

# Reporting and funding opportunities in HORIZON 2020

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#### The periodic report shall be transmitted:

- " through the coordinator to the EC
- " via the Participant Portal
- " including FORM C
- The Form C must be signed by the authorised person(s) within the beneficiary's organisation

There is a guideline 'Guidance Notes on Project Reporting'

http://ec.europa.eu/research/participants/data/ref/fp7/89692/project-reporting\_en.pdf

& a 'Template for Periodic Report' (EN 123392):

http://ec.europa.eu/research/participants/portal/desktop/en/funding/reference\_docs.html#fp7



The **Publishable Summary** is a <u>standalone</u> document, understandable without further explanations or information.

- " Major tasks and achievements
- " since the <u>beginning</u> of the project
- " and (overall) objectives
- "in a language also understandable for <u>lay</u> persons
  - → enabling direct publication
- "best no longer than 1 page
- Concise!

(It's not a copy and paste exercise from the TA & periodic report...)



The periodic report should include <u>only</u> tasks & results achieved during the <u>respective reporting period</u>,

- " no historical overview,
- " no results achieved before,
- " nor outside the project (according to TA)

The periodic report should be a <u>concise</u>, <u>complete</u> and <u>honest</u> overview of:

- " progress of the work
- " <u>achievements</u>
- " and <u>problems</u>!

# Periodic Reports European Commission

**For each work package**, except project management, which will be reported in section 3.2.3, please provide the following information:

- A summary of progress towards objectives and details for each task;
- · Highlight clearly significant results;
- If applicable, explain the reasons for deviations from Annex I and their impact on other tasks
  as well as on available resources and planning;
- If applicable, explain the reasons for failing to achieve critical objectives and/or not being on schedule and explain the impact on other tasks as well as on available resources and planning (the explanations should be coherent with the declaration by the project coordinator);
- a statement on the use of resources, in particular highlighting and explaining deviations between actual and planned person-months per work package and per beneficiary in Annex 1 (Description of Work);
- If applicable, propose corrective actions.



#### Also the **Periodic Report** is a <u>standalone</u> document.

- ➤ It is <u>not possible to refer</u> to other documents e.g. <u>deliverables</u>!
- Avoid redundancy between deliverables and periodic reports.
- " (Deliverables have the format of a separated report.)

#### The periodic report has to

- " include the relevant details **but**,
- to be <u>as short as possible</u> (avoid unnecessary, lengthy explanations and justifications)
- ▶ be concise!



#### 3.2.3 Project management during the period

Please use this section to summarise management of the consortium activities during the period. Management tasks are indicated in Articles II.2.3 and Article II.16.5 of the Grant Agreement.

Amongst others, this section should include the following:

- Consortium management tasks and achievements;
- Problems which have occurred and how they were solved or envisaged solutions;
- Changes in the consortium, if any;
- List of project meetings, dates and venues;
- Project planning and status;
- Impact of possible deviations from the planned milestones and deliverables, if any;
- Any changes to the legal status of any of the beneficiaries, in particular non-profit public bodies, secondary and higher education establishments, research organisations and SMEs;
- Development of the Project website, if applicable;

The section should also provide short comments and information on co-ordination activities during the period in question, such as communication between beneficiaries, possible co-operation with other projects/programmes etc.

For Grant Agreements related to infrastructures (Annex III to the Grant Agreement), the access provider shall include a section in the periodic reports on the access activity, indicating the membership of the selection panel as well as the amount of access provided to the user groups, with the description of their work, and the names and home institutions of users.



#### **General recommendations**

- "Adhere strictly to <u>deadlines</u> of 60 days it's a contractual obligation.
- "Do not submit incomplete reports!
- "Follow the <u>structure</u> of periodic reports given in the <u>guidance</u> <u>notes & template</u>

#### Plan ahead

- " Alert all partners to importance of timely submission
- "Discuss reporting modalities early with partners



# Funding opportunities in HORIZON 2020 – Brain research

# Horizon 2020: 3 priorities

- European Research Council
- Future and Emerging Technologies
- Marie Skłodowska-Curie actions
- Research infrastructures

• Excellent science

- Leadership in enabling and industrial technologies
- Access to risk finance
- Innovation in SMEs

- •Industrial leadership
- •Societal challenges

### **Health, demographic change and wellbeing**

- Food security,
  sustainable
  agriculture and
  forestry, marine and
  maritime and inland
  water research and
  the Bioeconomy
- Secure, clean and efficient energy
  - Smart, green and integrated transport
- Climate action,
   environment,
   resource efficiency
   and raw materials
- Inclusive, innovative and reflective societies
- Secure societies
- Science with and for society
- Spreading excellence and widening participation



# 7 Focus Areas



# 7. Health, demograph change and wellbeing

Understanding health, ageing & disease

Effective health promotion, disease prevention, preparedness and screening

**Improving diagnosis** 

**Innovative treatments and technologies** 

Advancing active and healthy ageing

Integrated, sustainable, citizen-centred care

Improving health information, data exploitation and providing an evidence base for health policies and regulation

### First call WP



### 2014-2015

**PHC-01-2014:** Understanding health, ageing and disease:

determinants, risk factors and pathways

**PHC-05-2014:** Health promotion and disease prevention:

translating 'omics' into stratified approaches

PHC-06-2014: Evaluating existing screening and

prevention programmes

**PHC-10-2014:** Development of new diagnostic tools and

technologies: in vitro devices, assays and

platforms

PHC-13-2014: New therapies for chronic non-

communicable diseases

**PHC-17-2014:** Comparing the effectiveness of existing

healthcare interventions in the elderly

**PHC-23-2014:** Developing and comparing new models for

safe and efficient, prevention oriented

health and care systems

**PHC-32-2014:** Advancing bioinformatics to meet

biomedical and clinical needs

Adapting to an ageing

population

Personalised medicine

Translational research

Clinical trials

CER and costs

# Further Opportunities



### IMI 2

The <u>Innovative Medicines Initiative</u> is a Public-private partnership between the EU and pharmaceutical industry launched in 2008

- Strategic research agenda: <u>broader scope</u>
   'The right prevention and treatment for the right patient at the right time'
- Neurodegenerative diseases and psychiatric diseases among the health priorities identified
- Based on WHO priority medicines report
- Indicative IMI 2 Call 5
  - → 4 topics related to brain research

# Further Opportunities



### IMI 2

#### **Indicative topics related to brain**

- <u>topic 3</u>: <u>Inflammation</u> and AD: modulating microglia function focussing on TREM2 and CD33
- **topic 4:** Understanding the role of <u>amyloid biomarkers</u> in the current and future diagnosis and management of patients across the spectrum of cognitive impairment
- **topic 5**: Evolving models of <u>patient engagement</u> and access for earlier identification of Alzheimer's disease: phased expansion study
- **topic 6**: ApoE biology to validated Alzheimer's disease targets

http://www.imi.europa.eu/content/home

# **Further Opportunities**



### JPND transnational calls

Joint Programming initiative on Neurodegenerative Disease Research (JPND): member-states led initiative (28 countries, FR coordinates)

**2015:** Longitudinal Cohort Approaches, Advanced Experimental Models, Risk and Protective Factors

€40 million total budget, incl. €10 million from the EC

The evaluation of the 2015 call is underway

Other annual transnational calls will be launched

Alzheimer's disease and other dementias

Parkinson's disease and PD-related disorders

Prion disease

Motor neurone diseases

Huntington's Disease

Spinocerebellar ataxia

Spinal muscular atrophy

http://www.neurodegenerationresearch.eu/

# **Further Opportunities**



### **NEURON II transnational calls**

Network of European funding for Neuroscience research: member-states led initiative (16 countries, DE coordinates) - neuroscience, neurology, psychiatry

#### 2015:

- ☐ European Research Projects on Neurodevelopmental Disorders
- ☐ European Research Projects on Ethical, Legal, and Social Aspects (ELSA) of Neuroscience

€10 million total budget

The evaluation of the 2015 call is underway

Other annual transnational calls will be launched

http://www.neurodegenerationresearch.eu/



#### **Horizon 2020**

### **Next steps-Work Programme 2016-2017**

- 2016 call expected to be published end 2015
- Submission deadline expected in the first quarter 2016





Thank you



www.ec.europa.eu/research/health www.ec.europa.eu/research/horizon2020

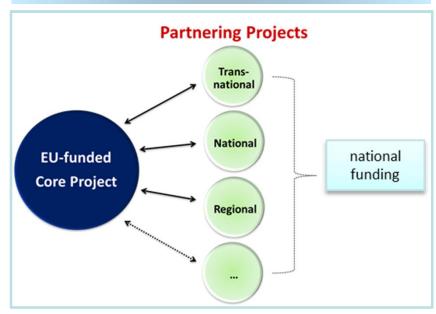
# **Further Opportunities**



# Future & Emerging Technologies Flagship Model

Science-driven, large-scale R&D initiatives addressing a grand S&T challenge

- 10 years research roadmap
- " budget of 1 billion €
- EU and national funding



ec.europa.eu/digital-agenda/en/fet-flagships

#### The Human Brain Project

~100 M€/year – started Oct 2013 www.humanbrainproject.eu



# A federated ICT infrastructure for neuroscience, personalised medicine and future computing

- To catalyse a collaborative European effort for understanding the brain and its diseases and for emulating its computational capabilities
- More than 400 scientists from 112 institutions from 24 countries

#### Medical Informatics

Collecting data for disease signatures

High Performan ce Computing

#### Neuro Informatics

Organise neuroscience data & models

# **Brain Simulation Platform**

Develop models and perform

pecianca an

#### **Neurorobotics**

Evaluate brain cognitive models and develop brain designs for robots

#### **Neuromorphic**

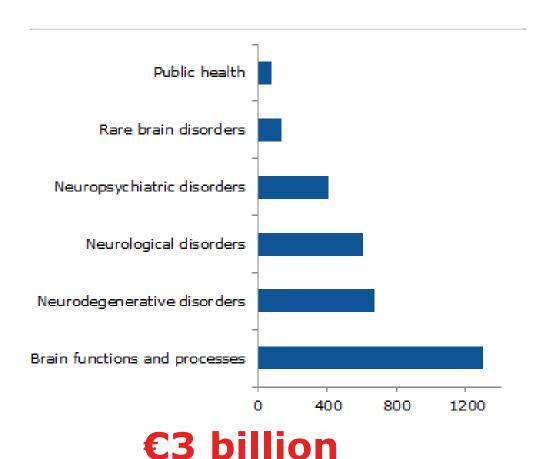
Design braininspired hardware and evaluate

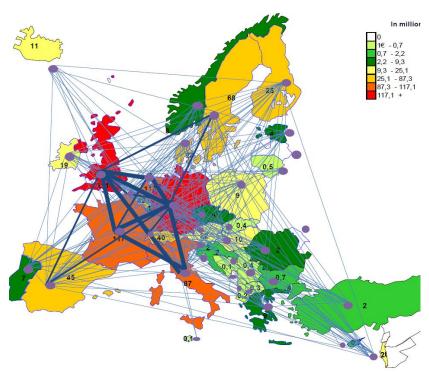
### **FP7 Brain**



## **Brain research (2007-2013)**

Collaborative research / Frontier research / Training and mobility





Over 19,000 Connections





#### PHC 13 – 2014 New therapies for chronic noncommunicable diseases

Commission

**Specific challenge:** Chronic non-communicable diseases represent a significant burden on individuals and healthcare systems. <u>Innovative</u>, <u>cost effective</u> therapeutic approaches are required to provide the best quality of care when prevention fails. While a considerable amount of knowledge has been generated by biomedical research in recent years, the development of new therapies is stagnating, in part due to a lack of clinical validation.

# Example: RIA



#### PHC 13 – 2014 New therapies for chronic noncommunicable diseases

Commission

**Scope:** Clinical trial(s) supporting proof of concept in humans to assess the potential clinical efficacy of the novel therapeutic concept(s) and / or optimisation of available therapies (e.g. drug repurposing). The application may build on pre-existing pre-clinical research and additional results from large scale databases. A concise feasibility assessment justified by available published and preliminary results and supporting data should also be provided. Considerations of effectiveness and potential clinical benefit (possibly including real world data) should be integrated in the application if relevant.

# Example: RIA



#### PHC 13 – 2014 New therapies for chronic noncommunicable diseases

Commission

#### **Expected impact:**

New therapeutic strategies, adapted where relevant to the differing needs of men and women, with the <u>highest</u> <u>potential to generate advances in clinical practice</u> for chronic diseases, including multi- or comorbidity, ready for further development.

Early exclusion of candidate strategies unlikely to succeed. Contribute to the <u>improvement of the therapeutic outcome</u> <u>of major chronic health issues</u> with significant impact on burden of diseases both for individual patients and for health care systems.



# **PHC 12:** Clinical research for the validation of biomarkers and/or diagnostic medical devices

- "ADDIA: "Validation of a fast and simple peripheral blood diagnostic biomarker kit for Alzheimer's disease" (Amoneta Diagnostics)
- "But also on: myocardial infarction, lung cancer, pancreatic cancer, cervical cancer, colorectal cancer, glioma, bladder cancer, rheumatoid arthritis, dental carries, respiratory distress syndrome, corneal diseases