3rd Health Programme
2014-2020

Grants for Actions co-financed with Member State authorities 2015

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Roma, 2 Luglio 2015
Consumers, Health and Food Executive Agency

Call 2015: Actions co-financed with MS authorities – Joint Actions

- JA have a clear EU added value and are co-financed either by competent authorities that are responsible for health in the MS or in the third countries participating in the Programme, or by public sector bodies and non-governmental bodies mandated by those competent authorities.

- Proposals should provide a genuine European dimension. Depending on the scope of the action, previous JA involved on average 25 partners.

- A multibeneficiary grant agreement.
3rd HP: New procedure for JA

- Direct grant procedure = > all participants have to be nominated first (no open call!)
- If an European umbrella organisation/NGO wants to participate in a JA, it must be designated by a MS competent authority through a transparent procedure.
- As in PHP2, international organisations (e.g. WHO, OECD, etc.) are not eligible to participate.
- Chafea will carry out spot checks concerning the transparency and legality of the designation process.
How much co-funding?

- EU contribution is 60% of the total eligible cost;
- In cases of exceptional utility, it is 80%.

Who can participate?

- Country eligibility – EU28 and EEA (Norway and Iceland) + Serbia
- Focus: MS authorities
- Public sector bodies and non-governmental bodies from the above countries can participate in JA, if they are mandated by competent authorities.
Exceptional utility criteria

1. At least 30 % of the budget of the proposed action is allocated to MS whose gross national income (GNI) per inhabitant is less than 90 % of the Union average. *This criterion intends to promote the participation from MS with a low GNI.*

2. Bodies from at least 14 participating countries participate in the action, out of which at least four are countries whose GNI per inhabitant is less than 90 % of the Union average. *This criterion promotes wide geographical coverage and the participation of MS authorities from countries with a low GNI.*
Joint Actions in the WP 2015
Budget 17,9 million for:

- JA-01-2015 *Health Technology Assessment cooperation* (€12 million EU co-funding)
- JA-02-2015 *Prevention of Frailty* (€3,5 mil.)
- JA-03-2015 *Market surveillance of medical devices* (€ 850.000)
- JA-04-2015 *Rare cancers* (€1,5 million)
JOINT ACTION – thematic priority 1

TITLE

Health Technology Assessment cooperation

OBJECTIVE

The cooperation is expected to result in improving use, quality and efficiency of HTA work at national and EU level by: (i) improving joint assessment of clinical evidence and increasing production of HTA joint work, including reports produced at EU level for reuse at national and regional level; (ii) increasing the capacity and know-how in the HTA Bodies; (iii) improving shared understanding of qualitative and methodological issues of HTA; (iv) increasing the interaction between HTA and regulatory requirements; and (v) defining a sustainable model after EU funding under the Health Programme ends

AMOUNT: 12 000 000 EUR
JOINT ACTION – thematic priority 2

TITLE

Prevention of Frailty

OBJECTIVE

The objective of this action is the identification for pre-frail conditions, such as malnutrition and lack of physical activity, and targeting frail older people for appropriate interventions, including promoting better health and reduction of avoidable hospitalizations and better long-term care. This action will contribute to the reduction of disability and dependence and at large will prevent growing burden of chronic diseases in terms of health care demands. It will improve our understanding of long-term care medical conditions affecting older patients, including chronic diseases, and lead to development of improved strategies for diagnosis, care, research, and medical education for frailty, disability and multimorbidity.

AMOUNT: 3 500 000 EUR
JOINT ACTION – thematic priority 3

TITLE

Market surveillance of medical devices

OBJECTIVE

This action to be taken forward by national bodies mandated in this field will promote cooperation between Member States allowing development of best practice, training and knowledge and resource sharing concerning the implementation of the medical device legislation, in particular in relation to Member States tasks such as the market surveillance of devices.

AMOUNT: 850 000 EUR
JOINT ACTION – thematic priority 4

TITLE

Rare cancers

OBJECTIVE

This action will provide a platform for competent national authorities, involving specialised institutions, scientific and professionals bodies and patient’s organisations in Member States with the mission to produce recommendations on policy developments in order to: (i) recommend a consensual and operational definition on rare cancers analysing the impact of this in aspects related to registers, orphan medicinal products policy, etc.; (ii) spread knowledge and good practice guidelines on rare cancers with a view to ensure timely and appropriate diagnoses and care and to reflect this in the National Plans for cancer and rare diseases; (iii) address obstacles to patients’ access to appropriate therapies; (iv) involve the disease-oriented communities (of both researchers and patients) in the development, approval and assessment of new therapies; (v) development of a European reference network concept for the treatment of patients with rare cancers across the EU; and (vi) provide tools and establish frameworks that are appropriate for supporting a joint patient-physician decision making process in conditions of high uncertainty, which often occur in the treatment of rare cancers.

AMOUNT: 1 500 000 EUR
The Role of the MS

• MS to nominate participants prior to Chafea invitation to prepare the proposal

Participants

• Competent authorities (national or regional level) or other bodies (public sector body/NGO: nominated via a transparent procedure, according to relevant national legislation) to participate in one or more of the listed JA
Competent Authorities

If more than 1 CA exists in a given public health field at MS/regional level, several competent authorities can be nominated:

Nominations must be submitted separately for each CA

+ "explanation why two or more competent authorities have been nominated"
• Prevedere in prima ipotesi la partecipazione diretta alle Azioni (in via esclusiva o concorrente) da parte del Ministero
• In difetto, procedere alla identificazione degli Enti esterni esclusivamente nell’ambito della rete di collaborazioni istituzionali del Ministero (ISS, IRCCS, IZS, Regioni)
• Selezionare Enti che, vuoi per disposizione diretta di leggi, per abituale collaborazione o supporto alle attività tecniche ministeriali, ovvero avendo svolto attività di leadership nazionale di progetti italiani ed europei, si possano considerare, nei singoli settori, pienamente rappresentativi del Paese sia in termini di requisiti tecnici che di ruolo strategico
• Per le Regioni, procedere per consenso/designazione Commissione Salute
Body other than a competent authority to participate:

- The designation must be done through a transparent procedure and according to its relevant national legislation.

- Article 190(1)(d) of the Rules of Application of the Financial Regulation, the Member State/EEA is fully responsible to put in place the designation procedure and ensure that the requirements of transparency and legality are respected.

- Third Health Programme (Articles 7 and 8) public sector bodies, in particular research and health institutions, universities and higher education establishments as well as non-governmental bodies can be mandated to participate in the joint action on behalf of the Member State/EEA country.
Letter to the Permanent Representatives

Luxembourg,
sante.ddg1.c.1IK/Lo(2015)2610899

NOTE FOR THE ATTENTION OF PERMANENT REPRESENTATION IN THE EU

Your Excellency,

Subject: Health Programme in 2015 – Implementation of actions co-financed with Member State health authorities (commonly referred to as ‘joint actions’)

I am writing to you regarding the joint actions planned for 2015 under the third EU Health Programme 2014-2020. The work programme was adopted on 2 June 2015. It foresees approximately €17.9 million for the following actions co-financed with Member State authorities:

- JA-01-2015 Health Technology Assessment cooperation (€12 million EU co-funding)
- JA-02-2015 Prevention of Frailty (€3.5 million EU co-funding)
- JA-03-2015 Market surveillance of medical devices (€ 850.000 EU co-funding)
- JA-04-2015 Rare cancer (€1.5 million EU co-funding)
OFFICIAL NOTIFICATION

of participation as a partner in a Joint Action

I, Mr/Ms [Name (Title/Function)]

[Signature]

are duly authorised to sign this notification on behalf of the [Name of the ministry/ governmental organization],

officially notify the [Name of the ministry/governmental organization] that the [Organization official name and (acronym)]

is legally represented by [Name of legal representative]

is an eligible

[ ] Competent Authority

[ ] Another body

to participate on behalf of [Country/Regional entity]

and under its responsibility in the following joint action to be funded under the Health Programme 2015:

[ ] JA-01-2015: Health Technology Assessment cooperation

[ ] JA-02-2015: Prevention of frailty

[ ] JA-03-2015: Market surveillance of medical devices

[ ] JA-04-2015: Rare cancer

Date and Place

[Signature]

Name and Signature
Deadline for NOMINATION of competent authority

*****  9 October 2015  *****
Next steps

1. Nomination of participants
   Deadline: 9 October

2. Chafea sends the Invitation letter to prepare the grant agreement for the designated competent authorities

3. Information session on Joint Actions, by late October

4. ADVANCED DRAFT PROPOSALS

5. Remote assessment of JA

6. Discussion among JA coordinators and evaluators

7. ADAPTATION of the JA proposal in SYGMA

AWARD DECISION
NEW in 2014: Electronic submission! upon invitation!

- Electronic Submission System used for H2020 and other programmes
- No paper / online submission!
- Information will be on Chafea, SANCO web and the Participant Portal
- Evaluation & grant agreement: online
Evaluation = Quality assurance

• Not subject to competition!

• Direct grant procedure!

• Subject to a negotiation process!
Special Meeting 2015 for JA nominated entities

• End of October 2015

• Only for nominated entities
Thank you for your attention!

- European Commission
  Consumers, Health and Food Executive Agency
  Health Unit

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