



Cross4Health

SUMMARY FOR THE 2nd OPEN
CALL

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Summary for the Open Call

1 Cross4Health Overview

Cross4Health is a 2,5-year, €5 million project, funded by the European Commission Framework Programme for Research and Innovation Horizon 2020. The Cross4Health Consortium consists of seven European partners: *Norway Health Tech (coordinator), EuroB Creative, Health Cluster Net, Aerospace Valley, Innovation Skåne, Cluster de Salud de Castilla y León and Zenit*. During the project period, a total amount of €3,5 million will be invested directly in SMEs, in order to foster collaboration, transfer of knowledge and opportunities among European SMEs coming from Aerospace, Energy and Creative Industries leveraged on Biotechnology, ICT and Medical Devices sectors.

2 Second Cross4Health Open Call

Cross4Health **2nd Open Call** for **innovative projects patient-centered personalized care** will remain open from the 16th of November until the 18th of February 2019 at 17:00 CET (Central European Time).

By applying to the 2nd Cross4Health Open Call, the teams will compete to get engaged in **the 2nd Cross4Health Acceleration Programme**, where up to **20 projects (a maximum of 40 SMEs) will obtain support worth up to 55 000€** (per SME partner in the project, limited to max 110 000€) and distributed as follows:

- **€25 000 in Direct Cash Funding per SME partner**
- **Up to €30 000 per SME partner in Innovation Services:**
 - Up to €15 000 **per SME partner** in Innovation Vouchers to be used in services provided by external providers.
 - Up to €15 000 **per SME partner** in additional services provided by Consortium Partners.

3 Second Cross4Health Acceleration Programme

The whole **Acceleration Programme** will last a maximum of 9 months, indicatively, from April **2019 to December 2019**. The Cross4Health Acceleration Programme is, apart from the kick-off event, non-residential.

Selected teams from the Open Call will become Cross4Health project Sub-grantees and will be required to sign a **Sub-Grant Agreement** with the Cross4Health Project Coordinator.

A Key Account Manager (KAM) will be assigned and will mentor and guide the team through the whole Acceleration Programme. Each KAM belongs to one of the Cross4Health Consortium Partner entities and will be carefully monitoring the project status. He/she will be discussing with the teams and making recommendations so as to align the innovation services with the specific needs of a given team, helping to setup the best possible service package for each team to deliver its objectives.



The **Direct Funding** is perceived as an investment to help SMEs to achieve their planned milestones. It will be **equity free** and no cost reporting will be required. Funds and support will be disbursed directly to each SME in the team. Teams will have to provide a breakdown of the distribution of funds among the SMEs in the team; only SMEs can be beneficiaries, but other organization can be part of the team.

Acceleration Programme payments distribution		€
M 1	1 ST pre-financing payment	10 000*
M 5	Mid-term payment	10 000*
M 10	Final payment	5 000*
M 10	Innovation Voucher	Up to 15 000*

* Per SME

4 Second Open Call Challenges to tackle

The 2nd Open Call is open to cross health solutions based on a combination of different sectors. These solutions should help meet the needs of health care providers in Europe. Connected care, innovations from Aerospace, Energy and Creative Industries sectors can be a catalyst for such solutions.

Based on the results of the Cross4Health Open Innovation Spaces run through all Europe in Spring and Summer 2018, the following three key challenges must be addressed by any submitted proposal:

Challenge	Description/example.
Early detection and diagnoses	<i>Remote monitoring.</i> Benefits involve enabling patients, within high-risk groups, to a higher degree going about their ordinary lives with fewer doctor visits, while at the same time providing security and safety in the acute situation. E.g. EEG measurements for early seizure detection.
	<i>Remote monitoring/self-testing.</i> Risks involve precise enough methods to assure quality, while benefits include fewer doctor visits and improved ability to detect and treat sickness at an earlier stage. E.g. At home self-testing for urine protein indicator detection connected to Uremia, within high-risk groups.
	<i>Remote monitoring.</i> Providing reliable diagnostic measurements in an emergency setting is difficult, since most measurement methods have been developed for a clinical setting.

	<p>E.g. Hypothermia detection. Research show that e.g. inner ear measurements provide a reliable indicator for core body temperature. A solution for use outside of the clinical setting would substantially improve patient safety in emergency care.</p>
Remote patient support	<p><i>Patient support.</i> Lifestyle app/platform for preventive purposes specified per condition/diagnoses/identified high risk group. Encouraging individuals to understand how lifestyle adjustments lower the risk for severe disease in the long-term, is beneficial both for the health care system, and for the individual patient.</p> <p>E.g. A way to target preventive care with lifestyle adjustments is through encouraging methods, such as gamification.</p> <hr/> <p><i>Patient support.</i> Failure to adhering to suggested treatment results in risks for the individual as well as reduced efficiency in the health care system. Platforms for encouraging adherence increases health care efficiency for the individual patient as well as for the health care system.</p> <p>E.g. Easily accessible platform/app for increasing adherence of patient to treatment.</p> <hr/> <p><i>Rehabilitation, assistance at home.</i> It is expected that “smarter”, more individualized, tools for assistance and rehabilitation at home will improve treatment consistency and quality for patients, while also reducing the need to regular physio visits.</p> <p>E.g. Solutions may include assistive tools supporting the daily life of patients with physical/cognitive limitations, as well as products targeting patients undergoing treatment for injuries.</p> <p>E.g. Individualized tools for personal use, e.g. VR, robotics, exoskeletons.</p>
Patient management process	<p><i>Logistics support.</i> From initial triage the resulting assessment/diagnoses can use data from a real-time logistic support which through care guidelines and big data modelling can with high probability predict internal patient journey, with treatments and diagnostical events, but also estimated discharge time for the individual patient. This improves planning and patient flow and better understanding of input+output through caregiver system.</p> <p>E.g. Since accumulated data can present better understanding of input/output through caregiver system, better use of proper allocation of resources can be suggested accordingly.</p> <p>E.g. An extension to the described example could also integrate, add collaborative interfaces, between different levels of health care</p>

	providers, such as between specialist care, primary care, and home care.
	<i>Diagnosis/decision support.</i> With the use of e.g. AI/big data and/or national care guidelines, from triage most symptoms can be detected, and appropriate diagnosis measures suggested. This may result in improved standardization of assessments and generally improved efficiency.

5 Who can Apply?

The following **eligibility criteria** must be complied to, in order to get through to the evaluation process:

- The Open Call is open to **teams led by an SME** (under de EU definition)¹ **and composed of minimum two legal entities, legally based in two different EU member states** (Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Spain, Sweden and United Kingdom*) **or H2020 associated country** (Iceland, Norway, Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Montenegro, Serbia, Turkey, Israel, Moldova, Switzerland, Faroe Islands, Ukraine, Tunisia, Georgia and Armenia).
- Beyond the minimum requirement to have one SME as lead partner, the consortium might consist of **up to four legal entities**. The other partner(s) may be an end user, a large enterprise an additional SME, etc, so long as they are a legal entity based in an EU member state or H2020 Associated country. It is however important to note that **support can only be offered to SMEs** and, irrespective of the composition, the team leader remains responsible for driving the project and reporting on progress.
- For project teams with more than two SME's participating, only two will receive direct financial support. In this case, the consortium needs to indicate on the application stage which two SME's will receive direct financial support.
- It is a requirement that teams demonstrate the implementation of ideas and solutions from either aerospace, energy or creative industries sectors leveraged on ICT, bio-technology or medical devices sectors in addressing the specific healthcare challenges listed in the call text.
- A [Technology Readiness Level \(TRL\) 5](#) (in the sector which the technology is being transferred from) is required. In addition, the selection will be based on the excellence of the proposed idea to address the identified healthcare challenge, the maturity and the management capacity of the team to drive project to the market, and the potential of the proposed solution to scale-up in the international market.

¹

What is an SME? (http://ec.europa.eu/growth/smes/business-friendly-environment/sme-definition_en)

- Already existing products without a clear advance or innovation beyond the state-of-art will be rejected.
- Project activities that have already been funded or are being funded will be rejected. Double funding is not allowed.
- SMEs can be part of more than one application but can only be funded in one of those.

** In the event that the Brexit process takes effect on the 30th of March 2019 without an agreement being reached which gives UK's SME's access to the H2020 program, SME beneficiaries participating in the 2nd Open Call, will no longer be eligible for any funding or support by the Cross4Health Consortium.*

6 How to Apply?

Register at the Cross4Health website (cross4health.eu) and complete the application electronically in English before **February 18th 2019 at 17:00, CET (Central European Time)**. It is recommended to submit in good time before the deadline. The Cross4Health consortium will not be responsible for technical issues. **Registration is compulsory before the submission process can take place. Do not delay until the last minute.** All applications will be processed through the private website. This application process involves the submission of:

- 10 pages max. application form (compulsory for eligibility) (+ cover + summary + lean canvas = 13 pages max.)
- 10 slide max. pitch deck (compulsory for eligibility) (+ cover = 11 pages max.)
- Short video presenting the team (voluntary)
- Declarations of Honour and existence of an internal Consortium Agreement – each applicant has to sign one **and submit all of them attached in the same file (compulsory for eligibility)**

English is the official language for the open calls. Submissions done in any other languages will not be evaluated.

7 Evaluation Process

The **Open Call evaluation process** is structured as follows:

- 1) **Eligibility Check.** A first review will be performed by an Evaluation Committee, composed by Consortium Partners. **The proposal (cover + summary + 10 pages max + lean canvas), the pitch (cover + 10 pages max), and the declarations of honor of ALL members be needed to have been submitted. If not the proposal will be disqualified. Same if the proposal does not address any of the compulsory Open Call challenges. Any page beyond the pages limit will be removed before passing to the external evaluators.**
- 2) **External Experts Evaluation.** Two external evaluators will review each proposal in a cross-national system, consisting of two non-local reviewers.
- 3) **Cross4Health Evaluation Committee** will oversee and validate the evaluation process, and will check there is no conflict of interest, fraud, double funding, or any partner exceeding the 60 000€ threshold.

