

Work Programme 2014 – 2015

Area: 8. Health, demographic change and wellbeing

(DG CNECT topics only)



**Arnaud SENN DG CNECT
Information Day
Warsaw 18 Nov. 2014**



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Dzień dobry!
Serdecznie dziękuję za zaproszenie.



Preliminary remarks on Horizon 2020

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1. PHC 21 and PHC 25

- **PHC 21- 2015 PHC 21 – 2015: Advancing active and healthy ageing with ICT: Early risk detection and intervention**
- **PHC 25 - Advanced ICT systems and services for Integrated Care**

3. Other PHC topics

- **PHC 27 – 2015: Self-management of health and disease and patient empowerment supported by ICT**
- **PHC 29 – 2015: Public procurement of innovative eHealth services:**
- **PHC 28 – 2015: Self-management of health and disease and decision support systems based on predictive computer modelling used by the patient him or herself**
- **PHC 30 - 2015: Digital representation of health data to improve disease diagnoses and treatment**
- **Other topics of potential interests**

4. Evaluation process: a few words



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Preliminary remarks on Horizon 2020



Conception of H2020

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- **Calls are challenge-based, and therefore more open to innovative proposals**
- **No grant negotiation phase nor budget cuts ! (Y/N)**
 - **The time from submission of a proposal, evaluation and signature of the grant has been reduced to a maximum of 8 months**
(max. 5 months for evaluation + Info + max. 3 months for signature)
- **There is a greater emphasis on impact, in particular through each call or topic impact statements and also on innovation**
- **Proposals may be both inter-disciplinary and cross-sectoral in nature to tackle specific challenges**
- **Innovation capacity , dissemination plan !**
- **Link to the Work Programme 2014-15 / 8. Health, demographic change and wellbeing:**
- **http://ec.europa.eu/research/participants/data/ref/h2020/wp/2014_2015/main/h2020-wp1415-health_en.pdf**



Conception of H2020

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- **General information on Horizon 2020 framework available on the following websites:**
 - <http://ec.europa.eu/programmes/horizon2020/>
 - http://ec.europa.eu/research/participants/portal/desktop/en/funding/reference_docs.html

Cross-cutting issues

- **Cross-cutting issues are fully integrated in the work programme (WP):**
 - **Social Sciences and Humanities (SSH)** and **Responsible Research Initiative (RRI)** are integrated across all Horizon 2020 activities to successfully address European challenges
 - **Gender dimension in the content of R&I** - a question on the relevance of sex/gender analysis is included in proposal templates
 - **The new strategic approach to international cooperation**
 - **Other cross-cutting issues**

Cross-cutting issues taken into account if explicitly mentioned under the scope or expected impact of the call or topic



<http://ec.europa.eu/digital-agenda/en/news/sshri-organic-approach-ict-related-parts-wp14-15>

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RRI and SSH closely related

		Risk-Based	Crit.Acc.
RRI	- Public Engagement	"acceptance"	"co-creation"
	- Ethics	"red lines"	"framing"
	- Gender	ELSIfication	Redescription
	- Education	SSH	
	- Open Access		



Putting Innovation at the Core of your proposal

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<http://ec.europa.eu/research/index.cfm?lg=en&pg=faq&sub=details&idfaq=42705>]

Research & Innovation Actions	Innovation Actions
Basic & applied research	Limited R&D activities
Testing / validation on small-scale prototype (in lab or simulated environment)	Prototyping, testing, large-scale product validation & market replication
Limited demo or pilot activities (to show tech feasibility in a near to operational environment)	Demo or pilot activities (to show tech feasibility in operational environment)
Developing innovations meeting needs of markets	Developing innovations meeting needs of markets & <u>their delivery to market</u>
Exploitation activities	
Innovation management	



Putting Innovation at the core of your proposal

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'Excellence' criterion *(excerpt)*

- *Extent that proposed work is ambitious, **has innovation potential**, and is beyond the state of the art*

'Impact' criterion *(excerpt)*

- *Enhancing **innovation capacity** and integration of new knowledge;*
- *...developing **innovations meeting the needs of European and global markets**; and, where relevant, by **delivering such innovations to the markets***

'Quality & efficiency of the implementation' *(excerpt)*

- *Appropriateness of the management structures and procedures, including risk and **innovation management**.*

(ref. p 7 of H2020 Research & Innovation and Innovation actions proposals template - <http://tinyurl.com/innov-mgmt3>)



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PHC 21 – 2015: Advancing active and healthy ageing with ICT: Early risk detection and intervention

Scope 1/2

- ICT based solutions to support active and healthy ageing by enabling early detection and minimisation of risks associated with ageing, including (but not limited to) cognitive impairment, frailty, depression and falls;
- Demonstrate the link between changes in behaviour and subsequent negative consequences of ageing by unobtrusive behavioural sensing, and large scale collection of data readily available in the daily living environment.



PHC 21 – 2015

Scope 2/2

- ICT based interventions, as well as innovative treatments and therapies based on early detection;
- Multi-disciplinary research involving ICT, behavioural, sociological, health and other relevant disciplines;
- Stakeholder engagement to identify relevant user needs and ensure end-user acceptance (including gender aspects);
- Ensure full compliance with relevant data protection rules.



PHC 21 – 2015

Expected Impact

- Evidence for the benefits of risk detection and intervention, based on proof of concept and involvement of relevant stakeholders;
- Clear improvements for individuals, care systems and wider society from new therapies and interventions based on early risk detection;
- Global leadership in ICT based innovation for active and healthy ageing.



PHC 21 – 2015

Deadline, Budgets, Thresholds

- Submission Deadline: 21-04-2015 17:00:00 (Brussels local time)
- Research and Innovation Actions, EU contribution 3-4 million €
- Total Call Budget: 20 million €
- Cumulative threshold: 12 (4/4/3)

FAQ-PHC21: some further points

- **We expect rather proof of concept rather than traditional RCT type projects (even if some research dimension may be included, if required).**
- **Data collection can be during and/or before the project**
- **Risks associated with ageing: the project does not need to address all of them but it needs to bring clear argument on the selected pathology/condition.**
 - Proposals must demonstrate connection between behaviour changes and early detection of age-related risks
- **Research into development of an ICT product to help with early detection and intervention ? YES**
- **Research on the use of an existing ICT solution/product: YES**
- **Developing an actual ICT product: NO**



Contact & More Info

Work Programme 2014-2015, 8. Health, demographic change and wellbeing:

http://ec.europa.eu/research/participants/data/ref/h2020/wp/2014_2015/main/h2020-wp1415-health_en.pdf

Digital Social Platforms (H2):

CNECT-ICT4ageing@ec.europa.eu

Specific FAQ on topics PHC21 and PHC25 (regular update):

- <http://ec.europa.eu/digital-agenda/en/news/questions-and-answers-open-calls-advancing-active-and-healthy-ageing-ict-ict-integrated>



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PHC 21 – 2015 Participant Portal

The screenshot shows the 'RESEARCH & INNOVATION Participant Portal' for 'Personalising health and care'. The main content area displays the following details:

Planned Opening date	30-07-2014	Deadline Date	21-04-2015 17:00:00 (Brussels local time)
Publication date	11-12-2013	Main Pillar	Societal Challenges
Total Call Budget	€104,500,000	OJ reference	OJ C 361 of 11 December 2013
Status	Open		

Topic: Advancing active and healthy ageing with ICT: Early risk detection and intervention **PHC-21-2015**

Navigation links: Topic Description, Topic Conditions & Documents, Submission Service



<http://ec.europa.eu/research/participants/portal/desktop/en/opportunities/h2020/topics/2268-phc-21-2015.html>

PHC 25 – 2015: Advanced ICT systems and services for Integrated Care

Scope

● Advance the state of art in telehealth and telecare systems, addressing technological, social and organisational issues. Focus on

- services to support patient empowerment, self-care, adherence to care plans
- monitoring patient status, activity and compliance to therapy
- Fusion, analysis and interpretation of data (from patients and care providers) for improved decision making
- new patient pathways & personalisation of care programmes
- new knowledge for management of co-morbidities

Involve a wide range of stakeholders (doctors, nurses, social workers, patients, programmers, interaction designers, etc.)

Proof-of-concept, with qualitative & quantitative success measures



©Dreaming project



**Integrated, sustainable,
citizen-centred care**

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PHC 25 - 2015) Advanced ICT systems and services for Integrated Care

Expected Impact

- Reduced admissions and stays in care institutions
- Improvements in daily activities and quality of life of older persons
- Stronger evidence on health outcomes, QoL and care efficiencies
- Improved cooperation among actors in care services & improved interaction between patients and carers
- Improved usability and adaptability of ICT systems for integrated care
- Strengthened European position in ICT products and services



PHC 25– 2015

Deadline, Budgets, Thresholds

- Submission Deadline: 21-04-2015, 17:00:00 (Brussels local time)
- Single Stage
- Total Budget: 20 million €
- Research and Innovation Actions, EU contribution 3-5 million EUR
- Cumulative threshold: 12 (4/4/3)



PHC 25 – 2015 on the Participant Portal

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RESEARCH & INNOVATION
Participant Portal

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Personalising health and care
H2020-PHC-2015-single-stage Sub call of: H2020-PHC-2014-2015

Planned Opening date	30-07-2014	Deadline Date	21-04-2015 17:00:00 (Brussels local time)
Publication date	11-12-2013	Main Pillar	Societal Challenges
Total Call Budget	€104,500,000	OJ reference	OJ C 361 of 11 December 2013
Status	Open		

Topic: Advanced ICT systems and services for integrated care PHC-25-2015

Topic Description Topic Conditions & Documents Submission Service

Specific challenge: Research on new models of care organisation demonstrates that advanced ICT systems and services may have the potential to respond to, amongst others, the increasing burden of chronic disease and the complexity of co-morbidities and in doing so contribute to the sustainability of health and care systems.

One challenge in re-designing health and care systems is to develop integrated care models that are more closely oriented to the needs of patients and older persons: multidisciplinary, well-coordinated, anchored in community and home care settings, and shifting from a reactive approach to proactive and patient-centred care.

Scope: Proposals should go beyond the current state of art in tele-health and tele-care systems by developing new approaches for integrated care supported by ICT systems and services. Proposals should address barriers from technological, social and organisational points of view in the following domains:

- Development of robust, privacy compliant, accurate and cost-effective systems that facilitate monitoring of patient status, patient activity and compliance with therapy;
- Fusion, analysis and interpretation of patient and care provider data, to improve decision making among formal and informal care givers and patients;
- Multi-channel and multi-actor interaction and exchange of knowledge in integrated care settings, across digital collaborative platforms;

<http://ec.europa.eu/research/participants/portal/desktop/en/opportunities/h2020/topics/2269-phc-25-2015.html>

FAQ-PHC 25: some further points

- **Age Group: +65 only (other age groups out-of-scope)**
- **Integrated care is not defined in a restrictive way but it concerns alignment, collaboration and connectivity among health and social providers and informal carers**
- **Simply evaluation of existing models of integrated care ? **NO****
- **Essential point is to describe the proposed methodology for proof-of-concept validation with both qualitative parameters and quantitative success measures as required by the Call**



Contact & More Info

Work Programme 2014-2015,

8. Health, demographic change and wellbeing:

http://ec.europa.eu/research/participants/portal/doc/call/h2020/common/1617611-part_8_health_v2.0_en.pdf

- **FAQ on topics PHC21 and PHC25:**
- **<http://ec.europa.eu/digital-agenda/en/news/questions-and-answers-open-calls-advancing-active-and-healthy-ageing-ict-ict-integrated>**

Digital Social Platforms (H2):

CNECT-ICT4ageing@ec.europa.eu



PHC 28-30: Addressing Health and data modeling, but from 2 different approaches

- **PHC 28 – 2015: Self-management of health and disease and decision support systems based on predictive computer modelling used by the patient him or herself**
- **PHC 30 - 2015: Digital representation of health data to improve disease diagnoses and treatment (used by the health professional)**



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PHC 28 – 2015 Self-management of health and disease and decision support systems based on predictive computer modelling used by the patient him or herself

Scope

- Development of predictive decision support systems (DSS) based on computer modelling to be used by the individual in health and wellbeing in decision and/or co-decision
- Collection of various data, examples including physical training and performance, environmental data etc.
- Existing predictive computer models
- Processing in real-time
- Indications on the uncertainties and limits



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PHC 28 – 2015 Self-management of health and disease and decision support systems based on predictive computer modelling used by the patient him or herself

Expected Impact

- Improving the participation of the patient in the care process
- Improving the management of a disease by reducing the number of severe episodes and complications
- Increasing the importance of the prevention sector in healthcare using predictive modelling
- Boosting the development of personal devices used for self-management of health
- Improving for individuals the self-control of health and the disease prevention



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PHC 28 – 2015 Deadline, Budgets, Thresholds

- Submission Deadline: 21-04-2015, 17:00:00 (Brussels local time)
- Single Stage
- Total Budget: 19,5 million €
- Research and Innovation Actions, EU contribution 3-5 million EUR
- Cumulative threshold: 12 (4/4/3)



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PHC 30 – 2015 Digital representation of health data to improve disease diagnosis and treatment

Scope

- New decisional support systems
- Based on a more complex integration of heterogeneous data sources and subject-specific computer models (Digital Patient)
- Personalised prediction and decision
- Prevention, diagnosis or treatment
- Highly visual data representation
- Interactivity, friendly interfaces, usability
- Models: Existing multi-scale and multi-level, personalised computer models for diseases/physiology/functional disorders when relevant for the clinical context
- Data: patient specific, population specific and all other relevant data (e.g. history of patient, genomics, therapeutics, nutrition, molecular imaging data etc.). New technologies e.g. KET data.
- Emphasis on data standard formats
- Uncertainties and limits



PHC 30 – 2015 Digital representation of health data to improve disease diagnosis and treatment

Expected Impact

- Better coherent use of health data and existing medical knowledge in clinical decision making
- Designing predictive and therapeutic interventions
- Better management of complex clinical situation
- Enabling use of the same information by the different medical services and relevant healthcare professionals
- Better control and inter-service coordination in the management of the patient health
- Providing a consistent view of a patient's care needs



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PHC 30 – 2015 Deadline, Budgets, Thresholds

- Submission Deadline: 21-04-2015, 17:00:00 (Brussels local time)
- Single Stage, Total Budget: 20 million € , Research and Innovation Actions, EU contribution 3-5 million EUR / Cumul threshold: 12 (4/4/3)

Twitter: @EU_eHealth ; @EU_eHealthweek

Website: bit.ly/EUeHealth

Subscribe to our newsletter: bit.ly/eHealthinFocus

Work Programme 2014-2015, 8. Health, demographic change and wellbeing:

http://ec.europa.eu/research/participants/data/ref/h2020/wp/2014_2015/main/h2020-wp1415-health_en.pdf



Contact & More Info

Health and Well-being (H1): CNECT-EHEALTH@ec.europa.eu

Twitter: @EU_eHealth ; @EU_eHealthweek

Website: bit.ly/EUeHealth

Subscribe to our newsletter: bit.ly/eHealthinFocus

Work Programme 2014-2015, 8. Health, demographic change and wellbeing:

http://ec.europa.eu/research/participants/data/ref/h2020/wp/2014_2015/main/h2020-wp1415-health_en.pdf

- FAQ on topics PHC27, PHC28, PHC29 and PHC30:
- <https://ec.europa.eu/digital-agenda/en/news/faqs-horizon-2020-topics-related-ehealth>

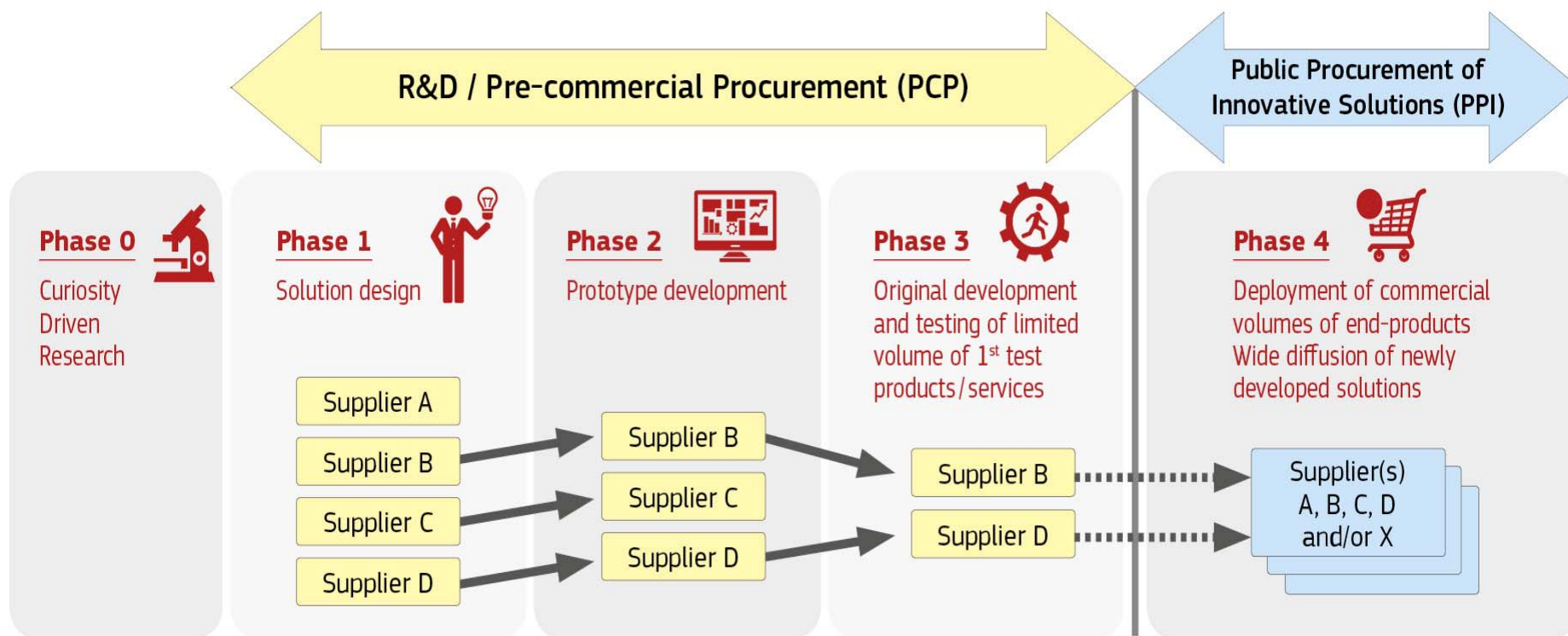
Innovation Procurement = PCP + PPI / Complementarity



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PCP to steer the development of solutions towards concrete public sector needs, whilst comparing/validating alternative solution approaches from various vendors

PPI to act as launching customer / early adopter / first buyer of innovative commercial end-solutions newly arriving on the market



Participation requirements PCP Cofund actions Beneficiaries and linked third parties



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- ❑ PCP Cofund actions support groups of procurers to execute **one joint PCP** procurement
- ❑ Minimum of 3 independent participants from 3 different MS or AC, of which minimum 2 public procurers (buyers group) from 2 different MS or AC
 - Public procurers are contracting authorities/entities as defined in EU public procurement directives
- ❑ In addition, there can be other beneficiaries
 - Other type of procurers that are providing services of public interest and share the same procurement need (e.g. private procurers, NGOs)
 - Other entities that add clear value to the action (e.g. end-users, certification bodies that assist the procurers in the preparation, implementation and follow-up of the procurement or in additional coordination/networking activities)
 - But that are not potential suppliers or solutions sought for by the PCP and have no other type of conflict of interest with the PCP undertaken during the action
- ❑ In addition, there can be third parties linked to beneficiaries
 - E.g. Third parties (e.g. end-users such as fire brigade) putting resources (e.g. test sites, testers) at the disposal of the beneficiaries/procurers to carry out the action
- ❑ Subcontractors
 - Successful tenderers, selected by the buyers group & lead procurer as result of the call for tender: They do 'NOT' become beneficiaries in the grant agreement with the EC, they are subcontractors from the point of view of the EC grant agreement.



- Reimbursement rate 'direct costs': 70% for PCP co-fund actions
- Eligible direct costs to carry out eligible activities defined in WP include:
 - Price of the R&D services procured
 - VAT is eligible cost except for beneficiaries that can deduct it
 - Eligible coordination and networking activities (e.g. to prepare, manage and follow-up the procurement)
 - In-kind contributions (e.g. third parties/end-users putting resources – e.g. test facilities - at disposal of procurers)

Requested reimbursement for coordination and networking activities can comprise max 30% of the total requested contribution

Reimbursement 'indirect costs': flat rate of 25% of eligible direct costs



**Integrated, sustainable,
citizen-centred care**

Horizon 2020 - societal challenge 1

PHC 27 -2015) Self-management of health and disease and patient empowerment supported by ICT

Scope

- **patient empowerment supported by ICT**
- use of **pre-commercial procurement (PCP)** to maximise the engagement of innovation **in healthcare organisations**



**Integrated, sustainable,
citizen-centred care**

Horizon 2020 - societal challenge 1

PHC 27 -2015) Self-management of health and disease and patient empowerment supported by ICT

Expected Impact

- **Improving the participation of the patient in the care process, management of a disease by reducing the number of severe episodes and complications, increasing the level of education, adherence and acceptance**
- **Improved interaction, evidence base on health outcomes**
- **Reinforced medical knowledge, confidence, commitment**

Indicative project size 3 to 5 million EUR



**Integrated, sustainable,
citizen-centred care**

Horizon 2020 - societal challenge 1

PHC 29-2015) - Public procurement of innovative eHealth services

Scope

- **improve sustainable deployment** of new or improved **services** by healthcare service procurers in line with the eHealth Action Plan
- **specify, purchase and deploy ICT based solutions** which can deliver sustainable, new or improved healthcare services
- **improve the ecosystem** in which procurement approaches for innovative healthcare solutions are successfully applied
- based on a **complete set of common specifications for technology and end-to-end services**
- ambition to **reach a large scale implementation across multiple regions of Europe**



**Integrated, sustainable,
citizen-centred care**

Horizon 2020 - societal challenge 1

PHC 29-2015) - Public procurement of innovative eHealth services

Expected Impact

- ***Contribution to regulatory and legal process***
- ***awareness and successful use of public procurement to boost innovation in the application of ICT***
- ***Support to interoperability and defragmentation of the market***
- ***creation of economic conditions***
- ***forward-looking, concerted, public sector approach to eHealth***
- **Reduced fragmentation** of public sector demand
- **wide market uptake** and economies of scale

Indicative EC contribution 1-5 million Eur



PHC 27 and 29 – 2015

Deadline, Budgets, Thresholds

- Submission Deadline: 21-04-2015 17:00:00 (Brussels local time)
- Total Call Budgets:
 - PHC 27 Pre-Commercial Procurement (**PCP**) **Cofund actions**: 15 million € (EC contribution: maximum **70% of the total eligible costs**, compliance with Annex E)
 - PHC 29 Public Procurement of Innovative Solutions (**PPI**) **Cofund actions** : 10 million € (EC contribution: maximum **20% of the total eligible costs**, compliance with Annex E)
- Cumulative threshold: 10 (3/3/3)



- **FAQ updated on Participants' portal regularly for PHC 27, 28,29,30:**
- **<https://ec.europa.eu/digital-agenda/en/news/faqs-horizon-2020-topics-related-ehealth>**
- **"See related Documents:FAQs H2020 eHealth 2015"**
- **For more info on Innovation Procurement as well as the on-going PCP projects please visit the following web page:**
- **<http://ec.europa.eu/digital-agenda/en/innovation-procurement>**
- **For more detailed info on the PCP-Cofund actions please consult**
- **[Annexes D and E](#) of the Horizon 2020 Work Program 2014-2020**



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Other topics of potential interest



HCO-O6: Global Alliance for Chronic Disease

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- **Specific challenge:** The Global Alliance for Chronic Diseases will focus its 2015 call for implementation science proposals on lung diseases.
- **Scope:** Proposals must focus on lung diseases and have an implementation science focus. They must address what works, for whom, under what contextual circumstances and are the intervention(s) adaptable and scalable in ways that are accessible and equitable.
- **Proposals should generate:** new knowledge on interventions and their implementation + demonstrate understanding of the local health system context & global cross-sectorial context.
- **Budget:** Contribution from the EU of between EUR **1 to 3 million** but does not preclude submission and selection of proposals requesting other amounts.

HOA7/e-Health inducement prize: The food scanner

- **Reward to whoever can first or best deliver breakthrough solution to a clearly defined challenge in order to:**
 - *identify new approaches or ideas and attract investment in specific areas*
 - *demonstrate the feasibility or potential of some technologies or promote their development and diffusion."*
- **Health and Well-being (H1): CNECT-HEALTH-PRIZE@ec.europa.eu**
- **Twitter: [@EU_eHealth](https://twitter.com/EU_eHealth) (#foodscanner) LinkedIn: [linkd.in/1BIGxnF](https://www.linkedin.com/company/1BIGxnF)**

ICT 28 – 2015: Cross-cutting ICT KETs (Key Enabling Technologies)



European
Commission

13 M€

Horizon

Small projects (2-4 M€)
70% funding

Page 1

ICT28.a Innovation Actions

- ICT KET integrated platforms for the healthcare and food sectors

Focus: Further development and validation in real settings of micro-nano-bio and bio-photonics systems, e.g. Reliable, Low cost, Driven by users

Focus is on:

- ✓ *Health sector:* Early or fast diagnosis and monitoring - Clinical Trials excluded
- ✓ *Food sector:* Quality, safety and process control

Impact

- ✓ **Measurable progress** in the effectiveness, cost-performance and speed of medical diagnosis, disease monitoring, the prevention and treatment of major diseases
- ✓ **Wide market introduction** of micro-nano-bio and bio-photonics systems for healthcare

- ICT28.c Coordination and Support actions

1 M€

Focus: Cooperation of scientists, technology developers and providers, and end-users for acceleration the deployment of bio-photonics and micro-nano-bio solutions in the health sector

Impact: **Reinforced value chains** and **accelerated deployment** of micro-nano-bio and bio-photonics solutions in the health sector through closer cooperation of the key stakeholders and users



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Public-Private Partnership on Big Data

- **Big Data Value aisbl founded in October 2014** under Belgian law / President: Jan Sundelin (CEO TIE Kinetix)
- **Currently 24 members** (ATC, IT Innovation, IBM, SINTEF, University of Bologna (CINI), UPM, NOKIA Solutions & Networks, THALES, Univ. Duisburg Essen, Siemens, SAP, Engineering, TIE Kinetix, ANSWARE, Software AG, Orange, Atos, INDRA, ITI, VTT, FhG, Deri, TUB, supported by Platte Consult)
- **PPP was signed between NK and the private side 13/10/2014**
- **PPP Website:** <http://www.bigdatavalue.eu>



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Specific goals of the PPP on big Data

- **Translating priorities of industry into EC Work Programmes and Calls for Proposals**
- **Create new cross-sectorial, cross-lingual and cross-border big data ecosystems and markets**
- **Drive the take-up and integration of big data value services in private and public decision-making**
- **Optimise and validate data analytics' technologies (both from a technical and business perspective)**
- **E-space, lighthouse project, community building**
- **Supporting Community and networking dimensions within EU Data Community**

HPC Centres of Excellence (HPC CoE)



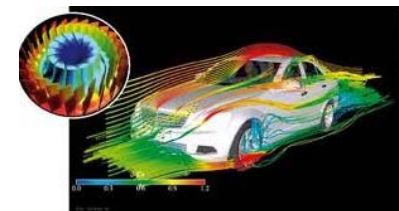
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Specific challenge:

• Establish a limited number of user-centred Centres of Excellence (CoE) in the application of HPC for addressing scientific, industrial or societal challenges (incl. health)



- CoEs may be: 'thematic', (medicine, life science, energy..)
 - 'transversal' on computational science (e.g. algorithms, analytics, numerical methods etc.) or 'challenge-driven', (e.g. ageing, climate change, clean transport etc.); or a combination of these types.





Proposals for CoEs

- **8-10 CoEs are expected to be funded**
 - Follow up Call is expected in the future
- **EU indicative contribution per proposal: 4 -5 M€**
- **Deadline for the submission of proposals:
14/01/2015**
- **Overall budget: 40M€**



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Evaluation process: A few words



Evaluation process: A few words

Rules on experts' recruitment and involvement

- **Strict rules on the recruitment of experts: expertise, conflict of interest, etc. and also turnover.**
- **Standard contract for involvement into the review process**
- **Clear and strict rules concerning the Review process and consensus building : independence, impartiality, accuracy, etc..**

- Proposals are scored between 0 and 5 during the Panel Review

- All proposals above threshold are listed in descending order of overall score

- Proposals are selected starting from the top of the list, until the available budget is exhausted: grading is absolutely crucial



Evaluation process: A few words

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European
Commission

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Evaluation process: A few words

Crucial points of Horizon 2020

- **Balanced approach to support research and innovation**
- **Industry dimension: reinforcing the EU leading role**
- **End-user dimension: proposals must be user friendly but also built-up in a very pragmatic perspective, eg proof-of-concept and piloting dimensions**

- Major importance of the Work Programme's detailed specifications for each call

- Cross-cutting issues to be taken into account if mentioned under the scope of the call: gender dimension, Responsible Research and Innovation, and Social Sciences and Humanities (SSH)

Evaluation process: A few words / Award criteria

• 1. Excellence

- Clarity, soundness of the concept, credibility (including transdisciplinary considerations), but also demonstrating progress beyond the current state of the art:

• 2. Impact: [...] contribution to:

- The expected impacts listed in the work programme
- 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;
- ...measures to, disseminate and exploit the project results,... communication.



Very
important!

• 3. Quality and efficiency of implementation

- Coherence and effectiveness of work plan (tasks, resources,) ; Competences and experience of people in charge of the project + the consortium as a whole
- Appropriateness of the management structures and procedures....risk management.



Evaluation process: A few words / Award criteria

- **Regarding the evaluation process / Further information available on this website:**
http://ec.europa.eu/research/participants/docs/h2020-funding-guide/grants/from-evaluation-to-grant-signature/evaluation-of-proposals/eval_process_results_en.htm



Evaluation process: recruitment of experts / General points and FAQ

- **Regarding experts recruitment / Further information available on this website:**
- **<http://ec.europa.eu/research/participants/portal/desktop/en/experts/index.html>**
- **<http://ec.europa.eu/research/participants/portal/desktop/en/support/faq.html#f13>**



Horizon 2020 - societal challenge 1

Dziękuję za uwagę.

Zapraszam do zadawania pytań