



HORIZON 2020

SC1 – Health, demographic change and Well-being



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Research and
Innovation

Information Day - Horizon 2020
'Health, demographic change and well-being'
Prague, May 18, 2016

The Multiannual Financial Framework 2014-2020:

Key challenge: stabilise the financial and economic system while taking measures to create economic opportunities

1. Smart & inclusive growth (€451 billion)



2. Sustainable growth, natural resources (€373 billion)

3. Security and citizenship (€16 billion)

4. Global Europe (€58 billion)

5. Administration (€61.6 billion)



What is Horizon 2020?

- ***The European Union programme for research and innovation for 2014-2020 with a budget of €77 billion***
- ***A core part of Europe 2020, Innovation Union & European Research Area:***
 - *Responding to the economic crisis to invest in jobs and growth*
 - *Addressing people's concerns about their livelihoods, safety and environment*
 - *Strengthening the EU's global position in research, innovation and technology*

What is new?

- “ **A single programme** bringing together three separate programmes/initiatives*
- “ **Coupling research to innovation** – from research to retail, all forms of innovation
- “ **Focus on societal challenges** facing EU society, e.g. health, clean energy and transport
- “ **Simplified access**, for all companies, universities, institutes in all EU countries and beyond

* The 7th Research Framework Programme (FP7), innovation aspects of Competitiveness and Innovation Framework Programme (CIP), EU contribution to the European Institute of Innovation and Technology (EIT) – There is a separate programme for Euratom activities



Horizon 2020: Three priorities

*Excellent
science*

€24 billion

- É European Research Council
- É Future & Emerging technologies (FET)
- É Marie Curie
- É Research infrastr

€17 billion

- É Leadership in Enabling and Industrial Technologies (LEIT)
- É Risk finance
- É Innovation in SMEs

*Industrial
leadership*

*Societal
challenges*

€29 billion

- É SC1 Health (€7.4b)
- É SC2 Food & bioeconomy
- É SC3 Energy
- É SC4 Transport
- É SC5 Environment
- É SC6 EU in the world
- É SC7 Security

Societal Challenge 1



Health, Demographic Change and Well-being



Challenge-driven

Broad topics

Less prescriptive topic texts

Two-year work programme

Stronger focus on end users

Funding instruments



Health research: different programmes serving different communities & purposes



Work Programme highlights



Better health for all

PRIORITY



2014-15:
EUR 1.3
Bn

2016-17:
EUR 1.4
Bn

Personalised medicine (2014-2017)



Healthy ageing
(2014-2017)



Health ICT
(2014-2017)



Infectious Diseases
(2014-2017)

Human
biomonitoring
(2016-2017)



Research and Innovation



Maternal and
child health
(2016-2017)

More opportunities for SMEs

- “ **Integrated approach** - around 20% of the total budget for societal challenges and LEITs to go to SMEs
- “ **Simplification** of particular benefit to SMEs (e.g. single entry point)
- “ A **new SME instrument** used across all societal challenges as well as for the LEITs
- “ A dedicated activity for research-intensive SMEs in '**Innovation in SMEs**'
- “ '**Access to risk finance**' will have a strong SME focus (debt and equity facility)



Simplification

...in the design of Horizon 2020

- **Same set of rules for all actions (very few exceptions)**
- **One project – one funding rate (max. 100% of total eligible costs, except for innovation actions, where a 70% maximum applies for profit making entities; indirect eligible costs: flat rate of 25% of direct eligible costs)**
- **Shorter time-to-grant (8 months)**
- **Simpler rules for grants (e.g. broader acceptance of participants accounting practices for direct costs; no time-sheets for personnel working full time on a project)**
- **Fewer, better targeted controls and audits**
- **Participant Portal – the single gateway for all exchanges in managing grants and experts**
- **Fully paperless management of grants and expert contracts**

Outcome of the SC1 2014-2015 calls

Country success rate in the proposals with coordinator:

Country	Collaborative projects			SME Instrument			Total N prop	Total N proj	Final SR
	N prop	N proj	Success rate	N prop	N proj	Success rate			
CZ	12	0	0.0%	11	0	0.0%	23	0	0.0%
SK	7	0	0.0%	14	0	0.0%	21	0	0.0%
HU	78	0	0.0%	97	5	5.2%	175	5	2.9%
PL	58	0	0.0%	57	1	1.8%	115	1	0.9%
AT	146	4	2.7%	25	7	28.0%	171	11	6.4%
Total	301	4	1.3%	204	13	6.4%	505	17	3.4%

Outcome of the SC1 2014-2015 calls

Total number of participations in the proposals and in the funded projects:

Country	Number participations in proposals	Number participations in projects	Final success rate
CZ	271	23	8.5%
SK	90	9	10.0%
HU	431	31	7.2%
PL	480	36	7.5%
AT	709	70	9.9%
Total	1,981	169	8.5%

Czech participation in the H2020 projects in SC1

FAIR-PARK-II - Conservative iron chelation as a disease-modifying strategy in Parkinson's disease: a multicentric, parallel-group, placebo-controlled, randomized clinical trial of deferiprone	UNIVERZITA KARLOVA V PRAZE – EU contribution € 145,000.00
APERIM - Advanced bioinformatics platform for PERsonalised cancer Immunotherapy	Masarykova univerzita, BRNO – EU contribution € 135,250.00
SECURE - Secondary prEvention of CardiovascUlaR disease in the Elderly trial	VSEOBECNA FAKULTNI NEMOCNICE V PRAZE – EU contribution € 242,125.00
DIAGORAS - Chair/bedside diagnosis of oral and respiratory tract infections, and identification of antibiotic resistances for personalised monitoring and treatment	BIOVENDOR - LABORATORNI MEDICINA AS, BRNO – EU contribution € 631,500.00
ULTRAPLACAD - ULTRAsensitive PLAsmonic devices for early CAncer Diagnosis	AMIRES SRO, PRAHA – EU contribution € 159,750.00 USTAV FOTONIKY A ELEKTRONIKY AV CR, PRAHA - EU contribution € 313,125.00
Euthyroid - Towards the elimination of iodine deficiency and preventable thyroid-related diseases in Europe	ENDOKRINOLOGICKY USTAV, PRAHA – EU contribution € 20,177.50
FORECEE - Female cancer prediction using cervical omics to individualise screening and prevention	UNIVERZITA KARLOVA V PRAZE – EU contribution € 358,920.00
EURO-HEALTHY - Shaping EUROpean policies to promote HEALTH equityY	UNIVERZITA KARLOVA V PRAZE – EU contribution € 57,960.00
MIAMI-MD - Medical Intelligence for Assistive Management Interface – Mild Dementia	DEX INNOVATION CENTRE, LIBEREC – EU contribution € 202,500.00

Czech participation in the H2020 projects in SC1 ctd.

WOMEN-UP - Cost effective self-management of urinary incontinence addressed to women across Europe	EVROPSKA UROGYNEKOLOGICKA SPOLECNOST, PRAHA – EU contribution € 53,750.00
ELECTOR - eHealth in Rheumatology	REVMATOLOGICKY USTAV, PRAHA – EU contribution € 297,449.00
EMI-TB - Eliciting Mucosal Immunity to Tuberculosis	MIKROBIOLOGICKY USTAV - AVCR, V.V.I., PRAHA – EU contribution € 43,125.00
DanuBalt - DanuBalt: Novel Approaches in Tackling the Health Innovation and Research Divide in the Danube and Baltic Sea Region (CSA)	FAKULTNI NEMOCNICE U SV. ANNY V BRNE – EU contribution € 631,500.00
EuroStemCell - European Consortium for Communicating Stem Cell Research (CSA)	Masarykova univerzita , BRNO – EU contribution € 0
VISION DMD - Phase 2 Clinical Trials of VBP15: An Innovative Steroid-like Intervention on Duchenne Muscular Dystrophy	FAKULTNI NEMOCNICE V MOTOLE, PRAHA – EU contribution € 265,312.50
ALBINO - Effect of ALlopurinol in addition to hypothermia for hypoxic-ischemic Brain Injury on Neurocognitive Outcome	OSTRAVSKA UNIVERZITA V OSTRAVE – EU contribution € 140,624.00
INHERIT - INter-sectoral Health Environment Research for InnovaTions	UNIVERZITA KARLOVA V PRAZE – EU contribution € 304,500.00
ChiLTERN - Children’s Liver Tumour European Research Network	FAKULTNI NEMOCNICE V MOTOLE, PRAHA – EU contribution € 24,875.00

Czech participation in the H2020 projects in SC1 ctd2.

TB and Tobacco - Tobacco cessation within TB programmes: A 'real world' solution for countries with dual burden of disease	VSEOBECNA FAKULTNI NEMOCNICE V PRAZE – EU contribution € 161,221.25
RESSTORE - REgenerative Stem cell therapy for STroke in Europe	FAKULTNI NEMOCNICE U SV. ANNY V BRNE – EU contribution € 20,000.00
NISCI - Antibodies against Nogo-A to enhance plasticity, regeneration and functional recovery after acute spinal cord injury, a multicenter European clinical proof of concept trial	FAKULTNI NEMOCNICE V MOTOLE, PRAHA – EU contribution € 158,717.50



TB and Tobacco

Project reference: 680995

Funded under: H2020-EU.3.1. - SOCIETAL CHALLENGES - Health, demographic change and well-being

Tobacco cessation within TB programmes: A 'real world' solution for countries with dual burden of disease

From 2015-11-01 to 2019-10-31, ongoing project

Project details

Total cost: EUR 2 999 828,75	Topic(s): HCO-06-2015 - Global Alliance for Chronic Diseases. Prevention and treatment of lung diseases
EU contribution: EUR 2 999 828,75	Call for proposal: H2020-HCO-2015 See other projects for this call
Coordinated in: United Kingdom	Funding scheme: RIA - Research and Innovation action



www.york.ac.uk/healthsciences/research/public-health/projects/tb-tobacco/

Objective

We aim to reduce the burden of tobacco-related lung diseases. Our approach is to integrate inexpensive tobacco cessation strategies of proven efficacy into TB control programmes. This has three advantages: a) Preventing non-communicable diseases as well as reducing TB-related deaths; b) TB patients are more likely to quit tobacco than healthy smokers - 'teachable moments'; and c) in the absence of specialist infrastructure, an approach to 'piggyback' cessation on existing programmes is a desirable policy imperative.

We will first assess the effectiveness and cost-effectiveness of tobacco cessation strategies in helping TB patients to quit and improving their TB outcomes - the effectiveness goal; and then explore how best these strategies can be delivered, sustained and scaled-up - the implementation goal. We propose six work packages for Bangladesh, Nepal and Pakistan - high TB and tobacco burden countries.

WP1 Development & Feasibility: To optimise the delivery of tobacco cessation strategies within TB programmes (focus group discussions [FGD], interviews, surveys, expert panel workshops)

WP2 & 3 Effect and economic evaluation: To assess the effectiveness and cost effectiveness of cytisine with behavioural support vs. behavioural support alone on tobacco cessation and TB outcomes (randomised controlled trial [RCT])

WP4 Process evaluation: To study the design and delivery of the tobacco cessation strategies (FGD, observations, exit interviews)

WP5 Context evaluation: To study the influence of contextual factors on the RCT outcomes (lit. review, interviews, surveys, analysis)

WP6 Scale up & Sustainability: To assess sustainability of the cessation strategies and identify the likely costs, obstacles and opportunities for scaling these up (FGD, interviews, cost and outcomes analysis)

Our ambition is that by studying the 'real world' influences on the implementation and success of tobacco cessation we will be able to translate our findings into benefits for patients





ChILTERN

Project reference: 668596

Funded under: H2020-EU.3.1. - SOCIETAL CHALLENGES - Health, demographic change and well-being



Children's Liver Tumour European Research Network

Institute of Cancer and Genomic Sciences

From 2016-01-01 to 2020-12-31, ongoing project

Project details

Total cost: EUR 8 191 665	Topic(s): PHC-18-2015 - Establishing effectiveness of health care interventions in the paediatric population
EU contribution: EUR 7 941 665	Call for proposal: H2020-PHC-2015-two-stage See other projects for this call
Coordinated in: United Kingdom	Funding scheme: RIA - Research and Innovation action

Objective

Liver cancer in the paediatric population is rare with an incidence approximately 1-1.5 per million population. The commonest tumour seen in the childhood population is hepatoblastoma (HB), usually seen in young children and infants. Much rarer (about 10% of paediatric liver cancers) is hepatocellular carcinoma (HCC), usually seen in the teenage population and sometimes associated with underlying cirrhotic liver diseases. The ChILTERN project relates to topic PHC 18 'establishing effectiveness of health care interventions in the paediatric population'. The ChILTERN project builds on a unique opportunity to undertake a comprehensive research programme linked to an ambitious global partnership which will see the single largest clinical trial (the Paediatric Hepatic International Tumour Trial - PHITT) ever undertaken in this population of patients, with several randomised questions in six subgroups of patients. ChILTERN will allow us to move towards an era of personalised therapy in which each patient will receive the correct amount of chemotherapy and will undergo the best surgical operation (surgical resection or liver transplant). By using both clinical and biological information, we can assign patients more accurately to risk groups based on their survival. Using genetic tests and biomarkers, we will determine those children who may be at risk of developing long term side effects (deafness, heart failure, kidney damage). In addition, biomarkers will allow us to monitor during therapy and detect toxicities early before serious damage is done so that we can adapt treatment and prevent these problems. Finally, we will be using imaging technology tools which will help our surgeons plan liver operations more safely and effectively. Ultimately ChILTERN will allow us to cure more children with liver cancer, expose fewer children to toxic chemotherapy and ensure their surgery is both effective and safe.



Societal Challenge 1 "Health, Demographic Change and Wellbeing" call 2016-2017

All information about the published or future calls can be found at:

<http://ec.europa.eu/research/participants/portal/desktop/en/opportunities/index.html>

The call for 2016-2017 has been published on October 20, 2015. The single-stage submission call has been launched for the call 2016 (deadline 13 April 2016). For the call 2017, the deadline for submission (first stage) is October 4, 2016 and April 11, 2017 for the second stage.



SC1 Call 2016-2017

Important notice on the second Horizon 2020 Work Programme

This Work Programme covers 2016 and 2017. The parts of the Work Programme that relate to 2017 are provided at this stage on an indicative basis. Such Work Programme parts will be decided during 2016.

(European Commission Decision C(2016)1349 of 9 March 2016)

1.1 Understanding health, well-being and disease	7	1.4 Active ageing and self-management of health	26
SC1-PM-01-2016: Multi omics for personalised therapies addressing diseases of the immune system.....	7	SC1-PM-12-2016: PCP - eHealth innovation in empowering the patient	26
SC1-PM-02-2017: New concepts in patient stratification	8	SC1-PM-13-2016: PPI for deployment and scaling up of ICT solutions for active and healthy ageing	28
SC1-PM-03-2017: Diagnostic characterisation of rare diseases.....	9	SC1-PM-14-2016: EU-Japan cooperation on Novel ICT Robotics based solutions for active and healthy ageing at home or in care facilities.....	30
SC1-PM-04-2016: Networking and optimising the use of population and patient cohorts at EU level.....	10	SC1-PM-15-2017: Personalised coaching for well-being and care of people as they age... 32	
1.2 Preventing disease	12	1.5 Methods and data	34
SC1-PM-05-2016: The European Human Biomonitoring Initiative.....	12	SC1-PM-16-2017: In-silico trials for developing and assessing biomedical products	34
SC1-PM-06-2016: Vaccine development for malaria and/or neglected infectious diseases 15		SC1-PM-17-2017: Personalised computer models and in-silico systems for well-being	35
SC1-PM-07-2017: Promoting mental health and well-being in the young	17	SC1-PM-18-2016: Big Data supporting Public Health policies	37
1.3 Treating and managing diseases	18	SC1-PM-19-2017: PPI for uptake of standards for the exchange of digitalised healthcare records	38
SC1-PM-08-2017: New therapies for rare diseases	19	SC1-PM-20-2017: Development of new methods and measures for improved economic evaluation and efficiency measures in the health sector	39
SC1-PM-09-2016: New therapies for chronic diseases	20		
SC1-PM-10-2017: Comparing the effectiveness of existing healthcare interventions in the adult population.....	21		
SC1-PM-11-2016-2017: Clinical research on regenerative medicine	22		
SC1-PM-22-2016: Addressing the urgent research gaps against the Zika virus and other emerging threats in Latin America	23		

Coordination activities:

SC1-HCO-01-2016: Valorisation of FP7 Health and H2020 SC1 research results.....	41
SC1-HCO-02-2016: Standardisation of pre-analytical and analytical procedures for in vitro diagnostics in personalised medicine	43
SC1-HCO-03-2017: Implementing the Strategic Research Agenda on Personalised Medicine	44
SC1-HCO-04-2016: Towards globalisation of the Joint Programming Initiative on Antimicrobial resistance.....	45
SC1-HCO-05-2016: Coordinating personalised medicine research	47
SC1-HCO-06-2016: Towards an ERA-NET for building sustainable and resilient health system models	49
SC1-HCO-07-2017: Global Alliance for Chronic Diseases (GACD)	50
SC1-HCO-08-2017: Actions to bridge the divide in European health research and innovation	50
SC1-HCO-10-2016: Support for Europe's leading Health ICT SMEs	51
SC1-HCO-11-2016: Coordinated action to support the recognition of Silver Economy opportunities arising from demographic change.....	52
SC1-HCO-12-2016: Digital health literacy.....	55
SC1-HCO-13-2016: Healthcare Workforce IT skills.....	56
SC1-HCO-14-2016: EU-US interoperability roadmap	57
SC1-HCO-15-2016: EU eHealth Interoperability conformity assessment	58
SC1-HCO-16-2016: Standardisation needs in the field of ICT for Active and Healthy Ageing	59

Examples of the topics

SC1-PM-04-2016: Networking and optimising the use of population and patient cohorts at EU level..... 10

SC1-PM-09-2016: New therapies for chronic diseases 20

SC1-PM-10-2017: Comparing the effectiveness of existing healthcare interventions in the adult population

Specific Challenge: Effective health care and prevention may be improved by additional evidence as to the most effective health interventions. Growing numbers of patients affected by chronic diseases also call for efficiently managing co-morbidities.

Scope: Proposals should compare the use of currently available preventative or therapeutic (pharmacological as well as non-pharmacological) healthcare interventions in adults¹⁹. While there is no restriction on the diseases or interventions to be the focus of proposals, preference will be given to proposals focusing on interventions with high public health relevance and socio-economic impact, i.e. interventions addressing conditions that are particularly frequent, may lead to co-morbidities, have a high negative impact on the quality of life of the individual and/or are associated with significant costs or where savings can be achieved. A cost effectiveness analysis must be included. Given the focus on existing interventions, proposals will aim to contribute to improve interventions, take decisions about the discontinuation of interventions that are less effective or less cost-effective than others, and make recommendations on the most effective and cost-effective approaches. A comprehensive array of clinical and safety parameters, as well as health and socio-economic outcomes (e.g. quality of life, patient mortality, morbidity, costs, and performance of the health systems) for chosen populations should be assessed. Agreed core outcome sets (COS) should be used as endpoints in conditions where they already exist, in other cases efforts should be made to agree on such COS. Randomised controlled trials, pragmatic trials, observational studies, large scale databases and meta-analyses may be considered for this topic. Where relevant the study population should address gender as well as socio-economic differentials in health and/or any other factors that affect health equity.

The Commission considers that proposals requesting a contribution from the EU of between EUR 4 and 6 million would allow this specific challenge to be addressed appropriately. Nonetheless, this does not preclude submission and selection of proposals requesting other amounts.

SC1-HCO-08-2017: Actions to bridge the divide in European health research and innovation

Specific Challenge: Despite serious efforts deployed at national and European level, the European Union sees significant internal disparities in terms of research and innovation performance as also identified in the Innovation Union Scoreboard. The disparities are equally present in health research and innovation and this call seeks solutions specifically adapted to this domain.

The European Commission has been funding projects to analyse the roots of the divide in European health research and innovation (HCO-14 2014) and wishes to continue efforts in closing the gap.

Scope: Any type of activities that can help less performing countries and regions to build capacities and exploit opportunities to eventually increase their participation in EU funded collaborative projects can be supported.

Beneficiaries of the activities should be low performing⁴⁴ Member States/regions that have identified health R&I as a priority in their Research and Innovation Strategies for Smart Specialisation (RIS3). Applicants shall seek synergies with European Structural and Investment Funds, the operational programmes and support from managing authorities.

The proposals will propose concrete measures for tackling structural barriers to health research and innovation, including those related to capacity, skills, policy, regulatory environment, and economic and socio-cultural factors including gender equality issues and gender dimension in research content.

The Commission considers that proposals requesting a contribution from the EU of up to EUR 1 million would allow this specific challenge to be addressed appropriately. Nonetheless this does not preclude submission and selection of proposals requesting other amounts.

Expected Impact: The action should demonstrate good practice on how synergies between Structural Funds and Horizon 2020 can be exploited in the health R&I domain. This shall contribute to increased Horizon 2020 participation of low performing regions.

Type of Action: Coordination and support action



SME Instrument

<https://ec.europa.eu/programmes/horizon2020/en/h2020-section/sme-instrument>

Provided with about € 3 billion in funding over the period 2014-2020, the SME Instrument helps high-potential SMEs to develop groundbreaking innovative ideas for products, services or processes that are ready to face global market competition. Available to SMEs only, which can however organise a project in the way that best fits their business needs – meaning that subcontracting is not excluded – the new scheme has opened a new highway to innovation through phased, progressive and complimentary support.

The SME Instrument offers small and medium-sized businesses the following:

Business innovation grants for feasibility assessment purposes (optional phase I): EUR 50,000 (lump sum) per project (70% of total cost of the project);

Business innovation grants for innovation development & demonstration purposes (possible phase II): an amount in the indicative range of EUR 500,000 and 2,5 million (70% of total cost of the project as a general rule);

Free-of-charge business coaching (optional in phases I and II), in order to support and enhance the firm's innovation capacity and help align the project to strategic business needs;

Access to a wide range of innovation support services and facilitated access to risk finance (mostly in optional phase III), to facilitate the commercial exploitation of the innovation.

Is permanently open with no deadlines for application.



2017 Calls and general conditions

Topics (Type of Action)	Budgets (EUR million)		Deadlines
	2016	2017	
Opening: 29 Jul 2016			
SC1-PM-02-2017 (RIA)		40.00	04 Oct 2016 (First stage)
SC1-PM-07-2017 (RIA)		20.00	11 Apr 2017 (Second stage)
SC1-PM-08-2017 (RIA)		60.00	
SC1-PM-10-2017 (RIA)		40.00	
SC1-HCO-03-2017 (ERA-NET-Cofund)		5.00	11 Apr 2017
SC1-HCO-07-2017 (RIA)		24.00	
SC1-HCO-08-2017 (CSA)		1.00	
SC1-PM-03-2017 (RIA)		15.00	
SC1-PM-20-2017 (RIA)		9.00	
Opening: 20 Sep 2016			
SC1-PM-15-2017 (RIA)		25.00	31 Jan 2017
Opening: 08 Nov 2016			
SC1-PM-16-2017 (RIA)		19.00	14 Mar 2017
SC1-PM-17-2017 (RIA)		19.00	
SC1-PM-19-2017 (PPI)		8.26	



Participant portal

<http://ec.europa.eu/research/participants/portal/desktop/en/home.html>

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- Justice Programme

FP7 & CIP Programmes 2007-2013

Funding Opportunities

H2020 ONLINE MANUAL

Find the European Union funding opportunities and search for new or closed calls of the programmes described on this page.

Horizon 2020

Horizon 2020 is the new EU funding programme for research and innovation running from 2014 to 2020 with a €80 billion budget. H2020 supports SMEs with a new **instrument** that runs throughout various funded research and innovation fields, enhances EU international research and Third Country participation, attaches high importance to integrate social sciences and humanities encourages to develop a new research project.

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HORIZON 2020 PROPOSAL EVALUATION

ROLE OF EVALUATORS



Guiding principles (I)



“ *Independence*

- **You are evaluating in a personal capacity**
- **You represent neither your employer, nor your country!**

“ *Impartiality*

- **You must treat all proposals equally and evaluate them impartially on their merits, irrespective of their origin or the identity of the applicants**

“ *Objectivity*

- **You evaluate each proposal as submitted; meaning on its own merit, not its potential if certain changes were to be made**

“ *Accuracy*

- **You make your judgment against the official evaluation criteria and the call or topic the proposal addresses, and nothing else**

“ *Consistency*

- **You apply the same standard of judgment to all proposals**

Guiding principles (II)



“ *No grant negotiation phase!*

- *The time from submission of a proposal, evaluation and signature of the grant has been reduced to a maximum of 8 months*

“ *What does this mean for the evaluation of proposals?*

- **You evaluate each proposal as submitted not on its potential if certain changes were to be made**
- **If you identify shortcomings (other than minor ones and obvious clerical errors), you must reflect those in a lower score for the relevant criterion**
- **You explain the shortcomings, but do not make recommendations i.e. do not suggest change of consortium, change to work packages, resources cut...**
- **Proposals with significant weaknesses that prevent the project from achieving its objectives or with resources being seriously over-estimated must not receive above-threshold scores**
- **Any proposal with scores above the thresholds and for which there is sufficient budget will be selected and funded as submitted**

Confidentiality (1)



You must:

“ Not discuss evaluation matters, such as the content of proposals, the evaluation results or the opinions of fellow experts, with anyone not directly involved in the evaluation of the respective proposal, including:

- Other experts or Commission/Agencies staff or any other person (e.g. colleagues, students...) not directly involved in the evaluation of the proposal**

“ Not contact partners in the consortium, sub-contractors or any third parties

“ Never disclose the names of your fellow experts

- The Commission publishes the names of the experts annually - as a group, no link can be made between an expert and a proposal**

Confidentiality (2)



You must:

“ Not talk about your role or tasks as evaluator in any social media (Facebook, Twitter etc.)

“ Maintain the confidentiality of documents, paper or electronic, at all times and wherever you do your evaluation work (on-site or remotely)

- **Please take nothing away from the evaluation building (be it paper or electronic)**
- **Return, destroy or delete all confidential documents, paper or electronic, upon completing your work, as instructed**

Conflicts of interest (COI) (1)



You have a COI if you:

- ” were involved in the preparation of the proposal*
- ” stand to benefit directly/indirectly if the proposal is successful*
- ” have a close family/personal relationship with any person representing an applicant legal entity*
- ” are a director/trustee/partner of an applicant or involved in the management of an applicant's organisation*
- ” are employed or contracted by an applicant or a named subcontractor*
- ” are a member of an Advisory Group or Programme Committee in an area related to the call in question*
- ” are a National Contact Point or are directly working for the Enterprise Europe Network*

Conflicts of interest (COI) (2)



You have a *potential COI for a given proposal* if you

are in any situation that compromises your impartiality such as:

- **You were employed by an applicant or sub-contractor in the last 3 years**
- **You were involved in a grant agreement/decision, the membership of management structures or a research collaboration with an applicant in the last 3 years**
- **You are in any other situation that casts doubt on your impartiality or that could reasonably appear to do so**

In these situations, the Commission will decide whether a COI exists

COI conditions are spelled out in the contract, and in the Code of Conduct (Annex 1)

Conflicts of interest (COI) (3)

" You must inform the Commission/Agency as soon as you become aware of a COI

- **Before the signature of the contract**
- **Upon receipt of proposals, or**
- **During the course of your work**

" If there is a COI for a certain proposal you cannot evaluate it

- **Neither individually**
- **Nor in the consensus group**
- **Nor in the panel review**
- **The Commission/Agency will determine if there is a COI on a case-by-case basis and decide the course of action to follow**

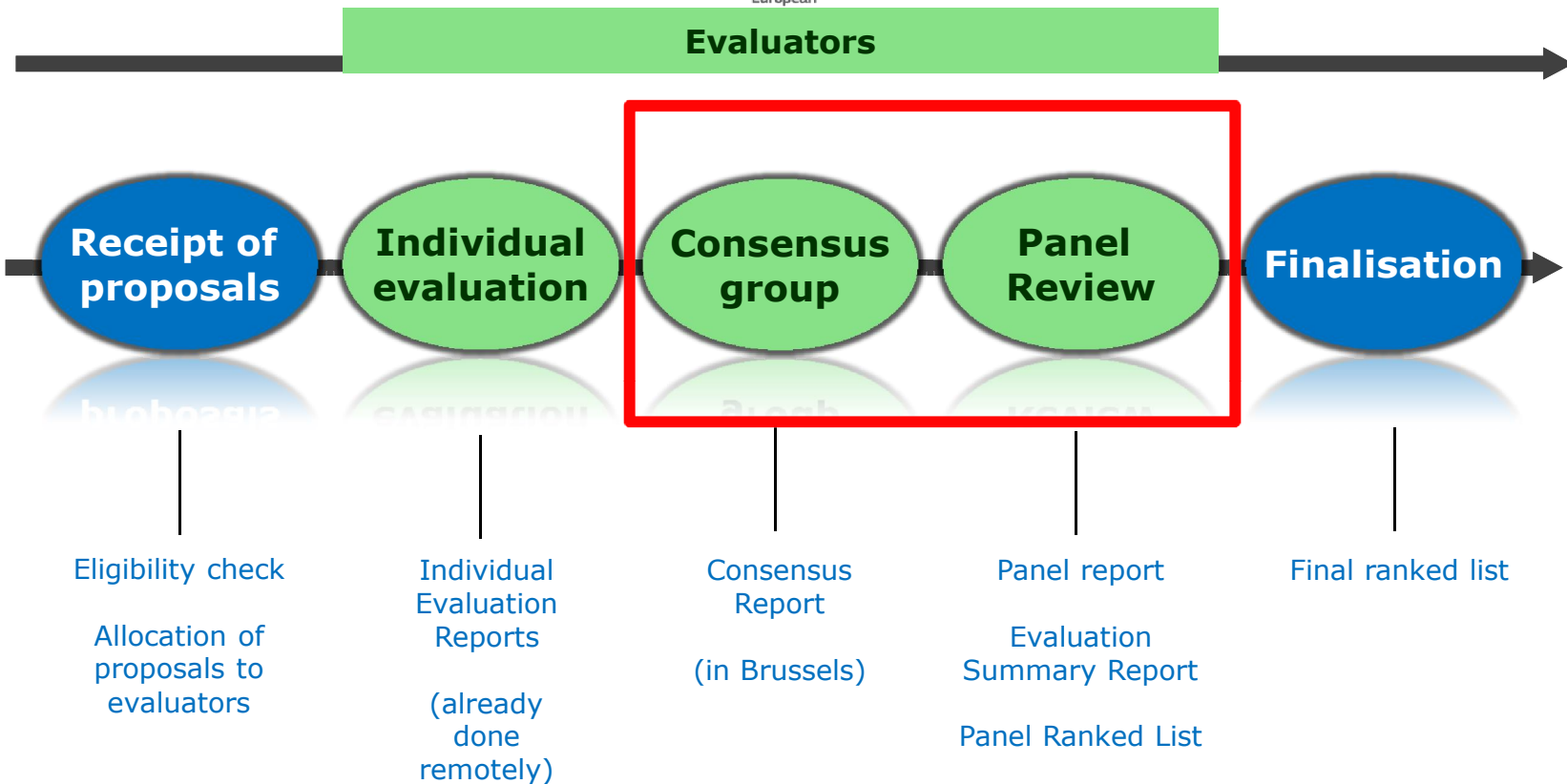
" If you knowingly hide a COI, you will be excluded from the evaluation and your work declared null and void

- **The allowance/expenses you claimed may be reduced, rejected or recovered**
- **Your contract may be terminated**

Overview of the Evaluation Process



European



Admissibility and eligibility checks



“ Admissibility is checked by the Commission:

- **Readable, accessible and printable, clear page limits set out in the submission system and excess pages automatically marked with a watermark**
- **Completeness of proposal: presence of A forms and a part B**
- **Eligibility checked mainly by the Commission – except for "out of scope". However, if you spot any other issue, please inform the Commission. At least three legal entity established in a Member State or Associated Country**
- **“Out of scope” – you need to check if the content of a proposal corresponds, wholly or in part, to the description of the call or topic. "Partially in scope" will be dealt with in the first evaluation criterion. "Out of scope" only clear cut cases will be deemed ineligible.**

Evaluation criteria (I)



There are three evaluation criteria

- ✓ **Excellence** (*concept, approach etc. relevant to the description of the call or topic*)
- ✓ **Impact (including communication activities and where relevant research data management)**
- ✓ **Quality and efficiency of the implementation including risk and innovation management**
 - You should also check requests for 'exceptional funding' from third country participants not included in the [list](#)

Research and Innovation Action Evaluation criteria (II)



Excellence

Clarity and pertinence of the objectives

Soundness of the concept, including trans-disciplinary considerations, where relevant

Extent that proposed work is ambitious, has innovation potential, and is beyond the state of the art (e.g. ground-breaking objectives, novel concepts and approaches)

Credibility of the proposed approach

Impact

The expected impacts listed in the work programme under the relevant topic

Enhancing innovation capacity and integration of new knowledge

Strengthening the competitiveness and growth of companies by developing innovations meeting the needs of European and global markets; and, where relevant, by delivering such innovations to the markets

Any other environmental and socially important impacts (not already covered above)

Effectiveness of the proposed measures to exploit and disseminate the project results (including management of IPR), to communicate the project, and to manage research data where relevant

Quality and efficiency of the implementation

Coherence and effectiveness of the work plan, including appropriateness of the allocation of tasks and resources

Complementarity of the participants within the consortium (when relevant)

Appropriateness of the management structures and procedures, including risk and innovation management

Third Countries (1)



- “ In principle, all actions under Horizon 2020 are open for participation of third countries and international organisations.*
- “ There are countries which are automatically eligible for funding:*
- ✓ 13 Countries associated to H2020 (Iceland, Norway, Albania, Bosnia and Herzegovina, Former Yugoslav Republic of Macedonia, Montenegro, Serbia, Turkey, Israel, Moldova, Faroe Islands, Tunis, Georgia)*
 - ✓ Countries specifically listed in the H2020 Work Programme (so called developing countries such as Argentina, ..., Mozambique, ..., South Africa)*

USA, BRIC countries, and Mexico are no longer eligible for automatic funding

Third Countries (2)



- “ Participation of legal entities from other countries not mentioned in the H2020 Work Programme can be funded only in exceptional cases*
- “ The exceptionality needs to be justified in the proposal*
- “ In the evaluation of proposals experts judge the participation of the entity in question **as essential** for carrying out the action with clear benefits to the consortium (such as outstanding competence and expertise, access to unique know-how, access to data etc.)*

Operational capacity



“ As part of your Individual Evaluation, please give your view on whether each applicant has the necessary basic operational capacity to carry out their proposed activity(ies)

based on the information provided in the proposal:

- **Curriculum Vitae or description of the profile of the participant(s)**
- **Relevant publications/achievements/experience**
- **Relevant previous projects or activities**
- **Description of any significant infrastructure or any major items of technical equipment**

*“ **Now, at the consensus group meeting, you consider whether an applicant lacks basic operational capacity***

*“ **If so, you provide comments and score for the proposal without taking into account this applicant and its associated activity(ies)***

*“ **It is a distinct operation carried out during the evaluation of the award criterion "Quality and efficiency of the Implementation"***

Proposal scoring



“ You give a score of between 0 and 5 to each criterion based on your comments

- **Half-marks can be used**
- **The whole range of scores should be used**
- **Scores must pass *thresholds* if a proposal is to be considered for funding**

“ *Thresholds apply to individual criteria and to the Overall threshold*

Criteria	Minimum Thresholds
Excellence	4/5
Impact	4/5
Quality and Efficiency of Implementation	3/5
Overall Score	12/15

Interpretation of the scores



- 0** The proposal fails to address the criterion or cannot be assessed due to missing or incomplete information.
- 1** **Poor.** The criterion is inadequately addressed or there are serious inherent weaknesses.
- 2** **Fair.** The proposal broadly addresses the criterion but there are significant weaknesses.
- 3** **Good.** The proposal addresses the criterion well but with a number of shortcomings.
- 4** **Very Good.** The proposal addresses the criterion very well but with a small number of *shortcomings*.
- 5** **Excellent.** The proposal successfully addresses all relevant aspects of the criterion; any shortcomings are minor.

If a proposal



“ *Is only marginally relevant in terms of its scientific, technological or innovation content relating to the call or topic addressed, you must reflect this in a lower score for the **"Excellence" criterion***

“ *No matter how excellent the science!*

“ *Does not significantly contribute to the expected impacts as specified in the WP for that call or topic, you must reflect this in a lower score for the **"Impact" criterion***

“ *Would require substantial modifications in terms of implementation (i.e. change of partners, additional work packages, significant budget or resources cut...), you must reflect this in a lower score for the **"Quality and efficiency of the implementation" criterion***

“ *If cross-cutting issues are explicitly mentioned in the scope of the call or topic, and not properly addressed (or their non-relevance justified), you must reflect this in a lower score for the **relevant criterion***

- **A successful proposal is expected to address them, or convincingly explain why not relevant in a particular case**
- **Proposals addressing cross-cutting issues which are not explicitly mentioned in the scope of the call or topic can also be evaluated positively**

Ethics review/assessment



“ Only proposals that comply with the ethical principles and legislation may receive funding

“ For proposals above threshold and considered for funding, an ethics screening and, if necessary, an ethics assessment is carried out by independent ethics experts *soon after the scientific evaluation*

✓ Proposals involving the use of human embryonic stem cells automatically undergo an ethics assessment

“ For those proposals in which one or more ethical issues have been identified, the ethics experts will assess whether the ethics issues are adequately addressed

“ The ethics experts will produce an ethics report and give an opinion on the proposal, including:

- **Granting ethics clearance (or not)**
- **Recommending the inclusion of ‘ethics requirements’ in the grant agreement, or**
- **Recommending a further Ethics Assessment and/or an Ethics Check or Audit**

Evaluation Outcome



" It is expected that applicants will be informed on the outcome of the evaluation within 5 months from the final date for submission

" If a proposal is in the main list (on the basis of the ranking list and available budget), the consortium, through the coordinator, is invited to the "grant preparation stage"

" Consortium of a proposal not been retained for funding receives a "Rejection letter" together with the reasons why and how to appeal (Redress procedure)



**Thank you
for your attention!**

Find out more:

<http://ec.europa.eu/programmes/horizon2020/>

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