



Second Call for Proposals for Innovation Projects: Innovation by Ideas

Publication of Call: 6 June 2018

Submission deadline: 2 October 2018, 4pm, Munich time

About Innovation Projects

EIT Health Innovation Projects focus on three specific challenges: promoting healthy living, supporting active ageing and improving healthcare. Through the 2015–2018 calls, we have developed a strong portfolio of Innovation Projects addressing these three societal challenges. These projects have brought together new partners from throughout the consortium who are now collaborating to bring better health and healthcare to European citizens. In our current call for new Innovation Projects, we are looking to expand our portfolio of high-quality, strong, balanced projects.

EIT Health hereby invites partners to submit proposals for new Innovation Projects to be included in the Business Plan to start in 2019. The ultimate objective of the projects should be the rapid market penetration of innovative projects and services, and/or the testing and implementation of novel organisational and healthcare delivery processes.

This document summarises the information on the second Call for Proposals for Innovation by Ideas projects for the 2019 Business Plan. In this regard, it is the one document to consider for proposing new activities in Innovation Projects.

About the Call for Innovation by Ideas

Innovation by Ideas projects are collaborative projects and are designed to address societal challenges within the thematic scope of EIT Health. The projects are “solution driven”, i.e. a potential solution has been identified that either capitalises on an opportunity or addresses a specific problem presented by demographic ageing of the population. These are considered bottom-up proposals, and the projects can be led by Core or Associate Partners (and their Linked Third Parties) of any category.



What we are looking for

We are looking to support new projects that address at least one of the four themes outlined below:

- Prevention and management of chronic disease
- Empowering citizens to manage their health
- Improving healthcare systems
- Leveraging new technology and data

Proposals need to demonstrate a clear innovation and should present a viable plan to reach the market or – in the case of organisational innovations – present a viable deployment strategy. The EIT Health-financed part of the project should result in an innovation that has been technically validated and tested in a relevant environment, bringing the project to a point where it can attract early adopters or additional external financing. Market launch/deployment/regulatory approval for the innovation should be targeted for about two years following the completion of the project, and a clear path to this point should be presented.

Innovation by Ideas:

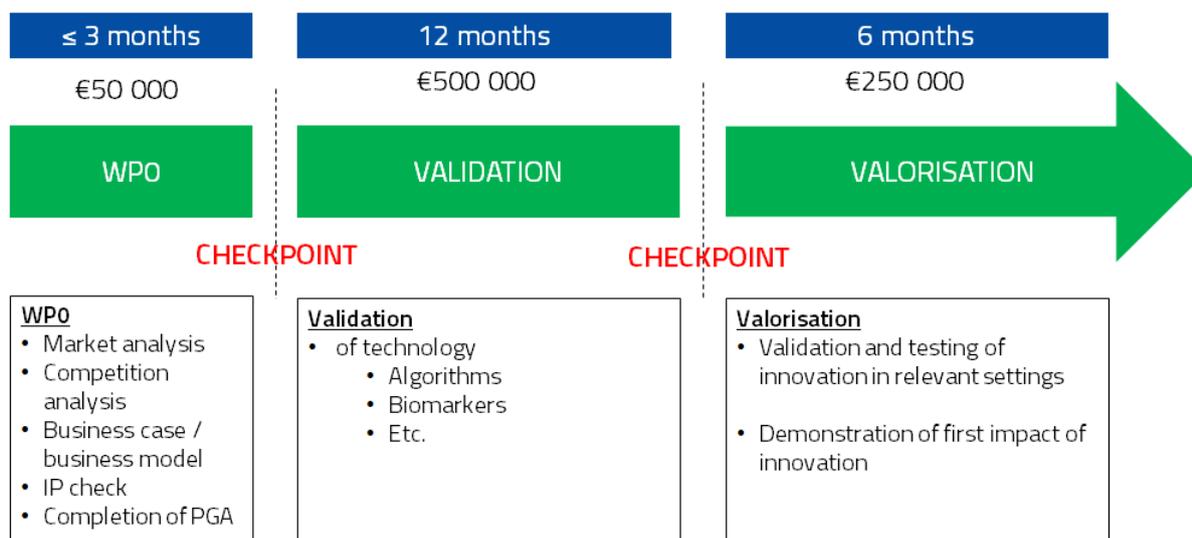
- Address at least one of the three societal challenges of EIT Health.
- Include at least one academic and one non-academic Core or Associate Partner, i.e. one Partner of the type “Education” or “Research” and one of any other type.
- The financial contribution for 2019 may not exceed €250 000*.
- The financial contribution for 2020 may not exceed €500 000**.
- All EIT financed project activities must be complete by 31 December 2020.

* excluding WPO activities.

** Please note that financial contributions beyond 2019 will be subject to a successful review of the project, and are thus deemed “indicative” at this stage.

Project Funding and Structure

Innovation by Ideas projects are structured into three phases, as outlined in the diagram below. The financing amounts represent the maximum EIT funding that can be applied for in each phase, and the timing for the validation and valorisation phases should be seen as guides only.



Critical milestones will be evaluated after the WPO phase and the first year. A maximum EIT contribution of €750 000 can be sought for each project. The EIT contribution will only be provided for a maximum of 18 months, finishing on 31 December 2020 at the latest.

WPO – Structure and Purpose

The primary purpose of WPO (Work Period 0) is to gain a greater all-round understanding of the innovation and the environment (competition/IP/regulatory etc.) in which it will operate. This will support the team in being able to identify and address key issues in the project at an early stage.

While the exact activities for WPO will be tailored to each individual project, the main areas are:

- Provide a detailed and updated analysis of the competition and market/implementation pathway (including any regulatory barriers).
- Improve and update the business/implementation model.
- Analyse the IP situation, including identification of any freedom to operate issues.
- Complete PGA ready for signature by all parties.
- Determine non-EIT impact KPIs for the project.

The work will be carried out with the support of external experts (for example from the EIT Health Market Coach Network). Director of Innovation and project teams can provide input for experts. Final decision will be made by the Director of Innovation.

The output of WPO will be reviewed together with the project team to determine if any changes to the originally proposed project plan are necessary, in order to give the project the best possible chances of success. The Director of Innovation must approve the WPO deliverable to ensure its quality, as well as to make sure that the issues raised by the evaluators are correctly addressed.

Eligibility criteria

All innovation project proposals must:

- Be complete and submitted via the Plaza system before the deadline (2 October 2018, 4pm Munich time).
- Be submitted by an EIT Health partner.
- Have identifiable KIC Complementary Activities (KCA).
- Include Core and/or Associate Partners who have paid their membership fees for the year 2018.
- Involve Core or Associate Partners from a minimum of two CLC/InnoStars (NB: not counting external project partners).
- Have clear and achievable commercial or implementation end-points (e.g. products and services to be launched, organisational innovations to be implemented, etc.).

Application process

Application is possible through the EIT Health Plaza submission system starting from 30 July 2018. More information on the application form will be given in the following weeks.

Evaluation process

All eligible proposals will enter an evaluation process that involves two stages: (1) remote expert evaluations and (2) hearings.

STAGE 1: Remote expert evaluation

Each eligible proposal is evaluated based on the criteria indicated below by three independent external evaluators. The evaluators are contracted by EIT Health e.V. and receive a training on the EIT Health strategy, rules and procedures. They are instructed to check for a conflict of interest and to inform the EIT Health HQ if necessary before evaluation of the proposal proceeds. A consensus meeting will only take place should there be large outliers (based on qualitative review from evaluators, or 35 points of difference between minimum and maximum evaluator). A maximum of 100 points will be awarded in remote evaluation.

STAGE 2: Hearings

Invitations for hearings will be issued by 10 December 2018 to the Activity Leader named in the proposal. Invitations to hearings will be based on the scoring/ranking from the remote evaluation. The hearings are conducted by an Evaluation Board for the Innovation Pillar. The Evaluation Board consists of an external expert group and will be chaired by a member of the HQ management team. The external experts for all Evaluation Boards will be appointed by the Supervisory Board in due time. The composition of the Evaluation Board will be published prior to the hearings.

Some practical information on the hearings:

- Hearings will be face-to-face and take place in Munich, to allow the experts to meet with the teams in-person.
- Hearings will take place from the 21-25 January 2019

A maximum of 100 points will be awarded from the hearings.

Evaluation criteria

The high-level evaluation criteria are given below:

Stage 1: Remote Evaluation

- Project Excellence and Strategic Fit (25%)
- Feasibility (25%)
- Implementation and adoption pathway (25%)
- Impact (25%)

Stage 2: Hearings

- Clarity of Innovation and Strategic fit (10%)
- Feasibility and project plan (25%)
- Implementation strategy/market strategy (25%)
- Strength and commitment of team and collaboration (20%)
- Impact (20%)

Detailed Evaluation Criteria for Stage 1: Innovation by Ideas

Project Excellence and Strategic Fit (25%)

- Quality of background science with reference to state of the art; quality of innovation.
- Uniqueness of approach.
- Project organisation and the balance of activities between CLCs and partners.
- Strategic fit.

Feasibility (25%)

- Feasibility of the project plan, deliverables and execution; feasibility of delivering on the project's objectives given the budget and distribution between WPs and partners.
- Resource fit (including infrastructure where relevant).
- 360-degree analysis: SWOT, risk analysis, competition and "USP" evaluation.
- Clarity of "business" case/business or implementation model.
- Mitigation plan – both regarding technical risks and market/implementation risks.

Implementation and adoption pathway (25%)

- Justification of end users/market targeted; for organisational innovations, justification of organisations targeted.
- Implementation plan/market introduction plan – timeline and resources required.
- Relevant hurdles (e.g. regulatory, CE certification) identified and strategies to overcome clearly presented.
- Evaluation of future landscape (4-5 years perspective) relevant for the innovation.

Impact (25%)

- Quantitative impact that can be expected at the end of the project (i.e. immediately following the end of EIT financing).
- Quantitative/Qualitative or indicative impact in the short/medium/long term AFTER the project comes to an end.
- Impact of EIT financing on overall project (i.e. through to introduction/implementation of innovation).
- Potential for scalability.
- Economic growth/sustainability and job creation.
- Efficiency of industry/healthcare provision.
- Efficiency/sustainability of healthcare systems.

Final Selection for the Business Plan

The criteria applied for the selection of proposals for EIT contribution will be:

- The score obtained by each proposal in the remote evaluations and in the hearings. The final score will be calculated based on 50% of the remote evaluation score + 50% of the hearing score.
- Overall portfolio balance and fit to strategic agenda.
- The overall budget remaining, and the approved distribution of the anticipated EIT budget over the three pillars.
- The maximum total EIT contribution for an EIT Health Associate Partner is €250 000/year. This will be enforced at the selection stage.

Feedback

All proposing teams will be informed about whether they have been selected to come to hearings by 10 December 2018. Proposals selected to be included in the business plan will be informed by 15 February 2019. All proposals will receive their scores and detailed evaluator feedback by 15 March 2019.

Available support

All guidance, documents and webinars to support partners in the application process will be available at [EIT Health Connections](#), under Guidance for Partners. Access to EIT Health Connections is granted using the same Plaza login + passcode combination.

Webinars on financial and administrative issues

The Project Management Office, in collaboration with the Finance Director and the Director of Innovation, recorded a series of information webinars to cover:

- Financial and administrative issues
- Project elements and best practices
- Practical guidance on the use of the Plaza tool

Webinars cover the use of Plaza in terms of general eligibility criteria, general guidance on proposal drafting and submission, and budgeting and cost eligibility.

Following topics were covered in webinars:

- The financial construction of a proposal | [Play recording](#) | [Download presentation](#)
- Building blocks of a proposal | [Play recording](#) (23 min) | [Download presentation](#)
- EIT Health KPIs | [Play recording](#) (29 min) | [Download presentation](#)

Training at the CLCs

The CLCs, in collaboration with the Project Management Office, may organize on-site training for partners on the same topics as above, with additional time set aside for detailed questions. Please refer to Annex 2: Contact persons detailing relevant contact information for the CLC in your region.

Grounds for appeal and appeal procedure

Partners may appeal the process for the selection of their own proposal(s).

Grounds for appeal are:

- Process errors
- Technical problems outside of the control of applicants (e.g. the technical failure of the electronic submission system).
- Obvious\ human / mechanical errors made by EIT Health staff.

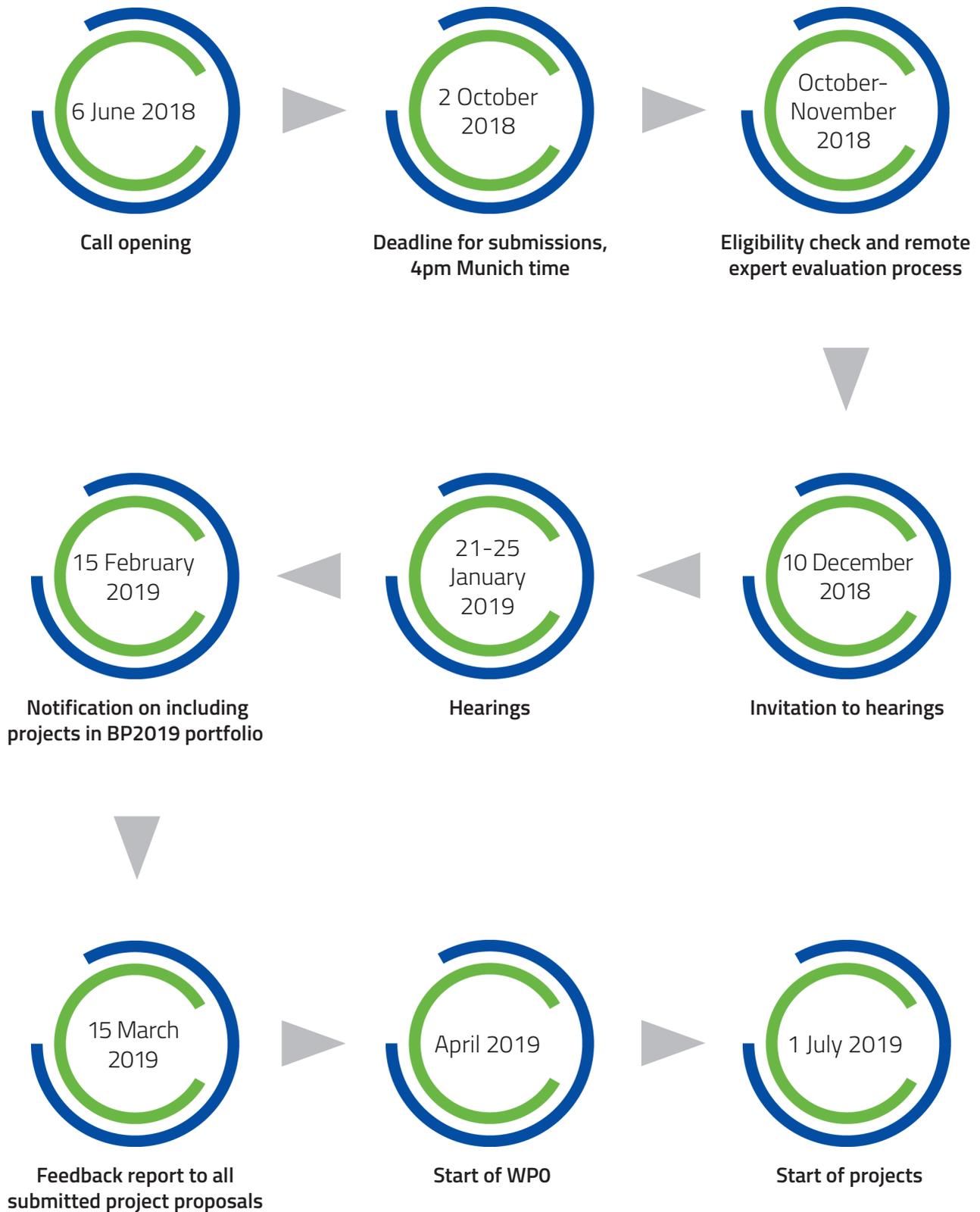
What is NOT grounds for appeal:

- Scores awarded in the course of the evaluation process.

Appeal process:

- Partners should send their appeals in writing to the Management Board (addressing the CEO) as soon as they identify an error but no later than 21 days after the error occurred.
- EIT Health staff at the HQ assesses the claim and deliver a first response with the CLC in copy.
- If there are grounds for appeal, the staff will attempt to remedy the consequences as best as possible (e.g. if a technical error of EIT Health prevented the submission of a proposal, a late submission may still be accepted as eligible).
- The Supervisory Board is notified about the matter, if:
 - the Partner does not accept that the Management Board rejects the appeal;
 - there are grounds for appeal but the problem cannot be remedied anymore without disrupting the process.

Annex 1: Timeline



Annex 2: Contact persons

Innovation Projects programme		
For questions related to the calls for proposals, including Focus Areas, content, and strategic fit.		
Jorge Fernández García, Director of Innovation		M: +49 151 2808 4395 E: jorge.fernandez@eithealth.eu
Séverine Lacharme-Reichert, Innovation Manager		M: +49 151 4635 1415 E: severine.lacharme@eithealth.eu
Regional Co-Location Centres		
For questions related to call proposal development, in particular support with matchmaking, identifying potential collaboration partners, and understanding the overall strategy of EIT Health		
UK-Ireland	Leslie Harris, Director UK-Ireland	M: +44 7340 405273 E: leslie.harris@eithealth.eu
Germany	Katharina Ladewig, Director Germany	M: + 49 1577 26 38 290 E: katharina.ladewig@eithealth.eu
Scandinavia	Henrik Cyrén, Director Scandinavia	M: +46 73 155 30 22 E: henrik.cyren@eithealth.eu
Belgium/Netherlands	Menno Kok, Director Belgium Netherlands	M: +31 6 414 922 11 E: menno.kok@eithealth.eu
Spain	Marco Pugliese, Director Spain	M: +34 658 204 075 E: marco.pugliese@eithealth.eu
InnoStars	Balazs Furjes, Director InnoStars	M: +36 20 424105 E: balazs.furjes@eithealth.eu
France	Jean-Marc Bourez, Director France	M: +33 6 87324947 E: jean-marc.bourez@eithealth.eu
Project Managers		
For questions related to the administrative elements of the call for proposals, including eligibility and help and support with the Plaza submission system.		
Kseniia Choni, Project Manager Innovation		M: +49 151 16326615 E: kseniia.choni@eithealth.eu
Matteo Barnabe, Project Manager Innovation		M: +49 151 1571 5871 E: matteo.barnabe@eithealth.eu
Finance Office		
For questions related to the financial elements of the call for proposals, especially on cost eligibility.		
Felix Hage, Director of Finance		M: +49 151 16326616 E: felix.hage@eithealth.eu
Justine Curtit, Finance Project Manager		M: +49 151-16369605 E: justine.curtit@eithealth.eu

Annex 3: Glossary of Terms

EIT Health Challenges and Objectives

1. Promote Healthy Living

- Lifestyle interventions
- Self-management of health

2. Support Active Ageing

- Workplace interventions
- Overcoming functional loss

3. Improve Healthcare Systems

- Improve healthcare systems
- Treat & manage chronic diseases

KAVA: KIC Added Value Activities

These are KIC activities that contribute to the integration of the “knowledge triangle” – of research, business creation and higher education – including the KICs’ establishment, and their administrative and coordination activities. These activities form part of the EIT’s overall objectives. KAVA may be financed up to 100% by the EIT, divided into direct and indirect costs.

Direct costs are directly linked to the implementation of KAVA and can therefore be attributed to it directly (including expenses and investments). They must not include any indirect costs.

Indirect costs are not directly linked to the implementation of KAVA and therefore cannot be attributed to it directly. Indirect costs are eligible if they are declared on the basis of a 25% flat rate of the eligible direct costs. Plaza automatically calculates the 25% flat rate. They exclude the following:

- Costs of subcontracting
- Cost for sub-granting, i.e. contributions made for example to External Project Partners (see below)
- Costs of in-kind contributions provided by third parties that are not used on the KIC LE or the KIC partner’s premises
- Costs of providing financial support to third parties
- Unit or lump-sum costs

KIC LE or KIC partners that receive an operating grant financed by the EU or Euratom budget cannot declare indirect costs for the period covered by the operating grant.

KAVA: KIC Complementary Activities (KCA)

These are KIC activities linked to at least one KAVA, and which are not financed by the EIT. KCA consists of direct and indirect costs, and it must:

- Have a clear, defined link with at least one KAVA; and be funded from other sources (not the EIT).
- Be incurred by a KIC Legal Entity/Partner.
- Be proportionate to the cost of KAVA and/or to the expected impact in furthering the mission of a KIC.
- Be incurred after the designation date of the KIC (for simplicity, as of 1 January 2015).

Co-funding

Co-funding refers to financing KAVA from financial contribution sources other than the EIT, such as KIC LE/partners' own resources, etc. Co-funding contributes a minimum 75% share of global expenditure. Unlike with KCA, co-funding may not come from other EU (non-EIT) funding sources.

External Project Partners, or 'sub-grantees'

External project partners who are included in the implementation of the action but are neither EIT Health Core nor Associate Partners, nor one of their linked/affiliated third parties, can receive a maximum EIT contribution of €50 000 per year.

Important: They also need to be entered on Plaza in order to be added to a proposal. Reach out to the Project Management Office for details.

Sub-Contracting

"Direct costs of subcontracting" is one of the cost categories in EIT Health. To be eligible, they must be foreseen at proposal stage, and mentioned in the Business Plan and its budget tables. However, later, only actually incurred costs will be reimbursed (principle of actual costs).

Outputs

The specific technology, product, service, method, design, concept, methodology, approach, etc., created by a KIC added-value activity. Outputs can also be intangible.

Output examples: New products or processes, transformation of existing products, innovative training modules, new qualifications, guidance material for new approaches and methodologies, TestBeds and experimental facilities, prototypes, patents, publications, etc.

Deliverables

Tangible documents, media or other artefacts encapsulating the quantifiable outputs (e.g. products or services) created by a KIC added-value activity for a specific objective and defined in the Business Plan for each specific activity. The deliverables are additional outputs produced at a given moment during the action. Core KIC documents (plans and reports that support KIC work) are part of the KIC planning and monitoring process and should not be listed as deliverables of KIC added-value activities.

Deliverable examples: Workshop proceedings, summaries, comparative studies, market analysis reports, handbook and training tools, workshops, conferences, etc.

KPIs

Key Performance Indicators: these are quantitative metrics that measure progress towards reaching a goal or objective over time. KPIs are typically associated with target values. EIT Health will measure its impacts by means of a KPI scoreboard. Follow these links for a complete list and definitions of [EIT Core](#) and [EIT Health Monitor KPIs](#).