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Opening of the Flagships Call: September 2022

Communications Pack



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## Introduction from Jean-Marc Bourez, Interim CEO



Earlier this year, the Partners and Management Boards of EIT Health came together to align on how we would deliver our mission to the patients and citizens of Europe that we serve, by enabling them to live longer, healthier lives, by building and growing the largest health innovation ecosystem across Europe.

From this, our flagship concept has been born. Four bespoke programmes, developed to contribute to some of the top health priorities that have been identified at EU level. It is therefore my honour and my pleasure to announce that the call for activities against the flagships\* is now open.

Europe is facing a turning point in healthcare. From an increase in infectious diseases, pandemic threats and antimicrobial resistance, to rising costs of healthcare delivery and social and healthcare systems typically slow to change and adapt. The opening of this call marks the start of the greatest opportunity we have, to safeguard the future of healthcare services for the millions of people who use and rely on them.

None of what you see in the call document would have been possible without the shared vision that our existing Partners and colleagues at EIT Health have had. However, this call is not just open to those people that currently work with us. We want to actively encourage participation from anyone with an interest in healthcare innovation who shares our desire to impact on the future; start-ups, healthcare providers, research bodies, payors, regional/national/international policy bodies or institutions and municipalities.

I know that we are moving forward with many challenges ahead of us, but now is the time to focus our energy on the content that matters to our Partners and our key stakeholders.

The time to act is now, so come and join us at EIT Health and let's change lives – together.

#### Jean-Marc

\*It should be noted that this does not include "Supporting the deployment of Important Project of Common European Interest in Health (IPCEI) to address market failures", which will have its own specific call and timeline.

### You said, we did; Listening to the partnership

You said	Emphasis needs to be placed on specific areas of wider impact across the European health agenda.	Implemented the Flagship approach - four bespoke programmes, developed to contribute to some of the top health priorities that have been identified at EU level. We did
You said	Can we align with other European instruments?	Introduced the 1/3 funding principle to help leverage EU, national or regional funding sources in our Business Plan 2023-25.
You said	Can cross-pillar activities be aligned to enable better integration throughout the EIT Health journey?	We did Designed a harmonised cross-pillar offer under the Flagship approach in our Business Plan 2023 -25. We did
You said		Given a detailed explanation within the call document as to how the different activities can be integrated. We did
You said		We have agreed we will support projects to showcase their achievements and outcomes through our social media channels and event programmes. We did

Remove caps and limitations on proposal submission numbers.

Removed limitations on the participation of organisations for the flagships proposals.

We did

#### You said

Assure openness of the call to a wider range of external participants, while maintaining fair management fees.

Implemented the openness principle, ensuring an opportunity for organisations external to our existing EIT Health partnership network to apply for the call, whilst still keeping the value of strong integration with our Partners.

We did

#### You said

Minimise changes to the 'rules of the game' for running portfolios in a multi-year approach.

Established a multi-year Business Plan framework with agreed conditions for 2023-25.

We did

Enable regular interactions through continued open Matchmaking and bespoke support from Regional Innovation Hubs during proposal preparation and selection processes. Established a series of networking events across Europe and opened a dedicated networking space on Connections to enable interactions across the EIT Health ecosystem.

Positioned the Collaboration Leads in the Regional Innovation Hubs to be dedicated points of contact to support Partners throughout the call process.

#### You said

Maintain the support programme implemented for Innovation project proposals in previous calls, and replicate the concept for Education or Business Creation programme applications. Rolled-out the support programme for all activities under the Flagship call, contributing to the development of high-quality full proposals across all three pillars.

#### You said

Enable shorter lead-times between proposal selection and project implementation. Identified three Flagship application cut-offs per year to allow flexibility in submitting proposals and to reduce time from final selection to implementation (approximately 3 months).

Built requirements for advancing the preparation of technical documentation (e.g. for ethics approval or clinical trials) in Innovation projects into the call to enable smoother implementation. We did

We did

We did

Balance effort to develop proposals and apply for programmes with an adequate success ratio. Devised a two-stage application process (short proposal and full proposal), although it is anticipated that we will have 3x the number of full proposals in the second stage than the expected number of projects we can fund.

We did

#### You said

Bring alignment to the application process, similar to Horizon Europe programmes. Introduced a standardised two-stage PDF-based application process across all pillars for all Flagship programmes (max. 5 pages for first stage) similar to other Horizon Europe instruments.

Developed a new IT platform to support applications.

Simplified the information requested in the different application stages.

We did

You said

> Assure transparency in evaluation and scoring processes and criteria.

Provided a full explanation of the application and selection process in the Flagship call document.

Committed to sharing scoring criteria at the relevant selection stages.

We did

You said

Service

Can we have a better understanding of what EIT Health services are available to us to support our projects? We have provided this in the call document for each call or project type, so you know which EIT Health services might be beneficial for you.

We did

You said

> Provide clarification on financial sustainability contribution models.

Focussed financial sustainability mechanisms on two pre-defined models for Innovation (referred to in the call documents as the financial backflow and Grant for Option models).

Ensured that training and explanation of financial sustainability models would be offered with relevant examples, where appropriate.

#### You said

You

said

Keep the 'Grant for Option' model as a feasible financial sustainability mechanism for start-ups participating in EIT Health programmes.

#### We did

We did

Maintained the instrument in the form of Grant for Option.

We did

Identify opportunities for alternative sources of complementary funding, bringing value to the EIT Health network.

Brought in the 1/3 concept to help leverage European, national and regional funding instruments via new models for non-EIT-funded activities (NEFAs).

# What's different?

#### **Greater openness**

This call is open to applications from EIT Health Core or Associate Partners as well as non-registered project partners.

### 1/3 Co-funding principle

Funding for the flagships will come from three different sources:1/3 from EIT Health, 1/3 from Partners and an anticipated 1/3 from other EU or co-funding sources.

### **Cross pillar approach**

EIT Health have put in a number of measures to align the application and submission processes, providing a single point of contact in each hub, with better portfolio integration and management to support greater collaboration and impact.

### Alignment to other EU programmes

Introduction of a short and long form proposal in the application process, bringing this into line with how other Horizon Europe programmes operate.

### **Shorter timelines**

Reduced the timeframe between final selection to implementation (approximately 3 months).

### Simplified and flexible process

An open call for 12 months, but with three defined deadlines, meaning Partners can submit at a time that works for them.

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### FAQs

What is the overall EIT Health budget that will be distributed for projects in the Flagships call over the three cut-offs and, also, per respective cut-off?

The number of projects to be selected over the call will depend on the total available budget granted to EIT Health as part of our Business Plan 2023-25. At this point we are unable to give precise details, but we want to open this call up to as many proposals as possible and are fully committed to enabling this.

### Will the Plaza template be very similar, or will it be substantially changed?

An alternative platform has been developed to provide an opportunity for applicants to submit their documents. However, most of the questions will remain similar to previous years.

Could you please explain the cut-off procedure and what does it exactly mean in terms of requirements for proposal submission? What are these requirements/conditions?

The cut-off is the point in time in which you can present your short proposal, a specific framework will be given for this. Your consortium does not need to be complete at this early stage, but it must meet the eligibility criteria. The idea must reach the level of maturity required. If your application proceeds to the next step, the proposal and team will be enrolled in a two-month support programme, where the proposal will be developed and completed.

### Can you please clarify the term "new organisation" reported in the eligibility criteria. What does this mean - new to the network or newly established?

"New organisation" is related to the openness of the call, so it refers to an organisation that is not yet part of the EIT Health network.

### Are external partners still limited to €50K of funding per annum?

No, the Horizon Europe programme dictates that we cannot put a limit on this funding. However, entities applying for higher amounts of grant than €50K will have to request to become members of EIT Health and pay the appropriate membership fees.

### The call is cross-pillar. Is it mandatory to submit a cross-pillar proposal?

No, not at all. The cross-pillar interactions are pre-identified in the call document to support the building of the knowledge triangle integration. Other interactions are of course welcomed.

### Where can the information be found regarding eligible costs for each call within the flagship?

We follow Horizon Europe cost eligibility rules. The Annotated Model Grant Agreement or AMGA is the backbone of all Horizon Europe grant agreements.

### What do the 3 cut-off dates mean. Do we have to submit three different proposals?

No, cut-off dates are the deadlines to submit your short proposal. The call will stay open all year, so these dates are when all submitted short proposals will be reviewed. Any short proposal submitted after a cut-off date will be reviewed at the following cut-off date.

### **Eligibility questions**

### Are there any specific requirements for a partnership composition in the consortia?

Projects must involve members from a minimum of two countries and from two different Regional Innovation Hubs. There will also be certain other requirements that need to be met, which are outlined in the call document in respect of activity and submission stage.

### What does "Start-up and Partner driven" imply in regard to the cooperation and the distribution of roles and financing between start-ups and Partners?

Start-up driven projects are when the core innovation of the project is led by the start-up, as without them, there is no innovation project. Usually, the start-up owns the intellectual property and leads the commercialisation of the solution. In this case, there is a maximum grant (between  $\leq 300,000 - \leq 500,000$ ) for the start-up. Partner driven projects are when there is no start-up leading the core innovation.

### Will projects have indirect costs, and if so, at what percentage?

Yes, the same percentage as in Horizon Europe, so 25%.

### Can you clarify what you mean by "Have at least two paid FTEs working in the start-up at the time of submission", and you need a "CEO working full-time in a company"?

The start-up must have at least two full time equivalent employees working at the time of submission of the short proposal and a full-time CEO.

It is very likely that we might experience delays in obtaining approval of the ethics committees (this is never controlled by the consortiums) and approval seems to be mandatory now, how can applicants manage this?

We are currently developing the framework around this issue, but we will be flexible, and we are not asking applicants to already have everything in place when they submit their short proposals.

### Sustainability questions

#### Is the backflow model applicable to academic Partners?

The backflow model is applied to any entity who assumes the commercialisation of the solution but is not under the grant for option model. This could be an academic or service provider, if they are the Partner commercialising the product service developed in a Partner-driven project, start-up driven project or fast track project.

#### Is the sustainability of the project evaluated during Phase One?

No, it will only be evaluated in the full proposal.

### **Co-funding questions**

Regarding the anticipated 1/3 of other EU/national cofunding, is EIT Health managing and securing this co-funding or is it the responsibility of each Partner to get this cofunding from its own region or other EU programmes?

It is the responsibility of the Partners of each consortium. However, Partners can count on EIT Health's support, especially when they are at the stage of finalising their proposals. We can identify potential funding programmes, make introductions with NCPs and support applications. However, we will not write the application for Partners.

The Collaboration Leads in the hubs will establish the concept of a European network for the different programmes. Our Public Affairs and Stakeholder Relations Leads will be aware of what opportunities are available and how these might be complementary. It is expected that EIT Health's support will occur during the support programme, (i.e., the time between the selection of expression of interest and the final submission of the proposals) where you must have a plan on how to achieve your 1/3 of external funding.

### Is the 1/3 co-funding from own resources compulsory or can we obtain 2/3 co-funding from other EU/national programmes?

No, the 1/3 own co-funding is mandatory to demonstrate Partners' coinvestment commitment.

### How will synergies with other funding programmes be assessed in the application phase?

We will assess the level of co-funding that will be brought and the risk of implementation. This will happen in phase three during the hearing and portfolio analysis.

### How can we have synergies with other EU funding without falling into the trap of double funding?

While synergies will be made with other EU funding, work and costs claimed by different sources of EU funding will not be mixed in one activity, but will be clearly separated into two different activities, one EIT Funded Activity (EFA) and one non-EIT Funded Activity (NEFA) with separate work and budget. How this will play out operationally, and at which stage is under development; but it is likely that many NEFA's will be able to be combined into one to reduce administrative burden.

### Is the 1/3 co-funding from other EU/national sources mandatory?

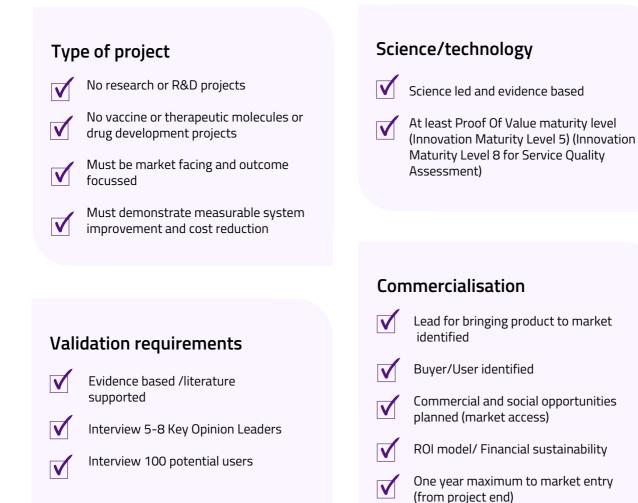
No, the extra 1/3 co-funding from other EU/national sources is a principle and not mandatory but encourages Partners to secure co-funding on top of EIT Health and Partner resources and will support the sustainability roadmap past 2025. EIT Health will provide support for Partners to help identify synergies and gain access to these additional sources of funding.

### What makes a good innovation project

Disclaimer: Please note that this is not official guidance as to how projects will be scored, but some tips and recommendations to support your application and ensure:

- your project is aligned with EIT Health impact, innovation acceleration and financial sustainability objectives
- your value proposition, approach, and plan are clear.

If your project does not fit with these recommendations, it may not be sufficiently mature or developed and you should discuss this with your local hub who may be able to identify some alternative opportunities.



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#### **Clinical requirements**

- Clinical validation well planned and achievable
  - Measurable and significant impact

Reaches patient care <2-3 years (after project end)

#### Work plan



Clear plan: tasks, milestones, risks identified



Clear deliverables

Achievable timeline

#### Team

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Right Partners for the domain

Commitment from Partners or users

Pan-European scope

#### Project

Clear elevator pitch



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Clear achievements targets

- Clear ambitions and vision
- Impact is relevant (importance of the need, severity, number of people impacted)

### Budget

Balanced (across EU consortium) and coherent

Linked to activities

Co-funding sources are clear and, where possible, should meet the 1/3 funding principle

Please remember to link your project with EIT Health objectives: better health outcomes, fostering entrepreneurship, and fostering jobs in Europe to create more efficient health systems.

Don't forget to include how you are going to disseminate the project results to give visibility to EIT Health and how it contributes to EIT Health sustainability goals: <u>https://eithealth.eu/who-we-are/our-goals/</u>



## **EIT Health Flagships**

### Find out more:

Explore our internal community platform

Take a look at our website

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