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**Mirror Regions Call for SMEs**

**Annex 2: Proposal Template**

**Version no.1.0 (May 2024)**

**General details**

|  |  |
| --- | --- |
| **GA number** | GA 101094676 |
| **Project Acronym** | HealthChain |
| **Project Title** | Boosting value chains in Health at regional and EU level |
| **Project Coordinator** | TICBIOMED (TBM)  Myriam Martín  [myriam.martin@ticbiomed.net](mailto:myriam.martin@ticbiomed.net)  Elena López  [Elena.lopez@ticbiomed.net](mailto:Elena.lopez@ticbiomed.net) |
| **Project Duration** | January 2023. – December 2025. (36 months) |

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| **Disclaimer** |

HealthChain project is funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or European Innovation Council and SMEs Executive Agency (EISMEA). Neither the European Union nor the granting authority can be held responsible for them.

**History of changes**

|  |  |  |
| --- | --- | --- |
| **Ver.** | **Date** | **Changes** |
| 1.0 | 28/05/2024 | First version |
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# Instructions

* Carefully read the Guidelines for Applicants before preparing your proposal, especially considering the Evaluation Criteria.
* You must follow the structure of the present template to prepare your proposal.
* Do not modify any section, the template has been designed to ensure that the important aspects of your proposal are presented in a way that will enable the evaluators to make an effective assessment against the evaluation criteria.
* The proposal is a self-contained document. Evaluators will be instructed to ignore hyperlinks to information that is specifically designed to expand the proposal, thus circumventing the sections’ limit.
* Remember that it is your responsibility to verify that you comply with the sections limit. Evaluators will be instructed to disregard any excess pages of any section.
* Images and graphs are not included in the word limits.
* The required font is Montserrat, size 10. Page margins must be as in this document.
* The final version of this document must be saved and uploaded to the application form in PDF format. You can delete this instructions page.

# SME description

|  |  |
| --- | --- |
| **GENERAL INFORMATION** | |
| **NAME OF THE SME** | To be completed |
| **DESCRIPTION OF THE SME** | Describe your company. **Max. 250 words** |
| **NATIONAL VAT NUMBER[[1]](#footnote-2)** | To be completed |
| **LEGAL ADDRESS** | To be completed. Indicate Street, Number, Postal Code, City, Region or County (if applicable) and Country. |
| **REGION WHERE THE SME IS LEGALLY ESTABLISHED** | Indicate in which region your organization is based, from the options below (HealthChain regions):   * ES62 – Murcia Region (Spain) * ES51 - Catalonia (Spain) * PT19 - Centro (Portugal) * PT11 - North (Portugal) * Any region in Slovenia * Any region in Croatia * NL2 - East Netherlands * NL3 - West Netherlands * EL63 - Western Greece * ES22 - Navarra (Spain) * ES41 - Castilla y León (Spain) * BE2 - Flanders (Belgium) * RO11 – Northwest Romania |
| **SUBSIDIARIES COUNTRIES** | To be completed |
| **YEAR OF FOUNDATION** | To be completed |
| **NUMBER OF EMPLOYEES** | To be completed |
| **TURNOVER OF THE LAST FISCAL YEAR ENDED** | To be completed |
| **WEBSITE URL** | To be completed |
| **ARE YOU AN SME?[[2]](#footnote-3)** | To be completed |
| **SOLUTION TRL LEVEL[[3]](#footnote-4)** | To be completed |

|  |  |
| --- | --- |
| **CONTACT DETAILS OF THE LEGAL REPRESENTATIVE** | |
| **FIRST NAME** | To be completed |
| **LAST NAME** | To be completed |
| **EMAIL** | To be completed |
| **PHONE NUMBER** | Telephone including country code e.g. 0034 for Spain. |

|  |  |
| --- | --- |
| **CONTACT DETAILS OF THE COORDINATING PERSON**  **(IF DIFFERENT FROM THE LEGAL REPR.)** | |
| **FIRST NAME** | To be completed |
| **LAST NAME** | To be completed |
| **EMAIL** | To be completed |
| **PHONE NUMBER** | Telephone including country code e.g. 0034 for Spain. |

# Solution description & relevance

|  |
| --- |
| 1. **CHALLENGE TO ADDRESS** |
| Select the acronym of the challenge you aim to address. |
| 1. OPER-ART (Navarra) 2. TRIME (Western Greece) 3. iMOTION (Castilla y León) 4. MoveBuddy (Flanders) 5. AITRIS (Northwest Romania) |
| 1. **SOLUTION DESCRIPTION** |
| Describe your objectives for the co-creation.  Describe your solution’s main characteristics and components. Add graphs or mock-ups to illustrate. Indicate the current stage of development of each key component |
| **Maximum 400 words excluding graphs and images.** |
| 1. **ALIGNMENT WITH CHALLENGE** |
| Explain how your solution is aligned with the targeted challenge, notably its compulsory and desirable requirements. Describe how you plan to address compliance with the pilot set-up conditions (e.g. ethical, legal, technological). Describe any additional value you can deliver related to the challenge. |
| **Maximum 800 words excluding graphs and images.** |
| 1. **RELEVANCE AND EFFECTIVENESS OF THE INNOVATION** |
| Describe the innovation potential of your proposal. Explain what makes your solution excellent and main differentiation factors from your competitors or the current state of the art. |
| **Maximum 400 words excluding graphs and images.** |

# Quality

|  |
| --- |
| 1. **METHODOLOGY** |
| Describe the methodology you envision for implementing the project. Particularly, describe your expectations in the co-creation phase with regards to the interactions with professionals and users: indicate the number and purpose of the interactions. Describe your technological needs. |
| **Maximum 400 words excluding graphs and images.** |
| 1. **TIMELINE** |
| The pilot co-creation and implementation lasts 12 months, and the selected SME can get up to €50.000 for this activity. Please provide an initial timeline with a breakdown of the work into tasks, subtasks and milestones. It will further be discussed with the healthcare organisation and SME if you are awarded. |
| **Maximum 400 words excluding graphs and images.** |
| 1. **TEAM DESCRIPTION** |
| For each project participant indicate gender, role and provide a short biography relevant to the project execution and their experience related to the challenge to be solved, co-creation in digital health or in any other activities that may be relevant for the project, identifying those that are going to be directly involved in the implementation. Indicate who will be the main contact point. HealthChain reserves the right to require the implication of the team described here. |
| **Maximum 400 words excluding graphs and images.** |

# Cost-effectiveness

|  |
| --- |
| 1. **BUDGET** |
| Each selected SME can get up to €50.000 as a lump sum, i.e. the HealthChain Mirror Region will pay you based on completion of work and deliverables and will not request costs justification. Still, we are interested in knowing whether your proposal is in line with the budget proposed. Please describe:   * The costs you plan to incur for the project (personnel, travel and subsistence, other direct costs…). * Explain whether the costs will be covered by HealthChain financial support or if you plan to leverage other sources of funding (e.g. company own resources). * Describe how you will ensure that you have appropriate funds to implement your proposal.. |
| **Maximum 400 words excluding graphs and images.** |
| 1. **VALUE FOR MONEY** |
| Describe how your proposal provides value for money for the HealthChain partners. |
| **Maximum 400 words excluding graphs and images.** |

# Impact

|  |
| --- |
| 1. **EXPECTED IMPACT INCLUDING KPIS** |
| Describe the expected impact of your solution including Key Performance Indicators (KPIs). KPIs should be clear, measurable, realistic and achievable within the duration of the project. State also by what means each KPI will be measured. These KPIs will be scrutinized at the final review of the HealthChain co-creation phase to assess project success. |
| **Maximum 400 words excluding graphs and images.** |
| 1. **EXPLOITATION AMBITIONS** |
| Describe your commitment to exploit the solution beyond the project and what activities you will undertake to ensure the future exploitation is successful (e.g. development of business model and go to market strategy, among others). |
| **Maximum 400 words excluding graphs and images.** |
| 1. **INTERREGIONAL COOPERATION** |
| Explain your interest in participating in an interregional cooperation project a HealthChain. How will you leverage the interregional network of the project? Describe proposed activities. |
| **Maximum 400 words excluding graphs and images.** |

# ANNEX: Ethical / Security Checklist

|  |  |
| --- | --- |
|  | YES/NO |
| **INFORMED CONSENT** | |
| * Does the proposal involve children? |  |
| * Does the proposal involve patients or persons not able to give consent? |  |
| * Does the proposal involve adult healthy volunteers? |  |
| * Does the proposal involve Human Genetic Material? |  |
| * Does the proposal involve Human biological samples? |  |
| * Does the proposal involve Human data collection? |  |
| **RESEARCH ON HUMAN EMBRYO/FETUS** | |
| * Does the proposal involve Human Embryos? |  |
| * Does the proposal involve Human Fetal Tissue / Cells? |  |
| * Does the proposal involve Human Embryonic Stem Cells? |  |
| **PRIVACY** | |
| * Does the proposal involve processing of genetic information or personal data (e.g. health, sexual lifestyle, ethnicity, political opinion, religious or philosophical conviction) |  |
| * Does the proposal involve tracking the location or observation of people? |  |
| **RESEARCH ON ANIMALS** | |
| * Does the proposal involve research on animals? |  |
| * Are those animals transgenic small laboratory animals? |  |
| * Are those animals transgenic farm animals? |  |
| * Are those animals cloned farm animals? |  |
| * Are those animals nonhuman primates? |  |
| **RESEARCH INVOLVING DEVELOPING COUNTRIES** |  |
| * Does the proposal involve use of local resources (genetic, animal, plant etc)? |  |
| * Does the proposal will bring benefit to local community (capacity building i.e. access to healthcare, education etc)? |  |
| **DUAL USE** |  |
| * Does the proposal have direct military application? |  |
| * Does the proposal have the potential for terrorist abuse? |  |
| **ICT IMPLANTS** |  |
| * Does the proposal involve clinical trials of ICT implants? |  |
| **ARTIFICIAL INTELLIGENCE** |  |
| * Does this activity involve the development, deployment and/or use of Artificial Intelligence-based systems? |  |
| * Does the proposal involve an AI system/technique that could stigmatise or discriminate against people (based on sex, race, ethnic/social origin, age, disability, sexual orientation, religion, political affiliation, etc.)? |  |
| * Does the AI system/technique interact, replace or influence human decision-making processes? |  |
| * Does the AI system/technique have the potential to lead to negative social |  |
| **I CONFIRM THAT NONE OF THE ABOVE ISSUES APPLY TO MY PROPOSAL** | **YES/NO** |

## Ethics

If you have entered any ethics issues in the ethical issue table, you must:

* submit an ethics self-assessment, which:
  + describes how the proposal meets the national legal and ethical requirements of the country or countries where the tasks raising ethical issues are to be carried out;
  + explains in detail how you intend to address the issues in the ethical issues table, in particular as regards:
    - objectives (e.g. study of vulnerable populations, dual use, etc.)
    - methodology (e.g. clinical trials, involvement of children and related consent procedures, protection of any data collected, etc.)
    - the potential impact (e.g. dual use issues, environmental damage, stigmatization of particular social groups, political or financial retaliation, benefit-sharing, malevolent use, etc.).
  + provide the documents that you need under national law (if you already have them), e.g.:
    - an ethics committee opinion;
    - the document notifying activities raising ethical issues or authorizing such activities

If these documents are not in English, you must also submit an English summary of them (containing, if available, the conclusions of the committee or authority concerned).

If you plan to request these documents specifically for the project you are proposing, your request must contain an explicit reference to the project title.

If you have entered any Artificial Intelligence ethics-related issues in the ethical table, you must provide:

* Explanation as to how the participants and/or end-users will be informed about:
  + their interaction with an AI system/technology (if relevant)
  + the abilities, limitations, risks and benefits of the proposed AI system/technique;
  + the manner in which decisions are taken and the logic behind them (if relevant).
* Details on the measures taken to avoid bias in input data and algorithm design.
* Explanation as to how the respect to fundamental human rights and freedoms (e.g. human autonomy, privacy and data protection) will be ensured.
* Detailed explanation on the potential ethics risks and the risk mitigation measures.
* Detailed explanation of the measures set in place to avoid potential bias, discrimination and stigmatisation.
* Detailed explanation on how humans will maintain meaningful control over the most important aspects of the decision-making process.
* Explanation on how the presence/role of the AI will be made clear and explicit to the affected individuals.
* Justification of the need for developing/using this particular technology.
* Assessment of the ethics risks and detailed description of the measures set in place to mitigate the potential negative impacts during the pilot, development, deployment and post-deployment phase.

## Security

Please indicate if your project will involve:

* Activities or results raising security issues: (YES/NO)
* 'EU-classified information' as background or results: (YES/NO)
* Any potential “dual use” of results: (YES/NO)

1. If you are not taxed and don’t have a VAT number, provide the unique identifying number of your company available in your country. [↑](#footnote-ref-2)
2. EU definition of SMEs: https://single-market-economy.ec.europa.eu/smes/sme-definition\_en [↑](#footnote-ref-3)
3. Technology Readiness Level (TRL) must be minimum 6. Check the definition of each level at: https://ec.europa.eu/research/participants/data/ref/h2020/other/wp/2016\_2017/annexes/h2020-wp1617-annex-g-trl\_en.pdf [↑](#footnote-ref-4)