



Gabinete de Promoção dos
Programa Quadro ID&I

Próximos concursos H2020 Saúde

Patrícia Calado, NCP Saúde



Better health for all

- 1 *Understanding health, wellbeing and disease*
- 2 *Preventing disease*
- 3 *Treating and managing disease*
- 4 *Active ageing and self-management of health*
- 5 *Methods and data*
- 6 *Health care provision and integrated care*



Orçamento (2014-2020): EUR 7.257 M

(9,7% do orçamento H2020)

PROGRAMA DE TRABALHOS DS1 2017

- Personalised Medicine (European Commission Policy)
- 15 tópicos a concurso (+ SME Instrument)
- 332 M€
- ICT for Health
- Clinical studies
- Active and healthy ageing
- Big data and computer modelling
- and more....

TÓPICOS DA SAÚDE - CARACTERÍSTICAS

- Tópicos mais **abertos**
- Foco na **inovação** e no **impacto**
- Ênfase nos **consumidores finais**
- Mais **estudos clínicos** e proximidade do mercado
- Grande investimento nas **ferramentas de ICT**
- Questões transversais (**SSH, gender aspects, ética, etc**)
- **Sinergias** com outros financiamentos (fundos estruturais, AAL, EDCTP, EU Health Programme, etc).
- Forte envolvimento das **PMEs** e das **entidades dos sistemas de saúde**

TÓPICOS NO PROGRAMA DE TRABALHOS

Specific challenge: apresenta o contexto, o problema a resolver e explica a intervenção necessária.

Scope: delinea o problema, especifica o foco e os limites da potencial ação (não descreve ou limita a abordagem específica).

Expected impact: descreve os elementos chave do que é esperado conseguir em relação ao desafio.

SCI-PM-09–2016: New therapies for chronic diseases

Specific Challenge: Chronic diseases represent a significant burden on individuals and healthcare systems in the European Union and beyond. Innovative and effective therapeutic approaches are required to provide the best quality of care when prevention strategies fail. While considerable basic knowledge has been generated by biomedical research in recent years, the development of new therapies is stagnating, in part due to a lack of clinical validation.

Scope: Proposals should focus on clinical trial(s), supporting proof of concept of clinical safety and efficacy in humans¹⁶ of novel therapies (pharmacological as well as non-pharmacological) or the optimisation of available therapies (e.g. repurposing) for chronic non-communicable or chronic infectious diseases. Preclinical research should be completed before the start of the project. Proposals should provide a sound feasibility assessment, justified by available publications or provided preliminary results. Gender and age must be considered whenever relevant. Due consideration should also be paid to involve patients and take their views into account wherever relevant. Rare diseases and regenerative medicine are not within the scope of this topic^{17, 18}.

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.

Expected Impact:

- New or optimised therapeutic strategies, adapted where relevant to the different needs of men, women, children and the elderly, with the highest potential to generate advances in clinical practice and care for chronic non-communicable or chronic infectious diseases.
- Improve the therapeutic outcome of major chronic health issues with significant impact on disease burden of individual patients and health care systems.

Type of Action: Research and Innovation action

TIPO DE ACÇÕES

Tipos de ação	Financiamento	Objectivo
Research & Innovation Action (RIA)	100%	I&D com o objectivo de gerar novos conhecimentos ou explorar a viabilidade de novas tecnologias
Coordination & Support Action (CSA)	100%	Medidas de standardização, disseminação, sensibilização, comunicação, networking, coordenação, suporte e diálogo
SME Instrument	Phase 1: 50K€ Phase 2: 1-2.5M€	Elaboração de um plano de negócios <u>ou</u> atividades de demonstração (testes, protótipos, etc).

PERSONALISED MEDICINE (PM)

SC1-PM-02–2017: New concepts in patient stratification

- Integrate **multidimensional** and **longitudinal data** and harness the power of **big data** including pharmacogenomics, systems biomedicine approaches, network medicine and **computational modelling**.
- New concepts of stratification should be validated in **pre-clinical** and **clinical studies**.
- Focus on **complex diseases** having high **prevalence** and high **economic impact**.

RIA
04-10-16
(1st stage)
4-6 M€

BIG DATA / COMPUTER MODELLING FOR PM

SC1-PM-16-2017: In-silico trials for developing and assessing biomedical products

- Innovative **in-silico** trials for designing, developing and assessing **drugs, rare diseases, biomedical and bioactive products**.
- Build on comprehensive **biological and biomedical knowledge management** and advanced **modelling paradigms** in order to be able to simulate the **individual** human physiology and physiopathology and the **interaction** with the product, thus taking into account the **variability** among individuals.
- **Virtual populations** of **individual patients** will be built for simple or composite diseases and will allow **simulating** the action of the products and **predicting** the treatments outcomes in order to develop a **personalised medicine approach**.

RIA
14-03-17
4-6 M€

SC1-PM-17-2017: Personalised computer models and in-silico systems for well-being

- New integrative **computer-models and simulation systems** build on **open data** and systems with application in well-being, health and disease.
- Computer modelling and simulations able to **aggregate various information** (genetic, molecular, biochemical, medical imaging, social, lifestyle, economic, occupational, micro-environmental, etc) into robust **predictors for resilience** in coping with and overcoming challenges and stresses and for recovery after challenges and illness.
- Predictive capability **validated** by state-of-the-art **clinical and/or laboratorial studies** and/or against **large health registries**.

RIA
14-03-17
4-6 M€

MENTAL HEALTH

SC1-PM-07–2017: Promoting mental health and well-being in the young

- Develop population-oriented **primary prevention** interventions to **promote well-being** of **young people** and assess them for their **effectiveness**.
- Increasing **resilience** and mitigating the impact of biological, psychosocial and environmental risk factors.
- **Multidisciplinary** approach and involve the young themselves and other relevant stakeholders.

RIA
04-10-16
(1st stage)
2-4 M€

SC1-HCO-07-2017: Global Alliance for Chronic Diseases (GACD) prevention and management of mental disorder

- Focus on **mental disorders**, including dementia
- Implementation research focus in **LMIC**, and/or in **vulnerable populations**
- Interventions with **proven effectiveness** (including cost-effectiveness)
- **Adapt** and **upscale** the implementation of these interventions in accessible, affordable and equitable ways in order to **improve the management** of mental disorders and where possible their **prevention** within medical health care, psychosocial and public health fields.

RIA
11-04-17
1-3 M€

RARE DISEASES

SC1-PM-03-2017: Diagnostic characterisation of rare diseases

- Apply **genomics** and/or other **-omics** and/or other **high-throughput** approaches for **molecular characterisation** of rare diseases in view of developing **molecular** tests for a large number of undiagnosed rare diseases
- Promote **common standards and terminologies** for rare disease classification and support appropriate **bioinformatics** tools and incentives to facilitate **data sharing**.
- Contribute to the objectives of, and follow the guidelines and policies of **IRDIRC**.

RIA
11-04-17
15 M€

SC1-PM-08–2017: New therapies for rare diseases

- Clinical trials on substances where **orphan designation** has been **granted**
- May focus on a **range of interventions**, from small molecule to gene or cell therapy. May include novel interventions and/or repurposing of existing and known interventions
- Must include plans to engage with **patient organisations**, **health authorities**, considerations of **efficacy**/potential **clinical benefit** and early indication on **health economics**.

RIA
04-10-16
(1st stage)
4-6 M€

REGENERATIVE DISEASES

SC1-PM-11–2016-2017: Clinical research on regenerative medicine

- Target regenerative medicine therapies ready for **clinical research** and for **clinical phase** of work (**late phases preferred**).
- **Preference** given to proposals which are closest to having **approvals in place** for clinical work to start.
- **Any disease or condition** can be addressed but a **justification** for the choice must be provided.

RIA
11-04-17
4-6 M€

OTHER CLINICAL STUDIES

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

- **Compare** the use of **currently available** preventative or therapeutic (pharmacological as well as non-pharmacological) **healthcare interventions** in **adults**.
- Preference given to interventions with high **public health relevance** and **socio-economic impact**.
- **Cost effectiveness** analysis must be included.
- Randomised controlled trials, pragmatic trials, observational studies, large scale databases and meta-analyses may be considered for this topic.

RIA
04-10-16
(1st stage)
4-6 M€

ACTIVE AGEING AND SELF-MANAGEMENT OF HEALTH

SC1-PM-15-2017: Personalised coaching for well-being and care of people as they age

- **Proof of concept** of **radically new** solutions for a personalised "**virtual coach**" based on intelligent ICT environments, access to relevant physiological and behavioural data, and open platforms and emotional computing.
- "Coach" should provide personalised advice, guidance and follow-up for key age related issues in daily life which impact the **person's ability to remain active and independent**.
- **Users** must be **involved** and drive the innovation **at all stages** of design and development.

RIA
31-01-17
3-6 M€

SC1-HCO-17-2017: Support for large scale uptake of Digital Innovation for Active and

Healthy Ageing

- Promote effective **uptake** and **impact** of important actions currently **ongoing**.
- Leverage **additional investments** by mobilising other national and regional public investments together with private investments.
- Provide support to the following activities: 1) Innovation to Market Initiative (**I2M**); 2) development of a European policy vision on **Digital Innovation for Active and Healthy Ageing** and 3) **EIP-AHA**.

CSA
31-01-17
2 M€

SC1-PM-20-2017: Methods research for improved health economic evaluation

Provide new or improved methods for one or both of the following areas:

- **Understanding variations in costs and health outcomes** within and across
- **Integrating data on costs and health outcomes** from different sources

RIA
11-04-17
2-3 M€

SME Instrument

SMEInst-05-2016-2017 - Supporting innovative SMEs in the healthcare biotechnology sector

a) Cell technologies in medical applications

Addressing considerations such as **scale-up/scale-out**, **automation**, **logistics pathways** and **business models**. Dialogue with **regulators** and compliance with **regulatory requirements**.

Phase 2
Several cut-off
0.5-5 M€

b) Clinical research for the validation of biomarkers and/or diagnostic medical devices

Provide evidence for high **analytical value**, appropriate **sensitivity** and **specificity**, and **clinical validity**. Validation of biomarkers with potential for **rapid uptake into clinical practice**. Both **in vivo and in vitro** potential biomarkers are eligible.

SMEInst-06-2016-2017 - Accelerating market introduction of ICT solutions for Health, Well-Being and Ageing Well

Interoperable and **secure eHealth solutions** for **consumers** and **institutional health** delivery building on **standards** and **new ICT solutions and innovation ecosystems** well building on **open software platforms**.

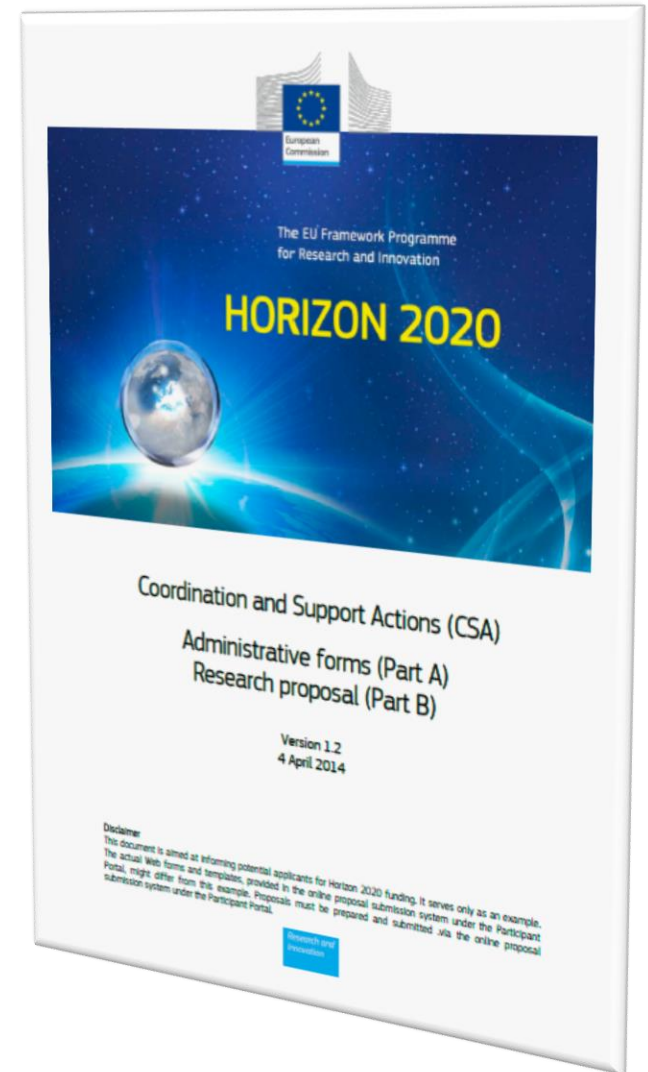
Phase 1/2
Several cut-off
0.5-2.5 M€



ESTRUTURA DA PROPOSTA

Parte A - Informação Administrativa:
apenas formulários online!...incluindo abstract

Parte B - Informação Técnica:
upload de PDF numa determinada pré-definida



http://ec.europa.eu/research/participants/data/ref/h2020/call_ptef/pt/2016-2017/h2020-call-pt-ria-ia-2016-17_en.pdf

PARTE A – INFORMAÇÃO ADMINISTRATIVA

- Preenchimento **online**
- **Informação geral**
título, duração, palavras-chave, sumário
- **Dados administrativos** da organização
parceira
- **Orçamento global** da proposta e de cada
organização **parceira**

Proposal Submission Forms
Directorate-General for Research and Innovation

proposal ID Acronym

- General information

Topic Type of action

Call identifier Acronym

Propositor* Max 200 characters (with spaces). Must be understandable for non-specialists in your field.

Initial duration of the project in full months

Final keyword 1 Add

Free keywords Enter any words you think give extra detail of the scope of your proposal (max 200 characters with spaces).

Abstract

Short summary (max. 2,000 characters, with spaces) to clearly explain the objectives of the proposal how they will be achieved. Its relevance to the work programme. It is used as the short description of the proposal in the selection process and in communications with the programme management committees and other interested parties. Do not include any confidential information. Use plain typed text, avoiding formulas and other special characters. If the proposal is written in a language other than English, please include an English version of this abstract in the "Technical Annex".

2000

Has this proposal for a very similar one been submitted in the past 2 years in response to a call for proposals under the 7th Framework Programme, Horizon 2020 or any other EU programme(s)?

Please give the proposal reference or contract number.

PARTE B – INFORMAÇÃO TÉCNICA

1. Excellence

- 1.1 Objectives
- 1.2 Relation to the work programme
- 1.3 Concept and approach
- 1.4 Ambition

2. Impact

- 2.1 Expected impacts
- 2.2 Measures to maximise impact
 - a) Dissemination and exploitation of results
 - b) Communication activities

3. Implementation

- 3.1 Work plan — Work packages, deliverables and milestones
- 3.2 Management structure and procedures
- 3.3 Consortium as a whole
- 3.4 Resources to be committed

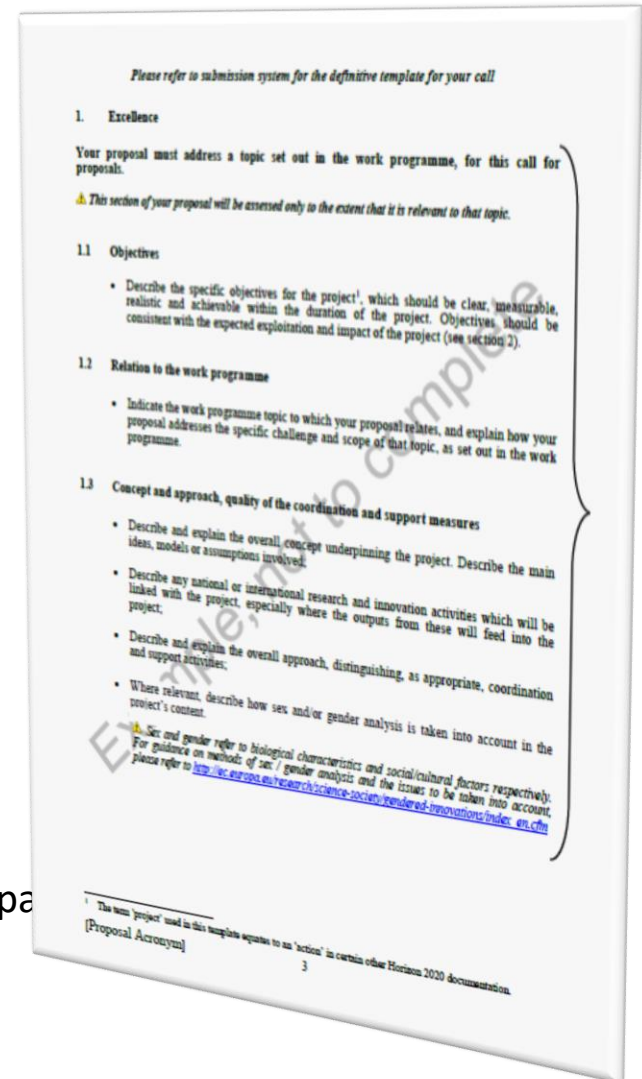
4. Members of the consortium

- 4.1 Participants (applicants)
- 4.2 Third parties involved in the project (including use of third parties)

5. Ethics and Security

- 5.1 Ethics
- 5.2 Security

Max 70 páginas!



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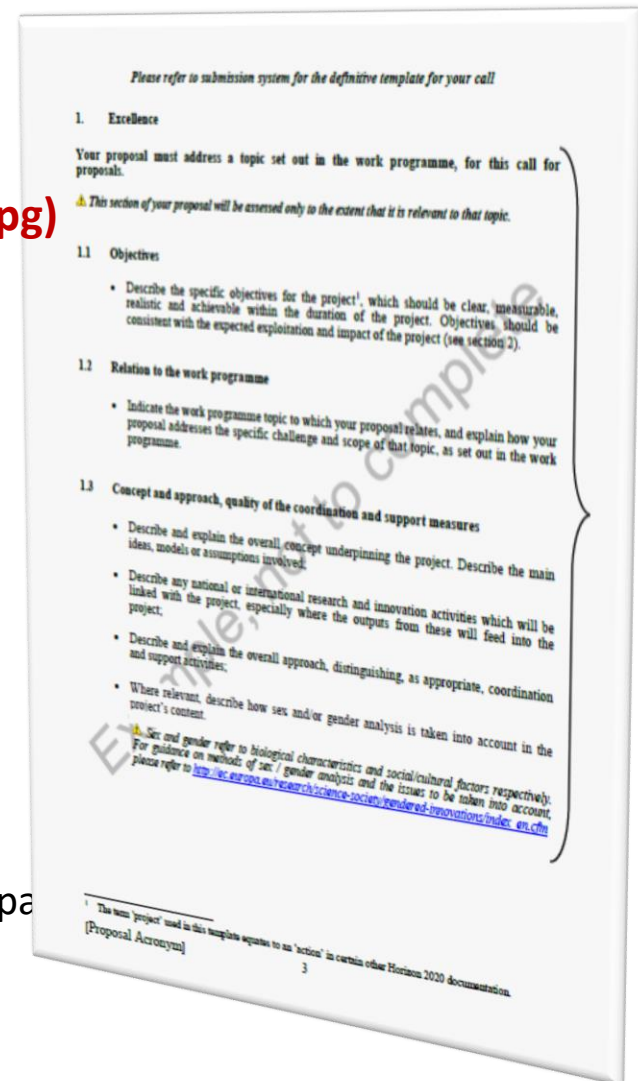
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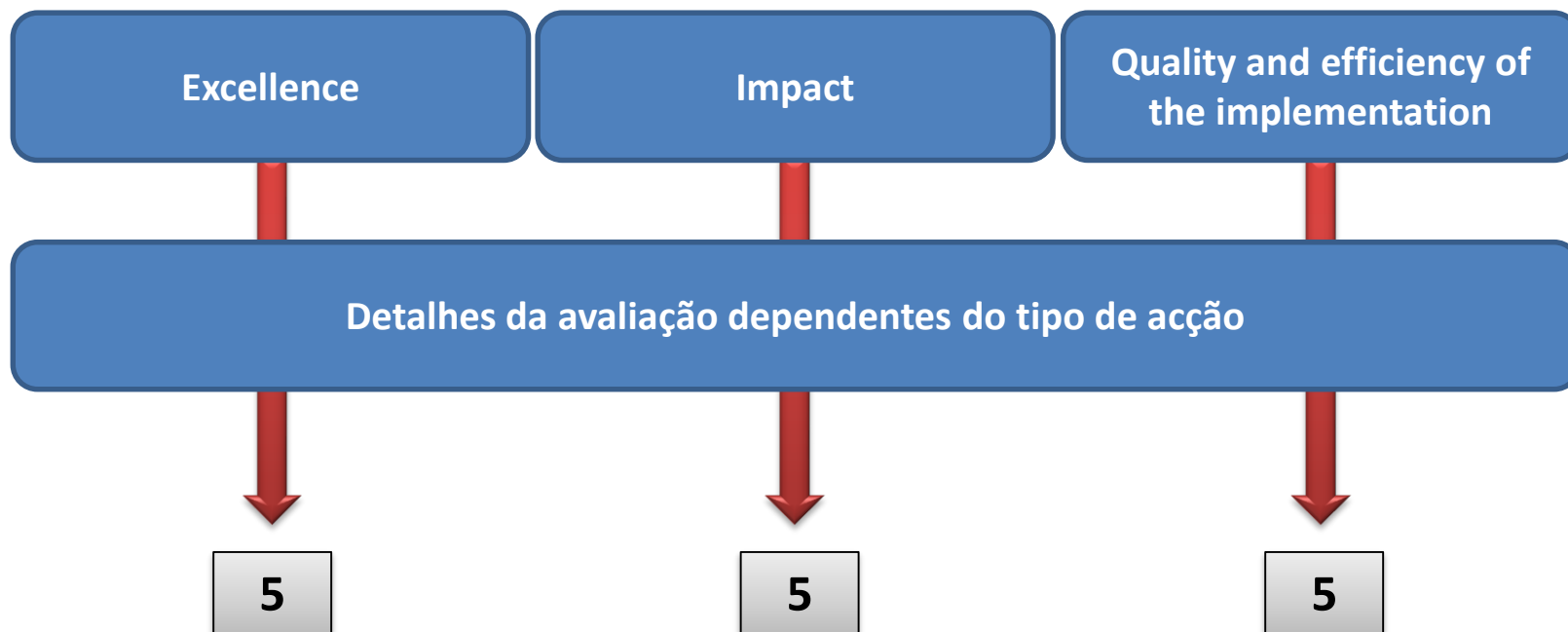
5.1 Ethics

5.2 Security

1ª fase
(max 10 pg)



CRITÉRIOS DE AVALIAÇÃO



EXCELLENCE

A man in a dark suit, white shirt, and purple tie is holding a white rectangular sign with his right hand. The sign contains the text "Make a good first impression".

Make a
good first
impression

Escolher um acrónimo que faça sentido e título apelativo (baseado no impacto)

“Título = SLOGAN | Acrónimo – Brand”

PLACES: Platform of Local Authorities and Communicators Engaged in Science

**Investir num *abstract* e num *pitch*
apelativos, que reforcem a inovação e o
impacto do projecto**

Erros mais comuns (exemplos dos ESRs 2014)

- Objectivos demasiado **vagos**
- **Fraca relação** com o programa de trabalhos
- Conceito e abordagem **mal descritos** ou **sem lógica**
- Abordagem **pouco fundamentada**
- Ambição demasiado **vaga** ou **sem inovação** de ponta

IMPACT



Important



Descreva como a proposta vai contribuir para **cada um dos impactos** descritos no tópico

Example

SC1-PM-11–2016-2017: Clinical research on regenerative medicine

Expected Impact:

- Obtain results by means of in-patient regenerative medicine research that allows **new therapies** to safely reach the **next level of testing or medical practice**.
- **Stimulate growth and competitiveness of European** regenerative medicine including **European small and medium-sized enterprises** and **industry** operating in the **sector**.
- **Increase the attractiveness of Europe** as a location of choice for development of new therapeutic options.
- **Lever existing investments** in fundamental research into regenerative medicine.
- **Develop new approaches** to currently untreatable diseases.

Erros mais comuns (exemplos dos ESRs 2014)

- “**Impactos demasiado genéricos**; embora o projecto contribua para a auto-gestão da saúde, a **contribuição** para os restantes impactos previstos está **mal demonstrada**”.
- “A melhoria na capacidade de inovação e integração de novo conhecimento está baseada e **limitada ao desenvolvimento de aplicações de uma plataforma existente**”.
- “Não há impacto significativo no fortalecimento da **competitividade e crescimento das empresas**”.
- “A presunção de que esta abordagem pode ser exportada para outras áreas de aplicação dos cuidados de saúde **não está suportada em exemplos convincentes**. Foi fornecida **informação insuficiente sobre o potencial impacto na excelência e competitividade global e Europeia**”.
- “A proposta não é convincente sobre a capacidade de desenvolver inovações que vão de encontro às necessidades do mercado global e Europeu. A proposta **não explica nem justifica adequadamente os benefícios económicos**”.

IMPLEMENTATION

NO CONSÓRCIO SÓ HÁ LUGAR PARA PARCEIROS



Saiba dizer “não” aos seus amigos e defina bem quem faz o quê e quando!

FERRAMENTAS PROCURA DE PARCEIROS (ex. Saúde)

Congressos/conferências



Horizon 2020 Health Open Info Days

Open Info Day - Horizon 2020 'Health, demographic change and wellbeing'

Centre Albert Borschette, rue Froissart 36, 1040 Brussels, Belgium
Friday: 22 November 2013

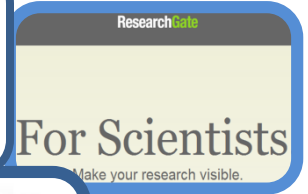
Infodays UE



Ferramentas virtuais
www.ideal-ist.eu
www.fitforhealth.eu



Rede de colaborações



Welcome to HealthCompetence



Redes profissionais

Projetos financiados
(>1000 2007-2013)
cordis.europa.eu

SECÇÃO 3 - IMPLEMENTATION

Erros mais comuns (exemplos dos ESRs 2014)

- “Os *Work Packages* propostos não estão descritos com **suficiente detalhe.**”
- “O *WP* XX tem **demasiadas tarefas e recursos.**”
- “Algumas descrições de tarefas **não estão suficientemente detalhadas.**”
- “O **timing projetado é problemático.** Há tarefas que se alimentam reciprocamente a decorrer quase em paralelo e com sobreposição.”
- “Os **recursos alocados a equipamentos e materiais não estão bem justificados.**”
- “A **estrutura de tomada de decisão** não está apresentada de forma convincente.”
- “A proposta lista **apenas 4 milestones**, o que parece pouco para um projeto a 4 anos.”
- “O **plano de contingência** não cobre todos os riscos de todas as tarefas complexas planeadas.”



Helpful
Tips

A proposta deve ser 100% relevante para o tema abordado no tópico

A proposta deve ser **Inovadora**, com **soluções** para o problema identificado, com **dimensão europeia, viável**, com parceiros **competentes e complementares** e com estrutura de **gestão adequada**

Investir numa apresentação eficaz e visualmente atraente

Apresente factos e números

Utilize gráficos, esquemas e tabelas

Parágrafos curtos, 'bullets', itálico, sublinhado

Usar e abusar do acrónimo do projeto

Flawless english

editar editar editar

Proposta convincente

Consórcio sólido

Ideia



**TAKE HOME
MESSAGES**

TENHA A ATITUDE CERTA



**Não encare os projectos Europeus como uma fonte de dinheiro
Pense na perspectiva do co-investimento**

NÃO TENDE ENCAIXAR A SUA IDEIA NA CALL



SIGA O SEU ROADMAP DE I&D



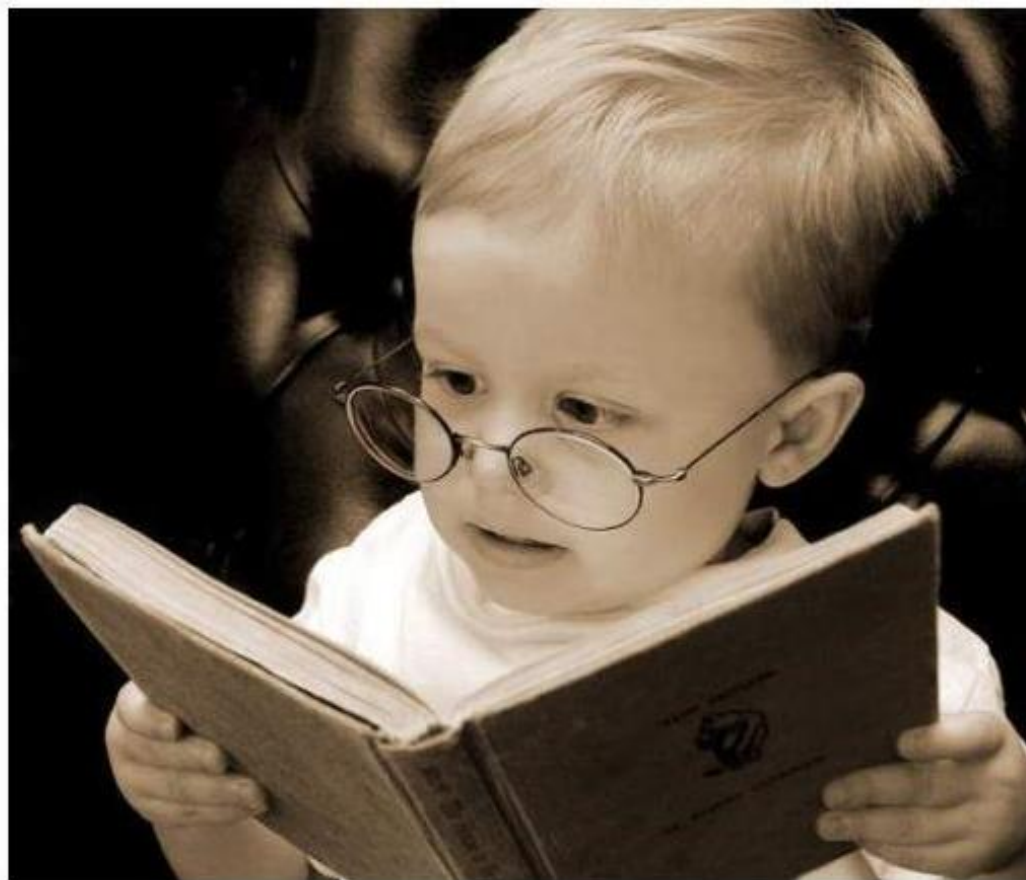
NÃO TENHA COMPLEXOS DE INFERIORIDADE



PUXE!



PREPARE-SE COM ANTEDEDÊNCIA



Estude o programa de trabalhos
Garanta que conhece todas as regras (custos, etc)
Esteja pronto: PIC, LEAR
Obtenha templates para recolher dados

SEJA MUITO CRÍTICO COM A SUA CANDIDATURA



Faça de advogado do diabo com a sua proposta
Considere a importância da secção “Impacto”
Pense como um avaliador (com base nos critérios conhecidos)
Lembre-se que “vai a exame” com a sua proposta!



**KEEP
CALM
AND
GOOD
LUCK**

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