligned with the Partnership's objectives.

As a formal document, the work plan translates the broader strategic goals of the THCS Partnership into concrete actions, offering clear direction for the upcoming year and providing transparency regarding expected outcomes. It serves as both a planning and management tool, helping to ensure that the Partnership remains focused on its mission while efficiently utilizing its resources.

# TABLE OF CONTENTS

<b>1 LIST OF PARTICIPANTS</b>	<b>5</b>
<b>2 COHERENCE WITH PART B OF THE PROPOSAL</b>	<b>7</b>
2.1 AWP objectives	7
2.2 Expected impacts	10
2.3 Correspondence with part B of the proposal	11
<b>3 ANNUAL WORK PROGRAMME ACTIVITIES</b>	<b>17</b>
3.1 Detailed Work Plan description	17
3.2 GANTT	65
3.2.1 AWP Tasks Overview	71
3.2.2 Annual Deliverables List	71
3.3 Participation in Annual Work Programme activities	72
3.3.1 Partner Profiles	72
3.3.2 Partners' additional information	98
3.3.2.1 Subcontract	98
3.3.2.2 Affiliated Entities	98
3.3.2.3 In-kind contribution	98
3.3.2.4 Financial Support to Third Parties	99
3.3.2.5 Associated Partners	100
3.4 Resources to be committed	101
3.4.1 Summary of Staff Effort	101
3.4.2 Other major cost items (travel, equipment, infrastructure, goods and services)	106

# 1 LIST OF PARTICIPANTS

No	Participant organisation name		Country
1	MINISTERO DELLA SALUTE	IT MOH	IT
1.1	ISTITUTO SUPERIORE DI SANITÀ	ISS	IT
1.2	AZIENDA ULSS 4 VENETO ORIENTALE	PROMIS	IT
2	MINISTERO DELL'UNIVERSITA E DELLA RICERCA	MUR	IT
3	REGIONE TOSCANA	RT	IT
4	UNIVERSITÀ CATTOLICA DEL SACRO CUORE	UCSC	IT
5	ÖSTERREICHISCHE FORSCHUNGSFÖRDERUNGSGESELLSCHAFT MBH	FFG	AT
6	BUNDESMINISTERIUM FUER KLIMASCHUTZ, UMWELT, ENERGIE, MOBILITÄT, INNOVATION UND TECHNOLOGIE	BMK	AT
8	FONDS INNOVEREN EN ONDERNEMEN	FIO	BE
8.1	VLAAMSE GEWEST	VLAIO	BE
10 *	MINISTÈRE DE LA COMMUNAUTÉ FRANÇAISE DE BELGIQUE	FWB	BE
11	FONDS DE LA RECHERCHE SCIENTIFIQUE- FNRS	F.R.S.-FNRS	BE
12	SUOMEN AKATEMIA	AKA	FI
13	TAMPEREEN KORKEAKOULUSÄÄTIÖ SR	TAU	FI
14	TERVEYDEN JA HYVINVOINNIN LAITOS	THL	FI
15	AGENCE NATIONALE DE LA RECHERCHE	ANR	FR
16	MINISTERE DES AFFAIRES SOCIALES ET DE LA SANTE	FR MOH	FR
16.1	INSTITUT NATIONAL DE LA SANTÉ ET LA RECHERCHE MÉDICALE	INSERM	FR
17	GENIKI GRAMMATIA EREVNAS KAI KAINOTOMIAS	GSRI	EL
18	RANNSOKNAMIDSTOD ISLANDS	RANNIS	IS
19	THE HEALTH RESEARCH BOARD	HRB	IE
20	MINISTRY OF HEALTH	CSO MOH	IL
21	LATVIJAS ZINATNES PADOME	LZP	LV
22	LIETUVOS RESPUBLIKOS SVEIKATOS APSAUGOS MINISTERIJA	SAM	LT
23	LIETUVOS MOKSLO TARYBA	LMT	LT
24	NEDERLANDSE ORGANISATIE VOOR WETENSCHAPPELIJK ONDERZOEK	NWO	NL
25	ZORG ONDERZOEK NEDERLAND ZON	ZonMw	NL
26	NORGES FORSKNINGSRAD	RCN	NO
27	NARODOWE CENTRUM BADAN I ROZWOJU	NCBR	PL
28	AICIB - AGÊNCIA DE INVESTIGAÇÃO CLÍNICA E INOVAÇÃO BIOMÉDICA	AICIB	PT
29	FUNDACAO PARA A CIENCIA E A TECNOLOGIA	FCT	PT
30	COMISSÃO DE COORDENACAO E DESENVOLVIMENTO REGIONAL DO CENTRO	CCDRC	PT
31	UNIVERSITATEA BABES BOLYAI	UBB	RO
32	MINISTERSTVO ZDRAVOTNICTVA SLOVENSKEJ REPUBLIKY	SR MOH	SK
32.1	UNIVERSITY HOPITAL MARTIN	UHM	SK

33	OFFICE OF THE GOVERNMENT OF THE REPUBLIC OF SLOVENIA FOR DIGITAL TRANSFORMATION	ODT	SI
34	MINISTRY OF HEALTH OF THE REPUBLIC OF SLOVENIA	SI MOH	SI
34.1	NACIONALNI INSTITUT ZA JAVNO ZDRAVJE	NIJZ	SI
35	AGENCIA ESTATAL DE INVESTIGACION	AEI	ES
36	FUNDACION INSTITUTO DE INVESTIGACION MARQUES DE VALDECILLA	IDIVAL	ES
37	CONSEJERÍA DE SALUD Y FAMILIAS DE LA JUNTA DE ANDALUCÍA	CSCJA	ES
37.1	FUNDACIÓN PÚBLICA ANDALUZA PROGRESO Y SALUD	FPS	ES
38	INSTITUTO ARAGONES DE CIENCIAS DE LA SALUD	IACS	ES
39	FORSKINGSRADET FOR HALSA ARBETSLIVOCCH VALFARD	FORTE	SE
40	VERKET FOR INNOVATIONSSYSTEM	VINNOVA	SE
42	AGENZIA REGIONALE PER LA SALUTE ED IL SOCIALE	ARESS	IT
43	INSTITUTO DE SALUD CARLOS III	ISCIII	ES
44	XJENZA MALTA (formerly MCST)	XM	MT
45	STICHTING NEDERLANDS INSTITUUT VOOR ONDERZOEK VAN DE GEZONDHEIDSZORG	NIVEL	NL
46	SOTSIAALMINISTEERIUM	MSA	EE
47	SIHTASUTUS EESTI TEADUSAGENTUUR	ETAg	EE
48	INNOVATIONSFONDEN	IFD	DK
49	DEPARTAMENTO DE SALUD GOBIERNO VASCO	DPTO SALUD	ES
49.1	FUNDACION VASCA DE INNOVACION E INVESTIGACION SANITARIAS	BIOEF	ES
50	ASOCIACIÓN INSTITUTO DE INVESTIGACIÓN EN SERVICIOS DE SALUD-BIOSISTEMAK	BIOSISTEMAK	ES
51	UNITATEA EXECUTIVA PENTRU FINANTAREA INVATAMANTULUI SUPERIOR A CERCETARII DEZVOLTARII SI INOVARII	UEFISCDI	RO
52	FEDERAL OFFICE OF PUBLIC HEALTH	FOPH	CH
53	SCHWEIZERISCHE AGENTUR FUR INNOVATIONSFORDERUNG	INNOSUISSE	CH
54	SCHWEIZERISCHER NATIONALFONDS ZUR FORDERUNG DER WISSENSCHAFTLICHEN FORSCHUNG	SNSF	CH
55	SCOTTISH GOVERNMENT	SG	UK
56	THE NHS CONFEDERATION	NHSC	UK
57*	AGENCY FOR HEALTHCARE RESEARCH AND QUALITY	AHQR	US
58*	HEALTH DATA RESEARCH	HDR	UK

\*All activities and costs are set to zero, as these beneficiaries have communicated their intention to withdraw from the Partnership. Their withdrawal will be reflected in the next amendment.

## 2 COHERENCE WITH PART B OF THE PROPOSAL

### 2.1 AWP objectives

The general objective of the European Partnership on Transforming Health and Care Systems (THCS) is to contribute to the transition towards more sustainable, efficient, resilient, innovative, high-quality, people-centred, inclusive and equally accessible health and care systems. The idea is to catalyse such transformation by building an open and supporting Partnership where all stakeholders can collaborate to stimulate and nurture research and innovation activities.

In order to reach this overall objective, during the third year the THCS Partnership will address the following specific operational objectives, by implementing key preliminary activities that in the short, medium and long run will ensure that such Operative Objectives (OO) are fully reached by the end of the THCS Partnership.

In order to **increase funding opportunities and strengthen the research and innovation community (SO1)** THCS will contribute to the following THCS Operational Objectives:

- OO1: Enable better alignment of priorities and coordination of funding to support health and care systems research and innovation
- OO2: Allocate resources promoting collaborative transnational methodological research, experimental development, implementation research, applied research, and innovation activities on e.g., technological and interdisciplinary aspects, digitalization, organisational innovations, and innovative service models while exploiting potential synergies among funding programmes.

In order to reach the above-mentioned objectives, during Year 3 THCS Partnership will aim at:

- launching the third JTC;
- preparing and approving the Annual Work Plan 2026;
- implementing the strategy developed to systematically monitor the RDI funding priorities at National/Regional level in the field of Health and care System Transformation.

#### References to AWP 2025 Tasks: 1.2, 6.1, 8.1, 8.3

In order to **Fill knowledge gaps (SO2)** THCS will contribute to the following Operative Objectives:

- OO3: Support comparative analyses of national or regional strategies and approaches to advance health and care services and uptake research findings into policy.
- OO4: Support the understanding of the evidence required to effectively inform the transferability of innovation based on different contexts.
- OO5: Support the identification of context-based new solutions responding to the challenges of the health and care sector and beyond.
- OO6: Promote the assessment of the adoption and use of innovation focusing on the concept of value proposition: who will benefit and how to minimize unintended consequences
- OO7: Foster harmonisation of methodologies and frameworks for monitoring and assessment of innovative solutions

In order to reach the above-mentioned objectives Year 3 of the THCS Partnership will be aimed at:

- assessing the needs in terms of 1) RDI and 2) capacity-building and training in implementing RDI outcomes for health and care systems in the EU and THCS Partnership countries by performing scientific research literature and review focused on national, European and international strategic and policy documents, including the work carried out by WHO, OECD and other international organisations;
- Developing JTC aim at reaching OO3, OO4, OO5, OO6, OO7;
- selecting for funding RDI projects under the JTC2025 aimed at reaching the OO3, OO4, OO5, OO6, OO7;
- monitoring that Funded projects under JTC2023 and JTC2024 are addressing OO3, OO4, OO5, OO7
- promoting activities of the THCS-funded projects to support the adoption of transformative innovative solutions as well as building synergies with other regional/national and European initiatives to maximise the impact of these solutions on the ground, facilitated by THCS Knowledge Hub (WP10) and the network of THSC' ecosystems (WP9).
- implementing THCS framework for supporting transferability and implementation of practices supported by THCS Knowledge Hub (WP10)

#### **References to AWP 2025 Tasks: 4.1, 4.2, 6.3, 7.1, 8.1, 8.2, 8.3, 9.1, 10.1**

In order to **increase the ability to implement innovation (SO3)** THCS will contribute to the following THCS Operative Objectives:

- OO8: Promote a faster exchange of best practices and test and upscaling innovation using existing tools across different countries and regions.
- OO9: Support accelerated implementation and translation of research and innovation into evidence-based practice.
- OO10: Strengthen the capacity and use of research to better inform the implementation of innovations in health and care systems.
- OO11: Promote research integrating end-users' perspectives.

In order to reach the above-mentioned objectives Year 3 of the THCS Partnership will be aimed at:

- actively engaging policymakers in and outside the Consortium, in the identification of relevant policy dialogue tools to translate research results into policy;
- implementing the toolbox to support policy dialogue for the uptake of results into policy and support mutual learning among policymakers;
- promoting the THCS framework for supporting transferability and implementation of practices for adoption by policymakers and health and care authorities and organisations;
- continuing the process of co-designing and implementation of the THCS Knowledge Hub which will act as a multifunctional platform fostering capacity-building support, exchange of good practices, knowledge and experience of different health and social care actors at macro, meso and micro levels for the transformation of health and social care sectors
- contribute to the innovation, testing and upscaling across different countries and regions through the Call Text for JTC2026
- continuing the promotion of the integration of the end-users' perspective in RDI activities by setting up Call Text for JTC2026, including the involvement of end-users as key indicator
- monitoring funded projects
- promoting activities and building synergies with other EU, national and regional-funded projects.

#### **References to AWP 2025 Tasks: 3.2, 4.2, 5.1, 5.2, 6.2, 8.1, 8.2, 8.3, 10.1**



In order to **Intensify cooperation among countries and regions and beyond healthcare (SO4)** THCS will contribute to the following THCS Operative Objectives:

- OO12: Foster the capacity of health and care policymakers, and other relevant stakeholders through sharing of knowledge
- OO13: Build synergies and promote networking to support the coordination of activities at EU, international and national level.

In order to reach the above-mentioned objectives Year 3 of the THCS Partnership will be aimed at:

- proposing concrete activities with other key strategic initiatives and organisations by means of the network of THCS Ambassadors
- maintaining a strong governance to involve key stakeholders at European/International and national level through the Advisory Board and the National Mirror Groups established in year 2
- implementing the strategy for “strengthening ecosystem” activities set up in year 1 and year 2;
- implementing activities at national, regional and local levels involving forerunner Countries through the Working Group of forerunner countries established in year 2;
- promoting, through dedicated activities, the collaboration and sharing of experiences among Countries and Regions

**References to AWP 2025 Tasks: 1.1, 3.1, 3.2, 3.3, 5.1, 5.2, 9.1, 10.1**

In order to **Increase stakeholders’ involvement (SO5)** THCS will contribute to the following THCS Operative Objectives:

- OO14: Establishing a multi-stakeholder/eco-system collaboration platform for providing schemes supporting upscaling
- OO15: Creating enabling environments for the use of technologies applying standard methodologies for their assessment and appraisal (in particular real-life validation).
- OO16. Increasing dissemination of results from research and innovation activities involving patients and general public

In order to reach the above-mentioned objectives Year 3 of the THCS Partnership will be aimed at:

- implementing the Communication and Dissemination strategy
- promoting the use of THCS Knowledge Hub in real-life settings, including the development of training materials
- promoting the “strengthening ecosystem” activities
- promoting the Partnership through dedicated targeted stakeholder engagement capacity and adequate dissemination and communication campaign. The Annual Conference will be organised to present the first three-years results of the Partnership.

**References to AWP 2025 Tasks: 3.2, 9.1, 10.1**

## 2.2 Expected impacts

The Activities that the THCS Partnership will implement in Year 3 will contribute to the expected impacts of Destination 4, by making solid foundations on which to build tools and actions for best practices transferability and to support policy uptake of research and innovation. In particular:

**Health policy and systems adopt a holistic approach (individuals, communities, organisations, society) for the evaluation of health outcomes and value of public health interventions, the organisation of health care, and decision-making.**



**Considering a scientific perspective,** health research in Europe and beyond will be improved by the use of the Partnership results that will allow us to take into consideration all critical dimensions of health and care systems and to put people's needs at the centre.



**Considering a societal perspective,** Year 3 THCS activities will develop the work carried out during the first two years that brought to the setting of solid policy dialogue tools that foster the bridging of evidence to policy (Tasks 5.1, 6.2, 8.1). Specific indicators on stakeholder involvement have been set and revised in the THCS Monitoring Framework. (Task 2.2)

**Health and social care services and systems have improved governance mechanisms and are more effective, efficient, accessible, resilient, trusted and sustainable, both fiscally and environmentally.**



**Considering the scientific perspective,** the quality of the implementation and applied research will be increased by outputs generated by the JTC2023 and JTC2024 funded projects and that will consist of new solutions and/or the adaptation of existing ones and strategies and plans for a large adoption of already validated solutions. In particular, the JTC2023 projects are focused on definition and testing of models and solutions supporting the redesigning of people-centred services (Tasks 8.1, 2.2) and JTC24 projects on enhancing primary and community care.

The outputs resulting from the reviews done during the last year in the Pillar “Science and Innovation to Policy and Practice” (WP4-WP5) have provided validated mapping and methodologies to assess concrete trends and needs for RDI and capacity-building and frameworks supporting transferability of innovation. In Year 3 the preliminary work carried out in the first two years will allow the continuous update of the framework for priorities identification and alignment (Task 4.1).

Capacity-building activities through the Knowledge Hub (KH) will support skills development (Task 10.1).



**Considering a societal perspective,** through a fostered connection between science and practice in an ecosystem-wide approach, using also the tools made available by the Knowledge Hub, health and care providers and authorities will have guidance to integrate evidence-based solutions in the health and care delivery planning. In particular during Year 3, based on the preparatory work carried out in 2023 and 2024 (WP5 – WP9) it will be possible to develop and implement the tools set out to engage local and regional authorities, in order to leverage the positive effects on health and care systems by designing policies in other sectors that will ensure better synergies (Tasks 4.1, 5.1, 5.2, 9.1, 10.1)

**Citizens are supported to play a key role in managing their own health-care, informal carers (including unpaid carers) are fully supported (e.g. by preventing overburdening and economic stress) and specific needs of more vulnerable groups are recognised and addressed.**



**Considering a scientific perspective** results from funded projects such as tools for better integrating users into research and innovation implementation will contribute to the definition of future research and innovation priorities that will strongly take into consideration people's needs.



**Considering a societal perspective**, providing high-quality care to all European populations is a crucial challenge of today's health and care systems. In Year 3 measures empowering citizens in managing their own health will be promoted through the THCS website which has been designed to host specifically communication sections (Task 3.2) tailored to their needs and through the KH (Task 10.1). In addition, projects that have been funded under JTC2023 and JTC2024 will be requested to demonstrate expected impacts on citizens and improvements in terms of their access to high-quality health and care service, including positive effects in the reduction of health inequalities and a longer active working life. AWP 3 will encourage citizens/people's involvement in the activities implemented and funded projects. Specific indicators on citizens' health and digital literacy as well as integration of users' perspective into R&I activities have been set in the THCS Monitoring Framework and will be taken into account for the monitoring tasks (Tasks 2.2 and 8.1).

**Healthcare providers are trained and equipped with the skills and competencies suited for the future needs of healthcare systems that are modernised, digitally transformed and equipped with innovative tools, technologies and digital solutions for health care.**



**Considering a societal perspective**, through targeted capacity-building activities implemented through the Knowledge Hub (Task 10.1), health and care providers will increasingly acquire the necessary skills for future needs. More skilled providers and professionals will lead to health and care systems transformation through an accelerated modernisation and a faster adoption of new technologies. During Year 3, THCS Partnership will continue contributing to respond to health and care providers and health and care professionals' needs. Activities connected with the Knowledge Hub, aimed at ensuring knowledge sharing and capacity-building across the health and care system actors, will be developed according to the Plan designed in Year 1.



**Considering an economic perspective**, skilled health and care providers will contribute to more efficient investments in health and care to make them better equipped and sustainable in the long-run.

## 2.3 Correspondence with part B of the proposal

The implementation of the THCS Partnership requires comprehensive programme management and a portfolio of measures, including advanced funding instruments, community building and formats for dissemination and mainstreaming of good practices. Year 3 is dedicated to the implementation of these

activities and to set the foundations to develop them in the future year of the THCS Partnership. Year 3 Activities are built around the **4 pillars that group different types of activities** (figure 1).



Figure 1. The Partnership Pillars

## Pillar Programme Management

The aim of this Pillar is to ensure efficient and effective working of the grant consortium at the governance, strategic and operational levels. This encompasses the following activities: appropriate programme management, knowledge transfer, engagement with relevant stakeholders and initiatives at EU and International level connected to the transformation of health and care systems, and building sustainable cooperation between policymakers and research funders of the countries involved in the Partnership. It will also facilitate the information flow and cooperation between pillars and work packages.

**Year 3 tasks** are focused on ensuring a right fit with the established governance of the Partnership and on the definition of the Annual Work Plan 3. The plan that has been set up in the previous years to foster synergies with other key initiatives at EU, National, Regional level will be further developed and implemented as well as the dissemination and communication activities. All tasks will be in line with the Monitoring Framework developed in 2023. Pillar 1 Tasks will ensure a strong link and collaboration with the other Pillars. Key moments will include the General Assembly, the Strategic Board meetings and the Annual Conference at the end of Year 3.

The following table show how Activities for Year 3 are related to Work Packages Activities:

THCS WORK PACKAGES	THCS YEAR 3 TASKS
<b>WP1 Governance and Annual Work Programme development</b>	<p><b>Task 1.1 Partnership Governance Maintenance</b></p> <ul style="list-style-type: none"> <li>• Sub-task 1.1.1 Governance implementation (M25-M36)</li> <li>• Sub-task 1.1.2 General Assembly Meetings (M25-M36)</li> <li>• Sub-task 1.1.3 Strategic Board Meetings (M25-M36)</li> <li>• Sub-task 1.1.4 Advisory Boards meetings and link with National Mirror Groups (M25-M36)</li> <li>• Sub-task Task 1.1.5 FAB meetings (M25-M36)</li> </ul> <p><b>Task 1.2. Development of Annual Work Plan (M26-M35)</b></p> <ul style="list-style-type: none"> <li>• Sub-task 1.2.1 Phase 1 - Brainstorming and inputs (M26-M29)</li> <li>• Sub-task 1.2.2. Phase 2 - AWP Building (M29-M34)</li> </ul>

	<ul style="list-style-type: none"> <li>Sub-task 1.2.3. Phase 3 – AWP 2025 Approval (M35)</li> </ul>
<b>WP2 Coordination and Management</b>	<p><b>Task 2.1. Coordination, management and reporting (M25-M36)</b></p> <ul style="list-style-type: none"> <li>Sub-task 2.1.1. Maintenance of the Partnership Management Plan (PMP) and Data Management Plan (DMP) (M25-M36)</li> <li>Sub-task 2.1.2. THCS Management (M25-M36)</li> <li>Sub-task 2.1.3. THCS internal communication (M25-M36)</li> </ul> <p><b>Task 2.2. Monitoring and Impact Assessment (M25-M36)</b></p>
<b>WP3 Strategic Relationship and Impact Maximisation</b>	<p><b>Task 3.1 Exploring and managing synergies at EU and international level (M25-M36)</b></p> <ul style="list-style-type: none"> <li>Sub-task 3.1.1 Maintenance of the “Synergies Database and Network of ambassadors” (M25-M36)</li> <li>Sub-task 3.1.2 Synergy Workshops and Joint Initiatives (M25-M36)</li> </ul> <p><b>Task 3.2 Communication, Dissemination and Exploitation activities (M25-M36).</b></p> <p><b>Task 3.3 SRIA update and alignment of priorities (M25-M36)</b></p> <ul style="list-style-type: none"> <li>Task 3.3.1 Towards SRIA update (M25-M36)</li> </ul>

## Pillar Science & Innovation into Policy and Practice

The aim of this Pillar is to provide evidence-based methodological frameworks supporting the priority selections and the uptake of results in policy and practice. It will provide support to the Partnership by assessing RDI and related capacity-building needs, by co-developing the necessary frameworks to support the implementation process of transforming practices and to optimize their transferability across countries and settings, and by fostering the dialogue between science, policy and practice.

In addition, to give a comprehensive picture of RDI trends and needs, it will identify priorities and key research questions to be addressed by the Partnership. This Pillar will also contribute to overcome the lack of sustainable mechanisms to inform policymakers of research and innovation achievements and to foster a sustainable cooperation between different policymakers, at different levels.

**Year 3 tasks** will be focused on developing evidence-based and scientifically sound processes for transferability of best practices and implementation of innovation in enabled environments.

The following table shows how Activities for Year 3 are related to Work Packages Tasks:

THCS WORK PACKAGES	THCS YEAR 3 TASKS
<b>WP4 - Methodological and Assessment Framework</b>	<b>Task 4.1 Reviewing and assessing emerging trends and needs for research, development and innovation (RDI) and capacity-building in a short, medium and long-term perspective (M25-M36)</b>

	<ul style="list-style-type: none"> <li>• Sub-task 4.1.1 Identifying Research, Development and Innovation (RDI) priority areas and needs (M25-M36)</li> <li>• Sub-task 4.1.2 Conducting capacity-building initiatives for RDI activities (M25-M36)</li> </ul> <p><b>Task 4.2 Methodological Framework to support the transfer and implementation of practices (M25-M36)</b></p> <ul style="list-style-type: none"> <li>• Sub-task 4.2.1 Planning how to incorporate the THCS Transferability and Implementation Framework and its key tools into the Knowledge Hub (M25-M28)</li> <li>• Sub-task 4.2.2 Integrating tested tools from other EU Programmes: Enhancing the Knowledge Hub and synergizing transferability and implementation efforts (M29-M33)</li> <li>• Sub-task 4.2.3 Supporting THCS-funded projects: Knowledge Hub integration and online training for model adoption (M33-M36)</li> </ul>
<b>WP5 - Bridging Evidence to Policy</b>	<p><b>Task 5.1 Toolbox to support policy dialogue for the uptake of results into policy (M25-M36)</b></p> <ul style="list-style-type: none"> <li>• Sub-task 5.1.1 Definition of expectations of policymakers on policy dialogue tools (M25-M27)</li> <li>• Sub-task 5.1.2 Organization of the first Workshops on health and care systems strategies and tools for translation of RDI results into policy (M25-M36)</li> <li>• Sub-task 5.1.3 Design of a toolbox to support the translation of R&amp;I results to policy (M25-M36)</li> <li>• Sub-task 5.1.4 Drafting the toolbox (M25-M36)</li> <li>• Sub-task 5.1.5 Wide dissemination of the toolbox (M25-M36)</li> <li>• Sub-task 5.1.6 Implementation of the toolbox while ensuring its sustainability after the end of the THCS project (M25-M36)</li> </ul> <p><b>Task 5.2 Support mutual learning among policymakers (M25-M36)</b></p> <ul style="list-style-type: none"> <li>• Sub-Task 5.2.1 Support mutual learning among policymakers (M25-M36)</li> <li>• Sub-Task 5.2.2 Establish a multi-year roadmap for task 5.2.(M25-M36)</li> <li>• Sub-Task 5.2.3 Coordinate with other relevant institutions to foster mutual learning among policymakers (M25-M36)</li> <li>• Sub-Task 5.2.4 Review of relevant programs/experimentations (M25-M36)</li> </ul>

## Pillar Research and Innovation funding

The aim of this Pillar is to develop a common strategy among Research and Innovation Funders to align research and innovation funding programmes and topics. This Pillar will launch Joint Transnational Calls (JTCs) to fund R&I activities in line with the prioritization strategy, as recommended in the AWP and SRIA of the THCS Partnership, considering both thematic and structural priorities (building blocks) and using a programmatic approach. Besides launching and managing JTCs through a shared Joint



Secretariat, this Pillar will also monitor projects implementation and assess project results for reporting to the other Pillars.

**Year 3 tasks** will be focused on launching the JTC2025 call and on the implementation of the monitoring system and impact assessment. **The JTC2025 call topic** will be focused on disease prevention. It will involve the application and adaptation of models also utilising IT tools and digital technologies within preventive health and care systems. Additionally, the focus extends to assessing their transferability, adoption, and scalability across diverse health and care contexts.

The following table shows how Activities for Year 3 are related to Work Packages Tasks:

THCS WORK PACKAGES	THCS YEAR 3 TASKS
<b>WP6 - Call texts definitions of research and innovation topics</b>	<p><b>Task 6.1 Organise JTC 2026 Call Steering Committee (CSC) (M34-M36)</b></p> <p><b>Task 6.2. Define call text for Joint Transnational Calls (M25-M36)</b></p> <ul style="list-style-type: none"> <li>Subtask 6.2.1 JTC 2026 topic selection and eligibility criteria (M25-M29)</li> <li>Subtask 6.2.2 Preparation of the JTC 2026 call documents (M30-M35)</li> </ul> <p><b>Task 6.3 Funding decision JTC 2025 (M36)</b></p>
<b>WP 7- Joint transnational call secretariat</b>	<p><b>Task 7.1 Establishment of the Joint Call Secretariat (M25-M36)</b></p> <ul style="list-style-type: none"> <li>SubTask 7.1.1. The Establishment of the Joint Call Secretariat for JTC25 (M25)</li> <li>SubTask 7.1.2 Pre-publication, publication and launch of the call (M25-M29)</li> <li>SubTask 7.1.3 Eligibility checks and proposal evaluation (M26-M30)</li> </ul> <p><b>Task 7.2 Preparation of the Standard Operating Procedure (SOP) manual (M25-M36)</b></p> <ul style="list-style-type: none"> <li>SubTask 7.2.1. Updating of the Standard Operating Procedure (SOP) manual (M35-M36)</li> <li>SubTask 7.2.2 Set up of the IT System for Proposal Submission and Management (M25-M30)</li> </ul>
<b>WP 8 - Project Monitoring, including Technical Report assessment and Assessment of Projects' results and Impact</b>	<p><b>Task 8.1 Definition of indicators and development of monitoring procedures (M25-M36)</b></p> <ul style="list-style-type: none"> <li>SubTask 8.1.1 Indicators update according to 2025 JTC (M25-M36)</li> <li>SubTask 8.1.2 Development of monitoring procedures (M25-M36)</li> </ul> <p><b>Task 8.2 Implementation of the monitoring tool (M25-M36)</b></p> <p><b>Task 8.3 Monitoring of the funded projects (M25-M36)</b></p> <p><b>Task 8.4 Impact assessment of the Joint Transnational Calls and research projects (M25-M36)</b></p> <ul style="list-style-type: none"> <li>SubTask 8.4.1 Impact assessment of every JTC (M25-M30)</li> </ul>

- SubTask 8.4.2 Impact assessment of projects funded (M25-M36)

## Pillar Support transferability and strengthening ecosystems

The aim of this pillar is to boost health and care systems transformation by supporting the implementation process and scale-up actions. In particular, this Pillar aims at facilitating the exchange of information and the collaboration among different stakeholders in a (eco) system-wide approach, but also at smoothing the implementation of innovation through the development of a Knowledge Hub with actions facilitating the transfer of good practices and capacity-building.

**Year 3 tasks** will focus on establishing strategic links with other ecosystem-related activities, collaborating with forerunner countries, initiating national/regional/local activities, and continuing development of the Knowledge Hub.

The following table show how Activities for Year 3 are related to Work Packages tasks:

THCS WORK PACKAGES	THCS YEAR 3 TASKS
<b>WP9 - Strengthening Ecosystems</b>	<p><b>Task 9.1. Establish strategic links to other ecosystem-related activities (M25-M36)</b></p> <p><b>Task 9.2. Transformative Ecosystems (M25-36)</b></p> <p><b>Task 9.3 Working Group of forerunner countries and commence national/regional/local activities (M25-M36)</b></p>
<b>WP10 - Knowledge Hub to support the transferability of best practices</b>	<p><b>Task 10.1 Knowledge hub – co-design of the platform (M25-M36)</b></p> <p><b>Task 10.2 Knowledge hub – building the community (M25-M36)</b></p> <p><b>Task 10.3 Knowledge hub – capacity-building support (M25-M36)</b></p> <p><b>Task 10.4 Knowledge hub – adaptation, localisation and its guidance (M25-M36)</b></p>



# 3 ANNUAL WORK PROGRAMME ACTIVITIES

## 3.1 Detailed Work Plan description

### PILLAR PROGRAMME MANAGEMENT

#### WP1 - GOVERNANCE AND ANNUAL WP

Set of Activities Number	A1.1					Start Date or Starting Event									M25	
Set of Activities Title	GOVERNANCE AND ANNUAL WP															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	IT MOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAI O	FWB	F.R.S.F.NRS	AKA	TAU	THL	
Person months per participant	12	0.6	1	1.6	1.6	0.2	0.4	0.4	0	0.6	0	0.2	1.8	1.2	1.6	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSRI	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	ZonMw	RNCN	NCBR	AICIB	
Person months per participant	1.8	3	0.6	1.8	0.2	1.8	3	1.8	1.2	0.2	0.4	3	3	1.8	0.6	
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	
Short name of participant	FC T	CCDR C	UBB	SRMOH	UHM	ODT	SIMOH	NIJZ	AEI	IDIVAL	CSCJA	FPS	IACS	FORTE	VINNOVA	

Person months per participant	0.6	0.6	0.6	0.2	0	1.8	1.8	0.6	1	1.8	0,8	2	1.2	0.8	0.6
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55
Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	1.6	0.8	1.8	0.6	0.4	0.4	0.8	0.14	0.14	0.8	0.6	0.2	1.2	0	1.6
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	0	0	0												
Start month	M25							End month				M36			

## Objectives

This WP is horizontal to the overall Partnership. It is aimed at maintaining the Bodies and the rules that govern the THCS Partnership implementation. The main Activity objectives are therefore:

- To maintain the management, governance structures and validation processes within the General Assembly, Strategic Board, Coordinating Team, the Advisory Board and the National Mirror groups
- To promote effective interactions between the Partnership and the abovementioned bodies
- To keep constant dialogue between the THCS Partnership and the national research and innovation strategic agendas and capture complementary actions enhancing the partnership impact.
- To develop the Partnership Annual Work Plan 2026 in order to ensure that the Partnership's progresses within its 7-years duration are reached in a coherent way and within the defined budget

## Description of Programmed Activities

### Task 1.1 Partnership Governance set-up and maintenance (M25-M36)

Leader: ITMOH; Partners: All partners involved in the WP

- **Sub-task 1.1.1 Governance implementation (M25-M36)**

The governance implementation will be ensured by the CT, which will ensure that each Governance Body is always compliant with all requirements set out in the ToR and Partnership rules and that the work is carried out collaboratively

Moreover, the CT will monitor and ensure compliance of the Beneficiaries with their obligations under the Grant Agreement and Consortium Agreement in terms of administrative, legal and financial management.

- **Sub-task 1.1.2 General Assembly Meetings (M25-M36)**

GA Meetings will be organized as in-presence meetings or in dual mode (in presence and on-line meetings) three times a year:

- in M26, with the preparatory phase of AWP Year4, update on funded projects under JTC2024 and monitoring, mid-term technical and financial reports (AE included);
- in M30 (virtual) for updates on JTC2025, AWP Year 4 and second periodic report preparation;
- in M34 for the final approval of AWP Year 4, second periodic report and update on JTC2025 and launch of JTC2026.

The CT is responsible for sending invitations, convening and organizing the meeting, preparing and sharing the agenda and preparatory materials according to CA provision, preparing minutes and monitoring follow up actions.

In order to avoid any potential Col, Research Performing Organisations (RPOs) involved in the consortium will not participate in the AWP development and therefore will be requested to exit the room of the GA when the Agenda foresees discussion and approval of the AWP. WP4 Leader (which is a RPO) will take part into the GA with a representative who won't be allowed to participate to JTCs. RPOs involved in the consortium will not receive the full Draft AWP before its circulation to external audiences. A pool of experts of RPOs, either members or not members of the Consortium, will be involved in topic and call text definition prior to the signature of an NDA (Non Disclosure Agreement) for avoiding any Col. Experts will be subject to strict confidentiality rules and will be unable to participate to JTCs launched by the Partnership. The CT is responsible for sending invitations, convening and organizing the meetings, preparing and sharing the agendas and preparatory materials according to CA provision, preparing minutes and monitoring follow up actions, with the support and cooperation of the GA Chair and vice-chair.

- **Sub-task 1.1.3 Strategic Board Meetings (M25-M36)**

SB meetings will be held bi-monthly either as face-to-face meetings or teleconferences and the first one will take place in M25. The second meeting will take place in presence in M26 in occasion of the GA. Further SB meetings will take place in M30, M34 and M35. The CT is responsible for sending invitations, convening and organizing the meetings, preparing and sharing the agendas and preparatory materials according to CA provision, preparing minutes and monitoring follow-up actions.

To avoid any Col, WP4 Leader (which is a RPO) will take part into the SB with a representative that won't be allowed to participate to JTCs.

- **Sub Task 1.1.4 Advisory Boards meetings and link with National Mirror Groups (M25-M36)**

Meetings will be organised in hybrid mode and the AB meeting will take place in M28-M34. Additional meetings may be organised if necessary.

- **Task 1.1.5 FAB meetings (M25-M34)**

FAB meetings will be organized from two to three times a year and two more additional meetings upon request of 1/3 of the FAB members, based on the needs.

## **Task 1.2. Development of Annual Work Plan (M26-M35)**

*Leader: ITMOH; Partners: WP Leaders*

- **Sub-task 1.2.1 Phase 1 - Brainstorming and inputs (M26-M29)**

In collaboration with Pillar “Science and Innovation to Policy and Practice”, the Coordinating Team will launch the first phase of the AWP2026 preparation, in particular, to support the identification of the call topic. Priorities discussed by the Consortium will be considered and presented to the Advisory Board and National Mirror Groups for additional comments. Comments and inputs will be included in an “AWP 4 Brainstorming report” used for the AWP Building.

To avoid any Conflict of Interest, RPOs will not participate in the AWP Preparation. WP4 Leader (which is a RPO) will take part into the SB with a representative that won't be allowed to participate to JTCs, by signing a NDA.

- **Sub-task 1.2.2. Phase 2 - AWP Building (M29-M34)**

The “AWP2026 Brainstorming Report” (a short document including key messages) will be presented to the Funding Agency Board to match the identified research areas with priorities established at the National and Regional level by each Research and Innovation Funding Organisation (RFO). The matching exercise is aimed at finalizing the prioritization of areas identified in Phase 1 considering the expectations of the national/regional Funding Agencies. This Phase will ensure the Commitment of Funding Agencies in the JTCs which will derive from the AWP.

A Prioritization meeting will be organized with the Funding Agency Board where the AWP2026 Brainstorming Report will be presented and discussed. Based on the priorities declared by the FAB, the SB will prepare the First Draft of AWP. The Plan will include activities implemented by all WPs of the Partnership (including the topic selection and description defined by WP6) with a coherent and programmatic approach with what regards the focus. The SB will share the First Draft of the AWP2026 with the General Assembly for comments (the topic will be shared only with FAB to avoid any Col).

- **Sub Task 1.2.3. Phase 3 – AWP 2025 Approval (M34)**

The Strategic Board will collect comments on the First Draft of the AWP2026 by the General Assembly. A revised version will be sent to the GA (except RPO members) before the final meeting in M34, when the GA will approve the AWP2026 (without the topic that will be approved by the FAB and included in the final AWP to be submitted to the EC and published on the THCS website).

The AWP 3 will then be transferred to Pillar Leaders for initializing the 2025 activities. In particular, “Pillar Research and Innovation Funding” will prepare the Call Text for JTC 2026, to ensure the announcement of the call by the end of year.

## Deliverables

### Deliverables already foreseen in Part B of the proposal

- D.1.5 Annual Work Plan 3 (M34; IT MOH)

### Additional Deliverables (if applicable - brief description and month of delivery)

- N/A

## WP2 - COORDINATION AND MANAGEMENT

Set of Activities Number	A2.1					Start Date or Starting Event									M25	
Set of Activities Title	COORDINATION AND MANAGEMENT															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	IT MOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAI O	FWB	FRS - FNR S	AKA	TAU	THL	
Person months per participant																45.4
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSR I	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	Zon Mw	RCN	NCBR	AICIB	
Person months per participant																1
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	

Short name of participant	FC T	C C D R C	U B B	S R M O H	U H M	O D T	S I M O H	N I J Z	A E I	I D I V A L	C S C J A	F P S	I A C S	F O R T E	V I N N O V A
Person months per participant	0.4	0.2	1.2	0.2	0	1.2	1.2	1.2	1.2	1.2	0,3	1.5	1.2	0.8	0.6
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55
Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	1.2	0.6	1.2	1.2	0.2	0.2	0.6	0.14	0.42	1	1.2	0	0.6	0	1.2
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	0	0	0												
Start month	M25						End month					M36			

## Objectives

The goal of this activity is to ensure a well-coordinated Partnership management concerning the contractual commitment. It will do so through carrying out the activities of consortium management and providing administrative oversight and support to all WPs. This activity is aimed at:

- ensuring that technical and managerial decisions are made for the implementation of the work plan;
- supporting the coordination of the activities and timelines of the consortium partners;
- tracking the performance of the programme according to plans and timelines;
- issuing progress reports and budget reviews as specified in the Grant Agreement;
- overseeing funding allocation;
- performing the day-to-day administrative and financial management of the programme.

- to evaluate the impacts and performance of the Partnership through the indicators defined in the Monitoring and Evaluation Framework

## Description of Programmed Activities

### Task 2.1. Coordination, management and reporting (M25-M36)

*Leader: ITMOH, Partners: All partners*

- **Sub-task 2.1.1. Maintenance of the Partnership Management Plan (PMP) and Data Management Plan (DMP) (M25-M36)**  
Ensure the updating and adequate implementation of the PMP and DMP as defined in the documents delivered in year 1.
- **Sub-task 2.1.2. THCS Management (M25-M36)**  
The THCS Partnership Management includes:
  - Day-to-day management of the Partnership and ensuring that the Grant Signatories comply with their obligations, dealing with administrative, financial, legal and logistic issues, tools and follow-up;
  - In collaboration with the SB, preparation – and supervision - of interim technical and financial reports (M36); preparation, collection, quality control of all deliverables
  - consortium meetings to support interim report
- **Sub-task 2.1.3. THCS internal communication (M25-M36)**  
Maintenance of a system for adequate internal Communication activities and tools, including: Mailing lists (high level members, operational and administrative/legal/financial), documents sharing platform, videoconference tools.

### Task 2.2. Monitoring and Impact Assessment (M25-M36)

*Leader: ITMOH, Partners: WP Leaders, All Partners*

The Partnership Monitoring System provides a continuous assessment of the Partnership performance as well as its contribution towards the expected outcomes and the expected impacts. The monitoring will be performed continuously and reported yearly. The monitoring reports will serve to: (i) assess the quality and specificity of performed activities; (ii) adjust the quality and specificity of planned activities; (iii) integrate the results of the monitoring in the up-scaling model and sustainability beyond the THCS; (iv) disseminate the THCS results.

## Deliverables

### Deliverables already foreseen in Part B of the proposal

- D2.5 Monitoring and Impact Assessment Framework 2 (M26)

### Additional Deliverables (if applicable - brief description and month of delivery)

- N/A

## WP3 - STRATEGIC RELATIONSHIP AND IMPACT MAXIMISATION ACTIVITIES

Set of Activities Number	WP3 2025					Start Date or Starting Event									M25	
Set of Activities Title	STRATEGIC RELATIONSHIP AND IMPACT MAXIMISATION ACTIVITIES															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	ITMOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAIO	FWB	F.R.S.F.NRS	AKA	TAU	THL	
Person months per participant	15.9	4.5	8	2.4	1.8	13.5	0.3	0.1	0	0.3	0	0.3	1.5	1.5	1.5	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSRI	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	ZonMw	RCN	NCBR	AICIB	
Person months per participant	2.4	3.6	0.6	1.5	0	1.5	3.6	1.5	1.5	0.3	0.3	3.6	3.6	1.5	0.9	
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	



Short name of participant	FC T	C C D R C	U B B	S R M O H	U H M	O D T	S I M O H	N I J Z	A E I	I D I V A L	C S C J A	F P S	I A C S	F O R T E	V I N N O V A
Person months per participant	0.6	0.3	0.9	1.8	0	1.5	1.8	0.9	1.5	1.5	0,1	0,5	1.5	0.6	0.6
Participant Number	42	43	44	45	46	47	48	49	49. 1	50	51	52	53	54	55
Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	1.8	0.3	1.5	0.9	0.3	0.3	0.6	0.2 9	0.2 9	2.7	1.5	0.1	0.9	0	2.1
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	0	0	0												
Start month	M25						End month					M36			

## Objectives

- To promote synergies and actively engage with relevant stakeholders and initiatives at the EU and International level connected to the transformation of health and care systems to increase mutual awareness and establish an effective and efficient collaboration in order to avoid duplication of investments, work and related activities.
- To ensure good and transparent external communication and dissemination to increase the visibility of the Partnership and the impact of the knowledge generated amongst policymakers, scientists, civil society and end users (patient/citizen advocacy groups, formal and informal care organisations) and other stakeholders at national, EU and international level, contributing to reinforcing the links between science-policy and with citizens.

- To pave the way to sustainable cooperation between policymakers and research funders of the countries involved in the Partnership, in order to ensure an alignment of priorities for health and care systems transformation in the long run.

## Description of Programmed Activities

### Task 3.1 Exploring and managing synergies at EU and international level (M25-M36)

*Leader: UCSC, Partners: ITMOH, All Activity Partners*

- **Sub-task 3.1.1 Maintenance of the “Synergies Database and Network of ambassadors” (M25-M36)**

The Ambassador Network that has been built in the first of the THCS Partnership will be further expanded this year. This includes:

- updating the consolidated list of Ambassadors after close monitoring of new initiatives;
- foster relationships and collaborative efforts with key strategic initiatives by aligning priorities, participating in and organising joint activities.

- **Sub-task 3.1.2 Synergy Workshops and Joint Initiatives (M25-M36)**

The Consortium will organise joint events/workshops with Initiatives that are currently working on main research/health and care areas that have been core in THCS activities both in 2024 and 2025.

In particular, at least one joint initiative will be organised to discuss how prevention strategies can be effectively implemented and support the transformation of health and care systems. The workshop will encourage exchange between projects funded under the THCS JTC2024 “Innovate to prevent” and initiatives that propose methodologies to effectively implement prevention strategies (i.e PROPHET, EPPerMed) and Joint Actions funded by the EU4Health programme, promoting pilots in the field of prevention (i.e JAPreventNCD, BESTRemap). The goal is to ensure that THCS awarded projects and key activities developed by THCS are taken into consideration during the implementation of other key initiatives at EU level. In parallel,, projects funded by THCS will take advantage of best practices and tools developed by other relevant initiatives.

Further additional activities will be organised involving initiatives that are aimed at improving the continuity of treatment and making the provision of primary healthcare more flexible and human centered. Initiatives that are already ongoing and that are promoting the transferability of best practices in primary care (as JA CIRCE) will be invited to share results and discuss obstacles in implementing innovative solutions in primary care in different settings and countries.

The events will be organised either in presence or remotely. Workshops may be held as side events during the Annual Conference or as a separate and stand-alone webinar/meetings.

### Task 3.2 Communication, Dissemination and Exploitation activities (M25-M36).

*Leader: ProMIS, Partners: All Partners*

- **THCS Website:** The website will undergo continuous updates and maintenance, including the internal private section, which serves as an internal repository accessible only to members. This will ensure a seamless flow of information and resources for the partnership.
- **Newsletters:** Two newsletters will be released during the third year (M30 and M36). In addition, flash news updates will be produced and disseminated through various stakeholder channels to keep the community informed of key developments. These newsletters and updates will also be published on the THCS website for broader visibility.
- **Social Media Pack:** The THCS social media presence, particularly on LinkedIn, will be actively managed, including regular updates, content dissemination, and compliance with privacy policies. This will enhance engagement and outreach to a wider audience.
- **Broadcast Media:** Informative videos will be produced and shared in preparation for, or as a result of, key THCS events and milestones (such as the JTC launch, Annual Conference, WP events, etc.). These videos will be uploaded to the THCS YouTube channel and later integrated into the Partnership Knowledge Hub to ensure long-term accessibility and dissemination.
- **Participation in Scientific Congresses:** THCS will actively participate in prominent European and international conferences, such as the **EPHC**, **European Health Summit**, **EIT Health Summit**, and **EHFG**, to present the Partnership's activities and engage with key experts in the field. This will enhance the visibility of THCS and foster collaboration with relevant stakeholders.
- **Event Support:** THCS will provide ongoing support to all WPs and partners in organizing events aimed at presenting the Partnership's results. This will include logistical assistance, promotional activities, and coordination to ensure the successful delivery of these events.

### Task 3.3 SRIA update and alignment of priorities (M25-M36)

*Leader: ISS; Co-leader: UCSC Partners: all partner organisations involved in the WP*

- **Sub-task 3.3.1 Towards SRIA update (M25-M36)**

**Leader: ISS, Partners: UCSC**

Based on the methodology established in Year 1 of THCS and the Updated Roadmap developed in Year 2, the Consortium will define the process towards the full SRIA update.

## Deliverables

### Deliverables already foreseen in Part B of the proposal

- No deliverables foreseen in M25-M36

### Additional Deliverables (if applicable - brief description and month of delivery)

- N/A

# PILLAR SCIENCE & INNOVATION TO POLICY AND PRACTICE

## WP4 - METHODOLOGICAL AND ASSESSMENT FRAMEWORK

Set of Activities Number	A4.1					Start Date or Starting Event									25	
Set of Activities Title	METHODOLOGICAL AND ASSESSMENT FRAMEWORK															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	ITMOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAIO	FWB	FRS-FNRS	AKA	TAU	THL	
Person months per participant	1	3	0	0	0	3	0	0.6	0	0	0	0	0	3	24	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSRI	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	ZonMw	RCN	NCBR	AI Cl B	
Person months per participant	0	0	0	0.6	0.2	0	6	0	2	0	0	0	0	0	0.2	
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	
Short name of participant	FC T	CCDR C	UBB	MOHSR	UHM	ODT	SIMOH	NJZ	AEI	IDIVAL	CSFJA	FPS	IACS	FORTE	VINNOVA	
Person months per participant	0	0	3	1	0.4	1	0	4	0	1	0,2	1	1	0.2	0	
Participant Number	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	

Short name of participant	AR ES S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N O S U I S S E	S N S F	S G
Person months per participant	0	0	0	14	0	0	0	0.14	0.2 9	3.4	0.6	0.2	0	0	1.6
Participant Number	61	62	63												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	2	0	0												
Start month	25							End month				36			

## Objectives

To assess short, medium and long-term trends and needs for research, development and innovation (RDI) and capacity-building for RDI-related activities in European health and care systems.  
To (co-) develop the necessary methods and tools to support the implementation process of innovative practices in health and care systems.

## Description of Programmed Activities

### Task 4.1 Reviewing and assessing emerging trends and needs for research, development and innovation (RDI) and capacity-building in a short, medium and long-term perspective (M25-M36)

*Leader: NIVEL; Partners: all partners organisations involved in the WP*

The activities planned for this Task are divided into two main components, briefly described below:

- **Sub-task 4.1.1 Identifying Research, Development and Innovation (RDI) priority areas and needs (M25-M36)**

The Task 4.1 team will update and refine the mapping report of RDI priorities and knowledge gaps. Further attention will be dedicated to specific areas of interest, identified through consultations with partners within THCS and relevant stakeholders outside of THCS, which is to allow for in-depth identification of priority areas, next to maintaining a broad approach. Aspects relevant to THCS, including the formation of ecosystems, the transfer and scale-up of

innovations, and the transformation of health and care systems and their role in connection to the identified priority areas and knowledge gaps will be examined further. Countries will be clustered according to similar RDI needs in selected priority areas, to enable a more efficient exchange of knowledge and capacity between countries.

To facilitate gap analyses of RDI priorities and needs, the Task 4.1 team aims to identify existing tools and to develop a new tool that tracks EU and national level research funding specifically supporting the transformation of health and care systems and facilitating synergies in funding of research initiatives in the area of health and care system transformation. Consultations will be conducted to obtain information regarding relevant initiatives at national and EU level and technical support will be enlisted. Existing and newly developed tools can potentially be integrated into the WP 10 Knowledge Hub.

- **Sub-task 4.1.2 Conducting capacity-building initiatives for RDI activities (M25-M36)**

Task 4.1 will provide a report containing an overview of capacity-building research needs in EU countries, obtained from recent international reports, scientific literature and a survey administered to stakeholders throughout the EU and launched in the Fall of 2024. Additionally, capacity-building initiatives are being planned, related to applying for and conducting international research, transferring/scaling-up innovations and transforming health and care systems. The aim is to provide webinars covering topics, such as how to apply for funding at EU level and write proposals for THCS and other calls; what can be learned from forerunner projects and countries; and how to apply various research methods.

#### **Task 4.2 Methodological Framework to support the transfer and implementation of practices (M25-M36)**

*Leader: THL; Partners: all partner organisations involved in the WP*

This activity aims at planning how to incorporate the THCS Transferability and Implementation Framework and its tested key tools into the THCS Knowledge Hub, as well as mapping other tested tools in the other EU programmes to be used within the framework and to be incorporated into the knowledge Hub. In addition, this activity aims at planning the THCS means and practices for supporting the THCS funded projects to describe the models and solutions they have developed into the Knowledge Hub and for supporting the adoption of these (and other) models and solutions with the THCS tools by health and care organisations.

- **Sub-task 4.2.1 Planning how to incorporate the THCS Transferability and Implementation Framework and its key tools into the Knowledge Hub (M25-M28)**

This activity plans how the stages and tasks of the framework will be shortly illustrated in the Knowledge Hub in the way that the templates and tools to perform the tasks can easily be found and used. In addition, it plans how the key THCS templates and tools for supporting the transfer and implementation of practices will be incorporated into the Hub. Their continuous development will be started as well:

- a template to describe the original solutions and their evaluation results in the original contexts for supporting their transfer and implementation across the systems
- a tool(s) to perform transferability and feasibility analysis in the adopting organisation
- a template to plan implementation in the adopting organisation

- **Sub-task 4.2.2 Integrating tested tools from other EU Programmes: Enhancing the Knowledge Hub and synergizing transferability and implementation efforts (M29-M33)**  
This task attempts to find synergies between the other EU programmes which focus on transferability and implementation of practices. The task maps other tested tools in other EU programmes to be used within the framework and to be incorporated into the knowledge Hub.
- **Sub-task 4.2.3 Supporting THCS-funded projects: Knowledge Hub integration and online training for model adoption (M33-M36)**  
This activity aims at supporting the transfer and implementation of the models and solutions the THCS-funded projects have produced across health and care systems. This will be made 1) by planning the THCS means and practices for supporting the THCS-funded projects to describe the models and solutions they have developed into the Knowledge Hub and 2) by preparing the online training materials for supporting the adoption of these (and other) models and solutions with the help of the THCS tools by health and care organisations.

## Deliverables

### Deliverables already foreseen in Part B of the proposal

- No deliverables foreseen in M25-M36

### Additional Deliverables (if applicable - brief description and month of delivery)

- AD4.1.1 Capacity-building report with overview of capacity-building research needs (M28)
- AD4.1.2 Monitoring instrument as a tool for tracking research funding supporting the transformation of health and care systems (M30)
- AD4.1.3 Report on mapping and assessment of trends and needs in RDI and capacity-building in a short-, medium and long-term perspective (M32)
- AD4.1.4 Capacity-building webinars in relation to applying for and conducting research supporting the transfer/scale-up of innovation and transformation of health and care systems (M28, M33 and M36)
- AD4.2.1 Plan for incorporating the THCS Transferability and Implementation Framework and its key tools into the Knowledge Hub (M28; Leader: THL)
- AD4.2.2 Mapping other tested tools in other EU programmes to be used within the framework and to be incorporated into the knowledge Hub (M33; Leader: THL)
- AD4.2.3 Plan for the THCS means and practices for supporting the THCS funded projects to describe the models and solutions they have developed into the Knowledge Hub and for supporting the adoption of these (and other) models and solutions with the THCS tools by health and care organisations (M36; Leader: THL)



## WP5 - BRIDGING EVIDENCE TO POLICY

Set of Activities Number	A5.1					Start Date or Starting Event									25	
Set of Activities Title	BRIDGING EVIDENCE TO POLICY															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	ITMOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAIO	FWB	F.R.S.F.NRS	AKA	TAU	THL	
Person months per participant	6	3	0	0	0	3	0	0	0	0	0	0	0	2	4	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSRI	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	Zonmw	RCN	NCBR	AICIB	
Person months per participant	0	12	1	0	0	2	6	0	2	0	0	0	0	0	0.2	
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	
Short name of participant	FC T	CCDR C	UBB	SRMOH	UHM	ODT	SIMOH	NIJZ	AEI	IDIVAL	CS CJA	FPS	IACS	FORTE	VINN OVA	
Person months per participant	0	0	9	1	0.4	1	0	6	0	0	0.4	0.2	2	0	0	
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55	



Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	0	0	0	2	0.2	0	0	0.29	0.14	2.6	0.6	0.6	0	0	0
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	1.4	0	0												
Start month	25							End month				36			

## Objectives

- To support efficient sharing of knowledge, and mutual learning for accelerated implementation and translation of research and innovation;
- To support the development of evidence-based strategies and policies on how to better cooperate concerning existing and upcoming needs and transformations considering the different capacities among countries;
- To contribute to the capacity and resilience of the European health and care systems to rapidly and efficiently respond to challenges and critical events (lessons learnt from the COVID-19 pandemic etc..) in the society, including adaptations needed by climate change and environmental pressures.

## Description of Programmed Activities

### Task 5.1 Toolbox to support policy dialogue for the uptake of results into policy (M25-M36)

*Leader UBB, Contributors: All Partners*

The aim of this task is to increase the capacity of policymakers to use research and innovation results in policy, promoting the development and utilization of tailored tools. For this purpose, WP5 largely distributed a survey to public decision-makers in order to identify their expectations and identify gaps in this area. Following on from the work that has been done the previous year, this task will focus on fostering the dialogue between researchers and policymakers' organisations inviting them to share their input on the best strategies and tools to be used in the context of the Partnership to support the translation of results to policy.

In 2024, WP5 identified key policymakers and researchers be able to contribute to its work. Furthermore, gaps and opportunities identified in the WP5 preliminary survey findings, but also in other WPs, were analyzed and needs were discussed. Further on, in 2025, based on the final results of the survey and data gathered by engaging key stakeholders, professionals' expectations on the policy tools that need to be developed under WP5 will be explored. Thanks to this work, WP5 deliver a first review of the best tools to promote uptake of evidence into policy, which helped determine:

- who are the individuals and groups likely to affect or be affected by WP5 work;
- ensure that all relevant stakeholders are recognized and taken into account;
- better understand the people involved, the issues that concern them, their expectations and their needs;
- target efforts according to their levels of interest;
- understand the interactions between different groups;
- reveal potential risks, problems or misunderstandings that could disrupt the project

The development of a toolbox is essential to bridge the gap between research findings and policy implementation. Bridging research-policy gaps is a bidirectional process, concerning both groups – policymakers and researchers. Policymakers operate within constrained timelines dictated by electoral cycles, political agendas, and immediate demands for action, even though with short-term effects. Simultaneously, researchers may prioritize intellectual exploration, pursuing topics of personal interest or academic significance, which may not always align with the immediate priorities or concerns of policymakers. The misalignment in priorities can create barriers to collaboration, as researchers may struggle to demonstrate the relevance and applicability of their work to policymakers' concerns.

The decision to create a toolbox stemmed from a recognition of the multifaceted challenges inherent in translating research insights into actionable policy solutions. In 2025, under Task 5.1, the design of a toolbox to support the translation of R&I results into policy will be developed. This task will be carried out in collaboration with other work packages, enhancing the toolbox's practicality and effectiveness. To achieve the objective, several methods will be employed:

- ❖ **Integration of Findings:** The toolbox will incorporate insights from various sources, including quantitative data and qualitative data.

- ❖ **Iterative Development:** An iterative approach will follow, guided by continuous stakeholder feedback, ensuring the toolkit remains relevant, practical, and effective.
- ❖ **Broad Distribution and Engagement:** A comprehensive distribution and engagement strategy will aim to achieve widespread availability and sustainability by leveraging the expertise of established professionals within key institutions.

The work mentioned above will be divided into 6 major sub-tasks, presented in the table below:

No.	Sub-tasks	Linked objective	Planned activities
5.1.1	Definition of expectations of policymakers on policy dialogue tools	<b>SO3:</b> Increase the ability to implement innovation.	Developing a report containing the findings of the survey analysis. Sharing the document among partners.
5.1.2	Organization of the first Workshops on health and care systems strategies and tools for translation of RDI results into policy	<b>SO3:</b> Increase the ability to implement innovation.	Plan and prepare two meetings/workshops starting with 2025, building on the projects' findings. Develop an SOP to thoroughly collect input from stakeholders during the meetings. Sharing the preliminary findings with partners.
5.1.3	Design of a toolbox to support the translation of R&I results to policy	<b>OO10:</b> Strengthen the capacity and use of research to better inform the implementation of innovation in health and care systems.	Integrate findings from the data analysis with insights obtained from deliverable 5.1 reviewing the best strategies and tools to support the translation of R&I projects' results to policy. Prepare a detailed document on the development process and findings.
5.1.4	Drafting the toolbox	<b>OO5:</b> Support the identification of context-based innovative solutions responding to the challenges of the health and care sector and beyond. <b>OO9:</b> Support accelerated implementation and translation of research and innovation into evidence-based practice.	Finalize, refine and integrate new details into the three components of the toolbox, which were developed on the following topics: <ul style="list-style-type: none"> <li>- Collaboration between evidence-generating entities and health policy-making institutions,</li> <li>- HRW (primary and community care)</li> <li>- and toolbox framework that aids in the integration of research into policy-making.</li> </ul> <b>In coordination with sub-task 5.2.1,</b> organise interviews with policymakers.
5.1.5	Wide dissemination of the toolbox	<b>OO8:</b> Promote a faster exchange of good practices and testing and upscaling of innovation using existing tools across different countries and regions.	Disseminate the three resulting components of the toolbox internally, starting with December 2024 and continuing throughout 2025.
5.1.6	Implementation of the toolbox while ensuring its sustainability after the end of the THCS project	<b>SO3:</b> Increase the ability to implement innovation.	Establish an NMG in Romania. Validate the toolbox within the NMGs, whenever possible.

- **Sub-task 5.1.1 Definition of expectations of policymakers on policy dialogue tools (M25-M27)**

*Leader: UBB, Contributors: WP Partners*

This sub-task aims at defining policymakers' expectations regarding policy dialogue tools and to develop activities that will enhance their effective use, by using data collected through survey distribution. This will ensure that these tools are better aligned with policymakers' needs and facilitate more effective integration of research findings into policy-making processes.

The main activities of this sub-task are the following:

- **Documentation and reporting:** a detailed report summarizing the findings of this survey analysis that will be finalized in 2025. This report will serve as a foundational document, guiding the subsequent activities and ensuring that the tools developed are aligned with the actual needs of policymakers.
- **Dissemination and refinement:** following the completion of the report, the document will be shared with all relevant partners and stakeholders. This step is crucial for transparency and for gathering feedback that can be incorporated into the final versions of the tools. Partners will have the opportunity to review the report and provide their input, ensuring that the final outputs are well-informed.

Work developed under these activities will be done in conjunction with *Sub-Task 5.2.1 Support mutual learning among policymakers*. **The key interim output** of this sub-task includes a comprehensive report detailing the findings from the survey analysis.

- **Sub-task 5.1.2 Organization of the first Workshops on health and care systems strategies and tools for translation of RDI results into policy (M25-M36)**

By organizing the first workshops focusing on strategies and tools for translating research, development, and innovation (RDI) results into actionable health and care policies, the future work under this sub-task aims to bridge the gap between research outcomes and policy implementation, ensuring that innovative solutions are effectively integrated into health and care systems.

Main activities will be represented by:

- **Workshops and meetings:** organize two workshops/meetings with stakeholders to gather input and provide updates. These events will be designed to build on the findings from the ongoing project, ensuring that discussions are grounded in the latest evidence and insights. The workshops/meetings will be carefully planned to address the specific needs and challenges of health and care systems in translating RDI results into policy. This includes setting clear objectives, identifying key stakeholders, and developing agendas that facilitate productive discussions.
- **SOP development:** to ensure that stakeholder input is systematically collected during the workshops, a Standard Operating Procedure (SOP) will be developed. This SOP will provide a structured approach to gathering, documenting, and analyzing feedback from participants. This will help ensure that the workshops yield actionable insights that can be used to refine strategies and tools.
- **Documentation and reporting:** throughout the process, detailed documentation will be maintained, capturing the planning, execution, and outcomes of the workshops. This will include stakeholder input, key discussions, and any emerging themes.

Preliminary findings and insights will be shared with project partners and will provide an opportunity for them to review the early outcomes and offer feedback.

**These sub-tasks' outputs** will include the organization and execution of two workshops on health and care systems strategies for translating RDI results into policy, an SOP for collecting and analyzing stakeholders' input during workshops and a document containing preliminary findings, that will later be shared with project partners.

- **Sub-task 5.1.3 Design of a toolbox to support the translation of R&I results to policy (M25-M36)**

The aim of this sub-task is to increase the capacity of policymakers to use research and innovation results into policy, promoting the development and use of tailored tools. For this purpose, two working groups were established in 2024 to collect both quantitative and qualitative data, addressing the knowledge gap in this field of study. Based on the groundwork laid by WP5 in 2024, in the first half of 2025, in-depth qualitative data will be collected through interviews with key-selected stakeholders. The second half of 2025 will provide an opportunity to combine preliminary interview findings with the final survey results, offering a comprehensive understanding of both policymakers' and researchers needs, barriers, and priorities. These insights will be further explored in the two workshops or meetings planned for 2025. Information gained through integration of findings will inform the development of the toolbox, ensuring its relevance. Key activities will focus on:

- **Documentation and reporting:**
- detailed documentation of the development process and findings.
- regular reporting to stakeholders on progress and outcomes.
- **Key interim outputs** of this task include workshop reports that document discussions and key takeaways from stakeholders.

- **Sub-task 5.1.4 Drafting the toolbox (M25-M36)**

Under Sub-task 5.1.4, the aim will be to effectively draft and refine the toolbox through an iterative process that incorporates stakeholder feedback, to identify needs and ensure alignment with established frameworks. In 2025, WP5 will build on the 3 components of the toolbox developed in 2024, using them as a baseline to draw conclusions from their findings. Additionally, results from the survey and preliminary qualitative analysis will be incorporated, to provide a more accurate depiction of the practical needs encountered by policymakers and researchers. The toolbox will be iteratively refined throughout the year.

For this sub-task, we will focus on three main activities:

- **Qualitative data collection:**
  - organize a series of interviews with policymakers.
- **Finalize toolbox components**
  - based on the framework developed in 2024, and on insights gained from workshops/meetings, surveys and preliminary qualitative findings.
  - ensure the components align with the framework and addresses the identified needs and gaps.
- **Iterative feedback and refinement**
  - share the draft framework with stakeholders for feedback.
  - incorporate feedback and refine the tools iteratively.

The **key interim output** is represented by a drafted toolbox, outlining the preliminary framework designed for further refinement and transcripts.



- **Sub-task 5.1.5 Wide dissemination of the toolbox (M25-M36)**

This sub-task aims to enhance the visibility of the toolbox and maximize its impact by engaging a diverse audience of stakeholders. In 2024, initial efforts were made to disseminate the three components of the toolbox, with further efforts expected throughout 2025. The professional networks established during the co-creation of the 2024 toolbox components will be kept informed and engaged. This will ensure wide availability of the toolbox, supported by joint efforts of other WPs. Additionally, where possible, we will connect with the formed NMGs and reach out to their representatives to validate the drafts of the toolbox components. This collaboration will help ensure the project's sustainability, as NMG members are established professionals working in key institutions.

A monitoring and evaluation report will stand as a **key interim output**, providing preliminary assessments of the potential toolbox's usage, effectiveness, and areas for improvement.

- **Sub-task 5.1.6 Implementation of the toolbox while ensuring its sustainability after the end of the THCS project (M25-M36)**

This sub-task aims to implement the toolbox designed to support the translation of research and innovation (R&I) results into policy while ensuring its long-term sustainability beyond the THCS project. **Key activities** will consist of:

- **Establishment of an NMG in Romania:** the NMG will consist of key stakeholders, including policymakers, and other relevant actors, who will be instrumental in implementing the toolbox and promoting its use. The group will serve as a crucial platform for collaboration, feedback, and dissemination, ensuring that the toolbox is integrated into policy-making processes at various levels.
- **Documentation and reporting:** throughout the implementation and validation process, detailed documentation will be maintained, capturing the steps taken, challenges encountered, and feedback received. This will ensure transparency and provide a clear record of the toolbox's journey from design to implementation. Regular progress reports will be prepared and shared with stakeholders, including updates on the establishment of the NMG, validation outcomes, and sustainability efforts.

The **key outputs** of this sub-task will consist of the establishment of an NMG in Romania and a document containing feedback and potential refinements for the toolbox.

## **Task 5.2 Support mutual learning among policymakers (M25-M36)**

*Leader: FR MOH; Partners: all partner organisations involved in the WP*

The successful transformation of our health and care systems will depend on the ability of decision-makers to learn from each other, across national and regional borders and perhaps across sector boundaries. This, based on evidence, research and good practices, and using this know-how to guide the necessary investments and implementation in a direction that corresponds to the vision of health and care of the future.

Task 5.2 includes the implementation of different actions to support mutual learning between countries and the ability to translate evidence into policies. Actions will rely on different types of interactions with policymakers from countries and regions involved in the Partnership to share experiences on how health and care systems are differently organized, on the political agenda and

reforms keys. Participants in this task can also further contribute to the identification of practices for key activities supporting the implementation of research results in policy.

This task will particularly contribute to a common understanding of challenges and solutions by creating a common vocabulary to address priorities for transforming health and care systems.

The work mentioned above is divided into 4 main sub-tasks. The associated planned activities are presented in the table below.

N°	Sub-tasks	Activity	Linked objective
5.2.1	Support mutual learning among policymakers	<i>Deliverable D 5.4 on Policy Dialogue</i>	SO3 "Increase the ability to implement innovation"
		<i>Analysis of the results of the 1st survey (regarding PD objectives)</i>	Expected outcome linked to SO3 : Identify barriers and successful factors enabling transferability of research and innovation findings and taking up innovation across countries and regions
		<i>Start rounds of interviews of policymakers</i>	
		<i>Typology of the projects (expected outcome: Report/paper on the promotion of THCS research projects within the framework of policy dialogue – M30)</i>	SO3 "Increase the ability to implement innovation" OO8: Promote a faster exchange of good practices and testing and upscaling of innovation using existing tools across different countries and regions.
		<i>Master Class: feasibility study and preparation of the MC (to be launched in 2026)</i>	
5.2.2	Establish a multi-year roadmap for task 5.2	<i>Strategy document (AD D 5.1.1) for the policy dialogue to be finalized.</i>	Management of the WP5 Sub-task 5.2 activities.
		<i>Plan to conduct interviews over the next 3 years (dissemination and discussion with partners).</i>	
		<i>Gantt chart (dissemination to partners and discussion about the planned activities)</i>	
		<i>Framework for including THCS funded projects in the future PD activities</i>	
5.2.3	Coordinate with other relevant institutions to foster mutual learning among policymakers	<i>Extend the repository of institutions relevant for task 5.2 activities to institutions from partners involved</i>	OO13 Build synergies and promote networking to support coordination of activities at EU, international and national level.
		<i>Explore collaboration with the institutions identified</i>	
		<i>Participation in the EUPHA conference (Presentation on THCS)</i>	
		<i>Plan for collaboration with national mirror groups</i>	
5.2.4	Review of relevant programs/ experimentations	<i>Specific review of relevant national/regional programs / EBP</i>	SO2 /OO3 SO2 /OO5
		<i>Analysis of the collected information through sub-task 5.1.1 (survey), 5.2.1</i>	SO2 /OO5: Support the identification of context-based innovative solutions

		<i>(interviews) and 5.2.4 (specific review) led by FR MOH</i>	<i>responding to the challenges of the health and care sector and beyond.</i>
		<i>Operational sheets / papers on programs (EBP) useful for policy dialogue</i>	<i>SO3 /0010 Strengthen the capacity and use of research to better inform the implementation of innovation in health and care systems.</i>
		<i>Webinars / Targeted training modules (On experimentation and taking up into policy)</i>	<i>SO2 /003: Support comparative analyses of national or regional strategies and approaches to advance health and care services and uptake research findings into policy.</i>

- **Sub-Task 5.2.1 Support mutual learning among policymakers (M25-M36)**

This sub-task aims at increasing the ability of decision makers to implement innovation (SO3) by learning from each other and exploiting the results of research programs, notably those funded by the THCS partnership.

The work carried out in 2025 under this sub-task will be structured around three main activities:

#### **1/ Continuing the rounds of interviews with policymakers initiated in 2024**

To support mutual learning between countries and the capacity to translate evidence into policy, the sub-task 5.2.1 dedicated the first part of its work in 2024 to initiating a second phase of data collection by preparing interviews with stakeholders involved in the policy process.

This work will continue, in 2025, to identify even more precisely barriers and success factors enabling the transferability of research and innovation results and the adoption of innovation between countries and regions. This information will complement the one collected via the survey launched in 2024, which had only minimal participation from policymakers and did not allow a detailed understanding of the complexity and local specificities of relevant evidence-based initiatives and policies (data, issues, stakeholders, relationships between stakeholders, etc.).

The interviews will be carried out by rounds, from September 2024 until early 2027 in order to cover all countries involved in the consortium (5 countries every 6 months). The success of this work is largely dependent on the effective cooperation of partner countries, which will be responsible for supporting WP5 in determining the list of people to interview and helping contact these people. The working group formed in 2024 to prepare these interviews will continue its work in 2025, conducting most of the interviews.

During the interviews, the interviewers will follow the instructions given in the interview guide made in 2024. It gives guidance on the methodology to follow, the questions to ask and the profile of the interviewees, also providing a logical thread for the discussion to be held with the decision-makers interviewed.

The interviews are designed to collect information about:

1. the policymakers' practice in using evidence to inform policy (selection of relevant and reliable data, how they balance input from different stakeholders or policy constraints);
2. the barriers and solutions found, as well as the facilitators made available at the institutional, regional or national levels (established processes, guidelines and training, evidence centres, readily available evidence, etc.) and,



3. their practice in policy evaluation and use of evidence in policy reviews.

These interviews also aim to better understand the expectations of decision-makers in relation to the THCS partnership as well as to solicit their interest in the activities carried out by WP5. The results of these interview cycles will give rise to a scientific analysis over time, which will make it possible to refine the WP5 strategy gradually to promote mutual learning between decision-makers. In the longer term (after 2027), they could also result in a scientific publication.

## **2/ Establishing a framework or typology allowing projects financed by the partnership to be included in the mutual learning process and policy dialogue activities led by WP5**

The results of the projects funded under the partnership must serve as a pivot for our future policy dialogue activities. And those activities must themselves help promote the projects funded. To make sure we are able to create this virtuous loop, WP5 will have first to identify how those projects could be taken up in policies and what are their contributions to society and the transformation of our health and care systems.

To do this, work was initiated during the last quarter of 2024 to establish a typology of projects funded so far by the partnership. This will continue during the first half of 2025 with the aim of establishing a framework for analysing projects financed in the specific context of policy dialogue. This work will take advantage of the work done by other WPs such as:

- the monitoring tool developed in the framework of WP8;
- the analyses carried out within the framework of WP3 on the response provided by these projects to the strategic and operational objectives of the partnership.

The objectives pursued are as follows:

- Understand how and when funded projects can contribute to the policy dialogue activity organized by WP5;
- Understand and highlight their expected impacts in terms of transformation of health and care systems;
- Establish a project classification grid to integrate new projects funded under future calls.
- Help the public health authorities of the different countries involved in the THCS to promote the funded projects in their policy.

The key interim output of this activity includes a comprehensive report detailing the findings from this analysis on the promotion of THCS research projects within the policy dialogue. This report will be included in Deliverable D 5.4 on Policy Dialogue and the multi-year roadmap for task 5.2.

## **3/ Preparing events (e.g. a Master Class or webinars - completion by 2026)**

In 2025, this sub-task will also focus on preparing the first main events and workshops that will promote policy dialogue from 2026. To do this, the work undertaken in 2024 to carry out a first feasibility study (which will define the targeted audience, the main themes, the preliminary program, and the learning objectives) concerning the launch, from 2026, of a Masterclass will be finalized. If it is conclusive, it will be followed by preparatory workshops during the following months. The Master class should make it possible to create and lead a community of decision-makers/researchers to encourage dialogue. It will notably aim to:

- enable knowledge sharing between policymakers in partner countries, which helps to strengthen their capacity to integrate research results into policies to better inform the implementation of innovation in health and care systems (SO3 /0010).

- raise awareness among policy decision-makers of the need to take up work from policy research.

The content of the masterclasses is expected to include lessons and case studies from individual countries, experiences in relevant EU initiatives and THCS-funded projects. Other forms of intervention with decision-makers will also be considered to highlight the projects currently funded under the THCS, such as webinars or targeted training and information actions.

This work and events will be developed in collaboration with the work carried out as part of sub-tasks 5.1.2 and 5.1.4 relating to the 3 components of the toolbox, taking advantage of the discussions that occurred during the attendance to the 3 main events in 2024, and of the workshops that will be organized in 2025, all as part of task 5.1. The third component of this toolbox relating to primary care (creating tools that will improve the use of research findings to improve policy development in health human resources, as well as in primary and community care, to support and support the transformation of the health and care system) could make it possible to deploy our first actions in this area and to make the link with the projects funded as part of the THCS 2025 call.

- **Sub-Task 5.2.2 Establish a multi-year roadmap for task 5.2. (M25-M36)**

The objective of this sub-task is to define the main strategic lines of actions to be carried out within the framework of task 5.2 and to plan and sequence the work throughout the partnership according to the issues relevant to the stakeholders. This strategic prospecting work was initiated in 2024 and will continue in 2025 by updating key documents allowing the development of the political dialogue activities of WP5:

- the GANTT chart to prepare and distribute the activities of task 5.2,
- the multi-year plan for the conduct of interviews to policymakers within the next years.

The work done in 2025 will also include in its work the framework for including THCS funded projects in the future policy dialogue activities. It will also prepare the future Deliverable D 5.4 on Policy Dialogue. This work will notably be based on the creation of a project book, which will be initiated in 2025 to trace all the work and discussions carried out within the framework of task 5.2.

- **Sub-Task 5.2.3 Coordinate with other relevant institutions to foster mutual learning among policymakers (M25-M36)**

Understanding the context of its action and identifying institutions with which WP5 Task 5.2 should work will allow the development of policy dialogue activities that are fully consistent. This is why this sub-task aims to clearly identify the added value that the WP5 can bring to the existing institutional landscape fostering policy dialogue activities. It will also evaluate the opportunity to carry out joint actions or work with other relevant institutions, both at the national and supra / sub-national levels. More generally speaking, it will allow building synergies and promoting networking to support the coordination of activities at EU, international and national level (OO13).

In 2024, the WP5 has defined the profile of the institutions that could help develop the dialogue between policymakers and researchers to facilitate the uptake of research results into policy. These institutions, whose areas of expertise are of strong interest for future activities in Task 5.2, can play different roles in the community:

- Develop and disseminate good practices to health and care stakeholders (Evidence-based policies; Policy assessment)

- Manage research communities
- Support organizational performance in health services
- Coordinate / Support reforms and transformations of the health system
- Monitor the proper implementation of the government's priority reforms
- Knowledge brokering
- Manage Registers or repositories of effective or promising policies.

The census work done in 2024 was limited to a few countries or regions. It will be extended to other countries or regions involved in the partnership, which will allow completing the specific repository created last year. This work is meant to be complementary to the work done on synergies by WP3 at European and international levels.

This sub-task also aims to contact the identified institutions to explore possible ways of working with them in future policy dialogue activities. It will also develop a plan for collaboration with national mirror groups.

- **Sub-Task 5.2.4 Review of relevant programs/experimentations (M25-M36)**

This sub-task differs from sub-task 5.2.1, which mainly concentrates on the policy dialogue that will be organized around the research funded by the THCS partnership. Sub-task 5.2.4 intends to collect information on existing evidence-based programs and policies responding to the challenges of the health and care sector at national or regional levels throughout the partner countries (SO2 /OO5) in order to nourish the policy dialogue with interesting cases and best practices.

The work to carry out in the framework of this sub-task will start with a preliminary identification of relevant evidence-based policies, experiments and programs that are significant for WP5 work, both in terms of tools and mutual learning. This review should facilitate a faster exchange of good practices and existing tools across different countries and regions (OO8) during the future policy dialogue activities developed by WP5.

The key interim outputs of this activity include:

- a specific review of relevant national/regional programs / EBP.
- an analysis of the collected information through sub-task 5.1.1 (survey), 5.2.1 (interviews) and 5.2.4 (specific review) led by FR MOH, in connexion with the analysis conducted on projects (sub-task 5.2.1).
- First operational sheets / papers on programs (EBP) useful for policy dialogue.

On the basis of this work, WP5 may consider organizing dedicated webinars or targeted training modules.

## Deliverables

### Deliverables already foreseen in Part B of the proposal

- D.5.4 Report on policy-dialogue activities 1 (M36; FR MOH) - (\*the due date of this deliverable will be postponed from M2 to M36 via the upcoming amendment)

### Additional Deliverables (if applicable - brief description and month of delivery)

- N/A

# PILLAR RESEARCH AND INNOVATION FUNDING

## WP6 - CALL TEXTS DEFINITIONS OF RESEARCH AND INNOVATION TOPICS

Set of Activities Number	A6.1					Start Date or Starting Event									M25	
Set of Activities Title	JTC 2026 preparation															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	ITMOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAIO	FWB	F.R.S.F.NRS	AKA	TAU	THL	
Person months per participant	10	0	0	3,6	3	0	1	0	0	0,4	0	0,3	3	0	0	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSRI	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	ZonMw	RCN	NCBR	AICIB	
Person months per participant	3,6	3	0	3	0,3	3	3	3	0	1	1,2	7	19	3,3	0	
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	
Short name of participant	FC T	CCDR C	UBB	SRMOH	UHM	ODT	SIMOH	NIJZ	AEI	IDIVAL	CS CJA	FPS	IACS	FORTE	VINN OVA	
Person months per participant	0,7	0,7	0	0	0	3	0	0	3	3	0,5	3	0	1,4	0,4	
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55	

Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	2,5	0,3	3	0	0,2	0,2	1,4	0,29	0,29	0	3	0,2	1,3	0,4	1
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	0	0	0												
Start month	M25							End month				M36			

## Objectives

- To establish a Call Steering Committee for JTC 2026.
- To prepare the call text documents, including evaluation criteria for JTC 2026.
- To select and define the topics for JTC 2026 in line with the prioritization strategy and recommendations in the AWP, considering both thematic and structural priorities.
- To provide funding decision for JTC 2025.

## Description of Programmed Activities

### Task 6.1 Organise JTC 2026 Call Steering Committee (CSC) (M34-M36)

*Leader: RCN. Co-Leader: IT MOH. Contributors: All the Funding Agencies participating in the JTC 2026*

In general terms, the Partnership is planning to set up the Call Steering Committee (CSC) and publish the JTC pre-announcement at the end of each year before the official launch of the call. The representatives of the participating RFOs in the JTC 2026 will form the CSC. Based on AWP 2026 approved by the GA in M34, the CSC for JTC 2026 will be immediately set up to finalise the Call Text for JTC 2026.

In M34, the CSC will finalise the topic(s) to be included in the Call Text, decide on the type of funding instrument, project size and duration, and officially confirm the funding commitment for the JTC 2026 based on input from the AWP, considering the rules and possibilities in each funding organization

participating in the call. CSC for JTC 2026 will be managed by the Joint Call Secretariat and chaired in co-leadership by the WP Leader (RCN) and the Coordinator (IT MOH).

## **Task 6.2. Define call text for Joint Transnational Calls (M25-M36)**

*Leader: RCN. Co-Leader: IT MOH. Contributors: All Funding agencies.*

- **Sub-task 6.2.1 JTC 2026 topic selection and eligibility criteria (M25-M29) Leader: RCN. Co-Leader: IT MOH. Contributors: All Funding agencies.**

As soon as the funding decision for the JTC 2025 is taken, the work for the JTC 2026 will immediately start. The task leader, in collaboration with the Strategic Board and Joint Call Secretariat, will coordinate a brainstorming phase on topic selection and eligibility criteria involving, but may not be limited to, THCS funding organisations, other THCS partners, invited EU organisations and partnerships, invited external organisations, national mirror groups, and invited independent experts. The culmination of this process is a vote on call topics by the FAB in M29, to be included in the AWP 2026.

The topic selection and eligibility criteria process will focus on implementing priorities in the SRIA and the current AWP. Special consideration will be given to avoid duplication, and promote synergies with Horizon Europe and EU4Health, calls in the area Health and Care Systems research and innovation, as well as thematic priorities in previous THCS calls.

- **Sub-task 6.2.2 Preparation of the JTC 2026 call documents (M30-M35) Leader: RCN. Co-Leader: IT MOH. Contributors: All Funding agencies.**

The task leader, in collaboration with the CSC, the Strategic Board (SB) and the Joint Call Secretariat (see A7.1) will be responsible for preparing all necessary documents. Unless decided differently in the AWP and by the JCS, the JTC 2026 call text will include the set of documents provided for JTC 2026, updated with topics and type of RDI actions to be funded. Main part of the topic agreed in the AWP will be used to launch the JTC 2026 pre-announcement.

The documents include:

1. The Call Text, which delineates the aim and the topic of the call, the application procedures (including deadlines), the evaluation procedures as well as other financial and legal issues including intellectual property (IPR) and open access publication. The call text will be submitted to the EC for approval.
2. The Memorandum of Understanding (MoU), which will serve as a joint statement of intention between the funding organizations participating in the JTC 2026 EC co-funded call. The MoU reflects the commitment of the partners who agree to make every reasonable effort to fulfil the intents expressed in this co-funded call as well as their earmarked budget.
3. The governance of the JTC 2026, evaluation and ethic assessment document, which describes in detail steps and rules of the EC co-funded call, especially the two-stage evaluation process (see A7.2), and project monitoring (see A8.1).
4. Guidelines for applicants, which describe the administrative details of the application procedure and include country-specific information from the different national/regional funding agencies of the JTC 2026. These outline the relevant national/regional rules and regulations that applicants must adhere to in order to be eligible for funding.
5. Proposal templates for pre-proposal and full proposal stage. Pre- and full-proposal



templates will be developed based on the available versions used in previous EU funded actions. The templates will be modified for the purpose of the THCS Partnership co-funded calls.

The Call Text for JTC 2026 will be passed to the Joint Secretariat (See Activities 7.1 and 7.2 for Call Publishing and Management). The Results of the call will then be discussed by the CSC for funding decision.

### **Task 6.3 Funding decision JTC 2025 (M36)**

*Leader:* RCN. *Co-leader:* IT MOH. *Contributors:* All the Funding Agencies participating in the JTC 2025

The CSC 2025 will take its final funding decision based strictly on the scientific recommendation of the SEC/PRP list (evaluation committee ranking list) delivered by the acting Joint Call Secretariat (A7.2). As many full proposals as possible with a clear funding recommendation will be funded, considering the available budget. Each eligible applicant will be funded by the organization of the country for which the applicants have applied and according to the national administrative regulations. The National/Regional Funding will be increased by the EC funding (virtual common pot). The final distribution of the EC contribution will be discussed and agreed upon by the CSC in order to maximize the number of high-quality proposals to be funded by filling funding gaps and/or topping up the national contributions (mixed model). This will be done in accordance with the general criteria fixed before the launch of the call to avoid the underestimation of national budgets and to permit a balanced distribution of the EC contribution in line with the national funding. If proposals have identical scores, the proposals coming from participating Member States or associated countries with still available funding will be given precedence, in order to further maximize the number of selected projects. The joint selection list of projects to be funded will be communicated to the EC after approval of the Funding Agency Board and notification to the General Assembly. The applicants will be informed by the JCS about the final funding decision and the national negotiations will commence. The final funding list will be prepared by the JCS and disseminated through publication on the THCS website and Newsletter, and relevant EC portals.

## **Deliverables**

### **Deliverables already foreseen in Part B of the proposal**

- D6.4 Confidential Call documents JTC 2026: memorandum of understanding, governance of the call, evaluation criteria (M36, RCN)
- D6.10 Public Call documents JTC 2026: call text, guidelines for applicants, proposal templates (M36, RCN)

### **Additional Deliverables (if applicable - brief description and month of delivery)**

- N/A



# WP7 - JOINT TRANSNATIONAL CALL SECRETARIAT

Set of Activities Number	A7					Start Date or Starting Event									25	
Set of Activities Title	JOINT TRANSNATIONAL CALL SECRETARIAT															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	ITMOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAI O	FWB	F.R.S.-FNRS	AKA	TAU	THL	
Person months per participant	11	0	0	6	3	0	0.4	0	0	2	0	0.3	3	0	0	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSRI	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	Zonmw	R CN	N C B R	A I C I B	
Person months per participant	12	3	0	3	0.1	3	3	3	0	1	0.4	38	3	18	0	
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	
Short name of participant	FC T	CCDR C	UBB	SRMOH	UHM	ODT	SIMOH	NIJZ	AEI	IDIVAL	CS CJA	FPS	IACS	FORTE	VINN OVA	
Person months per participant	0.7	0.7	0	0	0	3	0	0	3	3	0,5	3.6	0	1.4	0.4	
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55	

Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	2	0.3	3	0	0.3	0.3	1.4	0.1	0.1	0	2	0	2	0.4	2
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	0	0	0												
Start month	25							End month				36			

## Objectives

- Coordinate the establishment of the Joint transnational Call (JTC) Secretariat;
- Follow-up and manage activities regarding JTCs;
- Set up and maintain the IT call tool;
- Manage the evaluation process of the proposals.

## Description of Programmed Activities

### Task 7.1 Establishment of the Joint Call Secretariat (M25-M36)

- **Sub-task 7.1.1. The Establishment of the Joint Call Secretariat for JTC25 (M25)**

**Leader: ZonMw, Contributors: ANR, NCBR**

The Joint Call Secretariat for JTC2025 will work closely together. For this Joint Transnational call ANR will be in the lead of the process. The JTC2025 secretariat will be chaired by ZonMw and supported by ANR and NCBR. The Call Secretariat is responsible for launching the JTC, preparing the call documents with A6.1, managing the evaluation, the project award phase and relation with the Funding Agencies in the CSC. The JCS will act as a central helpdesk to the applicants regarding all aspects on the central level of the JTC, including proposal drafting and submission. In addition, each participating funding organisation will establish a national contact point to support applicants with advice on national rules and regulations, including eligibility and financial budget regulations.

- **Sub-task 7.1.2 Pre-publication, publication and launch of the call (M25-M29)**  
**Leader: ZonMw, Co-leader: WP6, Contributors: ANR, NCBR, ITMOH, All Funding Agencies**

The call for proposals will be published on the THCS website and by the National Funding Organizations via their national publishing routines such as websites, newsletters, press announcements, and social media. A call pre-announcement, based on the main information (call title and brief description) will be published to maximize the early mobilization of the research community in M22.

The call will be officially launched in M23. The EC will be duly notified of the call and its content by the THCS Partnership Coordinating Team. The call will be opened for the submission of proposals at least 60 days before the deadline. An info day (online) will be organized to explain the call topic and the main rules.

The electronic submission system that will be used to collect the proposals and the reviews, and to share these documents with the Expert Panel and the participating THCS partners will be adapted to the needs of the call. The system will be sub-contracted by the WP leader.

- **Sub-task 7.1.3 Eligibility checks and proposal evaluation (M25-M30) Leader: ZonMw, Contributors: ANR, NCBR, All Funding Agencies**

This sub-task includes the following activities:

- **7.1.3.A Establishment of the list of evaluators (pool of experts) (M25-M30)**

After the call topics are fully developed, the task leader will ask all partners to nominate suitable experts for the pool of experts that form the basis for the Peer Review Panel (PRP) and will support the selection of eventual additional experts that will contribute to the remote review of the proposals. Together with the pre-announcement a call for experts will be published on the THCS website. The Peer Review Panel (PRP) will include around 30 members and will be international, drawn from inside and potentially outside the Partnership countries, and be balanced in terms of nationality, age, gender and expertise. Think of experts in the field of health-social sciences, public health, policy development, economics, management of health and care organizations and authorities, stakeholder engagement, ethics, HTA, innovation and policy uptake etc. The PRP Panel chair(s) and the Peer Review Panel members will have a high standing in the field and be recognised experts in their area of expertise. An independent observer will be invited to the panel meetings. The JTC 2025 will be a two-stages call and, if needed and agreed on by the CSC, might have two panel meetings.

- **7.1.3.B Review of pre-proposals for research projects (M26 - M28):**

**Formal check of submitted pre-proposals (M26)**

Eligibility check: JCS will share the pre-proposals submitted to JTC2025 with the RFOs. Each RFO will perform National/ regional Eligibility Checks and will inform the JCS of any eligibility issues. JCS will also perform the central eligibility checks on the pre-proposals in respect to transnational and content requirements included in the call text. All pre-proposals with eligibility issues will be discussed in a CSC on-line meeting or via a written procedure to agree on the need to request additional information to applicants or potential solutions (if any) to overcome the eligibility concerns.

**Remote evaluation of pre-proposals (M26 -M27)**

Each proposal will be evaluated remotely by at least three experts selected from the experts pool. One of the three experts will be appointed as Rapporteur and will be asked to sum up the experts' report in one unique Final Consensus Report (FSR) per pre-proposal. The CSC will confirm the list of experts to guarantee a transparent and unbiased evaluation and a well-balanced, highly competent expert pool. To introduce the experts to the evaluation procedure, the criteria and the online evaluation system a briefing will be held before the written review. The written review (scores and a written evaluation) will be submitted via online submission as contracted by the JCS in agreement with IT MOH

#### **Panel meeting (M28)**

During a panel meeting, all pre-proposals will be discussed and agreement will be reached on a score and grade. After the meeting, the rapporteur will finalise the consensus report to be shared with the applicants. The pre-proposal scoring list will be shared with the CSC and during a meeting the CSC will decide which pre-proposals will be invited for full-proposal submission based on the reviewers' scores, the reviewers' recommendations, on the panel's scoring list and grades, and ensure a reasonable balance of requested funds also consider the available regional/national budgets.

- **7.1.3.C Review of full proposals for research projects (M30-M33)**

#### **Formal Eligibility check of submitted full proposals (M30)**

JCS will share the full proposals submitted to JTC2025 with the RFOs. Each RFO will perform National/ regional Eligibility Checks on new/additional partners and will inform the JCS of any eligibility issues. JCS will also perform the central eligibility checks on the full proposal in respect to transnational and content requirements included in the call text. Full proposals with eligibility issues will be discussed in a CSC online meeting or via a written procedure to agree on the need to request additional information from applicants or potential solutions (if any) to overcome the eligibility concerns.

#### **Remote evaluation of full proposals and the Rebuttal step (M30-M32)**

During the evaluation phase, the experts who assessed the pre-proposals will be invited to assess the eligible full proposals after a thorough check of potential conflicts of interest and expertise. Depending on the R&I priority 'new' experts can also be recruited. Each proposal will be evaluated remotely by at least three experts balanced in terms of nationality, age, gender and disciplinary background. One of the three experts will be appointed as Rapporteur and will be asked to sum up the experts' report in one unique Final Consensus Report (FSR) per proposal. The CSC will confirm the list of experts to guarantee a transparent and unbiased evaluation and a well-balanced, highly competent experts pool. To introduce the experts to the evaluation procedure, the criteria and the online evaluation system a briefing will be held before the written review. The written review (scores and a written evaluation) will be submitted via the online submission tool as sub-contracted by the JCS. The submitted reviews will be shared with the applicants. The applicants will be invited to write a compulsory rebuttal based on the reviews. This rebuttal stage allows applicants to comment on factual errors or misunderstandings that may have occurred in the review process and to reply to reviewers' questions.

#### **Peer Review Panel (PRP) and allocation of proposals to the experts (M32-M33)**

After the experts submit their written evaluations and scores, they will transform into the PRP. In preparation of the PRP meeting, the experts receive the rebuttal written by the applicants. The CSC will confirm the list of Peer Review Panel (PRP) including the independent observers to guarantee a transparent and unbiased evaluation and a well-balanced, highly competent PRP Panel. To introduce the Peer Review Panel to the review procedure, the criteria and the online evaluation system a briefing will be held before the PRP meeting.

**PRP meeting to discuss the full proposals and establish a ranking list (M33)**

The panel will meet to discuss all proposals in detail and settle on scores and assign grades to each full proposal based on its overall assessment of proposals' strengths and weaknesses. The scores and grades will form the ranking list for the proposals. The PRP reserves the right, during the PRP meeting, to adjust the scores (1 point up or down) per criteria based on the discussion and the rebuttal. After the PRP the rapporteur will produce the final consensus report.

- **Sub-task 7.1.3.D Proposal evaluation towards ranking list (M31-M34)**

The final scoring list is shared with the CSC and the funding decision procedure starts. The JCS takes over task 6.1.3 and supports the process towards the funding decision. Once the funding decision is taken, the JCS informs the Coordinating Team and the list of proposals recommended for funding is placed for confirmation on the agenda of the General Assembly. The JCS will notify the project coordinators to contact their national/ regional funders to start the national/ regional granting procedures

## **Task 7.2 Preparation of the Standard Operating Procedure (SOP) manual (M25-M36)**

- **Sub-task 7.2.1. Updating of the Standard Operating Procedure (SOP) manual (M35-M36)**  
**Leader: ZonMw, Contributors: ITMOH, ANR, NCBR, MUR.**

The aim of this task is to update the standard operating procedures after each THCS Joint Transnational Call (JTC) including, if needed, a detailed timeline for the call implementation and coordination of all the activities. The description of the internal (decision-making) processes, tasks, and the timeline to be followed by the Joint Call Secretariat (JCS), the call steering Committee and the Funding Agencies will also be updated if necessary.

- **Sub-task 7.2.2 Set up of the IT System for Proposal Submission and Management (M25-M30), Leader: ZonMw, Contributors: ITMOH**

For the 2025 call a new IT system will be sourced. Along with the finalisation of the Call text and its publication, the new submission system will be aligned with JTC2025 requirements. In order to ensure an optimal management of the submission process, the system will be ready at the latest one week after the call publication.

## Deliverables

### Deliverables already foreseen in Part B of the proposal

- D7.3 Final ranking list of proposals recommended for funding JTCs (M34; ZonMw)
- D7.9 Independent Observers' report on the evaluation (M35; ZonMw)
- D7.15 Joint selection list of projects to be funded (M36; ZonMw)
- D7.21 Formal and duly signed commitment on the availability of funds for the selected projects from each consortium (M36; ZonMw)

### Additional Deliverables (if applicable - brief description and month of delivery)

- AD7.1.2 Updated Standard Operating Procedure for the Management of the JTC (M26; ZonMw)

The SOP, if updated, will include a detailed timeline for the call implementation, internal (decision-making) processes, tasks, and the timeline to be followed by the Joint Call Secretariat (JCS), the call steering Committee and the Funding Agencies.

## WP8 - PROJECT MONITORING AND ASSESSMENT OF PROJECTS' RESULTS AND IMPACT

Set of Activities Number	A8.1					Start Date or Starting Event								25	
Set of Activities Title	PROJECT MONITORING AND ASSESSMENT OF PROJECTS' RESULTS AND IMPACT														
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14
Short name of participant	ITMOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAIO	FWB	F.R.S.-FNRS	AKA	TAU	THL
Person months per participant	8	0	3	1	1	0	1.8	0	0	0.2	0	0.2	0.8	0	0
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28

Short name of participant	A N R	F R M O H	I N S E R M	G S R I	R A N N I S	H R B	C S O M O H	L Z P	S A M	L M T	N W O	Z o n M w	R C N	N C B R	A I C I B
Person months per participant	1	1	0	1	0.4	0.6	11	1	0	0.2	0	1.4	1	1	0
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40
Short name of participant	F C T	C C D R C	U B B	S R M O H	U H M	O D T	S I M O H	N I J Z	A E I	I D I V A L	C S C J A	F P S	I A C S	F O R T E	V I N N O V A
Person months per participant	0.4	0.4	0	0	0	1	0	0	1	1	0.5	1	0	0.6	0.6
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55
Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	1	0.6	4.8	0	0.2	0.2	0.4	0.14	0.43	0	1	0	1	0	1
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	0	0	0												
Start month	25						End month					36			

## Objectives



To coordinate the monitoring of the projects, to analyse implementation and progress, by gathering periodic progress reports from the coordinators, organizing midterm follow-ups and preparing reports. The results of this WP will be used to constantly improve processes within the Partnership connecting with all WPs, on one hand, and for communication and dissemination purposes on the other hand.

## Description of Programmed Activities

### Task 8.1 Definition of indicators and development of monitoring procedures (M25-M36)

*Leader: CSO-MOH; Partners: all partner organisations involved in the WP*

- **Sub-task 8.1.1 Indicators update according to 2025 JTC (M25-M36) Leader: CSO-MOH; Participants: WP Partners**

This aim of this task is to update the list of tailored indicators according to 2025 JTC. The monitoring template will be revised accordingly. The monitoring working group, comprising external experts and THCS partners, will develop the indicators. Additionally, it is expected the participation from WP6 and WP7.

- **Sub-task 8.1.2 Development of monitoring procedures (M25-M36) Leader: CSO-MOH; Participants: WP Partners**

The aim of this task is to drive the procedures for the monitoring of the THCS-funded projects. This task falls to the THCS monitoring subgroup, which convenes regularly to discuss and plan these monitoring procedures. As part of its duties, the subgroup will organise a midterm monitoring meeting for projects awarded under the 2023 JTC. The subgroup comprises external experts and THCS partners (a Non-Disclosure Agreement will be signed to prevent potential conflicts of interest).

### Task 8.2 Implementation of the monitoring tool (M25-M36)

*Leader: IT MOH; co-leader: CSO-MOH; Partners: all partners involved in the WP*

The aim of this task is to maintain and update the online monitoring tool. The tool will be launched and the first monitoring reports will be collected. A training meeting on the tool for the project's coordinators will be conducted. The online monitoring tool will serve as a platform for project coordinators to submit periodic project reports and for RFOs and WP8 Partners to extract data and track projects implementation for THCS reporting purposes. The tool will be updated with new indicators tailored to each JTC.

### Task 8.3 Monitoring of the funded projects (M25-M36)

*Leader: CSO-MOH; co-leader: Xjenza Malta; Participants: WP Partners*

Projects monitoring reports will be collected and analysed by the monitoring subgroup. Project coordinators are responsible for the submission of the requested documents into the monitoring tool.

## **Task 8.4 Impact assessment of the Joint Transnational Calls and research projects (M25-M36)**

The aim of this task is to carry out statistical analyses on each JTC performance and assess the impact of the projects funded under the Joint Transnational Calls

- **Sub-task 8.4.1 Impact assessment of every JTC (M25-M30) Leader: Xjenza Malta; co-leader: CSO-MOH; Participants: WP Partners**

The aim of this task is to carry out a statistical analysis on the second JTC performance. The task leader and co-leaders will receive the submitted data from JCS to analyze JTC 2024 performance per country and RFOs. The statistics will encompass but will not be limited to the following aspects: geographical coverage of submitted/funded projects, funding and success rate per country and RFO, gender balance, budget, involved funding organisations, general information about the consortia and the projects.

The task leader will receive the data from the JTC and will elaborate and update the statistics within three months after the CSC approval of the JTC's final ranking list.

- **Sub-task 8.4.2 Impact assessment of projects funded (M25-M36) Leader: ProMIS; Participants: WP Partners**

The aim of this task is to assess the impact of THCS on research and innovation advancements through the projects funded under the JTCs and alignment with the SRIA and EC policies.

Leader and WP Partners will provide an analysis and summary of the monitoring reports to the THCS partners, describing the progress status, major achievements and issues for discussion.

Establishment of a Working Group composed by WPLEaders and Volunteer Participants of all WP partners.

A series of workshops and thematic ateliers, starting in the second semester of 2025, aimed at collaboratively monitoring, evaluating, and verifying the impact of projects funded by the European Partnership THCS will take place. The participation of the funded project representatives will ensure that the monitoring process aligns with the specific evaluation criteria and impact goals defined in each project.

### *Phase 1: Collaborative Development of M&E Framework*

A kick-off workshop will foresee the active participation of project leaders to co-develop the Monitoring and Evaluation (M&E) framework integrating indicators, targets, and evaluation methods proposed by the funded projects, ensuring that the monitoring process is tailored to each project's specific goals and context.

### *Phase 2: Thematic Ateliers for Targeted Evaluation*

A series of thematic ateliers will be organized around key areas of interest such as health system transformation, technological innovation, and patient-centered approaches. Project leaders will present preliminary results and share the monitoring data collected based on their initial proposals. These sessions will allow for peer learning, exchange of best practices, and joint problem-solving, leading to a richer understanding of the impact in specific thematic areas.

### *Phase 3: Synthesis and Impact Verification*

In the final workshop, project leaders will collaborate on synthesizing findings, verifying the impact achieved, and comparing outcomes with the projected impacts outlined in their proposals. This phase will also focus on adjusting evaluation strategies where needed, ensuring alignment with broader THCS objectives and highlighting the projects' contributions to health system strengthening and innovation across Europe.

## Deliverables

### Deliverables already foreseen in Part B of the proposal

- D8.4 Statistical analysis of JTC 2024 (M26; Xjenza Malta)
- D8.9 Longitudinal analysis of JTCs impact 1 (M30; ProMIS)

### Additional Deliverables (if applicable - brief description and month of delivery)

- N/A

## PILLAR SUPPORT TRANSFERABILITY AND STRENGTHENING ECOSYSTEM

### WP9 - STRENGTHENING ECOSYSTEMS

Set of Activities Number	A9.1					Start Date or Starting Event									25	
Set of Activities Title	Strengthening Ecosystems															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	IT MOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAI	FWB	F.R.S.F.NRS	AKA	TAU	THL	
Person months per participant	6	0	4.5	0	0	0	5	1	0	1	0	0	0	13	1	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	

Short name of participant	A N R	F R M O H	I N S E R M	G S R I	R A N N I S	H R B	C S O M O H	L Z P	S A M	L M T	N W O	Z o n M w	R C N	N C B R	A I C I B
Person months per participant	0	1	0	5	0	1	3.5	0	5	0	1.2	5	0	1.6	1
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40
Short name of participant	FC T	C C D R C	U B B	S R M O H	U H M	O D T	S I M O H	N I J Z	A E I	I D I V A L	C S C J A	F P S	I A C S	F O R T E	V I N N O V A
Person months per participant	0	0	0	1	0.4	0	0	5	0	2	0,5*	0.7	5	0	0
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55
Short name of participant	A R E S S	I S C I I	X J E N Z A M A L T A	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	0.3	0	0	0	0	0	0	0.4 3	0.2 9	4.2	0.5	0.4	0	0	0.8
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	2.3	0	0												
Start month	25						End month					36			

\*Allocation of p/m will be reflected in the next amendment

## Objectives

- To establish strategic links to other ecosystem-related activities
- To work with transformative ecosystems
- To promote the “strengthening ecosystem” approach by organizing first national/regional/local events

## Description of Programmed Activities

### Task 9.1. Establish strategic links to other ecosystem-related activities (M25-M36)

*Leader: FFG; Participants: TAU, ZonMw and All WP Partners*

Based on the outcomes of the work performed in 2024, Task 9.1 will continue to elaborate on strategic contacts in an ecosystem-wide approach. In establishing strategic contacts task 9.1. will work together with the WP9 partner organisations to build and strengthen links that are already existing and establish new ones when possible. The focus will be put on national/regional/local embedding. To this end, we will capitalize on contacts to national/regional mirror groups, national platforms, networks, funding programmes etc, whenever there is a connection to WP9 ecosystem work.

In addition to close collaboration with WP9 partner organisations and identified ecosystem partners, in establishing links and reaching out to relevant partners in an ecosystem-wide approach, Task 9.1 will collaborate especially with WP 3, 4, 5 and 10.

Task 9.1 will engage in developing a communication strategy for WP9 that includes various formats of events but also other kinds of dissemination and information tools, like podcasts, interviews, arena events etc. In doing so, a focus will also be put on providing strategic support to partner organisations in identifying ecosystems at the national/regional/local level by facilitating exchange and by providing supportive documentation and elaborating on how the identification of ecosystems provides benefit to them in terms of supporting transformation.

By month 30, Task 9.1 will provide an activity report that will include an excerpt of relevant chapters from the WP9 strategy to share the WP9 concept and the strategy with a larger audience.

By month 36 task 9.1 will provide the updated strategy document.

### Task 9.2. Transformative Ecosystems (M25-36)

*Leader: TAU, Participants: FFG and All WP Partners*

Building on the Forerunner Ecosystems working group (FTE-WG) workshops held in 2024, the FTE-WG will continue its efforts with regular meetings. The focus will be on engaging Forerunner Transformative Ecosystems (TEs) to develop peer learning methods and advance transformative ecosystem development. The plan is to meet three times a year, organizing both online meetings and meetings integrated into other general THCS and WP9 gatherings.

In addition, we will further intensify the work to identify and engage additional Forerunner TEs, which will enable the selection of TEs with special Beacon elements. We will also advance the ecosystem typologies initiated in 2024, exploring also other forms that inspire partner organizations to identify and recruit ecosystems.

We aim to apply methods such as storytelling and online lectures to highlight successful transformative health and care ecosystems, making them visible to a variety of different audiences. While doing so

our aim is to make the key enablers of the transformation understandable. Substantial effort will be dedicated to the conceptualization and realization of the first edition of the Transformative Ecosystem Arena. This event is intended to take place in Brussels in Autumn 2025. We will also present our findings at relevant THCS meetings to support the understanding and utilization of ecosystems in transforming health and care systems.

Furthermore, the Ecosystem Analysis working group (WG-EA) will continue its work, which began in 2023. The core of WG-EA consists of WP9 member Research Performing Organizations (RPOs), but it remains open to any willing WP9 partners. The main activities of WG-EA include supporting the Forerunner Transformative Ecosystem analysis and developing joint working methods.

### **Task 9.3 Working Group of forerunner countries and commence national/regional/local activities (M25-M36)**

*Leader: FFG; Participants: ZonMw, TAU and All WP Partners*

Task 9.3 will draw on the outcomes of 2024 activities. The focus will be put on

- organising relevant meetings at the national/regional/local levels
- organising exchange among partner organisations about the ecosystem identification
- supporting funded THCS projects, by liaising with them at the national/regional/local levels to other projects and/or to relevant stakeholders.

Task 9.3 aims at supporting partner organisations in their endeavour to organise meetings at national/regional/local levels. Target: 7 meetings altogether.

Task 9.3 will organise several meetings scattered over the year and at least 1 in-person workshop to be held in Vienna, probably in September 2025.

## **Deliverables**

### **Deliverables already foreseen in Part B of the proposal**

- D9.4 – Report on held events and organized activities 1 (M30)
- D9.2 - Strategy document on strengthening ecosystems 2 (M36)

### **Additional Deliverables (if applicable - brief description and month of delivery)**

- N/A

## **WP10 - KNOWLEDGE HUB TO SUPPORT THE**

# TRANSFERABILITY OF GOOD PRACTICES

Set of Activities Number	A10.1					Start Date or Starting Event									25	
Set of Activities Title	Knowledge Hub															
Participant number	1	1.1	1.2	2	3	4	5	6	8	8.1	10	11	12	13	14	
Short name of participant	IT MOH	ISS	PROMIS	MUR	RT	UCSC	FFG	BMK	FIO	VLAIO	FWB	F.R.S.-FNRS	AKA	TAU	THL	
Person months per participant	4.8	0	5.5	0	0	4	0	0	0	0.3	0	0	0	2	2	
Participant number	15	16	16.1	17	18	19	20	21	22	23	24	25	26	27	28	
Short name of participant	ANR	FRMOH	INSERM	GSRI	RANNIS	HRB	CSOMOH	LZP	SAM	LMT	NWO	ZonMw	RCN	NCBR	AICIB	
Person months per participant	0	2	4	0	0	0	2	0	1.5	0	0	1.4	2	1.5	0	
Participant number	29	30	31	32	32.1	33	34	34.1	35	36	37	37.1	38	39	40	
Short name of participant	FC T	CCDR C	UBB	SRMOH	UHM	ODT	SIMOH	NIJZ	AEI	IDIVAL	CS CJA	FPS	IACS	FORTE	VINN OVA	
Person months per participant	0.6	0.6	1.4	1.5	0	2	2	1.5	0	0	0.6	0.9	0	0	0	
Participant Number	42	43	44	45	46	47	48	49	49.1	50	51	52	53	54	55	



Short name of participant	A R E S S	I S C I I	X j e n z a M a l t a	N I V E L	M S A	E T A g	I F D	D P T O S A L U D	B I O E F	B I O S I S T E M A K	U E F I S C D I	F O P H	I N N O S U I S S E	S N S F	S G
Person months per participant	0.3	0	1.5	2.5	0	0	0	0.29	0.43	4	0.5	0.4	0	0	7.1
Participant Number	56	57	58												
Short name of participant	N H S C	A H R Q	H D R U K												
Person months per participant	1.4	0	0												
Start month	25						End month					36			

## Objectives

The objectives of WP10 activities are the following: To test, validate and implement a sustainable Knowledge Hub (v0.2) that will enable effective knowledge sharing to foster capacity-building support and exchange of good practices for the transformation of health and social care systems in Europe (Task 10.1). To facilitate the building and co-design of the Knowledge Hub “community” in order to encourage stakeholders to exchange their experience, good practices and expertise and mobilise their resources towards the transformation of health and social care systems in Europe (Task 10.2). To facilitate and provide capacity-building support activities for the transformation of health and social care systems in Europe (Task 10.3). To advise and support health and social care actors in how to use Knowledge Hub to access existing evidence, good practices and capacity-building support in transforming health and social care systems (Task 10.4).

## Description of Programmed Activities

### Task 10.1 Knowledge hub – co-design of the platform (M25-M36)

*Leader: SG; Partners: All WP10 partners*

The aim of this task is to continue with the co-designing activities of the Knowledge Hub and developing v0.2 of the Hub. Co-designing process is pivotal for the uptake and use of the THCS Knowledge Hub by a wide range of stakeholders. With this regards the following activities are envisaged in 2025:

- A series of online surveys to collect the feedback of the users on the use of v0.2 of the Hub in real-life settings.
- 1 in-person interactive workshop with the users of the v0.2 of the Hub.
- On-going liaison with the THCS technical developer of the Hub to inform the improvement and further development of the Hub.
- On-going liaison with the Advisory Board members and representatives of the National Mirror Groups to capture their experience in using and enhancing the Hub. In addition, specific focus will be given to advice on potential accreditation process to be incorporated in the Hub.
- On-going support for the use and implementation of WP4 Transferability and Implementation framework and development of associated tools and support needed for its use in real-life settings such as:
  - Template(s) to describe the original solutions and their assessment results in the original contexts for supporting their transfer and implementation across the systems
  - Tool(s) to perform transferability and feasibility analysis in the adopting organisation template to plan implementation in the adopting organisation
  - Template to plan implementation in the adopting organisation.
  - On-going liaison with other Work Package leaders is envisaged to monitor the needs and requirements for further development of the Hub

### **Task 10.2 Knowledge hub – building the community (M25-M36)**

*Leader: SG; Partners: All WP10 partners*

The aim of this task is to identify and tailor the resources produced in the THCS project (WPs 4-9) and facilitate their uptake in real-life settings. This will involve the mapping of the resources and evidence across the relevant Work Packages but also liaising with the external community, Advisory Board and National Mirror Groups. The THCS Transferability and Innovation Framework developed in WP4 will continue facilitating a support for the potential adaptation and transferability of these resources across European health and social care settings. The Hub will also act as enabler of policy dialogue and capacity-building support (WP5) as well as ecosystems' matchmaking platform (WP9) with a view to increase the uptake of these resources and support their wider implementation across health and social care systems. In 2025, the main focus will be given on the use and mapping of the community-building functionality to allow the users to manage the resources of the Hub themselves which will support the aspects of ownership and contribution to the community. Finally, the exploitation of synergies with other national, European and international projects and initiatives is planned in order to maximise the existing knowledge and expertise for the transformation of health and social care systems. For this purpose, a catalogue of the synergies' projects (WP2) will be reviewed and regularly updated.

### **Task 10.3 Knowledge hub – capacity-building support (M25-M36)**

*Leader: SG; Partners: All WP10 partners*

The aim of this task is to facilitate and implement capacity-building and training support activities for the transformation of health and social care systems in Europe, to prepare the ground for the transformation of health and social care systems. The following capacity-building activities are envisaged in 2025:

- 4 online knowledge exchange webinars to raise awareness about good practices identified in THCS.
- 1 study visit/capacity-building workshop organised.
- 5-10 Podcasts to showcase local good practices, outcomes of THCS-funded projects, innovation ecosystems and policy dialogue examples of transforming health and social care systems.
- 1 online THCS training week to showcase the capacity-building and training resources developed in the THCS project.
- Mapping and promoting of training and capacity-building activities beyond the THCS Community.

#### **Task 10.4 Knowledge hub – adaptation, localisation and its guidance (M25-M36)**

*Leader: SG; Partners: All WP10 partners*

The aim of this activity is to develop guidance on how to use Knowledge Hub (v0.2) as a platform to access the existing resources, adapt and transfer them in different health and social care settings as well as platform to facilitate capacity-building activities and exchange of good practices which is a critical element for its successful uptake and use in local settings. The following activities are envisaged:

- Documenting the evolving Hub through its main stages and development of specific training materials alongside.
- Organisation and delivery of 2 online tutorial webinars introducing the new prototype of the THCS Knowledge Hub (v0.2), its functionalities and further developments.
- Developing the guidance (illustrative) documents, online tutorials on how to use the THCS Knowledge Hub.
- Capturing the experience of users with using the v0.2 of the Hub (at least 3 short testimonial videos).
- Mapping interest/demand for the localisation and translation of some of the Hub's functionalities.

## **Deliverables**

### **Deliverables already foreseen in Part B of the proposal**

- No deliverables foreseen for 2025

### **Additional Deliverables (if applicable - brief description and month of delivery)**

- N/A

### 3.2 GANTT

[illegible]

[illegible]

[illegible]

[illegible]



Task 7.2 Preparation of the Standard Operating Procedure (SOP) manual												
Sub-task 7.2.1. Updating of the Standard Operating Procedure (SOP) manual												
Sub-task 7.2.2 Set up of the IT System for Proposal Submission and Management												
WP 8 - Project Monitoring, including Technical Report assessment and Assessment of Projects' results and Impact												
Task 8.1 Definition of indicators and development of monitoring procedures												
Sub-task 8.1.1 Indicators update according to 2025 JTC												
Sub-task 8.1.2 Development of monitoring procedures												
Task 8.2 Implementation of the monitoring tool												
Task 8.3 Monitoring of the funded projects												
Task 8.4 Impact assessment of the Joint Transnational Calls and research projects												
Sub-task 8.4.1 Impact assessment of every JTC												
Sub-task 8.4.2 Impact assessment of projects funded												
PILLAR SUPPORT TRANSFERABILITY AND STRENGTHENING ECOSYSTEMS												
WP9 - Strengthening Ecosystems												
Task 9.1. Establish strategic links to other ecosystem-related activities												
Task 9.2. Transformative Ecosystems												
WP10 - Knowledge Hub to support the transferability of best practices												

[illegible]

### 3.2.1 AWP Tasks Overview

Act. N.	Activity Title	Lead Participant N.	Leder Short name	Person-Months	Start Month	End month
A1.1	GOVERNANCE AND ANNUAL WP	1	IT MOH	<b>72,88</b>	25	36
A2.1	COORDINATION AND MANAGEMENT	1	IT MOH	<b>127,3</b>	25	36
A3.1	STRATEGIC RELATIONSHIP AND IMPACT MAXIMISATION ACTIVITIES	1.2 1.1 4	PROMIS ISS UCSC	<b>105,7</b>	25	36
A4.1	METHODOLOGICAL AND ASSESSMENT FRAMEWORK	45 14	NIVEL THL	<b>78,6</b>	25	36
A5.1	BRIDGING EVIDENCE TO POLICY	16 31	FR MOH UBB	<b>69,03</b>	25	36
A6.1	CALL TEXTS DEFINITIONS OF RESEARCH AND INNOVATION TOPICS	26	RCN	<b>101,5</b>	25	36
A7.1	JOINT TRANSNATIONAL CALL SECRETARIAT	25 15 27	ZonMw ANR NCBR	<b>143,4</b>	25	36
A8.1	PROJECT MONITORING AND ASSESSMENT OF PROJECTS' RESULTS AND IMPACT	20 44 1.2	CSO MOH Xjenza Malta PROMIS	<b>52,9</b>	25	36
A9.1	STRENGTHENING ECOSYSTEMS	5	FFG	<b>79,62</b>	25	36
A10.1	KNOWLEDGE HUB	55	SG	<b>66,52</b>	25	36
<b>Total Person Months</b>				<b>897,37</b>		

### 3.2.2 Annual Deliverables List

The following table provides an overview of the additional deliverables due in Year 3, only those not provided in part B of the proposal

D. N.	Deliverable Name	Activity Number	Lead Part	Type	Dissemination Level	Delivery
AD4.1.1	Capacity-building report with overview of capacity-building research needs	4.1	NIVEL	R	Sensitive	M28

AD4.1.2	Monitoring instrument as tool for tracking research funding supporting the transformation of health and care systems	4.1	NIVEL	R	Sensitive	M30
AD4.1.3	Report on mapping and assessment of trends and needs in RDI and capacity-building in a short-, medium and long-term perspective	4.1	NIVEL	R	Sensitive	M32
AD4.1.4	Capacity-building webinars in relation to applying for and conducting research supporting the transfer/scale-up of innovation and transformation of health and care systems	4.1	NIVEL	R	Sensitive	M28, M33 and M36
AD4.2.1	Plan for incorporating the THCS Transferability and Implementation Framework and its key tools into the Knowledge Hub	4.2	THL	R	Sensitive	M28
AD4.2.2	Mapping other tested tools in other EU programmes to be used within the framework and to be incorporated into the knowledge Hub	4.2	THL	R	Sensitive	M33
AD4.2.3	Plan for the THCS means and practices for supporting the THCS funded projects to describe the models and solutions they have developed into the Knowledge Hub and for supporting the adoption of these (and other) models and solutions with the THCS tools by health and care organisations	4.2	THL	R	Sensitive	M36
AD71.2	Updated Standard Operating Procedure for the Management of the JTC	7.2	ZonMw	R	Sensitive	M26

## 3.3 Participation in Annual Work Programme activities

### 3.3.1 Partner Profiles

## PP1 MINISTERO DELLA SALUTE (IT MOH)

<b>Profile</b>	<p>The Ministry of Health (IT-MoH) is the central body of the National Health Service and, as such, performs the functions belonging to the State regarding the protection of human health and the coordination of the National Health System. The Ministry of Health develops guidelines in the field of prevention, care and research in different health sectors and oversees National Health activities. Concerning international activities, IT-MoH is involved in all European Coordination and Support Actions accompanying measures (standardisation, dissemination, policy, dialogues etc) and is also the governmental body of connection with the World Health Organization, the European Commission (health sector), the European Medicines Agency and OECD. The Ministry of Health is the main public body funding biomedical research and biomedical innovation in Italy, while also overseeing research policy and stimulating the use of the generated knowledge in order to help improving the population well-being and the healthcare system in Italy. In particular, through yearly calls IT-MoH funds research for the improvement of the population's health through the rapid translation of research results into new or improved preventive, diagnostic, and treatment products and processes, and incorporation into health policies and practice. At the international level, the Ministry of Health is involved in multiple European projects supporting research. In particular, it is involved in a wide range of Horizon 2020 ERA-NETs, CSAs and Joint Programming Initiatives and in the majority of the Horizon Europe – Pillar 2, Cluster 1 - partnerships and CSAs. It is also committed to supporting EU projects on the development of the European Strategy Forum on Research Infrastructures (ESFRI) in the health research sector (ECRIN, EATRIS, BBMRI). IT-MoH is also a member of GLOPID-R, Global Research Collaboration for Infectious Disease Preparedness.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation. Coordinator of THCS Partnership. It is leader of WP1, WP2, WP3 and it participates in all the other WPs</p>

## AE1.1 ISTITUTO SUPERIORE DI SANITA' (ISS)

<b>Profile</b>	<p>The Istituto Superiore di Sanità (ISS, Italian National Institute of Health) is the main center for research, control and technical-scientific advice on public health in Italy. Alongside the Ministry of Health, the Regions and the entire National Health Service (NHS), ISS guides health policies on the basis of scientific evidence. ISS undertakes research, experimental, control and training functions in relation to Public Health in Italy</p>
<b>Main Tasks</b>	<p>Affiliated Entity of ITMOH. It is a Research Performing Organisation. It participates in WP1, WP2, WP3, WP8, WP10 No involvement in the Activities related to Call Text Definition is foreseen, nor in Drafting the Annual Work Plan (except for a preliminary brainstorming phase where inputs are collected)</p>

## AE1.2 AZIENDA ULSS 4 VENETO ORIENTALE (PROMIS)

<b>Profile</b>	<p>ProMIS is a network which involves the Italian Ministry of Health, the 21 Italian Regions / Autonomous Provinces (APs) and the National Agency for Regional Health Services (AGENAS). It was established to strengthen regional cooperation and links between Italian representative bodies of regional health practices and policies and the European initiatives on health. ProMIS promotes across Italy the dissemination of EU policies and funding opportunities in the framework of health, research and innovation. ProMIS has supported since 2012 Italian regions to apply to become EIP-AHA Reference Sites (15 in 2019) and it has also started promoting its model in the Reference Site Collaborative Network (RSCN). It's embraced by a community of experts, a dedicated network that facilitates the interaction between the innovation ecosystems of Regions, increasing the knowledge and experience about innovative and digital European active and healthy ageing initiatives and projects. Moreover, since 2020 it has set up a specific focus group of selected Italian Regions/APs with the aim of defining strategies for digitalising the National Health System according to the EU funding opportunities (as a EIP-AHA spin off focus group). The aim of the dedicated group is to: a) ease the intersection between supply and demand of "digital innovation" in the social-health field and RIS3; b) align regional policies with the regional health ecosystems activities (DIHs, academia, SMEs and patient and civic associations).</p>
<b>Main Tasks</b>	<p>Affiliated Entity of ITMOH. Leader of task 3.2 and sub-task 8.4.2 It participates in WP1, WP2, WP3, WP8, WP9, WP10</p>

## PP2 MINISTERO DELL'UNIVERSITA' E DELLA RICERCA (MUR)

<b>Profile</b>	<p>The Italian Ministry for Universities and Research (MUR), formerly MIUR, is the key RTD policy actor and funding agency in Italy at state level. MUR is in charge to prepare and to submit the National Research Programme (PNR – Piano Nazionale della Ricerca) proposal to the Government and to directly manage it. Besides, the Ministry, in charge of definition of strategic priorities in Research and higher education, has the following responsibilities:</p> <ul style="list-style-type: none"> <li>• coordination, assessment and evaluation of the national university system and advanced training schools;</li> <li>• supporting and fostering basic research in university and research institutions, programming intervention in public research institutions;</li> <li>• coordination, regulation and funding of national research institutions;</li> <li>• coordination of the research activities promoted by other Ministries;</li> <li>• monitoring and supporting the integration between the research system and industries;</li> <li>• integration between public research and applied research;</li> <li>• promoting and supporting research in the industry system;</li> <li>• funding research programmes for southern regions;</li> <li>• promoting initiatives such as the Funds for the diffusion of scientific culture;</li> <li>• enforcement of EU and international rules on university education and research.</li> </ul> <p>The Ministry also has key responsibilities for international co-operation. It concludes bi and multilateral agreements on research and technology collaboration and is in</p>
----------------	---

	charge of coordinating Italy's participation in the European Union's Framework Programme.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8

### PP3 REGIONE TOSCANA (RT)

<b>Profile</b>	Tuscany is a region in central Italy with an area of about 23,000 square kilometres and a population of about 3.8 million inhabitants. Regione Toscana (Tuscany Region) is the regional authority and administrative body of the region; it has legislative, administrative, and financial autonomy and is responsible, on a regional level, for issues including education, social issues, healthcare, international cooperation, and the environment. The Tuscan health system includes three Local Health Authorities and four university hospitals. The health system is the sector to which the region commits the largest share of its budget and organizational structure, and constitutes an infrastructure of services and activities that can generate positive effects throughout the region. Regione Toscana is also actively involved in the promotion of the Tuscan Life Sciences Cluster which is acting as "glue" between the specialist industrial dimension and the institutional and systemic one, promoting dialogue among companies and the network of excellence present in the field of research and technology transfer in the region. Tuscany Region promotes health research and innovation policies to structure an integrated and synergistic research and innovation system in a coordinated context among Tuscan university hospitals and other institutions of the Regional Health Service.
<b>Main Tasks</b>	Research Funding Organisation. It participates in It participates in WP1, WP2, WP3, WP6, WP7, WP8

### PP4 UNIVERSITA' CATTOLICA DEL SACRO CUORE (UCSC)

<b>Profile</b>	The Università Cattolica del Sacro Cuore (UCSC) ( <a href="http://www.unicatt.it">www.unicatt.it</a> ), founded in 1921, includes four campuses (Milano, Brescia, Piacenza-Cremona, Roma), 14 faculties, 52 three-year major tracks, 42 graduate level degrees, 1 four-years degree, over 100 master tracks, 53 specializations. The University plays a pivotal role in the Italian community through the Medical School, established in Rome in 1961, with the teaching hospital Fondazione Policlinico Universitario Agostino Gemelli ( <a href="http://www.policlinicogemelli.it">www.policlinicogemelli.it</a> ), that represents almost 10% of the entire productive capacity of Lazio Regional Health Service with 1559 Beds (of which 203 for day hospital + 37 for rehabilitation), and almost 100,000 patients each year. The School of Medicine is at present a world-class training ground for future leaders in medical research and practice - including every modern medical discipline as well as some of the most respected medical scholars all over the world - public health, and biomedical science. The Section of Hygiene of the Department of Life Sciences and Public Health will participate in this Partnership providing its expertise in Public Health, Health Economics, Management of Health Systems, Clinical Epidemiology,
----------------	--



	Genetic Epidemiology and Personalized Medicine, Health Policy research, Health Technology Assessment, Environmental Health, Bioethics. UCSC
<b>Main Tasks</b>	Research Performing Organisation. Task leader in Task 3.1. It participates in WP1, WP2, WP3, WP4, WP5, WP10 No involvement in the Activities related to Call Text Definition is foreseen, nor in Drafting the Annual Work Plan (except only for a preliminary brainstorming phase where inputs are collected)

#### PP5 OSTERREICHISCHE ORSCHUNGSFORDERUNGSGESELLSCHAFT MBH (FFG)

<b>Profile</b>	The Austrian Research Promotion Agency (FFG) is the national funding agency for industrial research and development in Austria. FFG funding schemes play an important role in generating new knowledge, developing new products and services, and enhancing competitiveness in the global marketplace. They make it easier, or possible, to finance research and innovation projects, and help to absorb the risks involved in research. The FFG supports international networking and encourages careers in science.
<b>Main Tasks</b>	Funding Agency that will manage Austrian Research Funding provided by BMK and BMBF. Leader of WP 9. It participates in WP1, WP2, WP3, WP6, WP7, WP8

#### PP6 BUNDESMINISTERIUM FUER KLIMASCHUTZ, UMWELT, ENERGIE, MOBILITAET, INNOVATION UND TECHNOLOGIE (BMK)

<b>Profile</b>	The Austrian Federal Ministry for Climate Action is not only responsible for the Austrian climate and energy policy, it is also the largest funder of R&I in Austria. With a series of programmes on applied R&I it covers a wide range of technologies, from ICT and industrial technologies to transport & mobility and energy & environmental technologies.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP4, WP9 Call management will be handled by FFG on its behalf.

#### PP8 FONDS INNOVEREN EN ONDERNEMEN (FIO)

<b>Profile</b>	Fonds voor Innoveren en Ondernemen is the legal entity that provides the funds for R&D&I projects in Flanders. Fonds voor Innoveren en Ondernemen han no personnel, VLAIO acts on behalf of Fonds voor Innoveren en Ondernemen
<b>Main Tasks</b>	Research Funding Organisation providing cash contribution for Joint Transnational Call. No involvement in activities is foreseen as Call management will be handled by VLAIO on its behalf.

## AE8.1 MINISTERIES VAN DE VLAAMSE GEMEENSCHAP/VLAAMSE GEWEST (VLAIO)

<b>Profile</b>	Flanders Region (Ministeries van de Vlaamse Gemeenschap) is the legal entity encompassing agencies and departments of the Flemish Region in Belgium, among others VLAIO (Flanders innovation and entrepreneurship), which will take the lead for Flanders Region in this partnership. VLAIO encourages and supports innovation and entrepreneurship, and contributes to a favourable business climate. By being a one-stop-shop, VLAIO builds a bridge towards stronger entrepreneurship. In this capacity, VLAIO acts on behalf of Fonds voor Innoveren en Ondernemen for all aspects pertaining to funding for R&D&I projects. Also, other relevant agencies and departments of Flanders Region will be involved, e.g. Welzijn, Volksgezondheid en Gezin (WVG) for health and care related aspects and the department of economy science & innovation (EWI).
<b>Main Tasks</b>	Affiliated Entity to FIO. Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP9, WP10

## PP11 FONDS DE LA RECHERCHE SCIENTIFIQUE- FNRS (F.R.S.-FNRS)

<b>Profile</b>	<p>The mission of the Scientific Research Fund - FNRS is to develop basic scientific research within the framework of initiatives presented by researchers. It promotes the production and development of knowledge by supporting, on the one hand, individual researchers and, on the other hand, by funding research programs carried out in laboratories and services located mainly in the universities of the Wallonia-Brussels Federation. Based on the sole criterion of scientific excellence, the financial support of the F.R.S.-FNRS is provided in several ways:</p> <ul style="list-style-type: none"><li>- the temporary or permanent remuneration of individual researchers,</li><li>- funding of research teams,</li><li>- participation in international networks and programs,</li><li>- the allocation of scholarships and credits to promote scientific exchanges,</li><li>- the awarding of scientific prizes.</li></ul> <p>The F.R.S.-FNRS is also responsible for promoting European research and innovation programs in which the Wallonia-Brussels Federation participates to researchers, and supporting researchers for participation in these programs.</p>
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8

## PP12 SUOMEN AKATEMIA (AKA)

<b>Profile</b>	<p>The Academy of Finland is an expert organisation in science and research that funds high-quality scientific research, provides expertise in science and science policy and strengthens the position of science and research. We are a government agency within the administrative branch of the Finnish Ministry of Education, Science and Culture. We promote excellent, responsible and high-impact research to ensure that society can make the best possible use of the results. Our goal is the renewal, diversification and increasing internationalisation of Finnish research. Our activities cover the full spectrum of scientific disciplines. We promote the impact and</p>
----------------	---

	renewal of research by encouraging researchers to submit boundary-crossing funding plans that involve risks but are of high scientific quality. We produce high-quality data and analyses and support the use of scientific knowledge in policymaking. We increase national expertise by promoting research and by collecting and opening data. Our work supports the renewal of the Finnish society with knowledge and know-how. We also collaborate with key stakeholders to improve the quality and impact of research, education and innovation.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8

### PP13 TAMPEREEN KORKEAKOULUSAATIO SR (TAU)

<b>Profile</b>	Tampere University is the second-largest comprehensive university in Finland, with 21 000 students and close to 4000 employees. Almost all internationally recognised fields of study are represented, and broad areas of strength are technology, health and society. According to its new strategy for 2030, the purpose of TAU is to build together a sustainable world. One of four strategic priority areas for research and education is "The Future of Wellbeing", where TAU searches for new solutions to promote health and wellbeing, guided by an in-depth understanding of changes in the societal landscape, and realised by combining competencies in technology, medicine, society, economics, and management. As embodiments of this strategic priority area, TAU has invested in two related major research programmes: Sustainable Welfare Systems and Health Data Science. Additionally, a 4+4 years research platform "TRANSFORM - towards effective and equitable welfare services" has been launched in 2021.
<b>Main Tasks</b>	Research Performing Organisation. Leader of task 9.1.2. It participates in WP1, WP2, WP3, WP4, WP5, WP9, WP10  Conflict of Interest firewalls are put in place to ensure that access to Call Text Definition is foreseen and Annual Work Plan is restricted.

### PP14 TERVEYDEN JA HYVINVOINNIN LAITOS (THL)

<b>Profile</b>	The Finnish Institute for Health and Welfare (THL) studies, monitors, and develops measures to promote the well-being and health of the population in Finland.
<b>Main Tasks</b>	Research Performing Organisation. Leader of Task 4.2. It participates in WP1, WP2, WP3, WP4, WP5, WP9, WP10  Conflict of Interest firewall are put in place to ensure that access to Call Text Definition is foreseen and Annual Work Plan is restricted.

### PP15 AGENCE NATIONALE DE LA RECHERCHE (ANR)

<b>Profile</b>	<p>The French National Research Agency (ANR) was established by the French government in 2005 to fund research projects, based on competitive schemes giving researchers the best opportunities to carry out their projects and paving the way for ground-breaking new knowledge. The main mission of ANR is to fund the best basic research, but also targeted and applied research in particular through partnerships between companies and public sector laboratories. Its action is thus intended to support French research excellence at both academic and technological levels by means of a rigorous selection process based on evaluation by peer review. Finally, it is also the ANR's mission to strengthen international cooperation by contributing in particular to the funding of international consortia in partnership with other funding agencies in Europe and beyond. ANR funds are available in all scientific fields, for both fundamental and industrial research. Since 2010, ANR has also been the principal operator of the Investments for the Future programme in the field of higher education and research. In this role, it ensures the selection, funding and monitoring of projects relating to the centres of excellence, health, biotechnologies, and the transfer of technology and the creation of value from research. Since its inception in 2005, the ANR agency awarded approximately 15,600 grants investing 6,5 billion €. In 2016 for example, 1,257 projects were awarded for an amount of 595,5 M€. Developing European and international collaborations is one of the priorities of the ANR. The ANR has participated/is participating in multiple ERA-NETs, CSAs and JPIs. Currently the Health &amp; Biology Department is contributing to 13 ERA-Nets (JPI-EC-AMR, SEA-EU-NET, ERA-HDHL, HDHL INTIMIC, JPI-JPcofuND, NEURON, FLAG-ERA II, ERA-CVD, ERA-CoSysMed, ERA PerMed, EuroNanoMedIII and E-Rare-3) and coordinates two of them (E-Rare and ERA-HDHL). ANR also participates in 3 JPIs (JPND, JPAMR, JPI HDHL), as well as other type of collaborative initiatives like ICPeMed or CRCNS (computational neurosciences).</p>
<b>Main Tasks</b>	<p>Research Funding Organisation. In Year two it is one of the three Funding Agencies supporting the Joint Call Secretariat (A7.1 and 7.2). It participates in WP1, WP2, WP3, WP6, WP7, WP8</p>

## PP16 MINISTERE DES AFFAIRES SOCIALES ET DE LA SANTE (FR MOH)

<b>Profile</b>	<p>The Ministry of Solidarity and Health prepares and implements French government policy in the areas of solidarity, social cohesion, public health and the organization of the health system.</p> <p>Among these missions:</p> <ul style="list-style-type: none"> <li>• It draws up and implements policies relating to family, childhood, the elderly and dependency.</li> <li>• It is in charge of the organisation of health and prevention.</li> <li>• In collaboration with other competent ministries, it participates in government actions</li> <li>• relating to research and innovation promotion in the health sector.</li> <li>• It draws up and implements the rules relating to the schemes and the management of social</li> <li>• security as well as complementary bodies.</li> </ul>
----------------	--

	<ul style="list-style-type: none"> <li>• It participates, in conjunction with the Minister for Ecological Transition, in the preparation</li> <li>• and implementation of the policy for the development of the social and solidarity economy.</li> <li>• It develops and implements poverty reduction programs</li> </ul>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>Leader of WP5</p> <p>It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP9, WP10</p>

#### AE16.1 INSTITUT NATIONAL DE LA SANTÉ ET LA RECHERCHE MÉDICALE (INSERM)

<b>Profile</b>	<p>Founded in 1964, Inserm is a public scientific and technological institute which operates under the joint authority of the French Ministries of Health and Research. The institute is dedicated to biomedical research and human health and is involved in the entire range of activities from the laboratory to the patient's bedside. Since it was founded, Inserm has played an active role in major medical breakthroughs, including the first prenatal diagnostic tests, decoding of the HLA system mechanisms, the first in vitro fertilization, identification of the AIDS virus, cancer radiotherapy, the first skin graft, deep brain stimulation, gene therapy.</p> <p>It also partners with the most prestigious research institutions in the world that are committed to scientific challenges and progress in these fields. Inserm is broken down into 9 institutes, including the Institute for Public Health (IPH) which coordinates 83 research teams and several infrastructures, such as nation-wide cohorts. Several teams are involved in health systems research, these teams often including researchers working as well in university hospitals.</p>
<b>Main Tasks</b>	<p>Affiliated Entity to FR MOH. Research Performing Organisation.</p> <p>It participates in WP1, WP2, WP3, WP5, WP10</p> <p>No involvement in the Activities related to Call Text Definition is foreseen, nor in Drafting the Annual Work Plan (except only for a preliminary brainstorming phase where inputs are collected)</p>

#### PP17 GENIKI GRAMMATIA EREVNAS KAI KAINOTOMIA (GSRI)

<b>Profile</b>	<p>The General Secretariat for Research and Innovation (G.S.R.I.) of the MINISTRY OF DEVELOPMENT AND INVESTMENTS is the state agency responsible for the design and planning of the national policy for research, coordination of its implementation as well as launching, funding and monitoring of research and Innovation programs.</p> <p>G.S.R.I. supports the research and innovation activities of both the country's research and academic organizations and those of its productive industry. It supervises and funds 11 very active and successful Research Centers and 3 Technological Organizations. It promotes international cooperation activities and represents Greece in relevant institutions of the European Union, OECD and International Research Organizations (CERN, EMBL etc), thus bringing the country's</p>
----------------	---

	research and technology activities into line with the requirements of the international community. It encourages activities aimed at raising public awareness about research and innovation issues. G.S.R.I. has been involved in 65 EU programs (ERANETS CO-FUND, ERANET PLUS, INCO-NET, OMC-NET, CSAs, EAs, etc.) since 2004 and has a considerable experience as a full partner contributing to or leading several tasks and as a Funding Party in many of the above schemes, supporting, only during the current programming period (2014-2020), (92) projects with Greek participants and (49) are due to be contacted.
<b>Main Tasks</b>	Research Funding Organisation. It participates in WP1, WP2, WP3, WP4, WP6, WP7, WP8, WP9

### PP18 RANNSOKNAMIDSTOD ISLANDS (RANNIS)

<b>Profile</b>	<p>Rannis administers the main public competitive funds in the fields of research, innovation, education and culture in Iceland.</p> <p>Rannis coordinates and promotes Icelandic participation in European cooperation programmes, such as Horizon Europe, Erasmus+ and Creative Europe, as well as other international programmes.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP4, WP6, WP7, WP8</p>

### PP19 THE HEALTH RESEARCH BOARD (HRB)

<b>Profile</b>	<p>The Health Research Board (HRB) is a statutory agency under the aegis of the Department of Health in Ireland. It has a complement of 80 staff, an annual budget of approximately €45m, and manages contracts valued at approximately €250m. It is funded mainly by the Department of Health and is accountable, legally, to the Department. However, it is scientifically, administratively and organisationally independent.</p> <p>The HRB is the lead agency in Ireland responsible for supporting and funding health research, information and evidence. Our vision is for better health through excellent research, data and evidence. Our mission is to support research that improves people's health, promotes evidence-informed care and creates solutions to societal challenges. We are committed to ensuring that people remain at the very heart of everything we do, led by our values as an organisation: leadership, independence, accountability, quality, responsiveness, collaboration and inclusiveness.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP5, WP6, WP7, WP8, WP9</p>

### PP20 MINISTRY OF HEALTH (CSO MOH)

<b>Profile</b>	<p>The Chief Scientist Office (CSO) of Israeli Ministry of Health (MOH) through its Medical Research Administration is a pivotal organization in Israel for managing and funding of bio-medical and medical research.</p> <p>Our strategic approach is to support investigator-initiated, health-related research projects performed in hospitals, universities and research institutes.</p> <p>Grant proposals received in response to public Calls for Applications issued by the Research Fund, are peer reviewed in various research-disciplines review committees (Study Sections). Funding of feasibility studies and fellowships for Physicians-Researchers is also available. CSO-MOH is also mandated to regulate animal experimentation, genetic human experimentation and homeland security aspects of biomedical research in Israel.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>Leader of WP8</p> <p>It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP9, WP10</p>

### PP21 LATVIJAS ZINATNES PADOME (LZP)

<b>Profile</b>	<p>The Latvian Council of Science (LZP) is a governmental institution under the authority of the Ministry of Education and Science which deals with science and research within the country as well as international cooperation since 1990. LZP acts as a research funding organization (RFO) through the distribution of State budget resources allocated to scientific activity in accordance with the procedures specified by the Cabinet of Ministers and the supervision of the utilisation thereof, as well as the provision of opinions regarding the scientific usefulness of the utilisation of allocated State budget resources. The distribution of allocated resources is based on competitive R&amp;D funding. LZP has a profound role in determining the perspective directions of research and innovation, evaluating the scientific activity in Latvia, designing the research policy, disseminating achievements of research, emphasising the social dimension of research. Beyond its role as the research council, LZP acts as integrator for multidisciplinary in science relying on 5 major expert teams (natural sciences, engineering, biomedical/medical/health sciences, social sciences and humanities, agriculture and environment), promotes social innovation based on scientific evidence. LZP is responsible for balancing the social and the technical components in scientific advancement. LZP supports the central platform for experts from various science fields in Latvia, and actively promotes collaboration of experts on various levels fostering horizontal integration of research. LZP has followed the social innovation component in the decision making, decision support, providing support to emerging research. International cooperation is one of the main objectives of LZP. LZP has been setting the priorities for Latvian participation in various LZP instruments, and the full meeting of the LZP is a platform of priority setting among all relevant ministries and bodies of Latvia. According to the Law on Scientific of Activity of Latvia LZP expresses binding opinion on reforms, institutional transformations and priorities related to research in Latvia</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP6, WP7, WP8</p>



**PP22 LIETUVOS RESPUBLIKOS SVEIKATOS APSAUGOS MINISTERIJA (SAM)**

<b>Profile</b>	<p>The Ministry of Health of the Republic of Lithuania is an institution that exercises executive powers, carries out State administration functions established by the laws and other legal acts in the healthcare sector, and implements State policy in the healthcare sector.</p> <p>Strategic goals of the Ministry of Health: Assurance of public health care by strengthening the health of the population, prevention and control of diseases. Improvement of public health care activities in compliance with the requirements of EU legal acts. Assurance of effective prevention of diseases, reduction of the morbidity and mortality of the population, giving special attention to the health care of pregnant women and infants, health preservation and improvement of children and youth. Reduction of morbidity from communicable and non-communicable diseases by removing the causing factors as well as reducing consequences that occur due to traumatic events and accidents. The mission is to form and implement health policy that ensures public health, high quality health promotion activities, and rational use of resources. We work to ensure smooth functioning of the health care in Lithuania. To achieve that we need to make new decisions and restore the previously proven elements. However, what we need most is the willingness to change and knowledge how to implement the changes. We have organised a professional team, and with your confidence we will revive the health system of Lithuania.</p>
<b>Main Tasks</b>	It participates in WP1, WP2, WP3, WP4, WP5, WP9, WP10

**PP23 LIETUVOS MOKSLO TARYBA (LMT)**

<b>Profile</b>	<p>LMT is the main national institution executing competitive funding in the country to the national research and education institutions for R&amp;D from the state budget, EU instruments and other sources. LMT is developing and implementing national funding streams, as well as participating in international cooperation programmes providing joint support to transnational research projects. LMT participated in 12 international coordination initiatives under H2020 schemes in 2020 and in 2021 joined 3 new ERA-NET COFUNDs and participated in 11 joint transnational calls.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP6, WP7, WP8</p>

**PP24 NEDERLANDSE ORGANISATIE VOOR WETENSCHAPPELIJK ONDERZOEK (NWO)**

<b>Profile</b>	<p>NWO has a longstanding tradition of participating and leading in international research programming and networks. NWO is one of the most important science funding bodies in the Netherlands and realises quality and innovation in science. It invests in curiosity-driven research, research related to societal challenges and research infrastructure. NWO facilitates excellent, curiosity-driven disciplinary, interdisciplinary and multidisciplinary research. In this role, NWO focuses on all</p>
----------------	--

	scientific disciplines and on the entire knowledge chain with an emphasis on fundamental research. NWO connects researchers from various disciplines and across the entire knowledge chain and brings researchers and societal partners together. NWO funds the personnel and material costs for scientific research and knowledge exchange and impact activities of Dutch universities and public research institutes.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP9

### PP25 ZORG ONDERZOEK NEDERLAND ZON (ZonMw)

<b>Profile</b>	The Netherlands Organization for Health Research and Development (ZonMw) is a national organization that promotes quality and innovation in the field of health research and health care, initiating and fostering new developments. ZonMw also actively promotes knowledge transfer and implementation, ensuring knowledge is exchanged between all relevant stakeholders (health researchers, health professionals, patients/consumers and the general public). This in turn facilitates the structured implementation of newly developed knowledge and guarantees emerging health care issues a place on the research agenda. The majority of ZonMw's commissions come from the Ministry of Health, Welfare and Sport (VWS) and the Netherlands Organization for Scientific Research (NWO).
<b>Main Tasks</b>	Research Funding Organisation Leader of WP7. It coordinates the Joint Call Secretariat in the JTC2023. It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP9, WP10

### PP26 NORGES FORSKNINGSRAD (RCN)

<b>Profile</b>	The Research Council of Norway is the national research strategy and research funding body. The Research Council distributes annually around ten billion kroner (approximately 1 billion EUR) for research purposes. The Research Council is the most important research policy adviser to the government, the ministries and other central institutions and environments with connection to research and innovation. We have a special responsibility for following up on the government's long-term plan for research. The Research Council implements national research policy decisions through several financing schemes. In collaboration with the research communities, the business community and the public sector, The Research Council work to give Norwegian research an economic and quality boost, and to promote innovation and knowledge. The Research Council works for greater international collaboration and increased participation in the EU's research and innovation program. Other important tasks are to create meeting places for and dialogue between researchers, users of research and actors who fund research.
<b>Main Tasks</b>	Research Funding Organisation Leader of WP6 . It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP10

### PP27 NARODOWE CENTRUM BADAN I ROZWOJU (NCBR)

<b>Profile</b>	The National Center for Research and Development (NCBR) is a Polish executive agency. NCBR is a partner in over 100 international initiatives, including ERA-Nets, and Joint Programming Initiatives, Joint undertakings, bilateral programmes and art. 185 and 187 TFEU based public-public and public-private partnerships and actively co-organises calls for proposals for international R&D projects.
<b>Main Tasks</b>	Research Funding Organisation. It is one of the three Funding Agencies supporting the Joint Call Secretariat. It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP9, WP10

### PP28 AICIB - AGÊNCIA DE INVESTIGAÇÃO CLÍNICA E INOVAÇÃO BIOMÉDICA (AICIB)

<b>Profile</b>	The Agency for Clinical Research and Biomedical Innovation (AICIB) is an entity created by a Resolution of the Portuguese Council of Ministers, in 2018, to be the link between the Ministry of Health and the Ministry of Science and Technology. Its main mission is to promote, coordinate and support activities in the areas of clinical and translational research and biomedical innovation, contributing to the optimization of Portugal's clinical, scientific and technological potential. AICIB's mission is also to coordinate research to be priority-oriented based on several political instruments such as the National Health Plan, the Priority Health Programs, the Integrated Strategy for Rare Diseases or European Framework Programs for R&D in Health.
<b>Main Tasks</b>	It participates in WP1, WP2, WP3, WP4, WP5, WP9,

### PP29 FUNDACAO PARA A CIENCIA E A TECNOLOGIA (FCT)

<b>Profile</b>	<p>FCT's vision is: To establish Portugal as a global reference in science, technology, and innovation. To ensure that knowledge generated by scientific research is used fully for economic growth and the well-being of all citizens.</p> <p>Mission: FCT's mission is to continuously promote the advancement of knowledge in science and technology in Portugal, attain the highest international standards in quality and competitiveness, in all scientific and technological domains, and encourage its dissemination and contribution to society and to economic growth.</p> <p>FCT pursues its mission through the attribution, in competitive calls with peer review, of fellowships, studentships and research contracts for scientists, research projects, competitive research centres and state-of-the-art infrastructures. FCT ensures Portugal's participation in international scientific organisations, fosters the participation of the scientific community in international projects and promotes knowledge transfer between R&amp;D centres and industry. Working closely with international organisations, FCT coordinates public policy for the Information and Knowledge Society in Portugal and ensures the development of national scientific computing resources</p>
<b>Main Tasks</b>	Research Funding Organisation

	It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP10
--	---

### PP30 COMISSÃO DE COORDENAÇÃO E DESENVOLVIMENTO REGIONAL DO CENTRO (CCDRC)

<b>Profile</b>	CCDRC is a regional agency of the Portuguese government, and in particular, a decentralised body of the Ministry for Territorial Cohesion, that deals with: environment (environmental impact assessments, air quality), land use and urban planning (regional land management plan); local administration (support); and regional development in Centro Region of Portugal.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP9, WP10

### PP31 UNIVERSITATEA BABES BOLYAI (UBB)

<b>Profile</b>	The Babeş-Bolyai University is today the oldest, the largest and, in many ways, the most prestigious university in Romania. The University has a wide portfolio of research projects funded by national (CNCSIS, CEEX, PNII) and international programs (NIH, FP6, FP7).
<b>Main Tasks</b>	Research Performing Organisation. Leader of task 5.1 It participates in WP1, WP2, WP3, WP4, WP5, WP10 No involvement in the Activities related to Call Text Definition is foreseen, nor in Drafting the Annual Work Plan (except only for a preliminary brainstorming phase where inputs are collected)

### PP32 MINISTERSTVO ZDRAVOTNICTVA SLOVENSKEJ REPUBLIKY (MOH SR)

<b>Profile</b>	<p>The Ministry of Health (MoH) is a central state budgetary organization for a) health care, b) health protection, c) public health insurance, c) further education of health professionals,</p> <p>d) natural healing spas, natural healing resources, natural mineral waters,</p> <p>e) pricing policy in the area of prices of products and services in healthcare and f) control of the restriction of biological weapons. Within the scope of its competence, the MoH can establish non-profit organizations, state enterprises and can establish contributory organizations and budgetary organizations.</p> <p>The Ministry of Health is active in several international and bilateral cooperation. MoH have internal project department, coordinates biomedical research and development activities, and participates in the coordination of projects funded by the Structural Funds and Horizon 2020 and Horizon Europe. In recent years, the MoH very intensively prepared the reform of the Health Care System in Slovakia. This reform is also one of the key points of the Recovery and Resilience Plan.</p>
<b>Main Tasks</b>	It participates in WP1, WP2, WP3, WP4, WP5, WP9, WP10

### PP32.1 UNIVERSITY HOSPITAL MARTIN (UHM)

<b>Profile</b>	The Martin University Hospital (Slovak: Univerzitná nemocnica Martin, abbreviated to UNM) is a Slovak public university hospital located in the Martin municipality, in the county of Zilina, north-east of the Slovak capital Bratislava. It is a teaching hospital and it is the main university hospital affiliated with the Jessenius School of Medicine. The hospital has over 1,700 employees. Martin University Hospital has 900 beds in total including all sectors
<b>Main Tasks</b>	Affiliated Entity to MOH SR. Research Performing Organisation It participates in WP4, WP5, WP9 No involvement in the Activities related to Call Text Definition is foreseen, nor in Drafting the Annual Work Plan (except only for a preliminary brainstorming phase where inputs are collected)

### PP33 OFFICE OF THE GOVERNMENT OF THE REPUBLIC OF SLOVENIA FOR DIGITAL TRANSFORMATION (ODT)

<b>Profile</b>	The Digital Transformation Office monitors and analyses the process of digital transformation at the state level and in individual regions, draws up strategic national documents and policies related to digital transformation, and coordinates and monitors their implementation. Other tasks include preparing and coordinating the measures of institutions at the national level related to the digital transformation policy, as well as monitoring and coordinating their implementation, and preparing and implementing key national projects in accordance with the national digitalisation strategy to improve digital indicators.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP8, WP10

### PP34 MINISTRY OF HEALTH OF THE REPUBLIC OF SLOVENIA (SI MOH)

<b>Profile</b>	The Ministry of Health (MoH) is responsible for the development, regulation and supervision of the health system and strategic health policy development, ensuring that public health and healthcare services are provided in accordance with national legislation and regulations.
<b>Main Tasks</b>	It participates in WP1, WP2, WP3, WP4, WP10

### AE34.1 NACIONALNI INSTITUT ZA JAVNO ZDRAVJE (NIJZ)

<b>Profile</b>	The National Institute of Public Health (NIJZ) is the central Slovenian institution for public health practice, research and education. Its academic staff work on various tasks covering the areas of epidemiology of communicable and non-communicable diseases, health promotion, health protection, health system research and national coordination of preventive programmes in primary health care. It also functions as
----------------	--

	<p>the central statistical authority in health. Although public health practice is not in the exclusive domain of a single type of organisation or profession, in Slovenia as in many other countries, the majority of important public health functions and services are provided by NIJZ. The main function of NIJZ is to provide research in the field of health, and protect and increase the level of health of the population by raising the awareness of the population and carrying out other preventive measures. NIJZ's main activities are funded by the Ministry of Health and include national health statistics and research in the field of public health including health care systems; activities to identify health threats and design measures for their control; designing and providing health promotion programmes and preparing a scientific background for health-friendly policies, programmes and measures for disease prevention. NIJZ is a public institute. Following legislation changes brought about by the Slovenian Health Services Act in 2013, the previous institution (also named the National Institute of Public Health) underwent organisational restructuring. From 2014 onward, NIJZ is organised as one central unit with nine regional offices. NIJZ employs over 400 staff members. NIJZ has successfully coordinated and participated in various international projects. NIJZ has also taken on the role of lead partner in three prominent EU-funded Joint Actions: EPAAC – European Partnership for Action Against Cancer, PARENT – Cross-border Patients' Registries Initiative and CANCON – Development of a European Guide on Quality Improvement in Comprehensive Cancer Control.</p>
<b>Main Tasks</b>	<p>Research Performing Organisation. Affiliated Entity to SI MOH It participates in WP1, WP2, WP3, WP4, WP5, WP9, WP10 No involvement in the Activities related to Call Text Definition is foreseen, nor in Drafting the Annual Work Plan (except only for a preliminary brainstorming phase where inputs are collected)</p>

### PP35 AGENCIA ESTATAL DE INVESTIGACION (AEI)

<b>Profile</b>	<p>The State Research Agency encourages R+D+I through its competitive financing with public resources and promotes excellence and collaboration between the agents of the Spanish Science, Technology and Innovation System.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8</p>

### PP36 FUNDACION INSTITUTO DE INVESTIGACION MARQUES DE VALDECILLA (IDIVAL)

<b>Profile</b>	<p>IDIVAL is the Health Research Institute of Cantabria, was created as a place for biomedical research, knowledge generation and socioeconomic tractor for the region as a result of the relationship that has been maintained over the years between the Marqués de Valdecilla University Hospital (HUMV) and the University of Cantabria (UC). Since its constitution in 2010, in March 2015, IDIVAL is an accredited institution by the Health Institute Carlos III (ISCIII), and re-accredited on June 2020 for a 5 years</p>
----------------	--

	<p>period, meaning that the work performed at IDIVAL meets the highest standards of quality.</p> <p>The close collaboration between IDIVAL, UC, MVUH and the Health System, is allowing IDIVAL to foster basic-clinical collaborations and a fast-growing and excellent research activity, specifically oriented to generate new knowledge helping to solve the medical problems of the population. The Institution is made up of more than 750 people (workers, researchers and administrative staff). The scientific structure of IDIVAL includes 32 research groups distributed according to three categories (22 consolidated groups, 6 associated groups and 5 emerging groups), that focus their activity on six areas: cancer; neurosciences; transplantation; infection and immunity; metabolism, aging and lifestyle habits; and transversal research.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP4, WP6, WP7, WP8, WP9</p>

### PP37 CONSEJERÍA DE SALUD Y CONSUMO DE LA JUNTA DE ANDALUCÍA (CSCJA)

<b>Profile</b>	<p>The Regional Ministry of Health and Families of Andalusia (<a href="https://www.juntadeandalucia.es/organismos/saludyfamilias.html">https://www.juntadeandalucia.es/organismos/saludyfamilias.html</a>) is fully responsible for public health, health policy, planning and regulation, healthcare management and provision in Andalusia, as well as the leadership of the Andalusian Public Healthcare System (APHS). The APHS, with more than 100,000 employees, is in charge of the provision of healthcare to all the population of Andalusia, one of the largest regions in Europe, with 8.41 million inhabitants. It is a wide network based on high-quality, patient-centred and accessible care.</p> <p>The main goals of the Regional Ministry of Health and Families of Andalusia are the improvement of the Public Healthcare System, based on the values of universality, access to good quality care, equity and solidarity; the modernization of health organizations, making them more flexible and patient-centred in order to ensure clinical governance and transparency; and the increase of the value of the Public Service System</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP8, WP10</p>

### AE37.1 FUNDACIÓN PÚBLICA ANDALUZA PROGRESO Y SALUD (FPS)

<b>Profile</b>	<p>The Progress and Health Foundation (<a href="https://www.juntadeandalucia.es/fundacionprogresoysalud">https://www.juntadeandalucia.es/fundacionprogresoysalud</a>) is a non-for-profit organization which belongs to the Andalusian Regional Ministry of Health and Families. FPS provides services to the Andalusian Public Health System through three lines of activity: R&amp;I, Information and Communication Technologies (ICT); and IAVANTE, which includes training and evaluation of professional expertise. FPS goal is to boost health research and innovation in the region through the R&amp;I area, which is responsible for giving facilities and support to the centres and research groups during the whole scientific process, especially for biomedical research.</p>
----------------	---



	Since 2005 FPS collaborates with the Regional Ministry of Health and Families and with the Andalusian Health Service in the management of the Research and Innovation calls for proposals and it also launches its own calls
<b>Main Tasks</b>	Research Funding Organisation. Affiliated Entity to CSCJA It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP8, WP9, WP10

### PP38 INSTITUTO ARAGONES DE CIENCIAS DE LA SALUD (IACS)

<b>Profile</b>	IACS is the entity that promotes research, innovation and knowledge brokering in biomedicine and health sciences for the Regional Health System contributing to high-quality care in the public health system, supporting innovation, excellent research and benchmark training, as well as supporting the creation of wealth and economic growth in Aragon. IACS supports stable research groups in clinical and translational medical research, biomedicine, public health, health systems and policy research. IACS manages 11 research core facilities supporting biomedical research, linking to national and European networks, providing scientific and technical services and advice and is the regional authority for authorization and monitoring of clinical trials and post-authorization observational studies for drugs and medical devices. IACS aims to improve the quality, safety and sustainability of the Healthcare System by providing HTA and evidence-based products, is responsible of the regional and node of the national Network of HTA Agencies and holds the secretary of the national clearinghouse of clinical practice for the adoption of evidence-based products.
<b>Main Tasks</b>	It participates in WP1, WP2, WP3, WP4, WP5, WP9

### PP39 FORSKNINGSRADET FOR HALSA ARBETSLIV OCH VALFARD (FORTE)

<b>Profile</b>	Forte is a government agency under the Swedish Ministry of Health and Social Affairs. Our operations are guided by governmental directives and an annual letter of appropriation. On behalf of the government we initiate, finance, evaluate and communicate research in the areas of health, working life and welfare. Forte distributes around SEK 700 million every year to both basic and needs-driven research. This ranges from individual project grants to larger efforts to build world-class research environments. Forte also works actively to stimulate international research collaborations, both within the EU and worldwide.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP4, WP6, WP7, WP8

### PP40 VERKET FOR INNOVATIONSSYSTEM (VINNOVA)

<b>Profile</b>	Vinnova – the Swedish Governmental Agency for Innovation Systems - is Sweden's innovation agency. Our mission is to promote sustainable growth by improving the conditions for innovations, as well as funding needs-driven research. Vinnova also supports the private sector focusing on SMEs as well as demonstrations/pilots and mission-driven approaches. Every year Vinnova invests about SEK 3 billion in various initiatives. Since co-financing from actors must total at least the same amount, the funds for addressing societal challenges are doubled. In addition, Vinnova is the Swedish Government's expert authority in innovation policy.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8

#### PP42 AGENZIA REGIONALE PER LA SALUTE ED IL SOCIALE (ARESS)

<b>Profile</b>	A.Re.S.S. is a technical-operational and instrumental body of the Apulia Region in support of the definition and management of social and health policies. It operates as an agency of study, research, analysis, verification, consultancy and technical-scientific support. A.Re.S.S. aims to organize and improve, through monitoring and continuous verification of outcomes, the responsiveness of the regional health system to the needs and expectations of the health demand of Apulian citizens. To this end, it identifies, plans and promotes lines of development in the field of health and social welfare, also defining and implementing strategies for innovation of health and social services, aimed at the full satisfaction of health needs, declined in the dual perspective of prevention and health care.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP9, WP10

#### PP43 INSTITUTO DE SALUD CARLOS III (ISCIII)

<b>Profile</b>	The National Institute of Health Carlos III (ISCIII) is the main public body in the fields of biomedicine and health sciences in Spain, providing research funding, and performing research. For over 25 years, its mission focuses on basic disease, person and population-oriented, translational and applied research, as well as health technology assessment. In addition to this, ISCIII performs intramural activities (research, reference services, post-graduate training) and has a regulatory role as far as on bio-banking and accreditation of health research institutes is concerned. It is also responsible for managing the Spanish Strategic Action for Health Research and developing the short-to-long term funding scheme within the R+D+I Plan framework of Spain.
<b>Main Tasks</b>	Research Funding Organisation It participates in WP1, WP2, WP3, WP6, WP7, WP8

#### PP44 Xjenza Malta (Formerly MCST)

<b>Profile</b>	Xjenza Malta (XM), established by Legal Notice 112 of 2024 (S.L. 595.49), is the Malta Government Agency acting as the national funding agency and policy development and implementation body in the areas of Research, Innovation, and Space. Xjenza Malta is entrusted with updating the national R&I and Space policy frameworks, overseeing and coordinating R&I and Space strategy implementation through programming efforts, including the direct management of the national public budgetary allocation for R&I and Space. Xjenza Malta actively participates in various international initiatives, including co-funded R&I partnerships such as the Clean Energy Transition Partnership, Sustainable Blue Economy Partnership, and the Partnership on Transforming Health and Care Systems, playing a central role in transnational R&I project calls and key tasks, such as fostering collaboration, monitoring funded projects, and conducting impact assessments. Xjenza Malta is also involved in PRIMA and in JPI Oceans, and is committed to developing bilateral and multilateral R&I funding collaborations, working closely with foreign agencies to drive joint projects and initiatives forward.
<b>Main Tasks</b>	Research Funding Organisation Leader of sub-task 8.4.1 It participates in WP1, WP2, WP3, WP6, WP7, WP8, WP10

#### PP45 STICHTING NEDERLANDS INSTITUUT VOOR ONDERZOEK VAN DE GEZONDHEIDSZORG (NIVEL)

<b>Profile</b>	NIVEL is an independent research institute, legally a not-for-profit foundation. NIVEL is the national institute for health services research, and has a double mission: to conduct scientific applied research activities which provide results that are relevant for stakeholders in health care. NIVEL holds an ISO:9001 certificate which guarantees its high quality. NIVEL's roots go back to 1965 when its predecessor was founded as the scientific office of the Dutch College of General Practitioners. Currently, its research domain covers the entire healthcare system. NIVEL receives basic funding from the Dutch Ministry of Health, covering about 35% of its annual turnover which amounts to 13 m€. NIVEL's staff includes appr. 100 researchers from multiple disciplines, more than half holds a PhD degree. Approximately 10% of NIVEL's turnover is funding from international sources (incl. the European Commission (Framework Programmes, Health Programme) and WHO). Since 1987, NIVEL is a WHO Collaborating Centre for Primary Health Care and Health Services Delivery. It is member of the Health Services and Policy Monitor (HSPM) network, led by the European Observatory on Health Systems and Policies as National Leading Institute (NLI) for the Netherlands. NIVEL also hosts a number of international organisations, including the European Public Health Association (EUPHA) and the European Forum for Primary Care (EFPC).
<b>Main Tasks</b>	Research Performing Organisation Leader of task 4.1. It participates in WP1, WP2, WP3, WP4, WP5, WP10

#### PP46 SOTSIAALMINISTEERIUM (MSA)

<b>Profile</b>	<p>The Ministry of Social Affairs of Estonia (Estonian: Eesti Sotsiaalministeerium) is a government ministry of Estonia. It was established on 1 February 1993 as a result of the merger of the Ministry of Social Welfare, the Ministry of Health and the Ministry of Labour.</p> <p>There are two ministers working in the ministry. The Minister of Health and Labour the Minister of Social Protection.</p> <p>The Ministry has five strategic objectives:</p> <ul style="list-style-type: none"> <li>• to ensure people's economic prosperity and their good work.</li> <li>• to ensure people's social coping and development.</li> <li>• to support the well-being of children and families.</li> <li>• to promote people's mutual care, equal opportunities, and gender equality.</li> <li>• to ensure people's long and high-quality life.</li> </ul> <p>In the field of health, the main tasks of the Ministry of Social Affairs are to develop the public health policy as well as the health care policy and organise their implementation. The objective of the Ministry of Social Affairs is to increase people's life expectancy, improve their quality of life, and reduce health inequality. It ensures the availability, quality, and safety of health care and raises residents' awareness of and satisfaction with health services.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP5, WP6, WP7, WP8,</p>

#### PP47 SIHTASUTUS EESTI TEADUSAGENTUUR (ETAg)

<b>Profile</b>	<p>The Estonian Research Council (ETAg, website: <a href="http://www.etag.ee">http://www.etag.ee</a>) is a private body fulfilling public functions, responsible to the Ministry of Education and Research. Its main goal is to support the most promising research initiatives in all fields of basic and applied research including humanities and social sciences. The ETAg includes several national programmes for research: Health R&amp;D programme, Environmental Conservation and Environmental Technology R&amp;D Programme and Estonian Research Infrastructures Roadmap activities.</p> <p>The ETAg acts as National Contact Point for the Horizon 2020, coordinates participation in the COST network and consults mobile researchers through the EURAXESS network and manages the Estonian R&amp; Liaison Office in Brussels.</p> <p>Estonian Research Council is also responsible for coordination of several international, bi- and multinational cooperation programmes (BONUS, ERA-NETs, EUROCORES and other). The ETAg is the authorized processor of the Estonian Research Information system, the information channel for submitting and processing grant applications, as well as submitting and confirming project reports. The ETAg runs a wide variety of science communication activities, and leads a national programme for science popularization.</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP6, WP7, WP8</p>

#### PP48 INNOVATIONSFONDEN (IFD)

<b>Profile</b>	<p>Innovationsfonden was established as of 1 April 2014 by bringing together research, technology development and innovation grants from the Danish Council of Strategic Research, the Danish National Advanced Technology Foundation and the Danish Council for Technology and Innovation into one new powerful foundation.</p> <p>The overall aim of IFD is to support the development of knowledge and technology, including advanced technology, in order to strengthen research and innovative solutions that may benefit growth and employment in Denmark. In this view, IFD creates a framework for entrepreneurs, researchers and businesses so they can develop innovative and viable solutions to society's challenges. For example, new climate mitigating solutions, healthier food, a more effective health care, cleaner environment, green transport, and start-up journeys. All projects IFD invests in, have requirements of societal engagement, transparency, education and ethics</p>
<b>Main Tasks</b>	<p>Research Funding Organisation</p> <p>It participates in WP1, WP2, WP3, WP6, WP7, WP8</p>

#### **PP49 DEPARTAMENTO DE SALUD GOBIERNO VASCO (DPTO SALUD)**

<b>Profile</b>	<p>DPTO SALUS is the department of the Basque Government responsible for the community's public health care system. It has the commitment and the obligation to ensure the health of all people. DPTO SALUD aims to guarantee the health care of all the people who live in Euskadi and to safeguard the healthcare system as a public, universal and quality system. DPTO SALUD acts on all the determinants of health by developing policies and projects of promotion and prevention and work in a transversal way with the rest of the Basque Government and institutions.</p>
<b>Main Tasks</b>	<p>It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP8, WP9, WP10</p>

#### **AP49.1 FUNDACIÓN VASCA DE INNOVACIÓN E INVESTIGACIÓN SANITARIAS (BIOEF)**

<b>Profile</b>	<p>BIOEF is an instrument to support the health authorities of the Basque Country for the design and deployment of R&amp;D&amp;I strategies, also ensuring the coordination of R&amp;D&amp;I activities carried out by the research institutes. Its mission is to promote innovation and research in the Basque Health Service, Osakidetza, to achieve continuous development and improvement in the capacity of the service to care for the health of the people in the region. In particular, BIOEF seeks to provide a framework for collaboration, cooperation and communication between the sectors involved in health research, development and innovation at regional, national and international levels.</p> <p>BIOEF participates in the development of strategic plans, programs or initiatives, promotes the gradual structuring of health's R&amp;D&amp;I and its professional management, disseminates the results of these activities and values them, triggers transfer and exploitation of the results, and supports the Ministry for Health and Basque Public Health Service-Osakidetza in R&amp;D&amp;I.</p>
<b>Main Tasks</b>	<p>It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP8, WP9, WP10</p>

**PP50 ASOCIACIÓN INSTITUTO DE INVESTIGACIÓN EN SERVICIOS DE SALUD-  
BIOSISTEMAK (BIOSISTEMAK)**

<b>Profile</b>	<p>BIOSISTEMAK is an Institute for Health Services Research that promotes and carries out management and organization research on health and socio-health services. Its scientific research programme is aligned with the policies of the Basque Department of Health, which pursue the continuous adaptation and transformation of the health system by keeping people at the centre of the system and addressing the challenges derived from ageing, chronicity and dependency. BIOSISTEMAK enables the implementation of innovative practices and generates scientific evidence regarding chronicity and health services sustainability, innovation, outcomes, scalability and transferability.</p> <p>BIOSISTEMAK main research areas are Health policy evaluation, Process and outcome evaluation, Decision support and Development and evaluation of organizational models. BIOSISTEMAK is experienced in the coordination and management of European projects (Horizon 2020 and 3rd Health Programme) and Joint Actions mainly related to research and implementation of innovative health care delivery integration systems</p>
<b>Main Tasks</b>	It participates in WP1, WP2, WP3, WP4, WP5, WP9, WP10

**PP51 UNITATEA EXECUTIVA PENTRU FINANTAREA INVATAMANTULUI SUPERIOR A  
CERCETARII DEZVOLTARII SI INOVARII (UEFISCDI)**

<b>Profile</b>	<p>UEFISCDI is a public institution with legal personality dependent on the Ministry of National Education (MEN), and functional to the advisory councils of the MEN with competences in matter of higher education, scientific research, development and innovation. It coordinated BS-ERA.NET and has participated in 79 networks including FLAG-ERA or NEURON Cofund</p>
<b>Main Tasks</b>	It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP8, WP9, WP10

**AP52 FEDERAL OFFICE OF PUBLIC HEALTH (FOPH)**

<b>Profile</b>	<p>As part of the Federal Department of Home Affairs, the Federal Office of Public Health (FOPH) is responsible for public health in Switzerland; it develops Switzerland's health policy and works to ensure that the country has an efficient and affordable healthcare system in the long term. Find out everything you need to know about our tasks and the objectives of our work at <a href="https://www.bag.admin.ch">https://www.bag.admin.ch</a>.</p> <p>Our tasks:</p> <p>We provide competence in healthcare, promote a healthy lifestyle and work for the general well-being of the public. We are responsible for ensuring that our healthcare system remains efficient and affordable.</p> <p>Our Goal: The people in our country should be able to deal competently and responsibly with their health, and our healthcare system should continue to provide high-quality care and be affordable and accessible to all.</p>
----------------	---

<b>Main Tasks</b>	Associated Partner It participates in WP1, WP2, WP3, WP4, WP5, WP6, WP9, WP10

#### **AP53 SCHWEIZERISCHE AGENTUR FÜR INNOVATIONSFÖRDERUNG (INNOSUISSE)**

<b>Profile</b>	Innosuisse's role is to promote science-based innovation in the interests of industry and society in Switzerland. Innosuisse is an entity under public law with a separate legal identity, which is composed of four expert bodies. The composition and responsibilities of the bodies are set out in the Federal Act on the Swiss Innovation Promotion Agency. Innosuisse primarily funds innovation projects run jointly by companies, research institutions and other organisations within the innovation ecosystem.
<b>Main Tasks</b>	Associated Partner It participates in WP1, WP2, WP3, WP6, WP7, WP8

#### **AP54 SCHWEIZERISCHER NATIONALFONDS ZUR FÖRDERUNG DER WISSENSCHAFTLICHEN FORSCHUNG (SNSF)**

<b>Profile</b>	The Swiss National Science Foundation (SNSF) is the foremost Swiss funding agency promoting scientific research. It mainly works according to a bottom-up approach and supports scientists from all disciplines. As part of its global approach, the SNSF is engaged in participating in multilateral initiatives at the European and global level, fostering synergies between funders, practitioners, researchers, innovators, and the society. Over the years, the SNSF has gathered practical experience in the implementation at the national level of numerous European initiatives, such as JPI Rare Diseases, ERA-Net Neuron, JPND. Moreover, the SNSF runs a National Research Programme "Smarter Health Care", see <a href="http://www.nfp74.ch/en">http://www.nfp74.ch/en</a>
<b>Main Tasks</b>	Associated Partner It participates in WP6, WP7

#### **AP55 SCOTTISH GOVERNMENT (SG)**

<b>Profile</b>	<p>The Scottish Government's Digital Health and Care Directorate supports the delivery of digital health and care services in Scotland. This includes providing expert advice and facilitation for multi-sectoral stakeholders; identifying funding for research and innovation; service redesign and the development of new digitally enabled services; and supporting knowledge exchange with international partners.</p> <p>The Directorate also:</p> <ul style="list-style-type: none"> <li>• supports implementation of the national Digital Health and Care Strategy for</li> </ul>
----------------	---



	<p>Scotland.</p> <ul style="list-style-type: none"> <li>• coordinates shared learning activities for digital health and innovation across Scotland.</li> <li>• co-ordinates Scotland's EIPonAHA 4-star Reference Site.</li> <li>• actively participates in key European and international networks, to facilitate ongoing knowledge exchange and collaboration with other regions and countries.</li> <li>• has co-ordinated EU-funded health and care projects, in Interreg IVC, Interreg VA, EU Health Programme, Horizon Europe, Horizon 2020, CIP and FP7 programmes.</li> </ul>
<b>Main Tasks</b>	<p>Associated Partner</p> <p>Leader of WP10</p> <p>It participates in WP1, WP2, WP3, WP4, WP6, WP7, WP8, WP9, WP10</p>

### AP56 THE NHS CONFEDERATION (NHSC)

<b>Profile</b>	<p>The NHS Confederation is the membership organisation that brings together, supports and speaks for the whole healthcare system in England, Wales and Northern Ireland. NHC empowers and supports healthcare organisations to improve population health, deliver high-quality care and reduce health inequalities. It supports integration across our membership, connecting different parts of the health and care system to share learning and develop solutions to shared challenges.</p>
<b>Main Tasks</b>	<p>Associated Partner</p> <p>It participates in A4.1, A4.2, A5.1, A5.2, A9.1, A10.1</p>

### AP57 AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ)

<b>Profile</b>	<p>The Agency for Healthcare Research and Quality (AHRQ) is the lead Federal agency charged with improving the safety and quality of America's healthcare system. AHRQ develops the knowledge, tools, and data needed to improve the healthcare system and help Americans, healthcare professionals, and policymakers make informed health decisions. AHRQ works within the U.S. Department of Health and Human Services (HHS) and with other partners to make sure that the evidence is understood and used in an effort to achieve the goals of better care, smarter spending of healthcare dollars, and healthier people.</p>
<b>Main Tasks</b>	<p>Associated Partner</p> <p>It participates in WP4, WP5, WP9, WP10</p>

### 3.3.2 Partners' additional information

#### 3.3.2.1 Subcontract

The following Participants are subcontracting tasks in Year 3:

<b>PP1/ IT MOH</b>	94.000€	Support to European Observatory on Health System and Policies (support to WP3, WP4, WP5, WP8, and WP10 for policy dialogue tools, methodological frameworks, dissemination/policy brief and training) – First tranche (20% of 270.000€) Maintenance of Monitoring tool (WP7-WP8) – 7.500€ Maintenance of THCS Website (WP3) – 25.000€
<b>PP1.2/ProMIS</b>	85.000€	Support to Communication and social/media relation management (WP3)
<b>PP5/ FFG</b>	40.000 €	First Tender as outlined in the proposal and in the Grant Agreement, see task 9.1,
<b>PP25/ ZonMw</b>	20.000€*	Development of the EPSS platform to allow 2-stages proposal submission of pre and full proposals by applicants to the 2024-2025 THCS Joint Call; eligibility check by the call secretariat and the funding organisations participating in the 2024-2025 THCS Joint Call; evaluation, rebuttal and feedback to the applicants; exporting proposals data to the European Commission (EC) and to THCS Work Package 8 Monitoring for € 8.820,- (Inc. VAT) Technical helpdesk work. For € 8.820,- (incl. VAT) EPSS maintenance / upgrading costs for € 42,- (incl. VAT) per month

\*transfer of budget will be reflected in the next amendment

#### 3.3.2.2 Affiliated Entities

All the Partners, including their Affiliated Entities are described in Section 2.4.1. AE roles are provided in the relevant description of tasks.

#### 3.3.2.3 In-kind contribution

No partner envisages the use of in-kind contribution at this stage.

### 3.3.2.4 Financial Support to Third Parties

The following Research Funding Organisations envisage the provision of the following cash contribution to support the launch of the JTC2025:

Partner Country	Acronym	Financial Support to Third Parties made available for JTC2025
Austria	FFG	€ 1.000.000,00
Belgium	VLAIO	€ 1.000.000,00
Belgium	FNRS	€ 300.000,00
Czech Republic	MZCR	€ 500.000,00
Denmark	IFD	€ 1.000.000,00
Estonia	ETAG	€ 300.000,00
Finland	AKA	€ 1.000.000,00
France	ANR	€ 1.500.000,00
France	Fr MoH	€ 2.000.000,00
Iceland	Rannís	€ 300.000,00
Ireland	HRB	€ 1.060.000,00
Israel	CSO-MOH	€ 300.000,00
Italy	AReSS	€ 60.000,00
Italy	IT MOH	€ 4.000.000,00
Italy	MUR	€ 500.000,00
Italy	RT	€ 400.000,00
Latvia	LZP	€ 600.000,00
Lithuania	LMT	€ 300.000,00
Malta	XM	€ 500.000,00
Netherlands	NWO	€ 900.000,00
Netherlands	ZonMw	€ 2.600.000,00
Norway	RCN	€ 1.850.000,00
Poland	NCBR	€ 2.000.000,00
Portugal	FCT	€ 500.000,00
Portugal	CCDRC	€ 400.000,00
Spain	BIOEF	€ 350.000,00
Spain	IDIVAL	€ 150.000,00
Spain	ISCIII	€ 1.000.000,00
Spain	CSCJA	€ 500.000,00
Sweden	Forte	€ 1.400.000,00
Switzerland	SNSF	€ 1.000.000,00
Switzerland	Innosuisse	€ 3.000.000,00
<b>TOTAL</b>		<b>€ 32.270.000,00</b>

### 3.3.2.5 Associated Partners

The THCS Partnership involves the following Associated Partners:

PP N.	Organisation Name	Country
52	FEDERAL OFFICE OF PUBLIC HEALTH (FOPH)	SWITZERLAND
58	SCHWEIZERISCHE AGENTUR FUR INNOVATIONSFORDERUNG (INNOSUISSE)	SWITZERLAND
59	SCHWEIZERISCHER NATIONALFONDS ZUR FORDERUNG DER WISSENSCHAFTLICHEN FORSCHUNG (SNSF)	SWITZERLAND
60	SCOTTISH GOVERNMENT (SG)	UK
61	THE NHS CONFEDERATION (NHSC)	UK
62	AGENCY FOR HEALTHCARE RESEARCH AND QUALITY (AHRQ)*	USA
63	HEALTH DATA RESEARCH UK (HDR)*	UK

\* These beneficiaries have communicated their intention to withdraw from the Partnership. Their withdrawal will be reflected in the next amendment

The description of Associated Partners including their roles are provided in section 2.4.1.

### 3.4 Resources to be committed

### 3.4.1 Summary of Staff Effort

[illegible]

11	F.R.S.-FNRS	0,2	0,2	0,3	0	0	0,3	0,3	0,2	0	0	1,5
12	AKA	1,8	1,2	1,5	0	0	3	3	0,8	0	0	11,3
13	TAU	1,2	1,2	1,5	3	2	0	0	0	13	2	23,9
14	THL	1,6	3,6	1,5	24	4	0	0	0	1	2	37,7
15	ANR	1,8	1	2,4	0	0	3,6	12	1	0	0	21,8
16	FR MOH	3	6,6	3,6	0	12	3	3	1	1	2	35,2
16.1	INSERM	0,6	1,2	0,6	0	1	0	0	0	0	4	7,4
17	GSRI	1,8	1,2	1,5	0,6	0	3	3	1	5	0	17,1
18	RANNIS	0,2	0,2	0	0,2	0	0,3	0,1	0,4	0	0	1,4
19	HRB	1,8	1,2	1,5	0	2	3	3	0,6	1	0	14,1
20	CSO MOH	3	6,6	3,6	6	6	3	3	11	3,5	2	47,7
21	LZP	1,8	1,2	1,5	0	0	3	3	1	0	0	11,5
22	SAM	1,2	1,2	1,5	2	2	0	0	0	5	1,5	14,4
23	LMT	0,2	0,2	0,3	0	0	1	1	0,2	0	0	2,9
24	NWO	0,4	0,2	0,3	0	0	1,2	0,4	0	1,2	0	3,7

25	ZonMw	3	6,6	3,6	0	0	7	38	1,4	5	1,4	66
26	RCN	3	6,6	3,6	0	0	19	3	1	0	2	38,2
27	NCBR	1,8	1,2	1,5	0	0	3,3	18	1	1,6	1,5	29,9
28	AICIB	0,6	0,4	0,9	0,2	0,2	0	0	0	1	0	3,3
29	FCT	0,6	0,4	0,6	0	0	0,7	0,7	0,4	0	0,6	4
30	CCDRC	0,6	0,2	0,3	0	0	0,7	0,7	0,4	0	0,6	3,5
31	UBB	0,6	1,2	0,9	3	9	0	0	0	0	1,4	16,1
32	SR MOH	0,2	0,2	1,8	1	1	0	0	0	1	1,5	6,7
32.1	UHM	0	0	0	0,4	0,4	0	0	0	0,4	0	1,2
33	ODT	1,8	1,2	1,5	1	1	3	3	1	0	2	15,5
34	SI MOH	1,8	1,2	1,8	0	0	0	0	0	0	2	6,8
34.1	NIJZ	0,6	1,2	0,9	4	6	0	0	0	5	1,5	19,2
35	AEI	1	1,2	1,5	0	0	3	3	1	0	0	10,7
36	IDIVAL	1,8	1,2	1,5	1	0	3	3	1	2	0	14,5
37	CSCJA	0,8	0,3	0,1	0,2	0,4	0,5	0,5	0,5	0,5	0,6	4,4



37.1	FPS	2	1,5	0,5	1	0,2	3	3,6	1	0,7	0,9	14,4
38	IACS	1,2	1,2	1,5	1	2	0	0	0	5	0	11,9
39	FORTE	0,8	0,8	0,6	0,2	0	1,4	1,4	0,6	0	0	5,8
40	VINNOVA	0,6	0,6	0,6	0	0	0,4	0,4	0,6	0	0	3,2
42	ARESS	1,6	1,2	1,8	0	0	2,5	2	1	0,3	0,3	10,7
43	ISCIH	0,8	0,6	0,3	0	0	0,3	0,3	0,6	0	0	2,9
44	XM	1,8	1,2	1,5	0	0	3	3	4,8	0	1,5	16,8
45	NIVEL	0,6	1,2	0,9	14	2	0	0	0	0	2,5	21,2
46	MSA	0,4	0,2	0,3	0	0,2	0,2	0,3	0,2	0	0	1,8
47	ETAg	0,4	0,2	0,3	0	0	0,2	0,3	0,2	0	0	1,6
48	IFD	0,8	0,6	0,6	0	0	1,4	1,4	0,4	0	0	5,2
49	DPTO SALUD	0,14	0,14	0,29	0,14	0,29	0,29	0,1	0,14	0,43	0,29	2,25
49.1	BIOEF	0,14	0,42	0,29	0,29	0,14	0,29	0,1	0,43	0,29	0,43	2,82
50	BIOSISTEMA K	0,8	1	2,7	3,4	2,6	0	0	0	4,2	4	18,7
51	UEFISCDI	0,6	1,2	1,5	0,6	0,6	3	2	1	0,5	0,5	11,5

52	FOPH	0,2	0	0,1	0,2	0,6	0,2	0	0	0,4	0,4	2,1
53	INNOSUISSE	1,2	0,6	0,9	0	0	1,3	2	1	0	0	7
54	SNSF	0	0	0	0	0	0,4	0,4	0	0	0	0,8
55	SG	1,6	1,2	2,1	1,6	0	1	2	1	0,8	7,1	18,4
56	NHSC	0	0	0	2	1,4	0	0	0	2,3	1,4	7,1
57	AHRQ	0	0	0	0	0	0	0	0	0	0	0
58	HDR UK	0	0	0	0	0	0	0	0	0	0	0
TOT		72,88	127,3	105,7	78,6	69,03	101,5	143,4	52,9	79,62	66,52	897,37

### 3.4.2 Other major cost items (travel, equipment, infrastructure, goods and services)

PP1/IT MOH	Cost (€)	Justification
Travel&subsistence	30.000	WP1 (12 travels for GA ad SB meetings); WP3(6 travels for Annual Conference); WP5 (1 travel); WP9 (6 travels for meetings Working Group);
Other goods, works and services	58.000	A1.1 Advisory Board Experts travels (30 exp) and logistics for meetings (20.000€); WP2 National meetings and audit fee (2.000€)
Total	88.000	
PP1.2/PROMIS	Cost (€)	Justification
Travel&subsistence	28.800	WP1 (12 travels for GA ad SB meetings); WP3(6 travels for Annual Conference);WP9 (6 travels for meetings Working Group);
Other goods, works and services	127.000	WP2 National meetings (2.000€), WP3 Organisation of workshops and editing materials (10.000€), WP3 Annual conference (115.000€)
Total	155.800	
PP1.1/ISS; PP2/MUR; PP3/RT; PP4/UCSC; PP12/AKA; PP15/ANR; PP16.1/INSERM; PP18/RANNIS; PP21/LZP; PP33/ODT; PP34/SI MOH; PP35/AEI; PP39/FORTE; PP40/VINNOVA; PP43/ISCIII; PP44/XM; PP45/NIVEL;		
	Cost (€)	Justification
Travel&subsistence	10.800	WP1 (3 travels); WP3 (3 travels for the Annual Conference)
Goods, works, serv.	2.000	WP2 National meetings (2.000€)
Total	12.800	
PP5/FFG	Cost (€)	Justification
Travel&subsistence	21.600	WP1 (6 travels); WP3(6 travels); WP9 (6 travels for meeting Working Group);
Other goods, works and services	27..200	WP2 national meetings (3200€); WP9 (logistics meeting WP meeting in Vienna, 10 stakeholders' travels 18.000€)
Total	42.800	

<b>PP6/BMK; PP17/GSRI; PP24/NWO; PP27/NCBR; PP36/IDIVAL; PP37.1/FPS; PP42/ARESS; PP51/UEFISCDI</b>		
	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	18.000	WP1 (6 travels); WP3 (3 travels); WP9 (6 travels for meeting Working Group)
<b>Goods, works, serv.</b>	2.000	WP2 National meetings (2.000€)
<b>Total</b>	20.000	
<b>PP8.1/VLAIO; PP26/RCN; PP46/MSA</b>		
	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	14.400	WP1 (3 Travels); WP3 (3 Travels); WP9 (6 travels for meeting Working Group)
<b>Goods, works, serv.</b>	2.000	WP2 National meetings (2.000€)
<b>Total</b>	16.400	
<b>PP11/FNRS; PP23/LMT; PP47/ETAg; PP48/IFD</b>		
	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	7.200	WP1 (3 travels); WP3 (3 travels)
<b>Goods, works, serv.</b>	2.000	WP2 National meetings (2.000€)
<b>Total</b>	9.200	
<b>PP13/TAU</b>	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	28.800	WP1 (6 travels); WP2 (6 travels); WP9 (12 travels for meeting Working Group)
<b>Other goods, works and services</b>	14.000	WP2 National meetings (2.000€) ; WP 9 (for Ecosystem Arena 6.000€); 5 stakeholders' travels 6.000€)
<b>Total</b>	42.800	
<b>PP14/THL; PP20/CSO-MOH</b>		
	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	21.600	WP1(6 travels); WP3 (6 travels for Annual Conference); WP9 (6 travels for meeting Working Group);
<b>Other goods, works and services</b>	2.000	WP2 National meetings (2.000€)

<b>Total</b>	23.600	
<b>PP16/FR MOH</b>	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	21.600	WP1(6 travels); WP2 (6 travels for Annual Conference); WP9(6 travels for meeting Working Group);
<b>Other goods, works and services</b>	12.000	WP2 National meetings (2.000€); WP 5 (meeting logistics 10.000€)
<b>Total</b>	33.600	
<b>PP19/HRB; PP22/SAM; PP32/MOH SR; PP38/IACS; PP34.1/NIJZ</b>		
	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	19.200	WP1 (6 travels); A3.2 (3 travels); A5.2 (1travel); WP9 (6 travels for meeting Working Group)
<b>Goods, works, serv.</b>	2.000	WP2 National meetings (2.000€)
<b>Total</b>	21.200	
<b>PP25/ZonMw</b>	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	21.600	WP1 (6 travels); WP3 (6 travels for Annual Conference); WP9 (6 travels for meeting Working Group);
<b>Other goods, works and services</b>	32.000	WP7 (logistics meetings 26.000€); WP9 (5 stakeholders' travels 6.000€)
<b>Total</b>	53.600	
<b>PP28/AICB; PP32.1/UHM</b>		
	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	15.600	WP1 (3 travels); WP3 (3 travels for the Annual Conference); A5.2 (1 travel); WP9 (6 travels for meeting Working Group)
<b>Goods, works, serv.</b>	2.000	WP2 National meetings (2.000€)
<b>Total</b>	17.600	
<b>PP29/FCT; PP30/CCDRC</b>		
	<b>Cost (€)</b>	<b>Justification</b>
<b>Travel&amp;subsistence</b>	7.200	WP1 (3 travels); WP3 (3 travels for the Annual Conference);
<b>Other goods, works and services</b>		
<b>Total</b>	7.200	
<b>PP31/UBB</b>	<b>Cost (€)</b>	<b>Justification</b>

<b>Travel&amp;subsistence</b>	12.000	WP1 (6 travels); WP3 (3 travels for the Annual Conference); WP5 (1meeting);
<b>Other goods, works and services</b>	7.000	WP2 National meetings (2.000€), WP5 editing materials (5.000€)
<b>Total</b>	19.000	
<b>PP49.1/BIOEF</b>	Cost (€)	Justification
<b>Travel&amp;subsistence</b>	2.400	WP1 (1 travel); WP3(1 travel for Annual Conference)
<b>Other goods, works and services</b>	2.000	WP2 National meetings (2.000€)
<b>Total</b>	4.400	
<b>PP50/BIOSISTEMAK</b>	Cost (€)	Justification
<b>Travel&amp;subsistence</b>	16.800	WP1 (6 travels); WP3 (2 travels); WP9(6 travels for meeting Working Group);
<b>Other goods, works and services</b>	22.000	WP1 logistics for the organisation of the General Assembly (20.000€)* WP2 National meetings (2.000€);
<b>Total</b>	38.800	

\*Transfer of budget will be reflected in the next amendment