

TOP 4.2



H2020-HCO-2014- Single stage

RTD



H2020-HCO-4-2014- Single stage

**1 eligible proposals
evaluated by 5 experts**

HCO-4

Outcome of evaluation:

- **Indicative budget: € 3 million**
- **Allocated budget: € 2.9 Million**
- **Coverage of the topic: yes**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
1	1 (100%)	1 (100%)	0

General remarks

- **One proposal, submitted by key institutions**
- **Good quality. Flexibility needed in implementation, because governance structure was not finalised at time of call deadline.**
- **One private foundation and one international consortium hosted at a university**

Remarks on short-list

GloPID-R-Sec: secretarial support to the Global Research Collaboration for Infectious Disease Preparedness (GloPID-R) for 5 years. Staffed by Fondation Mérieux/FR (coordinator) and ISARIC (International Severe Acute Respiratory and Emerging Infection Consortium), hosted by the University of Oxford.



H2020-HCO-5-2014- Single stage

**21 eligible proposals
evaluated by 14 experts (incl. 2 remote)**

HCO-5

Outcome of evaluation:

- **Indicative budget: € 9 million**
- **Allocated budget: € 10 Million**
- **Good overall coverage of the topic**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
21	9 (43%)	3 (14%)	3

General remarks

HCO-5

- **High interest for HCO-5**
- **Good quality of proposals for a new area of implementation science (9/21 above threshold)**
- **Global coverage with 9 proposals involving African countries, 6 Asian and 3 South American**
- **Over 50% of proposals (11) addressed vulnerable populations in HIC in Europe, accomplishing our policy objectives to address inequities in Europe**

General remarks

Proposals addressed:

- **Lifestyle determinants**
- **Screening and identification of populations at risk**
- **Educational campaigns, raising awareness**
- **Capacity building: training, local health systems**
- **Self-empowerment and health promotion**
- **Networking and social support**

General remarks

Proposals addressed:

- **5 proposals used eHealth and/or mHealth or multimedia**
- **Social innovation component:**
 - ✓ Patient and families self-empowerment
 - ✓ Leverage of existing networks
 - ✓ Capacity building by training

The 3 selected proposals address:

- *Family-based intensive lifestyle*
- *Expanding care networks*
- *Community based intervention: in particular involving countries that suffered the European crisis (Greece and Spain)*

Remarks on short-list

iHealth-T2D:

The project will compare family-based intensive lifestyle modification amongst 3,600 non-diabetic and/or prediabetes South Asian men and women for the prevention of T2D. The results will determine whether screening by waist circumference and/or HbA1c, coupled with intervention by family-based lifestyle modification, is an efficient, effective and equitable strategy for prevention of T2D in South Asians and provide a robust evidence for scalable community-wide approaches to reverse the epidemic of T2D amongst the >1.5 billion South Asians worldwide.

Countries: India, Pakistan, Sri Lanka and the UK

Remarks on short-list

SMART2D:

The project aims to strengthen capacity for T2DM care including prevention in high-risk population, through proven strategies like task shifting to community health workers, and expanding care networks through community-based peer support groups. The study has a strong social innovations component that will leverage existing networks and platforms, to empower patients, their families and communities through the self-management approach. It will embed research into policy and practice from the beginning; and enable cross-lessons from other chronic conditions and reciprocal learning.

Countries: Rural Uganda, urban South Africa and vulnerable immigrant populations in urban Sweden.

Remarks on short-list

Feel4Diabetes:

The aim of this project is to develop, implement and evaluate a community-based intervention aiming to create a more supportive social and physical environment to promote lifestyle and behaviour change to prevent type 2 diabetes among families from low and middle income countries and from vulnerable groups in high income countries in Europe. A low-cost and applicable in low-resource settings community-based intervention programme will be developed, with the active engagement of local stakeholders.

Countries: Bulgaria and Hungary, and in vulnerable populations (i) in the high income countries, Belgium and Finland, as well as (ii) in the high income countries under economic crisis, Greece and Spain.



H2020-HCO-7-2014- Single stage

**1 eligible proposals
evaluated by 7 experts**

HCO-7

Outcome of evaluation:

- **Indicative budget: € 5 million**
- **Allocated budget: € 10 million**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
1	1	1 (100%)	n/a

General remarks

- **Good quality of the proposal**
- **Following MS represented: FR (coordinator)
AT, BE, DE, DK, ES, IL, IT, LU, NL, PL, PT, RO,
SE, SK, UK,**
- **Associated countries represented: NO, TR**
- **Collaboration partners from Canada**

Remarks on short-list

Title: ERA-NET for establishing synergies between the Joint Programming on Neurodegenerative Diseases Research

three priority topics have emerged through a consultative process:

- **the identification of genetic, epigenetic and environmental risk and protective factors,**
- **the development and maintenance of longitudinal cohorts,**
- **the creation of advanced experimental models.**

These are key questions of equal priority to increase understanding of ND mechanisms that will be addressed



H2020-HCO-8-2014- Single stage

**1 eligible proposals
evaluated by 7 experts**

HCO-8

Outcome of evaluation:

- **Indicative budget: € 5 million**
- **Allocated budget: € 6.7 million**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
1	1	1 (100%)	n/a

General remarks

- **Good quality of the proposal**
- **Following MS represented: IT (coordinator)
AT, BE, DE, EE, EL, ES, FR, HU, IL, LV, NL, PL,
PT, RO, SI, SK**
- **Associated countries represented: NO, TR**
- **Collaboration partners from Taiwan**

Remarks on short-list

Title: ERA-NET: Aligning national/regional translational cancer research programmes and activities

The proposed ERA-NET Cofund TRANSCAN-2, aims at linking translational cancer research funding programmes in 15 Member States, 3 Associated Countries, and a third country.

It will provide a critical financial and scientific mass for tackling large-scale problems, relevant for improving translational cancer research globally.

A co-funded joint transnational call (JTC) will be launched focusing on the topic “Intratumour heterogeneity in resistance to therapy and recurrence” followed by three additional JTCs that will be implemented in a frame of multinational translational cancer research programmes.



H2020-HCO-9-2014- Single stage

**1 eligible proposals
evaluated by 7 experts**

HCO-9

Outcome of evaluation:

- **Indicative budget: € 5 million**
- **Allocated budget: € 4.9 million**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
1	1	1 (100%)	n/a

General remarks

- **Good quality of the proposal**
- **Following MS represented: DE (coordinator)
AT, BE, ES, FR, IE, IL, IT, LU, NL**
- **Associated countries represented: NO**

Remarks on short-list

Title: ERACoSysMed - Collaboration on systems medicine funding to promote the implementation of systems biology approaches in clinical research and medical practice

The central idea of ERACoSysMed is to implement systems biology approaches in medical concepts, research and practice by structuring, coordinating and integrating national efforts and investments during its project duration of five years.



H2020-HCO-10-2014- Single stage

**1 eligible proposals
evaluated by 6 experts**

HCO-10

Outcome of evaluation:

- **Indicative budget: € 5 million**
- **Allocated budget: € 5,8 Million**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
1	1	1 (100%)	n/a

General remarks

- **Good quality of the proposal**
- **Following MS represented: FR (coordinator)
AT, BE, DE, EL, ES, HU, IL, IT, LV, NL, PL, PT,
RO**
- **Associated countries represented: TR**
- **Collaboration partners from Canada and
Switzerland**

Remarks on short-list

Title: ERA-NET rare disease research implementing IRDiRC objectives

The E-Rare consortium was built to link responsible funding bodies that combine the scarce resources and fund rare disease research via Joint Transnational Calls (JTCs). The current ERare-3 project proposal will extend and strengthen the transnational cooperation by building on the experience and results of the previous E-Rare-1&2 programmes.



H2020-HCO-14-2014- Single stage

**10 eligible proposals
evaluated by 6 experts**

HCO-14

Outcome of evaluation:

- **Indicative budget: € 1 million**
- **Allocated budget: € 0,975 Million**
- **Coverage of the topic: yes**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
10	2(20%)	2 (20%)	0

General remarks

- Experts welcomed Commission's initiative to tackle the divide in European Health R&I and encouraged the continuation of the efforts
- Participation of the low performing member states were rather low in the proposals
- All 10 coordinators from EU 15
- For future calls, focusing on remedial actions was suggested

Short-listed projects

RegHealth-RI

- Analysing the health R&I situation in Europe
- Creating a networking platform for key stakeholders
- Workshops, conference » new initiatives, actions

DanuBalt

- Good representation of low performing regions among partners
- "Hands-on" performance analysis of selected regions
- Regions' potential, niche markets, unique selling points will be identified

Projects nicely complement each other



H2020-HCO-15-2014- Single stage

**3 eligible proposals
evaluated by 7 experts**

HCO-15

Outcome of evaluation:

- **Indicative budget: € 1 million**
- **Allocated budget: € 1.2 million**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
3	1	1 (33%)	n/a

General remarks

- **Following MS represented: NL (coordinator)
AT, BE, DE, DK, FI, FR, IT, PT, UK**
- **Associated countries represented: none**

Remarks on short-list

HCO-15

Title: A stepping stone approach towards the Genetics Clinic of the Future

It establishes a robust communication and implementation strategy that integrates the project's outcomes and recommendations in research and clinical practices and policy processes, outlining opportunities for a more responsive health research and innovation system by:

1. Envisioning the Genetics Clinic of the Future (WP1)
2. Mapping out the concept of data control (WP2)
3. Considering ethical and legal dimensions in the consent framework (WP3)
4. Exploring novel models for use of clinical data in research and vice versa (WP4)
5. Initiating public engagement, mutual learning and dissemination (WP5)
6. Engaging policy makers (WP6)



H2020-HCO-16-2014- Single stage

**2 eligible proposals
evaluated by 7 experts**

HCO-16

Outcome of evaluation:

- **Indicative budget: € 2 million**
- **Allocated budget: € 2 Million**

<i>Received</i>	<i>passed</i>	<i>Short-listed (success rate)</i>	<i>reserve</i>
2	1	1 (100%)	n/a

General remarks

- **Good quality of the proposal**
- **Following MS represented: ES (coordinator)
AT, BE, DE, EL, FR, HR, IL, IT, PL, PT, UK**
- **Associated countries represented: none**

Remarks on short-list

Title: Improving and professionalizing the Health NCP service across Europe.

The main objective of the HNN 2.0 project is to satisfy the needs and priorities of all different types of NCPs, notably newcomers, NCPs with fewer resources, NCPs from EU-13 and NCPs in Third Countries so as to face the challenge of the current heterogeneity of the network.