

Orientations for Work Programme 2012 (6th call)

Health Directorate
DG Research & Innovation
European Commission

Health Theme 2012 orientation paper - May 2011



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Main points

The 7th Framework programme (FP7)

- Introduction
- Basic principles
- 2012 Work programme
 - Key features / priorities
- Considerations for SMEs
- Information sources
- Annexes:
 - list of topics
 - Health research in other themes



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EU research policy

Why ?

- **to improve quality of life and**
- **to improve competitiveness of Europe**
through collaboration

How ?

- **by pooling resources** (funds for Framework Programme)
- **by coordinating national research programmes**



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Collaborative research in the Health theme

Main policy drivers:

- **Improving health** of European citizens
- **Increasing competitiveness** of European health-related industries and businesses
- **Addressing global health issues,**
including emerging epidemics

Budget:

- **€6.1 billion over 7 years** (2007-2013)



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Collaborative research across borders and other barriers

- **between countries:**

→ At least 3 partners from the 27 EU Member States:

Austria, Belgium, Bulgaria, Czech Rep., Cyprus, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, the United Kingdom.

→ or the 13 Associated Countries:

Albania, Bosnia-Herzegovina, Croatia, FYROM, Iceland, Israel, Liechtenstein, Montenegro, Norway, Serbia, Switzerland, Turkey and the Faroe Islands.

→ In addition, researchers from anywhere in the world can participate:

e.g.: Australia, Brazil, Canada, China, Egypt, India, Japan, Korea, Russia, South-Africa, USA, ...

and in many cases, can be funded.



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Basic principles for calls & evaluation

Peer review

Equality of treatment

Transparency

Aim: to fund the best R&D proposals



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Submission & evaluation

Basic principles:

- **Annual calls for proposals** (in two stages)
- **Evaluation by panels of independent experts** overseen by Independent Observers
- **3 criteria:**
 - Science & Technology excellence
 - Implementation & Management
 - Potential Impact
- **Feedback:** Evaluation Summary Reports (ESRs)

Experts wanted!

Based on draft Orientation paper – please refer to final published Work Programme 2012



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Drivers for FP7 from Innovation Union policy

- **Innovation-driven approach**
 - **Focus on SMEs** through genuine academia-industry collaborations
- **Challenge-driven approach**, focussed on key challenges
- **Support implementation of European Innovation Partnerships**, such as “**Active and healthy ageing**”
- Stronger **socio-economic impact** - innovation dimension
 - with more attention on **exploitation phase**
- **Balance** upstream research and activities closer to market in order to achieve short and medium-term impact



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Features of FP7 Health in 2012 & 2013

- fewer, more prominent priorities
i.e. more focus on fewer areas
- fewer, broader topics, two-stage submission-evaluation
- greater emphasis on innovation
 - especially through SME-targeted topics
 - and continued support of clinical trials
- emphasis on flexibility for consortium, duration & budget
- international cooperation with more strategic focus



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Trends in Health Work programmes

	2007	2008	2009	2010	2011	2012
Budget for calls	641	577	593	628	657	650*
Topics	86	87	71	72	51	37*
Projects	153	172	108	131	125*	127**
Budget / topic	7.5m	6.6m	8.4m	8.7m	13.1m	17.5m*
Budget /project	4.2m	3.35m	5.5m	4.8m	5.3m*	5.1m**

Average size of consortia remains quite high: ~12m

* tbc

** est.

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Features of FP7 Health in 2012

- Indicative budget for 2012 calls: €650m (tbc)
- 2 "Health" calls:
 - FP7-HEALTH-2012-INNOVATION-1 (32 topics, €540m)
 - FP7-HEALTH-2012-INNOVATION-2 (3 topics, €108m)
 - FP7-2012-ERA-NET call (1 topic, €2m)
- ALL topics will have two-stage submission
- MOST topics (28/36) can have several projects funded (exceptions: 6 CSA, 1 IP, PLC with Australia)
- 15 SME-targeted topics (including special call)
plus 2 Industry-targeted topics (including SMEs)
- A special action for the preparation of EDCTP-2

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Priorities of FP7 Health in 2012

Main priorities:

- **Ageing** will be the 1st priority in 2012 – budget ~€220m (incl. med. tech, biomarkers, clinical trials, co-morbidity, health services)
- **Medical technologies** – €160m
- **Rare diseases** – ~€100m
- **SME targeted actions:**
 - 3 topics: ≥50% EC contrib. to SMEs: €108m
 - 6 topics: ≥30% EC contrib. to SMEs: €180m
 - 6 topics: ≥15% EC contrib. to SMEs: €72mTotal: 15 topics (out of 36 topics) – €360m (~55%)

NB: total budget: €650m (some overlap between priorities & budgets)

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New initiative “SMEs for Innovation” call (1)

Pilot initiative to stimulate innovation via enhanced SME participation

3 broad topics with a focus on medical technologies:

- 1.4-2 Medical technology for transplantation and bio-artificial organs
- 2.3.0-1 Diagnostics for infectious diseases (in humans)
- 2.4.5-1 Technological approaches to combating sensory impairment

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New initiative “SMEs for Innovation” call (2)

Pilot initiative to stimulate innovation via enhanced SME participation

Special conditions:

- 3-5 partners, min. 50% of req. EU funding for SME(s)
- Restricted to SMEs from EU and Associated Countries
- max. 3 years
- The SME must have a leading role in the project
- 2-stage submission & evaluation
- Simplified application process: short project description
- Accelerated procedures for submission, evaluation & negotiation
i.e.: earlier deadlines for 1st and 2nd stage submission.

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- Any research organisation can participate, including larger companies, as well as service-providers.
- However, the funding levels are different:
 - For SMEs: 75% of research costs
 - (+ 100% management & training & eligible IP costs)
 - For larger companies: 50% of research costs
 - (+ 100% management & training & eligible IP costs)
- What is an SME ? (for the EC: 1 + 2 + 3)
 1. less than 250 employees
 2. annual turnover \leq €50 million OR balance sheet total \leq €43 million
 3. must be autonomous*

* check SME status: <http://ec.europa.eu/research/sme-techweb>



Aim:

- Translating research into clinical practice
- Different types of clinical trials,
e.g. investigator-driven, observational,

Scope:

- specified in each topic, phases covered will depend on budget
- expected to be mostly phase II, but for details see specific topics and special instructions for clinical trials on page 9 of orientation paper.



Funding schemes for FP7 Health in 2012

Funding scheme	Ceiling for EU contribution	Number of topics	% budget
Large-scale integrating project (CP-IP)	€12m	4	~ 16.5%
Small or medium scale focused project (CP-FP)	€3m / €6m	23	~ 78%
Coordinating or supporting action (CSA)	various	9	~ 2.5%
Other actions*	various	–	~ 2%
Total		36	100%

* including HFSP0, EDCTP, study on emerging areas for research/innovation, study on impact of ethics review on health research, production of videos.

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Key messages for potentials applicants

Opportunity & Flexibility

Opportunity:

- for ambitious, well-funded R&D projects
- for genuine collaborations (esp. academia – industry), across borders

Flexibility at submission stage:

- Broader topics: more “bottom-up”
 - The size of consortium (beyond min. 3)*
 - The EU contribution requested**
 - The duration of the project***
- } is for applicants to decide

(* with the exception of 3-5 max. for the “SMEs for innovation” call,
** within ceiling, ***some exceptions)



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Is applying for EC funding a waste of time?

It depends...

applicants need to be aware of the conditions.

- **Main condition:** it must be **collaborative research** (min. 3), but this obligation should be seen as **an opportunity**.
- **Time to start:** the process is not quick.
- **No strings attached:** with grants, you own the IPR.
- **Support structures:** the National Contact Points (NCPs)
the "FIT-for-Health" network
- **Consultants** can help... but **you** must stay in charge.



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Is applying for EC funding a waste of time?

It depends...

applicants need to examine cost/benefit ratio.

- Apply only **if it fits your strategy** AND if you play a major role in the project and get significant funding. Don't get dragged into projects/consortia.
- Do not view EC grants only as a source of cash, but as a means to **access know-how & resources** from partners.
- Managing the project yourself is a major task – it needs to be properly resourced – but you have **control**.



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Challenges for SMEs

- Confirm SME status => size, turnover, autonomy
- Find partners => SMEs-go-Health / Fit-for-Health www.fitforhealth.eu
- Matching funds => foresee & demonstrate
- Financial viability => check may be needed
- Consortium agreement => address this early



The screenshot shows the CORDIS website interface. At the top, there is a navigation bar with 'Home', 'News', 'Funding', 'Results', 'Themes', 'Go local', 'Look it up', 'Abstract', and 'Help'. Below this is a search bar and a 'Quick Links' dropdown menu. The main content area is titled 'Health Research' and features a large image of laboratory flasks with a heartbeat line overlay. To the left is a sidebar with a 'Home' menu and 'Previous Programmes' including 'imi' and 'Life sciences, genetics and...'. The main content area includes a 'Health Research homepage' section with a 'Highlights' list:

- **New: FP7 Health - 2012 orientation paper** [here](#) [img]
- The 2012 calls are expected to be published in July 2011.
- The European and Developing Countries Clinical Trials Partnership (EDCTP) has launched new calls for proposals (deadline: 14 June 2011).
- Publication on "International Cooperation in EU-funded Health Research" [img]
- **News alert:** www.healthcompetence.eu a new interactive platform on European health research

Below the highlights is a section titled 'Health is our priority' with the text: 'The objective of health research under FP7 is to improve the health of European citizens...'. On the right side, there is a 'Latest News' section with a headline: 'Scientists discover three human gut types: what's yours?' and a brief description: 'In the same way humans can be divided into blood groups, EU-funded scientists have now discovered that we can categorise ourselves by gut type too. [read more](#) [Date: 2011-04-26]'. Below this is a 'more news' link and an 'Events' section with two items: 'Register now European Perspectives in Personalised Medicine Conference, 12 - 13 May 2011, Brussels. Find more information [here](#).' and 'Register now FP7 Health - Open Information Day & Partnering event, 9 June 2011, Brussels. Find more information [here](#).'

The Health Theme Three main activities ("pillars")



Orientations for 2012 WP

Activity 1 Biotechnology, generic tools and medical technologies for human health

YOU MUST REFER TO THE FINAL PUBLISHED CALL FOR PROPOSALS
for confirmation of deadlines, conditions & final topic descriptions.

Based on draft Orientation paper – please refer to final published Work Programme 2012



Activity 1 Biotech, tools & technologies

1.2 - Detection, diagnosis and monitoring

1.2-1 Development of technologies with a view to patient group stratification for personalised medicine applications.

Funding scheme: CP-FP, SME-topic (min. 30% for SMEs)
max. €6m/project. >10 projects to be funded

Based on draft Orientation paper – please refer to final published Work Programme 2012



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Activity 1 Biotech, tools & technologies

1.4 - Innovative therapeutic approaches & interventions

1.4-1 Innovative approaches to solid organ transplantation.

Funding scheme: CP-FP, SME-topic (min. 15% for SMEs)
max. €6m/project, ~3 projects to be funded

1.4-2 Medical technology for transplantation and bioartificial organs. [**"SMEs for Innovation" call**]

Funding scheme: CP-FP, SME-topic (min. 50% for SMEs)
3-5 partners, max. €6m/project. 5-7 projects to be funded

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Activity 1

Biotech, tools & technologies

1.4 - Innovative therapeutic approaches & interventions

1.4-3 Innovative strategies for translation of stem cell based therapies in regenerative medicine (EU-Australia cooperation)

Funding scheme: CP-FP, SME-topic (min. 15% for SMEs)
max €6m/project, max 1 project to be funded

1.4-4 Targeted nucleic acid delivery as an innovative therapeutic or prophylactic approach.

Funding scheme: CP-FP, Industry-topic (min. 30% for industry, including SMEs); max €6m/project, ~3 projects to be funded

Based on draft Orientation paper – please refer to final published Work Programme 2012



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Orientations for 2012 WP

Activity 2 Translating research for human health

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2.1.1 – Large-scale data gathering

2.1.1.1-A Support for international rare diseases research.

Funding scheme: SA, max. €2m/project, max. 1 project

2.1.1.1-B Clinical utility of -omics for better diagnosis of rare diseases.

Funding scheme: CP-IP, SME-topic (min. 30% for SMEs); max. €12m/project, max. 2 projects

2.1.1.1-C Databases, biobanks rare diseases research.

Funding scheme: CP-IP, max. €12m/project, max. 1 project

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2.1.1 – Large-scale data gathering

2.1.1-2 Validation of -omics based biomarkers for diseases affecting the elderly.

Funding scheme: CP-IP, SME-topic (min. 30% for SMEs)
max. €12m/project, up to ~2-3 projects

2.1.1-3 Statistical methods for collection and analysis of -omics data.

Funding scheme: CP-FP, SME-topic (min. 15% for SMEs)
max. €6m/project, ~1 project to be funded

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2.1.2 – Systems Biology

2.1.2-1 Systems medicine: SME-driven research applying systems biology approaches to address medical & clinical needs

Funding scheme: CP-FP, SME-topic (min. 30% for SMEs)
max. €3m/project, up to 6-8 projects

2.1.2-2 Systems medicine: applying systems biology approaches for understanding multifactorial human diseases and their co-morbidities.

Funding scheme: IP, max. €12m/project, up to ~3-4 projects

2.1.2-3 Preparing for the future research and innovation activities in systems medicine.

Funding scheme: CA, max. €3m/project, max. 1 project funded

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2.2.2 – Human development and ageing

2.2.2-1 Integrative systems biology and comparative genomics for studying human ageing and/or most common age-related diseases.

Funding scheme: CP-FP, SME-topic (min. 30% for SMEs)
max. €6m/project. Up to ~3 projects

2.2.2-2 Investigator-driven clinical trials for optimisation of management of elderly patients with multiple diseases.

Funding scheme: CP-FP, SME-topic (min. 15% for SMEs)
max. €6m/project. Up to ~3 projects

Based on draft Orientation paper – please refer to final published Work Programme 2012



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2.3 – Translational research in **major infectious diseases**

Covers major HIV/AIDS, malaria, tuberculosis, hepatitis, neglected infectious diseases, emerging epidemics, fungal pathogens, as well as anti-microbial drug resistance.

2.3.0-1 Diagnostics for infectious diseases [“SMEs for Innovation” call]

Funding scheme: CP-FP, SME-topic (min. 50% for SMEs)
3-5 partners, max. €6m/project. Up to ~6 projects

2.3.0-2 ERA-NET on infectious diseases [ERA-NET call]

Funding scheme: CA, max. €2m/project, max. 1 project

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2.3.2 – HIV/AIDS, malaria and tuberculosis

2.3.2-1 Co-infection of HIV/AIDS, malaria, tuberculosis and/or hepatitis.

Funding scheme: CP-FP, max. €6m/project, up to 2-3 projects

2.3.2-2 Co-morbidity between infectious diseases and non-communicable diseases.

Funding scheme: CP-FP, max. €6m/project, up to 2-3 projects

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2.3.2 – HIV/AIDS, malaria and tuberculosis

2.3.2-3 Prevention and treatment for HIV/AIDS, malaria and tuberculosis.

Small consortia encouraged (3-5 partners), duration 1-3 years.

Funding scheme: CP-FP, SME-topic (min. 15% for SMEs)
max. €6m/project, up to 2-3 projects

2.3.2-4 Low-cost interventions for disease control in resource poor settings.

Funding scheme: CP-FP, max. €3m/project, up to 3-4 projects

Action to support preparation of 2nd phase of EDCTP

Funding scheme: CSA, max. €10m. (named beneficiary)

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2.4.3 – Diabetes and obesity

2.4.3-1 Innovative approaches to manage diabetes.

Funding scheme: CP-FP, SME-topic (min. 30% for SMEs)
max. €6m/project. Up to 3-4 projects

2.4.3-2 Investigator-driven clinical trials for type 1 diabetes research.

Funding scheme: CP-FP, max. €6m/project, up to 2-3 projects

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2.4.4 – Rare diseases

2.4.4-1 Preclinical and/or clinical development of substances with a clear potential as orphan drugs.

Funding scheme: CP-FP, Industry-topic (min. 30% for industry, including SMEs); max €6m/project, up to ~10 projects

2.4.4-2 Observational trials in rare diseases.

Funding scheme: CP-FP, max. €3m/project, ~3-4 projects

2.4.4-3 Best practice and knowledge sharing in the clinical management of rare diseases.

Funding scheme: CA, max. €2m/project, max. 1 project

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2.4.5 – Chronic diseases

2.4.5-1 Technological approaches to combating sensory impairments. [**“SMEs for Innovation” call**]

Funding scheme: CP-FP, SME-topic (min. 50% for SMEs)
3-5 partners, max. €6m/project. Up to ~5-6 projects

2.4.5-2 Biomarkers and diagnostics for chronic inflammatory diseases of the joints and/or digestive system.

Funding scheme: CP-FP, SME-topic (min. 15% for SME)
max. €6m/project. Up to ~2 projects

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Orientations for 2012 WP

Activity 3 Optimising the delivery of healthcare

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Optimising delivery of healthcare

3.2 – Quality, efficiency and solidarity of healthcare systems

3.2-1 Improving the organisation of health service delivery.

Funding scheme: CP-FP, max. €3m/project, up to ~7-8 projects

3.2-2 New methodologies for health technology assessment

Funding scheme: CP-FP, max. €3m/project, up to ~2-3 projects

3.2-3 Social innovation for ageing research

Funding scheme: CP-FP, max. €3m/project, up to ~1-2 projects

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3.4 – International public health & health systems

3.4-1 Research on Health systems and services in low/middle income countries.

- Projects should generally be 5 years in duration.
- Min. 6 different ICPC partners & 2 EU/AC partners from different countries.

Funding scheme: CP-FP (SICA), max. €6m/project, ~3 projects

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Orientations for 2012 WP

Activity 4 Other actions across the theme

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Activity 4

Actions across the Health theme

4.1 – CSAs across the theme

4.1-1 Network to encourage knowledge transfer activity in FP-funded health research (especially in academic and governmental organisations).

Funding scheme: CA, max. €2m/project, up to 1 project.

4.1-2 Training actions linked to intellectual property rights management and knowledge transfer.

Funding scheme: CA, max. €2m/project, up to 1 project

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Activity 4

Actions across the Health theme

4.1 – CSAs across the theme

4.1-3 Support for presidency events. Organisation of supporting actions and events related to the EU Presidency.

Funding scheme: SA, max. €0.1m/project, up to 2-3 projects

4.1-4 Communicating the benefits of European research to the general public.

Funding scheme: CA, max. €1m/project, up to 1-2 projects

4.1-5 Preparing the future for health research and innovation

Funding scheme: CSA, max. €0.5m/project, up to 1-2 projects

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Opportunities in other Themes

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Opportunities in other Themes

KBBE: complementary to Theme Health

- KBBE.2012.2.1-01: Role of health-related symbols and claims in consumer behaviour
- KBBE.2012.2.2-01: Beneficial effects of bioactive compounds in humans
- KBBE.2012.2.2-02: Study on the needs for food and health research infrastructures
- KBBE.2012.2.2-03: Impact of lifestyle on well-being and diet-related disease

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Opportunities in other Themes

NMP: complementary to Theme Health

- NMP.2012.1.2-2: Development and phase-I clinical trials of novel therapeutic nanotechnology-enabled systems for the diagnosis and treatment of atherosclerosis
- NMP.2012.1.2-3: ERA-NET on nanomedicine
- NMP.2012.1.3-1: Systematic investigations of the mechanisms and effects of engineered nanomaterial interactions with living systems and/or the environment
- NMP.2012.1.3-2: Modelling toxicity behaviour of engineered nanoparticles
- NMP.2012.2.2-1: Biomaterials for improved performance of medical implants

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Opportunities in other Themes

SSH: complementary to Theme Health

- ERA-net Coordinating research economic agendas
- Making longevity an asset for economic and social development
- A European childhood and youth survey
- Forward looking tools and methods for answering major societal challenges

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Opportunities in other Themes

ICT: complementary to Theme Health

ICT-2011.5.2 Virtual Physiological Human (call 9)

- a) Patient-specific predictive computer-based models and simulation
- b) Development of ICT tools, services and infrastructure to obtain more elaborate and reusable multi-scale model
- d) Early demonstrators and proof of concept of digital representations of health status

All other areas of challenge 5: 'ICT for Health, Ageing Well, Inclusion and Governance' are closed in 2012

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Thank you

Contacts & Information:

FP7 Health web site: <http://cordis.europa.eu/fp7/health>

Open info day 9 June 2011:

http://ec.europa.eu/research/health/events-05_en.html

Support: http://cordis.europa.eu/fp7/health/support_en.html

Registration as an **Expert:** <https://cordis.europa.eu/emmp7/>

FitForHealth: www.fitforhealth.eu

EC projects database: www.healthcompetence.eu

National Contact Points (NCP):

http://cordis.europa.eu/fp7/health/ncp_en.html



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