ERA4Health Partnership

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Experiences and general feedback

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Evaluation criteria

1. Excellence
2. Impact
3. Quality and efficiency of the implementation

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Excellence

a. Scientific quality of the proposal
   - Significance of the research question
   - Clarity and relevance of the objectives
   - Credibility of the proposed approach and methodology
   - Clear demonstration of innovation potential

Repair/regeneration: poorly known mechanisms, repair vs cell therapy
Heart failure/Afib: reversal pathophysiology, HFpEF, comorbidities

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Excellence

Quality of the project consortium: international competitiveness of participants in the field(s), previous work and specific expertise of the participants, complementarity of the participants, benefit of the transnational collaboration.

Demonstration of previous collaborative efforts (scientific papers, grants,…)

Demonstration of the benefit of working together and the unique contribution of each partner

Girls vs Boys vs Young vs Senior:

Gender balance **in leadership positions**
Junior researchers **in leadership positions**


diversity, diversity and diversity !

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Excellence

b. Novelty and ambition (including translatability of the proposed research to human health).

A serious request to generate a credible roadmap how this research will contribute to a solution for the disease studied.

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Impact

a. Unmet public and societal need and potential impact for future clinical, public health, and/or other socio-economic health relevant applications including patients' needs and/or for industry.

- details on the medical need with societal impact and costs

- patents, documented experience in translational research (at the PI level in addition to Institution), involvement of private collaborator (not always needed but…), inclusion of clinical scientists/experts

clinical reviewers

industry reviewers

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Impact

b. Added-value of transnational collaboration and potential for fostering international network: gathering a critical mass of patients, sharing of resources (biological material, models, databases, etc.), harmonization of data, sharing of specific know-how and/or innovative technologies, etc.

- Sharing resources and harmonizing data is key
- Develop a credible data management plan using European guidelines and know-how
- Use of existing human biological material and/or clinical databases is mandatory

- Avoid redundancy (too many *in vitro* groups, too many animal experts,…), leadership of the Work Plan, quasi-equal sharing of the overall workload, choice of countries

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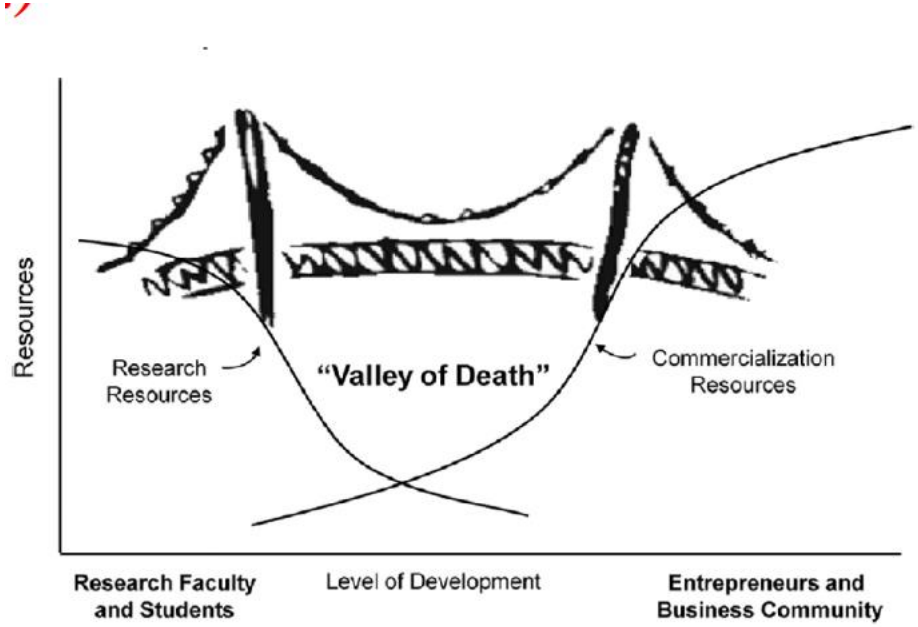
Impact

c. Projects with high potential of applicability at short/medium term: expected time for market and transfer to patient towards clinical and public health applications, pharmaceutical/health device applications, other industrial applications including market and end user's scenario, quality of dissemination, exploitation and business plan.

- plan for clinical testing;
- plan for patenting;
- plan for regulatory approval
- business model
- source for additional funding (angel investors, venture capitals, grants, …
- scaling-up strategy



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Impact

d. Participation/engagement with end-users such as patients, industry, clinicians (when appropriate/applicable)
e. Dissemination

It is strongly encouraged to engage end-users (e.g. patients, industry, clinicians) in the research process from conception of the study to dissemination and implementation. End-users can participate as partners (when eligible for funding by a national/regional funding organisation), as collaborator (participation with own budget) or as part of an advisory board.

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Quality and efficiency of the implementation plan

a. Feasibility of proposal and likelihood of successful completion of proposed research.

PROPOSED WORK
- brief recap on the main idea
- technology readiness levels, contribution to solution for patients
- unmet medical need

PRELIMINARY RESULTS
- Convince the reviewer
- Basic/in-vitro for “innovative projects”
- In-vivo/in-human for “projects with high potential of applicability ”

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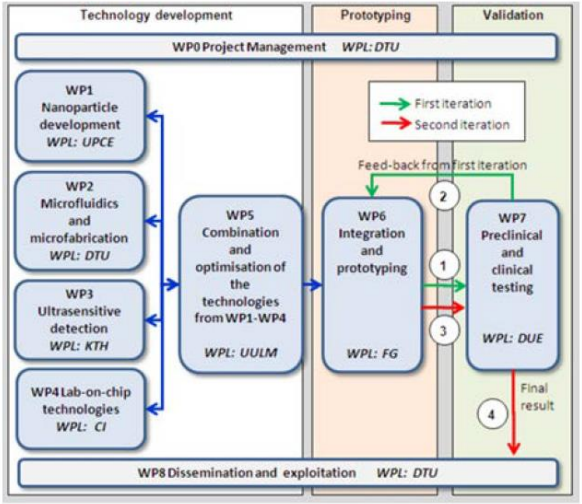
Quality and efficiency of the implementation plan

b. Coherence and effectiveness of the work plan.

- Clearly state the aims (typically 2-3 aims for a 3-year project)
- Clearly present Work Packages as connected to the aims (WP1–identification of molecular target; WP2–in vitro characterizations; WP3–in vivo modeling; WP4: first in patient study; WP5: exploitation)
- Specify WP leader and structure
- Specify role of each Partner in the WP (balanced)
- Risk assessment (pitfalls and mitigations)



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Quality and efficiency of the implementation plan

c. Use of existing biobanks and existing cohorts.

Mandatory!

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Quality and efficiency of the implementation plan

d. Adequacy of the budget
e. Appropriateness of the management structures and procedures
f. Sustainability of the research capacities initiated by the project

- Co-funding always necessary/desirable (salaries from Institution, partial coverage of consumables, intramural funding, ….)
- Co-funding from Industrial Partners always desirable

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Personal consideration

Team is essential

Solution opportunity is more important than scientific excellence

Plan beyond

Have fun

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