The 3rd EU Health Programme
2014-2020

Giovanni Nicoletti
EUHP National Focal Point – Italy
Ministero della salute
Public health

is "the science and art of preventing disease, prolonging life and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities and individuals“  
(1920, C.E.A. Winslow)

It is concerned with threats to health based on population health analysis. The population in question can be as small as a handful of people or as large as all the inhabitants of several continents (for instance, in the case of a pandemic). The dimensions of health can encompass "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity", as defined by the United Nations' World Health Organization.

Public health incorporates the interdisciplinary approaches of epidemiology, biostatistics and health services. Environmental health, community health, behavioral health, health economics, public policy, insurance medicine and occupational health (occupational medicine) are other important subfields.
Europe 2020 is the EU’s growth strategy for the coming decade. In a changing world, we want the EU to become a smart, sustainable and inclusive economy. These three mutually reinforcing priorities should help the EU and the Member States deliver high levels of employment, productivity and social cohesion.

Concretely, the Union has set five ambitious objectives - on employment, innovation, education, social inclusion and climate/energy - to be reached by 2020. Each Member State has adopted its own national targets in each of these areas. Concrete actions at EU and national levels underpin the strategy.

Annual Growth Survey 2011
Country-specific Recommendations 2011
UNO SCENARIO SEMPRE PIU’ COMPLESSO

• Non sono più previste strategie “verticali”
  • Impatto della Direttiva CBHC
• Una politica per la salute o salute in tutte le politiche?

• Con la crisi economica, sono emersi problemi comuni a molti se non a tutti i sistemi sanitari (sostenibilità, innovazione, workforce)

  Impatto del coordinamento dei bilanci pubblici

  Opportunità di trovare e condividere soluzioni

• Ruolo Ministeri salute e DG SANTE’/Health (già SANCO)
General provisions

• Regulation (EU) No 282/2014 of the European parliament and of the Council 

• Established for a 7-year period (1 January 2014 to 31 December 2020)

• Funding: 449 394 000 EUR
## Health Programme budget
over 7 years

€449,39 million

<table>
<thead>
<tr>
<th>Year</th>
<th>Budget (Million)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>€53,63</td>
</tr>
<tr>
<td>2016</td>
<td>€55,91</td>
</tr>
<tr>
<td>2017</td>
<td>€58,16</td>
</tr>
<tr>
<td>2018</td>
<td>€59,9</td>
</tr>
<tr>
<td>2019</td>
<td>€61,68</td>
</tr>
<tr>
<td>2020</td>
<td>€62,91</td>
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</tbody>
</table>

\[ \text{€33,48 million for CHAFEA} \]

\[ \text{€52,57 Million (2014)} \]

\[ \text{+ EFTA contribution} = \text{€54,4} \]

\[ \text{= €415,9 million} \]
<table>
<thead>
<tr>
<th>Period</th>
<th>Programme Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1993-2002</td>
<td>8 different Action Programmes (health promotion, cancer, drug dependence, AIDS and other communicable diseases, health monitoring, rare diseases, accidents and injuries, pollution-related diseases)</td>
</tr>
<tr>
<td>2003-2008</td>
<td>Community Action Programme for Public Health</td>
</tr>
<tr>
<td></td>
<td>• Health Information</td>
</tr>
<tr>
<td></td>
<td>• Health Threats</td>
</tr>
<tr>
<td></td>
<td>• Health Determinants</td>
</tr>
<tr>
<td>2008-2013</td>
<td>2nd Programme of Community Action in the field of Health</td>
</tr>
<tr>
<td></td>
<td>• Health Security and Safety</td>
</tr>
<tr>
<td></td>
<td>• Health Promotion and Health Inequality</td>
</tr>
<tr>
<td></td>
<td>• Health Information</td>
</tr>
<tr>
<td>2014-2020</td>
<td>3rd Programme of Community Action in the field of Health</td>
</tr>
<tr>
<td></td>
<td>• Promote health, prevent diseases and foster supportive environments for health lifestyles</td>
</tr>
<tr>
<td></td>
<td>• Protect citizens from serious cross-border health threats</td>
</tr>
<tr>
<td></td>
<td>• Facilitate access to better and safer healthcare for Union Citizens</td>
</tr>
<tr>
<td></td>
<td>• Contribute to innovative, efficient and sustainable Health Systems</td>
</tr>
</tbody>
</table>
3rd Health Programme 2014-2020: scope and objectives

- Encouraging innovation in health
- Promoting health
- Support MS to improve the health of EU citizens and reduce health inequalities
- Increasing the sustainability of health systems

1) Promote health, prevent disease and foster supportive environments for healthy lifestyles
2) Protect citizens from serious cross-border health threats
3) Contribute to innovative, efficient and sustainable health systems
4) Facilitate access to better and safer healthcare for Union citizens
1) Promoting health, preventing diseases and fostering supportive environments for healthy lifestyles

- Cost-effective promotion and prevention measures for addressing **tobacco, alcohol, unhealthy dietary habits, physical inactivity**

- **Chronic diseases** including **cancer**; good practices for prevention, early detection and management, including self-management

- **HIV/AIDS, TB and hepatitis**; up-take of good practices for cost-effective prevention, diagnosis, treatment and care

- **Legislation on tobacco products** advertisement and marketing

- **Health information** and knowledge system
2) Protecting citizens from serious cross-border health threats

- **Legislation** in the fields of communicable diseases and other health threats (**Health Security Initiative**)

- Improve **risk assessment** by providing additional capacities for **scientific expertise and map existing assessments**

- Support **capacity building**, cooperation with neighbouring countries, preparedness planning, non-binding approaches on vaccination, joint procurement
3) Contributing to innovative, efficient and sustainable health systems

- **Health Technology Assessment**

- **Up-take of health innovation and e-health solutions**

- **Health workforce** forecasting and planning (number, scope of practice, skills), mobility/migration of health professionals

- Mechanism for **pooled expertise and good practices** assisting Member States in their health systems reforms

- Health in an ageing society, including European Innovation Partnership on **Active and Healthy Ageing**

- **Legislation** in the field of medical devices, medicinal products and cross-border healthcare

- **Health information** and knowledge system including **Scientific Committees**
4) Facilitating access to better and safer healthcare for EU citizens

- **European Reference Networks** (on the basis of criteria to be set under Directive 2011/24/EU)

- **Rare diseases** (networks, databases and registries)

- **Patient safety and quality of healthcare** including the prevention and control of **healthcare-associated infections**

- **Antimicrobial resistance**

- **Legislation** in the field of **tissues and cells, blood, organs, medical devices, medicinal products, and patients’ rights in cross-border healthcare**

- **Health information** and knowledge system
The design of the Programme
as compared to previous Programmes

- **Objectives** more focused and tangible (SMART)

- Limited number of **actions** prioritised **on EU added value criteria** (21 thematic priorities! – Annex I of Programme Regulation)

- **Progress indicators** to monitor the objectives and the impact

- Annual Work Plans based on **long-term policy planning** (Multi-Annual Planning involving all SANCO units)

- **Better dissemination** and communication of results

- **Simplification** of administrative and financial procedures
New Annex II – Criteria for establishing annual work programmes

- Policy Relevance
- EU added value
- Public health relevance
- Support to implementation of legislation
- Pertinence of geographical coverage
- Balanced distribution of resources between objectives
- Adequate coverage of thematic priorities
Financial provisions

Interventions (financial instruments):

- Grants for projects
- Grants for "joint actions" **New procedure!**
- Operating grants **New procedure!**
- Direct grants to International Organisations
- **Public procurement** (tenders, framework contracts)
- Presidency Conference

**New: no more co-funding for conferences!**

Beneficiaries (*recipients of funding*)

- Legally established organisations
- **Public authorities, public sector bodies** (research and health institutions, universities and higher education establishments)
- **Non-governmental bodies**
- International organisations
Financial instruments, grants

- **Project Grants** → Multibeneficiary grant

- **Actions cofinanced with Member State Authorities** → Multibeneficiary direct grant, invitation for submission of proposal **NEW: no call anymore!**

- **Operating Grants** → 3-year Framework Partnership Agreement under which invitations for submitting of proposal for 3 yearly Operating Grants will be issued

- **Presidency Conference** and Direct → Monobeneficiary direct grant, invitation for submission of proposal
## Types of participants

<table>
<thead>
<tr>
<th>Types of Participant</th>
<th>Coordinati on</th>
<th>Core Tasks</th>
<th>Eligible costs to be co-financed</th>
<th>Financial Contribution to the grant</th>
<th>Contractual relationship with the European Commission</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Beneficiary / Partner</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Associated Beneficiary</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>(Yes)</td>
</tr>
<tr>
<td>Subcontractor</td>
<td>No</td>
<td>No</td>
<td>Yes (Invoiced to beneficiaries)</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Collaborating Stakeholder/ Partner</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Financial Donor</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Affiliated entity</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>(Yes)</td>
<td>No</td>
</tr>
</tbody>
</table>
Eligible costs

Cumulative requirements

- **Connected** with the subject of the GA and included in the technical proposal and in the budget description
- **Necessary** for the implementation of the action
- **Reasonable and justified** “good housekeeping”
- **Generated** during the lifetime of the action
- **Actually incurred** by the beneficiaries, using applicable accounting principles
- **Identifiable and verifiable**, in particular being recorded in the accounting records of the beneficiary according to accounting standards and national law.
Non- Eligible costs

- Return on capital
- Debt and debt service charges
- Provisions for future losses
- Interest owed, doubtful debts
- Bank costs charged by the beneficiary's bank for transfers from the Agency
- Currency exchange losses
- Costs declared by a beneficiary and covered by another action funded by an EU grant
- Contributions in kind
- Deductible VAT (linked to activity and not to legal entity)
Cost categories

Direct Costs
1. Direct personnel costs

2. Subcontracting

3. Other direct costs
   a. Travel costs and subsistence allowances
   b. Equipment
   c. Other goods and services

Indirect Costs

4. Flat rate of 7% of total direct costs
**Direct personnel costs**

- **Staff** = employment contract or equivalent appointing act with one of the beneficiaries.
  - Costs claimed: salary + social security + taxes
  - Any other costs included in the remuneration (= statutory charges) based on national law or employment contracts

- **Considered as personnel costs**
  - Costs of natural persons working under a direct contract with the beneficiary other than employment (on the beneficiary's premises, results belong to the beneficiary with similar costs of employment)
  - Costs of personnel seconded by a third party against payment

- No differentiation on status of public / non-public officials.

< Contact Human Resources / Accounting Department for data >
• **Balance Payment**

  • *Reimburses the remaining part of the eligible costs for the implementation of the action.*
  
  • *Approval of final report + corresponding deliverables*
  
  • *Establishment of the consolidated total eligible costs of the action and the final grant amount, refer to slides "Calculation of EU Contribution".*
  
  • *Amount due is the balance of the final grant after the deduction of pre-financing and interim payments.*
  
  • *The balance is a recovery, if the amount of earlier payments exceeds the final grant amount.*
General principles EC funding
Applicable to all financing mechanisms

1. Co-funding rule: external co-financing from a source other than EC funds is required (own resources or financial contributions from third parties)

2. Non-profit rule: the grant may not have the purpose or effect of producing a profit for the beneficiary (total Expenses = total incomes)

3. Non-retroactivity rule: only costs incurred after the starting date defined in the grant agreement can be co-funded

4. Non-cumulative rule: only one grant can be awarded for a specific action carried out by a given beneficiary
Implementation

Annual Work Programmes
The Commission implements the Programme by establishing annual work programmes in accordance with Regulation (EU, Euratom) No 966/2012 and the criteria set out in Annex II of the Regulation (EU) No 282/2014

Programme Committee Members
The Commission is assisted by a committee for establishing the annual Work Plans and monitor the Programme implementation.

National Focal Points
Member states designate National Focal Points for the promotion of the Programme and the dissemination of the Programme results and the identification of impacts generated
http://ec.europa.eu/chafea/health/national_focal_points.html

Consumer, Health and Food Executive Agency (CHAFEA)
The Agency is entrusted by the Commission to implement the Health Programme, working in close collaboration with DG SANCO
Consumer, Health and Food Executive Agency

CHAFEA

http://ec.europa.eu/chafea/index.html
Policy Priorities  
Health Programme(s)  
Yearly Workplan  
Policy Development  
MS Contacts  
Publication of Calls  
Evaluation  
Negotiation/Contracting  
Monitoring/Payments  
Dissemination  
Archiving  
Information workshops, Guidelines, etc.  
External Evaluation (Projects, JA, etc.)  
EC internal evaluation (Tenders)  
External Evaluation  
Audits  
Publications, webpages, etc.  
Summary reports, meetings
# Award criteria-I

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Maximum points</th>
<th>Threshold</th>
<th>Threshold in % of max. points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – policy relevance</td>
<td>10</td>
<td>8</td>
<td>80%</td>
</tr>
<tr>
<td>2 – technical quality</td>
<td>10</td>
<td>6</td>
<td>60%</td>
</tr>
<tr>
<td>3 – management quality</td>
<td>10</td>
<td>6</td>
<td>60%</td>
</tr>
<tr>
<td>4 – budget adequacy</td>
<td>10</td>
<td>6</td>
<td>60%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>40</strong></td>
<td><strong>26</strong></td>
<td></td>
</tr>
</tbody>
</table>
Award criterion 1 - Policy and contextual relevance

- Sub-criteria:
  - Relevance of the contribution to meeting the objectives and priorities defined in the annual work plan of the 3rd Health Programme, under which the call for proposals is published,
  - **Added value at EU level in the field of public health**
  - Pertinence of the geographical coverage of the proposals is high,
  - Consideration of the social, cultural and political context.
Award criterion 2 - Technical quality

• Sub-criteria:
  • Quality of the evidence base,
  • Quality of the content,
  • Innovative nature, technical complementarity and avoidance of duplication of other existing actions at EU level,
  • Quality of the evaluation strategy,
  • Quality of the dissemination strategy and plan.
Award criterion 3 - Management quality

- Sub-criteria:
  - Quality of the planning and appropriate task distribution to implement the project,
  - Relevance of the organisational arrangements, including financial management,
  - Quality of the partnership.
Award criterion 4 - Overall and detailed budget

- Sub-criteria:
  - Relevance and appropriateness of the budget,
  - Consistency of the estimated cost per applicant and the corresponding activities,
  - Realistic estimation of person months per work package
  - The budget allocated for evaluation and dissemination is reasonable.
Evaluation of proposals

1. Screening
   - check completeness, allocation to evaluators

2. Financial & organisational analysis
   - check compliance with the selection criteria

3. Evaluation of compliance with award criteria
   - External evaluators

4. Consensus meeting
   - Chaired by a project officer.
   - Outcome: consensus evaluation report

5. Evaluation committee
   - Based on ranking:
     a) Ensure compliance with criteria
     b) Exclude potential duplication
     c) Decide on funding based on proposed co-funding and available budget

7. Adaptation

8. Award decision
   - Grant agreement
7 ways to create EU-added value

1. Implementing EU legislation
2. Economies of scale
3. Promotion of best practice
4. Benchmarking for decision making
5. Cross border threats
6. Movement of persons
7. Networking
7 ways to create EU-added value

1. Implementing EU legislation
   - Objective: ensuring that legislation is implemented correctly
   - Example: JA on Facilitating collaboration on organ donation between national authorities in the EU

2. Economies of scale
   - demonstrate ‘return on investment’ for MS & ensure sustainability
   - Objective: To save money, and to provide better service to citizens
   - Target: No duplication of efforts
   - Example: JA on Forecasting health workforce needs for effective planning in the EU
7 ways to create EU-added value

3. Promotion of best practice
   - Objective: Citizens benefit from state of the art best practice, capacity building where necessary
   - Target: ‘best practice’ applied in all participating MS
   - Example: JA on Mental Health and well-being

4. Benchmarking for decision making
   - Focus on indicators with real impact on decision making.
   - Objective: To facilitate evidence based decision making
   - Target: Real time data comparison available
   - Example: JA on Improvement of HIV prevention in Europe
5. Cross border threats

- **Objective:** To reduce risks and mitigate consequences of health threats
- **Target:** Depending on individual threats
- **Example:** JA on the impact on maritime transport of health threats

7 ways to create EU-added value
7 ways to create EU-added value

6. Movement of persons
   • Patients crossing borders, migration issues and Brain drain - movement of workers across Europe
   • High ‘EU legitimacy’. Ensure high quality Public Health across EU MS. Added value depends on the scale of the problem
   • Example: JA on Forecasting health workforce needs for effective planning in the EU
7 ways to create EU-added value

7. Networking

• Very difficult to put into objectives, targets, and indicators.
• Is a ‘side effect’ of other actions
• Is the rationale of the funding of ‘networks’
• Is very important for dissemination of the results to all MS including non-participants
3rd EU Health Programme – Work Programme 2014
Calls for Proposals 2014

Calls for proposals ‘Health-2014’ within the framework of the 3rd Programme of the Union’s action in the field of health (2014-2020) have been published on **06/06/2014** in the Official Journal of the European Union. 


This call for applications consists of the following parts:

- A call for proposals for project grants,
- A call for proposals for operating grants

Deadline for online submissions of the proposals is **25 September 2014**.

All the information, including the work programme for 2014 for implementation of the third Health Programme, specifying the topics for the calls and the selection, award and other criteria are available via the [EU Research & Innovation Participant Portal](http://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1402043713310&uri=OJ:JOC_2014_171_R_0003).
3rd Health Programme

The Third EU Health Programme is the main instrument that the Commission uses to implement the EU Health Strategy. Annual work plans of the Programme set out priority areas and the criteria for its funding actions. The total budget for the programme is €449.4 million. The programme has 4 overarching objectives which seek to:

- Promote health, prevent diseases and foster supportive environments for healthy lifestyles taking into account the 'health in all policies' principle
- Protect Union citizens from serious cross-border health threats
- Contribute to innovative, efficient and sustainable health systems
- Facilitate access to better and safer healthcare for Union citizens

Specific calls open under 3rd Health Programme

3rd Health Programme
Call for Proposals for Framework Partnership Agreement for operating grants 2014
HP-PFA-2014
Deadline: Date: 25/09/2014
Pub.Date: 06/06/2014

3rd Health Programme
Call for Proposals for Projects 2014
HP-PJ-2014
Deadline: Date: 25/09/2014
Pub.Date: 06/06/2014
Call summary
This call is constituted of 7 individual topics in the areas of chronic diseases, ageing, medicinal product pricing, health monitoring and healthcare associated infections.

Topics
PJ-01-2014 Innovation to prevent and manage chronic diseases
PJ-02-2014 Early diagnosis and screening of chronic diseases
PJ-03-2014 Professional reintegration of people with chronic disease
PJ-04-2014 Adherence, frailty, integrated care and multi-chronic conditions
PJ-05-2014 Statistical data for medicinal product pricing
PJ-06-2014 Health monitoring and reporting system
PJ-07-2014 Healthcare associated infection in long-term care
Call summary
Operating grants can be awarded to non-governmental bodies, including networks, working at the EU level in any priority covered by the third Health Programme. However, for 2014, special attention will be given to non-governmental bodies/networks working at the EU level in the fields of chronic diseases, cancer, HIV/AIDS, rare diseases and smoking prevention.

Topic
FPA-01-2014 Financial contribution to the functioning of non-governmental bodies
3rd Health Programme 2014-2020

New online submission system
What's new?

• 3rd Health Programme
  • Financing Instruments have changed

• Use of Electronic Exchange Systems, aligned with the HORIZON 2020 Programmes
  • Electronic Submission
  • Electronic Evaluation
  • Electronic Grant preparation and monitoring
  • Electronic Signatures

• Model Grant Agreement, Payments, Cost structure, simplifications
Proposal Submission, Evaluation, Grant preparation, Signature

ELECTRONIC EXCHANGE SYSTEMS
Applying for funding:
- Find a Call
- Find partners
- Register an organisation
- Submit a proposal

Evaluation & Grant signature:
- Evaluation of proposals
- Grant preparation
- Grant signature

Grant Management:
- Reports
- Dissemination of results
- Amend-ments
- Audits & certifications

Experts opinion:
- Expert registration
- Contracting & payment
- Expert roles & tasks
New system = new terminology (1)

- The **Participant Portal (PP)** is the website hosting the information about funding for the third Health Programme (2014-2020) and Horizon 2020 programmes [http://ec.europa.eu/research/participants/portal/desktop/en/home.html](http://ec.europa.eu/research/participants/portal/desktop/en/home.html)

- The **ECAS account** is the European Commission's Authentication Service. It is the system for logging on to a whole range of websites and online services run by the Commission.

- The **Beneficiary Register** is the European Commission's online register of the beneficiaries participating in EU Programmes, such as Horizon 2020 programmes, the Health and Consumers Programmes and others.
New system = new terminology (2)

- The **Participant Identification Code (PIC number)** is a 9-digit participant identification code, received upon completing the registration of the entity online.

- The **LEAR (Legal Entity Appointed Representative)** is the appointed representative within the beneficiary organisation. He/she is authorized to sign the grant agreement and action's documents on behalf of the organisation.
Chafea website

Call pages

Topics, Documents, Guidance

Online Submission

Participant Portal

Structure of the Call Pages
Chafea website
http://ec.europa.eu/chafea
2 Calls open: Operating Grants Projects

http://ec.europa.eu/research/participants/portal/desktop/en/opportunities/hp/
Framework Partnership Agreements for Operating Grants
Project Grants

CALL FOR PROJECTS
Call overview page

Summary Data

7 Topics under the 2014 Workplan
Choose your topic...

CALL FOR PROPOSALS FOR PROJECTS 2014

Publication date: 2014-06-05  
Deadline Date: 2014-09-25 17:00:00 (Brussels local time)

Budget: €12,305,000  
Main Pillar: 3rd Health Programme

Status: Open  
OI reference: 01-C 171/10 of 4 June 2014

Call description

Call summary

This call is constituted of 7 individual topics in the areas of chronic diseases, ageing, medicinal product pricing, health monitoring and healthcare associated infections.

Topics and submission service

Please click on a specific topic title to reach the eligibility conditions and other requirements as well as link to the submission service:
- PI-01-2014 Innovation to prevent and manage chronic diseases
- PI-02-2014 Early diagnosis and screening of chronic diseases
- PI-03-2014 Professional reintegration of people with chronic disease
- PI-04-2014 Adherence, frailty, integrated care and multi-chronic conditions
- PI-05-2014 Statistical data for medicinal product pricing
- PI-06-2014 Health monitoring and reporting system
- PI-07-2014 Healthcare associated infection in long-term care

Get Support

- Participant Portal FAQ - Submission of proposals
- Contact CHAFEA Health Programme helpdesk for further assistance at CHAFEA-HP-CALLS@ec.europa.eu
- IT helpdesk - contact the Participant Portal IT helpdesk for questions such as forgotten passwords, access rights and rules, technical aspects of submission of proposals, etc.
- H2020 Online Manual - Please use the manual with reservation and only for the Participant Portal tools guidance, i.e. Submission service and Beneficiary register, because it is H2020 specific and does not cover the 3rd Health Programme rules.
CALL FOR PROPOSALS FOR PROJECTS 2014
HP-PJ-2014

Publication date: 2014-06-05
Deadline Date: 2014-09-25 17:00:00 (Brussels local time)

Main Pillar: 3rd Health Programme

Status: Open

Topic Title: Innovation to prevent and manage chronic diseases

Topic Description:

Objective: Put more emphasis on new approaches to prevention of major chronic diseases, including linking prevention to healthcare interventions, with an emphasis on groups most at risk.

Scope: The projects funded should concentrate on identifying innovative approaches to prevention, taking some of the most important preventable chronic diseases as an example. They will focus on:

1. Diabetes prevention: improved implementation of good practice and the development of guidance on innovative and targeted prevention of diabetes type 2, in particular among people at high risk. Projects should draw lessons from research on metabolic profiles including children, and develop new targeted approaches to prevention in high risk groups.

2. Cardiovascular diseases: based on the knowledge and recommendations on the prevention of cardiovascular conditions, the aim is to identify innovative and modern prevention measures tailored to reach in particular high-risk populations, i.e., people with either genetic predisposition or unfavourable lifestyles, and to demonstrate their potential to reduce the incidence of cardiovascular conditions; and

3. Identification of good practice of linking and integrating prevention and healthcare intervention. This includes that the effectiveness of prevention measures identified in the projects above should be rigorously assessed for their uptake in the disease and care management, using standardized data systems linking primary and secondary prevention e.g. population-based disease registries, and identifying good practice for prevention interventions in different healthcare settings in Europe.

Type of action: Project (HP-PJ-2014)
Topic Overview Page, with Conditions, Call Documents, Guidance, Link to online Submission

Topic Conditions and Documents

Guidance documents

Legal basis Reference docs
Login with or register for an ECAS account
Make sure you and your partners' organisations are registered.

Do the Financial Capacity Self Check

Create a Draft Proposal

Step 3
Create a Draft Proposal

Test Mode

HP-PJ-2014
Dirk Meusel
PJ-01-2014

PIC: 86809505
Creek-Rouge, Luxembourg
44 Boulevard, Joseph II
Luxembourg, LU
VAT: LU1557789

Configuration OK
You’re using Firefox 10 on Windows. Adobe Reader (version 10.1.3.23) is installed.
For more information, please consult the User Guide.

Search your PIC

Your organisation
PIC: 
Short name:

Organisations you have been previously associated with. Click to select.

Your Role
Please indicate your role in this proposal:
- [ ] Main contact
- [ ] Contact person

Your Proposal
Please choose an acronym for your proposal. It will appear also in the “General Information” section of the submission form Part A and can also be updated there.

Acronym:

Please restrict acronym to Latin characters only

Short Summary (max. 2000 characters):
Character count

Next

Put Acronym and Summary
Submission and Evaluation of Proposals Assent Disclaimer

By pressing the following button, you accept the terms and conditions of usage of this site and more specifically:

Proposal pre-registration data

1. Information used for the pre-registration and creation of a draft proposal. Call, topic, type of action, Participant Identification (PIC) code of your Organisation, Accession, Short Summary, Panels and Keywords (Step1) and the list of participating organisations (Step3) - can be used by the services in charge for the planning of evaluations.

2. Short Summary describes briefly the purpose of the proposal with a maximum of 2,000 characters. Entering at least keywords will help the services in the planning of evaluations. Coordinators may choose to enter more at this stage should they prefer not disclosing any data. The Short summary information is then copied to the "Abstract" field in the administrative form and can be modified there. If you do not fill any of your pre-registration data to be available to the European Commission service in charge prior to call closure then please send an email to the Participant Portal Service Desk (address available at the foot of the screen and in the User Guide).

Part B

3. File format: For the Technical Annex (part B) you must use exclusively PDF ("portable document format", compatible with Adobe Acrobat version 5 or higher, with embedded fonts). Annexe might have an obligatory page limit. Please check for the number and type of mandatory or optional annexes for the call in the relevant call documentation. Annexe with excess pages where page limit applies, will receive a warning upon upload. Your will receive a warning when trying to submit an annex with excess pages.

4. Time constraints: Preparation and uploading of the PDF formatted technical annex may take some time. You should ensure that this has been completed in time, well before the call closure deadline.

Submission

5. In order to be made available for evaluation, proposals must be submitted prior to the call closure deadline. Likewise, modifications to proposals or uploaded attachments are also required to be submitted prior to the call closure deadline or they will not be taken into account. Proposals may be submitted or withdrawn at any time prior to the call closure deadline. There is only one version of a submitted proposal, as submission over-writes the previous version.

Personal Data

6. We will process personal data in accordance with Regulation No 45/2001 and according to the "notifications of the processing operations" to the Data Protection Officer (DPO) of the Commission/Agency (publicly accessible in the DPO register). Read more on the Legal Notice of the Participant Portal.
Confirmation by e-mail

Confirmation by email, Including "draft proposal ID"
Continue or come back anytime until the deadline to finish your proposal.
Choose your partners

Step 4
Manage Your Related Parties

Parties
In this step you as coordinator should manage and review the participants of your proposal. Only you as coordinator can edit the elements on this screen.

Note: Your changes will be applied only after you click the "Save changes" button.

Number of participants: 3 Add Partner

Consortium eligibility
Call requires at least 3 participant(s) from different EU member states or associated countries; currently you have 2.

1. Coordinator
   - EC
     - European Commission
     - Sguere de Meeuse 8, 1040 Brussels, BE
     - PIC: 988995144

2. Partner
   - JRC
     - JRC - Joint Research Centre - European Commission
     - Rue de la Loi 200, 1049 BRUSSELS, BE
     - PIC: 987805349

Configuration OK
You're using Explorer 8 on Windows. Adobe Reader (version 10.1,0,0) is installed.
For more information, please consult the User Guide.

Contacts
Dirk Meusel - Main contact

Save Changes next >>
Declarations

This text is currently under review and will be updated in the coming days/weeks. In the meantime, if you have any further questions, please don’t hesitate to contact the IT Helpdesk via the Participant Portal.

1) The coordinator declares to have explicit consent of all applicants on their participation and on the content of this proposal.*

2) The information contained in this proposal is correct and complete.

3) This proposal complies with ethical principles (including the highest standards of integrity — as set out, for instance, in the European Code of Conduct for Research Integrity — and including, in particular, avoiding fabrication, falsification, plagiarism or other misconduct).

4) The coordinator confirms that:
   - he/she carried out for the coordinator’s organisation the financial capacity self-check and has received confirmation from each participant that they have carried out the same at https://ec.europa.eu/research/participants/portal/desktop/en/organisations/fvy.html unless the coordinator or any participant is exempt from the check being a public body.

5) The coordinator hereby declares that each applicant has confirmed:
   - that if it is receiving an Operating Grant from any EU programme, it will not claim indirect costs for this action for the specific year covered by the Operating Grant.

6) The coordinator hereby declares that each applicant has confirmed:
   - each applicant is fully compliant with the exclusion and eligibility criteria set out in the specific call for proposals; and
   - applicants have stable and sufficient sources of funding to maintain their activity throughout the period during which the activity is being carried out and to participate in its co-financing; and
   - applicants have the professional resources, competences and qualifications required to complete the proposed action.

The coordinator is only responsible for the correctness of the information relating to his/her own organisation. Each applicant remains responsible for the correctness of the information related to him/her and declared above. If the proposal to be retained for EU funding, the coordinator and each beneficiary will be required to present a formal declaration in this respect.

Actions co-funded under the third Health Programme may receive a co-funding of up to 80% of the total eligible cost for the action, if they are deemed to be of exceptional utility towards achieving the objectives of the Programme. To receive up to 80% of co-funding, the proposals must comply with the criteria set out below:

1. At least 60% of the total budget of the action is used to fund staff (This criterion intends to promote capacity building for development and implementation of effective health policies).
2. At least 30% of the budget of the proposed action is allocated to Member States whose gross national income (GNI, as published by EUROSTAT) per inhabitant is less than 90% of the Union average. (This criterion intends to promote the participation of health actors from Member States with a low GNI).
3. The proposal demonstrates excellence in furthering public health in Europe and has a very high EU added value.

The coordinator confirms that he/she applies for up to 80% EU contribution due to exceptional utility of the proposal. The coordinator confirms being aware that in case of not meeting the criteria for exceptional utility the final EC contribution will only be up to 60% and additional applicant’s contribution will become necessary.

Your proposal may qualify for an EU contribution of up to 80% due to exceptional utility.

### Simplified Budget Table

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<thead>
<tr>
<th>Participant</th>
<th>Country</th>
<th>Direct personnel costs</th>
<th>Direct costs of subcontracting</th>
<th>Other direct costs</th>
<th>Indirect costs (max 7% on a and c)²</th>
<th>Total estimated eligible costs</th>
<th>Maximum reimbursement rate (%)</th>
<th>Maximum grant</th>
<th>Requested Grant²</th>
<th>Applicants contribution</th>
<th>Income generated by the action</th>
<th>Financial contributions given by third parties to the beneficiary</th>
<th>Action’s total receipts</th>
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</table>

CHAFEA PROJECTS.pdf - Vert.02 20140603  Page 10 of 12  Last saved 04/06/2014 at 09:33
Validation result

Section  
Description

The form has not yet been validated, click "Validate Form" to do so!
Call 2014: 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 a European umbrella organisation/NGO wants to participate in a JA, it must be designated by a MS competent authority through a transparent procedure.
- For the "follow-up" JA (second phase of an existing JA): because an organisation is part of the running/finishing JA, this organisation is not automatically designated to participate in the new JA on the same topic!
- 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).
- 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.
Get Support

- Participant Portal FAQ - Submission of proposals

- Contact CHAFEA Health Programme helpdesk for further assistance CHAFEA-HP-CALLS@ec.europa.eu

- **IT Helpdesk - contact the Participant Portal IT helpdesk for questions such as forgotten passwords, access rights and roles, technical aspects of submission of proposals, etc.**

- H2020 Online Manual - Please use the manual with reservation and only for the Participant Portal tools guidance, i.e. Submission service and Beneficiary register, because it is H2020 specific and does not cover the 3rd Health Programme rules.
EUHP: Priorities 2012

Health programme actions covering different health issues (2003–2012)

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<th>Health issue</th>
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<td>Health indicators, data and support to Member States</td>
<td>109</td>
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<tr>
<td>Rare diseases</td>
<td>59</td>
</tr>
<tr>
<td>Nutrition and physical activity</td>
<td>49</td>
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<tr>
<td>Sexually transmissible infections</td>
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<td>Health inequality</td>
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<td>Tobacco</td>
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<tr>
<td>Blood, organs, tissues, cells</td>
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<td>Alcohol</td>
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<tr>
<td>Patient safety/ Quality of health systems</td>
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<td>Health workforce</td>
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<td>Addiction prevention</td>
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<td>Mental health</td>
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<td>Cancer</td>
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<td>Environmental health</td>
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<td>Influenza/pandemic preparedness</td>
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<td>Injuries</td>
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<td>E-health</td>
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<tr>
<td>Vaccination</td>
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<tr>
<td>Operating grants 2012 and other actions</td>
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<td>Cardiovascular disease</td>
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<td>Cross-border healthcare</td>
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<td>Pharmaceuticals</td>
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<td>Scientific advice</td>
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<td>Health security and preparedness</td>
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<td>Innovation</td>
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EU Health Programme:
working together to improve
public health in Europe –
A selection of Public Health Projects with an Important Impact for EU Member States

Health for the EU
in 33 success stories
A selection of successful projects funded by the EU Health Programmes

Evaluation process

- All submissions peer reviewed by 3 experts from database
- SANCO desk officer opinion sought for policy relevance, in case of disagreement HoU to give additional input
- All peer evaluation reports + other evidence from DG RTD, DG ESTAT etc reviewed by Commission Evaluation Committee
- Final recommendation for funding issued on that basis
Evaluation Criteria

**Selection criteria:**
*Legal status, Financial viability, Operational Capacity*

**Award Criteria:**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Sub-criteria</th>
<th>Score</th>
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<tbody>
<tr>
<td>Policy and contextual relevance</td>
<td>EU added value; geographical coverage; context adequacy; strategical relevance; contribution to the annual WP</td>
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</tr>
<tr>
<td>Technical quality</td>
<td>Evidence base; Content specification; Innovative nature; Evaluation strategy; Dissemination strategy</td>
<td>/30</td>
</tr>
<tr>
<td>Management and budget quality</td>
<td>Planning; Organisation; Partnership; Communication strategy; financial management</td>
<td>/30</td>
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## Thresholds overcoming: 2008 vs 2009

### Graphical Representation

The bar chart illustrates the comparison between Under and Over Threshold values for the years 2008 and 2009 across different categories labeled A, B, and C.

### Under Threshold

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### Over Threshold

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<tr>
<td>C</td>
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Country participation

% of total partners

2008 2009 2010 2011 2012
Recommendation for funding per country
### Recommendation for funding per country (all partners) and per financing mechanism

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<th>CZ</th>
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Country participation

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Country success rate
EUHP Evaluation - Italy 2008 vs. 2009

Threshold Comparison 3
QUALI I RISULTATI OTTENUTI AD OGGI

AVVISO 2 (Aggiornamento al 27.10.2014)

- n. candidature finanziate: 36
- n. candidature non finanziate: 3
- n. candidature in attesa: 0
- importo totale approvato: €304.713,25
- importo ad oggi erogato: €128.314,85
- Differenza tra quanto approvato e quanto erogato (candidature chiuse): €176.398,41
- totale valore progetti approvati da CE: €24.421.210,00
QUALI I RISULTATI OTTENUTI AD OGGI

AVVISO 2

- n. progetti finanziati da CE: 8
- n. progetti non finanziati da CE: 10
- n. progetti in attesa di valutazione da CE: 18
- n. candidature finanziate per programma:

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Thanks for your attention!