

Info day: Third Health Programme 2014-2020

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European Commission
Consumers, Health and Food Executive Agency

Zagreb, 9 July 2014





Today

- Chafea: Who we are
- Overview of the 3rd Health Programme
- Implementation of the health programme: the Annual Work Plan for 2014. What's NEW?
- Calls 2014
 - Project proposals
 - Grants for Actions
 - Joint Actions
 - Call for tenders







Consumers, Health and Food Executive Agency

CHAFEA





EAHC -> Chafea: Who we are

- The Chafea is one of six executive agencies set up by the European Commission to execute complex Community programmes and enable the Commission to focus on policy making
- The Chafea was formerly EAHC (Executive Agency for Health and Consumers and before the Public Health Executive (PHEA). In 2008, the Agency's name was changed to EAHC, the mandate was prolonged and expanded to include actions in consumer protection and training for safer food

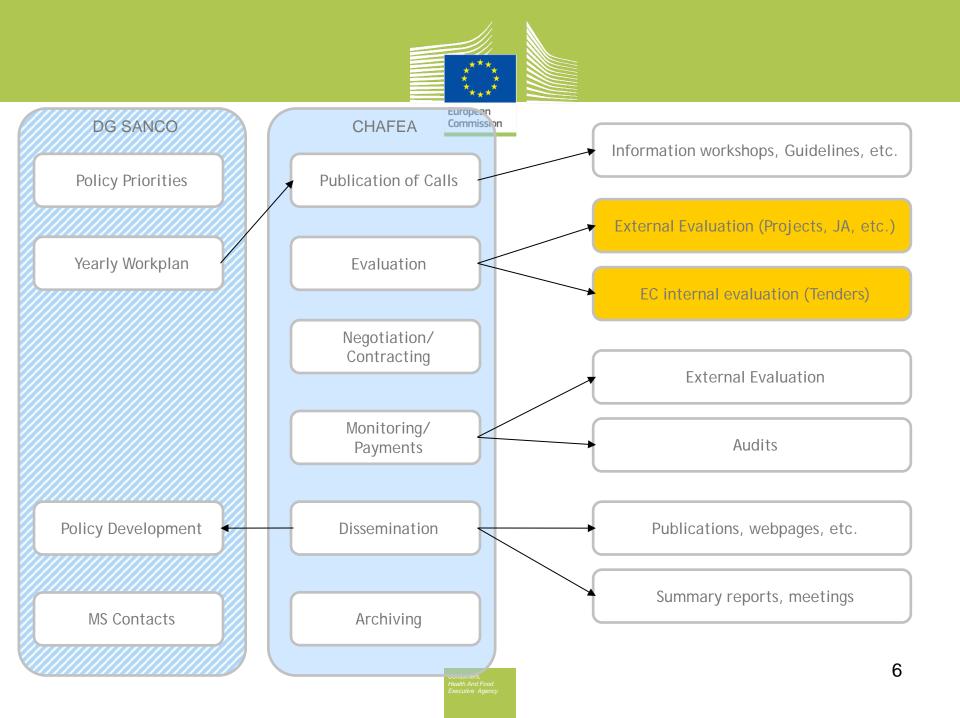


CHAFEA: Facts and figures

Based in Luxembourg

Staff: ~50 (for the 3 programmes)

- Manages nearly 500 public health actions: projects, operating grants, conferences, joint actions, international agreements and service contracts under the Health Programme 2008-2013
- Administers relationships with diverse types of beneficiaries: non-governmental organisations, public sector bodies, public administrations, universities, higher education establishments, commercial firms from all EU member states, with different capacities, experience and working cultures.









Third EU Health Programme 2014-2020

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EU Health Programmes

AIDS Prevention & communicable diseases

Injury prevention

Drug prevention

2002

98

Health monitoring Cancer

Rare diseases

Pollution related diseases

Health Promotion, Information, Education & training



 Community action programme in the field of health 2003-2007

EUR 312 million



2nd
 Community
 action
 programme
 in the field of
 health 2008 2013

EUR 321,5 million



 3rd Union action programme in the field of health 2014-2020

EUR 449,4 million



Health 2014-2020 THE CHALLENGES

- increasingly challenging demographic context threating the sustainability of health systems
- fragile economic recovery limiting the resources available for investment in healthcare
 - increase of **health inequalities** between/within Member States
- increase in **chronic diseases** prevalence
- pandemics and emerging cross-border health threats
- rapid development of **health technologies**

- → Third Health Programme Regulation (EU) 282/2014
- Commission proposal (November 2011)
- The only programme dedicated to health
- Published 21 March 2014
- Applies retroactively from 1 January 2014
- Workplan 2014 adopted 26
 May 2014





Health Programme budget

over 7 years

€449,39 million



€ 33,48 million for the **CHAFEA**



€ 52, 57 (2014)

Million + EFTA contribution = €54,4

2015 € 53,63 million

2016

€ 55,91 million

2017

€58,16 million

2018

2019

2020

€ 59,9 million €61,68 million €62,910 million



Scope of the programme





Objectives of the programme

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

Address in particular the kev risk factors with a focus on the ***eion added Coherent approaches integrated into MS preparedness plans Innovative tools and mechanisms in health and health evention Increase access to medical expertise and information for specific conditions



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 costeffective 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 devises, medicinal products, and patients' rights in cross-border healthcare
- Health information and knowledge system



Annual Work Programme 2014

IMPLEMENTING THE HEALTH PROGRAMME 2014- 2020





Annual Work Programme 2014

- Adopted by the Commission on 26 May 2014
- Annual budget of €54, 4 million
- Two parts:
 - Core text of Decision (Articles)
 - Annexes:
 - ✓ Annex I defining actions for funding Breakdown by financing mechanism (Grants, Procurement, Other Actions)
 - ✓ Annexes II to VII focusing on criteria (eligibility, exclusion, selection and award criteria for these actions; exceptional utility criteria; criteria for assessing the independence from industry, commercial and business or other conflicting interests)





Financial provisions

Interventions:

- Grants for projects
- Grants for "joint actions"
- Operating grants
- Direct grants to International Organisations
- Public procurement (tenders, framework contracts)

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





What's new?

- 3rd Health Programme
 - Financing Instruments have changed
- Use of Electronic Exchange Systems, aligned with the HORIZON 2020 <u>Programmes</u>
 - Electronic Submission
 - Electronic Evaluation
 - Electronic Grant preparation and monitoring
 - Electronic Signatures
- Model Grant Agreement, Payments, Cost structure, simplifications





New: Financing instruments have changed

New procedure for "Joint Actions"

- New procedure for Operating Grants
- No grant for supporting the organisation of Conferences (besides Presidential Conferences)



New IT tools for the management of the 3rd Health Programme

- These IT tools include a platform for e-submission of grant proposals, e-based evaluation system for grant proposals, e-based negotiation module for preparing the grant agreements, e-signature of the grant agreements and amendments and e-based grant reporting systems.
- Based on H2020 IT tools
- With these new IT tools, Chafea will substantially simplify the proposal submission and the grant monitoring processes as no more paper documents will be circulating between the agency and the beneficiaries.





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/h ome.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













Navigation pane



Simplification: grant preparation

- On-line submission forms: the administrative forms are substantially simplified with the use of many dropdown menu boxes and tutorial support
- No original declaration of honour submitted with the proposal (the coordinator will tick a box on behalf of all partners; formal e-signed declaration before signature of GA)
- Easy encoding of the administrative information for each partner using the PIC (partner identification code)
- Simplified budget with limit number of cost items (Staff, Other Direct cost, Indirect cost, Subcontracting). We had 7 cost items into PHP2 budget

28



Simplification: grant preparation (2)

- Only 1 category of staff (in PHP2 we had 2 categories of staff: Costs not Pertaining to national official and Cost pertaining to national official).
- The salary costs of personnel of national administrations (**Public Officials**) will be considered as direct cost to the extent that they relate to the cost of activities which the relevant public authority would not carry out if the project concerned was not undertaken.
- Part B (Description of the action) is prepared as a word template and submitted as PDF (no structured forms).





Simplification: Proposal Submission/grant agreement finalisation (3)

- The submission will be done electronically: No paper submission (No stress with delivering the proposal before the post office is closing)
- The signature of the grant agreement is electronic. There will not be signed paper documents circulating any longer.
- The GA enters into force after the electronic signature of the Coordinator and of the Chafea authorising officer. Once this is done, all the partners will be invited to sign electronically in the system an "accession form" to the GA. This means that there is no longer a need for the coordinator to collect original Mandate Letters.



Simplification: Technical and Financial reporting (4)

- The overall reporting process will be all e-based No paper copies of reports
- Deliverable reports and other reports are submitted, approve/rejected via the on-line project reporting tool.
- The cost will be declared within the payment module and the cost declaration will be signed electronically in the system by each beneficiary (no need for the coordinator to collect original signed declaration of cost)
- The project coordinator will have access a project monitoring tool to help monitoring the progress and the submission of the deliverables (dashboard)

31



Simplification: Amendments to GA (5)

In PHP2, we have an average of **3 amendments** made during the life time of a Project/Joint Action. The administrative burden in preparing amendment is important.

Chafea is **foreseeing measures to decrease the need for amendments**:

- The change of legal representative will be done directly into the system without the need to submit an official amendment.
- The amendment will be submitted electronically via the IT tool.
- If an amendment involves the change of legal name, the system will implement a "bulk" automatic amendment. This means that all the GA involving that organisation will be automatically amendment. No need to submit and treat multiple amendments.





Simplification: Amendments to GA (6)

- To simplify the financial management of the action and to optimise the use of financial resources, beneficiaries will be allowed to transfer resources between themselves and between different cost categories without requesting amendment of the GA, provided that these transfers do not result in changes in the original objectives and deliverables. One exception: beneficiaries cannot change the budget allocated to subcontracting without an amendment.
- This is important improvement since >40 % of the amendment in PHP2 grant agreement concerned changes in budget.





CONSUMERS, HEALTH AND FOOD EXECUTIVE AGENCY

EUROPA > European Commission > Chafea > News & Events

- **⋒** Home
- Nealth Programme
- **Consumer Programme**
- Better Training for Safer Food
- € Funding
- Managing grant agreements & contracts
- Publications
- News & Events
 - Technical meetings
 Other events
- About Chafea
- **d** Contacts

CALLS

CALLS 2014





BTSF initiative

News & Events

Calls for Proposals under the 3rd EU Health Programme – Electronic Submission online now

16 June 2014



2 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

Deadlines for online submissions of the proposals are 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.

New in 2014 is the electronic submission of proposals via the Electronic Exchange System of the EC Participant Portal.

CALLS FOR PROPOSALS UNDER THE HEALTH PROGRAMME

Start at the EU Research & Innovation
Participant Portal

Links and documents

- News from the Commission:
- ▶on Health
- ▶on Consumers
- ▶on Food Safety
- Register for Health-EU newsletter

DG Health and Consumers
Public Health Portal

EU Agencies



Overview: Financing Instruments

- Calls for proposals
 - Call projects
 - Calls for Joint Actions
 - Calls for grants
- Call for tenders





The Call for Projects as a specific financing instrument

CALL FOR PROPOSALS PROJECTS





What is a project? - I

The cynic would say ...

"a series of loosely connected activities that take three times longer and cost twice as much as foreseen, to achieve half the expected results"

- But should really be ...
- a systematic, goal-oriented, temporary and one-time endeavor

to create a unique product or service within clearly specified time, cost and quality constraints



What is a project? - II

A particular method of organising work that differs from standard business operational activities:

- Different from routine activities:
 - does not involve the application of implicit or explicit procedures existing in the organisation to regulate day-to-day work
- Different from improvisation:
 - more effective, but also more time-consuming entails a level of uncertainty or risk
- Particularly useful to introduce innovations, address new challenges or find solutions for problems for which the existing procedures and routines do not accommodate



What does the 3rd Health Programme say regarding co-funding of project?

- Grant may be awarded to fund:
 - actions having a clear Union added value explicitly provided for duly justified in the annual work programmes
 - co- financed by other legally established organisations:
 - public sector bodies: research and health institutions, universities and higher education establishments
 - non-governmental bodies
 - private bodies





Call 2014: Projects

All projects should:

- provide high added value at EU level;
- involve at least three partners (separate legal entities) from different countries **NEW !!**;
- be innovative, and
- normally last no longer than three years.

Co-funding: 60% - up to 80% - exceptional utility





Types of participants

- Project coordinator
- Other beneficiaries
 - Affilited entities

applicants

Several entities form one for the purpose of the action Legal and/or financial link to another beneficiary Must comply with eligibility criteria

- Subcontractors
 - Do not sign grant agreement
 - Get 100% of the cost reimbursed
- Collaborating stakeholders
 - Do not sign the grant agreement
 - Cost not eligible





Eligibility criteria

- Applicants must be legally established.
- Only applicants from the 28 EU Member States plus Norway and Iceland can apply.
- A project proposal must be submitted by at least 3 different legal entities from 3 different eligible countries.
- The only eligible activities are those listed in section 2.1 "Grants for projects" in the work programme 2014.
- The co-funding is meant for a future project.
 Running projects cannot be supported.





Exclusion criteria

- Exclusion from participation:
 - being bankrupt,
 - convicted of an offence concerning professional conduct,
 - guilty of grave professional misconduct
 - not in compliance with their obligations relating to the payment of taxes
- Exclusion from granting procedure:
 - conflict of interest
 - guilty of misrepresenting the information required by the Agency



Project co-funding

- 60% of the total eligible cost
- 80% if exceptional utility

There is not obligation for each applicant to contribute equally to the project's budget

The minimum required percentage of own contribution applies at the project level



Exceptional utility

Co-funding may be up to 80% 3 criteria:

- At least 60 % of the total budget of the action is used to fund staff
- At least 30% of the budget of the proposed action is allocated to Member States whose gross national income (GNI) per inhabitant is less than 90 % of the Union average.
- The proposal demonstrates excellence in furthering public health in Europe and has a very high EU added value.

It is your responsibility to ensure that the proposals complies with criteria 1 & 2



Key dates calls for projects - 2014

- Calls open: 6 June 2014
- Calls close: 25 Sept 2014
- NEW: Electronic submission system
- Evaluation from end-September to beginning November
- Adaptation
- Award Decision
- Signature in 2015



Topics open for submissions for project proposals



Thematic priority	Commission	Amount Euro (millions)
1	Making use of the potential of innovation for the prevention and management of major chronic diseases (diabetes, cardiovascular diseases)	2.5
	Promoting early diagnosis and screening of preventable chronic diseases	1.5
	Developing innovative approaches to promote the professional reintegration of people with chronic diseases and improving their employability	1.5
3	Support in areas related to adherence, frailty, integrated care and multi-chronic conditions	3.0
	Financial support for statistical data in the area of medicinal product pricing in Member States.	0.3
	Towards a sustainable health monitoring and reporting system	3.5
4	Healthcare associated infections - Prevention and control in nursing homes and long-term facilities.	0.5
	Consumers, Health And Food Executive Agency	482.3



TITLE

Making use of the potential of innovation for the prevention and management of major chronic diseases (diabetes, cardiovascular diseases...)

OBJECTIVE

The objective of the projects is to 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.

AMOUNT: € 2 500 000





TITLE

Promoting early diagnosis and screening of preventable chronic diseases

OBJECTIVE

The projects seek to explore the potential of early diagnosis in view of the control and more efficient treatment of chronic diseases. Technical developments, innovative approaches and progress in medicine lead to improved possibilities to identify the onset and to follow the progression of diseases

AMOUNT: € 1 500 000



TITLE

Developing innovative approaches to promote the professional reintegration of people with chronic diseases and improving their employability

OBJECTIVE

The objective of the project is to identify innovative strategies to adapt the workplace to the needs of people with chronic diseases and to improve their integration or reintegration into the workplace.

AMOUNT: € 1 000 000



TITLE

Support in areas related to adherence, frailty, integrated care and multi-chronic conditions

OBJECTIVE

This action seeks to support projects encouraging the use of innovative, coordinated and comprehensive community based prevention. Activities to be addressed will include: (a) supporting the development and implementation of early diagnosis and screening programmes for frailty risk factors; (b) development of programmes to improve the management of multi-morbid patients.

AMOUNT: € 3 000 000





TITLE

Financial support for statistical data in the area of medicinal product pricing in Member States.

OBJECTIVE

The overall goal of this **project** is to achieve a better coordination at the EU level in order to facilitate the control by the Member States of public budgets for medicinal products whilst avoiding/mitigating possible negative impacts on patient access to medicinal care.

AMOUNT: € 300 000





TITLE

Towards a sustainable health monitoring and reporting system OBJECTIVE

The project is about data and health information and supports monitoring, research and policy making in all areas of EU health policy. It should create a network of relevant activities that have been run under the past health and research framework programmes, overcoming the fragmentation of projects on health information and data. The aim is to prepare the transition towards a sustainable and integrated EU health information system for both public health and research purposes

AMOUNT: € 3 500 000



TITLE

Healthcare associated infections - Prevention and control in nursing homes and long-term facilities.

OBJECTIVE

The objective of this project is to enhance infection prevention and control in nursing homes and long-term care facilities in the EU, with the aim to prevent and contain the spread of antibiotic resistances in the long term.

AMOUNT: € 500 000





Any questions about the Call for Projects??



Actions co-finances with Member States Authorities

JOINT ACTIONS





Actions co-financed with Member States authorities — Joint Actions

- Joint Actions have a clear EU added value
- Co-funding 60% / 80%
- Country eligibility: MS /EEA
- NEW: direct grant to named beneficiaries
- MS: nominate participants prior to invitation to prepare proposal
- Can nominate:
 - Competent authorities
 - Public sector bodies / NGO via a transparent procedure
- Letter has been sent to PermRep: deadline <u>16/9/2014</u>



How much co-funding?

- EU contribution is 60 % of the total eligible cost;
- In cases of exceptional utility, it is 80 %.
- ✓ At least 30 % of the budget of the proposed action is allocated to MS whose gross national income (GNI) per inhabitant is less than 90 % of the Union average.

This criterion intends to promote the participation from MS with a low GNI.

✓ Bodies from at least 14 participating countries participate in the action, out of which at least four are countries whose GNI per inhabitant is less than 90 % of the Union average.

This criterion promotes wide geographical coverage and the participation of MS authorities from countries with a low GNI.



Joint Actions



€ 18,6 mio for the following actions co-financed with MS authorities :

- 1. Nutrition and physical activities (€1.2 mio EU co-funding)
- 2. HIV and co-infection prevention (€3 mio)
- 3. Dementia (€1.5 mio)
- Response to highly dangerous and emerging pathogens in the EU (€3.5 mio)
- Improved coordination and resource sharing for medical devices (€0.2 mio)
- 6. Support to eHealth Network (€2.4 mio)
- 7. EU wide rare diseases information databases (€4.3 mio)
- 8. Blood transfusion and tissue and cell transplantation (€2.5 mio)



The Role of the MS



MS to nominate participants **prior** to Chafea invitation to prepare the proposal

Participants

- Competent authorities (national or regional level) or
- other bodies (public sector body/NGO:

nominated via a transparent procedure, according to relevant national legislation) to participate in one or more of the listed JA



Competent Authorities

If more than 1 CA exists in a given public health field at MS/regional level, several competent authorities can be nominated:

Nominations must be submitted separately for each CA

+

"explanation why two or more competent authorities have been nominated"



Joint Actions



Body other than a competent authority to participate:

- The designation must be done through a transparent procedure and according to its relevant national legislation.
- Article 190(1)(d) of the Rules of Application of the Financial Regulation, the **Member State/EEA** is fully responsible to put in place the designation procedure and ensure that the requirements of transparency and legality are respected.
- Third Health Programme (Articles 7 and 8) public sector bodies, in particular research and health institutions, universities and higher education establishments as well as non-governmental bodies can be mandated to participate in the joint action on behalf of the Member State/EEA country.

63



Letter to the Permanent Representatives

Ref. Ares(2014)1573813 -16/05/2014



EUROPEAN COMMISSION HEALTH AND CONSUMERS DIRECTORATE-GENERAL

Public health Director

> Luxembourg, sanco.ddg1.c.1IA/ol(20 14)[565835

NOTE FOR THE ATTENTION OF PERMANENT REPRESENTATION IN THE EU

Your Excellency,

Subject:

Health Programme in 2014 – Implementation of actions co-financed with Member State health authorities (commonly referred to as 'joint actions')

I am writing to you regarding the joint actions planned for 2014 under the third EU Health Programme 2014-2020. The adoption of the work plan is envisaged by end of May 2014. Pending adoption, it would foresee almost €18,6 million for the following actions co-financed with Member State authorities:



Templates

To be completed

and sent to: CHAFEA-HP-JA@ec.europa.eu

and hardcopies (originals) to:

Consumer, Health and Food Executive Agency (Chafea), Health Unit, For the attention of Ms Maria Alonso, DRB A3/022, L-2920 Luxembourg

via

the Permanent Representatives



OFFICIAL NOTIFICATION

of

a competent authority to participate in the joint action

[please insert here the title action]	of the joint			
notification on behalf of th	ame], [please insert title / function], duly authorised to sign this the [please insert name of the ministry/governmental organisation] then, Health and Food Executive Agency that the			
Organisation official name				
Organisation short name				
Legally represented by:				
Name of legal representative				
is [the/an] [delete as appropriate – depending if one or more competent authorities are mandated] eligible body to participate on behalf of [please insert country/regional entity] and under its responsibility in the above mentioned joint action to be funded under the Health Programme 2014. The contact person is:				
First and last name				
Direct telephone line				
E-mail address				

Signature

Date:

Place:

66

OFFICIAL NOTIFICATION

<u>of</u>

a body other than a competent authority to participate in the joint action

[please insert here the title of the joint action]				
notification on behalf of th	nme], [please insert title / function], duly authorised to sign this e [please insert name of the ministry/governmental organisation] amer, Health and Food Executive Agency that the			
Organisation official name				
Organisation short name				
Legally represented by:				
Name of legal representative				
body to participate on b	priate—depending if one or more bodies are mandated] eligible ehalf of [please insert country/regional entity] and under its mentionedjoint action to be funded under the Health Programme			
First and last name				
Direct telephone line				
E-mail address				
national legislation in fo	tion procedure was executed and concluded in the respect of the rece in [please insert country] and that all the transparency public EU and national funds in [please insert country] have been			

fully met. I confirm that the [please insert name of the ministry/governmental organisation]

Signature

is fully responsible for this designation and its legality.

67

Date: Place:





Deadline for NOMINATION of competent authority

16 September 2014







NEW in 2014: Electronic submission upon invitation!

- Electronic Submission System used for H2020 and other programmes
- No paper / online submission!
- Information will be on Chafea, SANCO web and the Participant Portal
- Evaluation & grant agreement: online





Next steps

Nomination of participants
 Deadline:
 September

2. Chafea sends the Invitation letter to prepare the grant agreement for the designated competent authorities

3. Information session on Joint Actions, by late September/early October

4. ADVANCED DRAFT PROPOSALS

2 deadline options;

Mid November Or Mid-January 5. Remote assessment of JA

6. Discussion among JA coordinators and evaluators

AWARD DECISION

7. ADAPTATION of the JA proposal in SYGMA

Executive Agency



Topics open for Grants for actions co-finances with member State authorities



JOINT ACTION – thematic priority 1

TITLE

Facilitating the sharing of good practices between the EU Member States on national policies related to unbalanced dietary habits and physical inactivity

OBJECTIVE

The objective of this action is to take forward the work on common priorities identified in the EU strategy on nutrition, overweight, and obesity-related health issues between national bodies mandated in this field. It should lead to increased attention at national level on the necessity to develop action to counter obesity, in particular childhood obesity.

AMOUNT: € 1 200 000





TITLE

Improvement of HIV and co-infection prevention and treatment in priority regions and priority groups in the European Union OBJECTIVE

The activities should particularly address the growing HIV/AIDS epidemic among drug users, their sexual partners and offspring in East and Southern European countries. This action will build on best practice models of several EU networks. Collaboration between social services, health services and security sectors will be facilitated, and the capacity of professionals in these sectors to use cost effective prevention methods will be supported.

AMOUNT: € 3 000 000





TITLE

Promoting the implementation in Member States of coordinated actions to improve the situation of people with dementia and their carers

OBJECTIVE

The purpose of this action is to build on the outcomes of the ALCOVE Joint Action, to further develop knowledge and recommendations and to tackle important aspects related to dementia which have not been sufficiently addressed so far.

AMOUNT: € 1 500 000



TITLE

Efficient response to highly dangerous and emerging pathogens at EU level - Phase II

OBJECTIVE

The objective of this action is to ensure an efficient response to serious cross-border events caused by new and dangerous pathogens through reinforcing the existing EU network of Risk Group 3 and Risk Group 4 laboratories. This action will enable an efficient and coherent EU level response to potentially devastating cross-border events and it will also support Member States in implementing the International Health Regulations.

AMOUNT: € 3 500 000





TITLE

Technical and scientific co-operation allowing improved coordination and resource sharing between Member States OBJECTIVE

This action is about the technical and scientific co-operation allowing improved coordination and resource sharing between Member States following the adoption by the legislators of new Regulations on medical devices and in vitro diagnostic medical devices.

AMOUNT: € 203 000



TITLE

eHealth support for the eHealth Network by national competent authorities

OBJECTIVE

The action will support the eHealth Network by producing the required policy documentation and making the necessary arrangements for technical support to the work programme and decisions of the Network. The action will also contribute to the sharing of good practices between Member States on how eHealth tools are used in health promotion and disease management.

AMOUNT: € 2 400 000





TITLE

Support to the implementation of Council Recommendation and Commission Communication on Rare Diseases, in particular to an EU wide rare diseases information database OBJECTIVE

Developments in science and policy require continuous improvements. Therefore the aim of this action is to continue implementation of priorities identified in the Commission Communication COM(2008) 679 on Rare Diseases: Europe's challenges and in the Council Recommendation (2009/C 151/02) on an Action in the field of rare diseases.

AMOUNT: € 4 290 000





TITLE

Strengthening the Member States' capacity of monitoring and control in the field of blood transfusion and tissue and cell transplantation

OBJECTIVE

This action will promote further cooperation between Member States competent authorities in the area of blood transfusion and tissue and cell transplantation. The action should build on the outcome of previous EU-funded projects and should provide support in various aspects like managing national vigilance systems, traceability and implementation of the Single European Code for tissues and cells, and training of inspectors.

AMOUNT: € 2 500 000



Any questions about the new procedure for the Joint Actions?



The Call for Operating Grants as a specific financing instrument

OPERATING GRANTS





Call 2014: Operating Grants

What is an operating grant?

- Co-finance core operating costs for non-governmental bodies
- over a period that is equivalent to its one accounting year.
- 60 percent of expenditures can be covered (in cases of exceptional utility, the EU contribution can be 80%).



Who can apply for operating grant?

- Open for applications by <u>single bodies</u> (not consortia) legally established in a country participating in the 3HP;
- <u>Type of organization</u> non-governmental bodies or networks hosted by a non-governmental, non-profit body.
- Important applicants have to be:
 - Non-governmental, non-profit-making and independent of industry, commercial and business or other conflicting interests;
 - Working in the public health area, play an effective role in civil dialogue processes at Union level and pursue at least one of the specific objectives of the Programme;
 - Active at Union level and in at least half of the Member States, and have a balanced geographical coverage of the Union.



New

Framework partnership agreement (FPA)

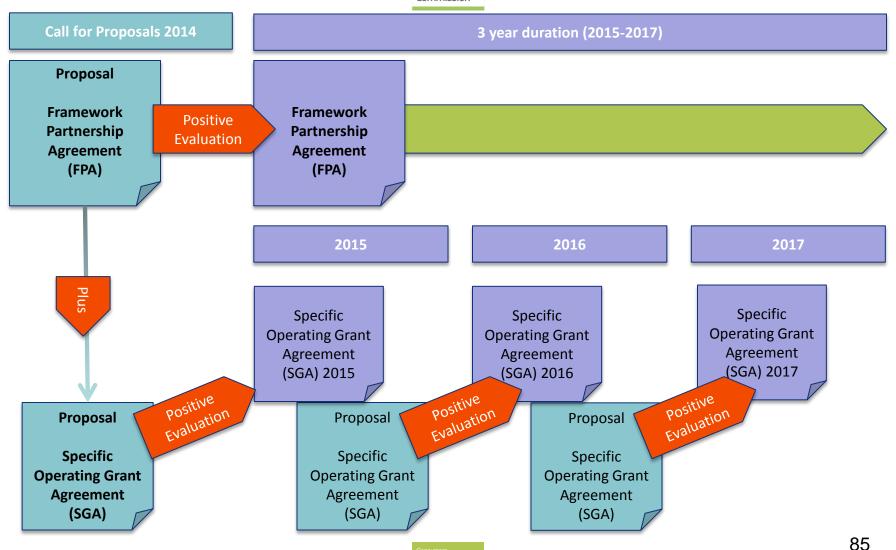
- 2015 2017
- Does not guarantee funding

Specific Grant agreement (SGA)

- Only those who have a FPA will be invited to send a proposal for a SGA – except in 2014!
- For 1 accounting year
- Like "normal operating grant"









Framework Partnership Agreement (FPA) proposal and outcome

- It will present an action plan covering the period from 2015 to 2017 (3 years)
- It will not include a request for co-funding, but only a provisional budgetary overview for the period 2015-2017
- Successful applicants will be invited to sign the FPA for that period; this will be a legal commitment, serving as the basis for the 3-year partnership
- Once the FPA is signed, it will make the signatory nongovernmental body or network eligible for receiving EU funding on the basis of an invitation to submit an SGA proposal



Specific Grant Agreement (SGA) proposal and outcome

- It will present the detailed action plan and budget for the first year of the partnership (in this case, for year 2015)
- It will include a request for EU financial contribution for the specific year (2015)
- Successful applicants will be invited to sign the SGA for 2015; this will be a budgetary commitment for that specific year
- The award of a financial contribution in 2015 does not guarantee to that organisation co-funding for the other two years covered by the FPA



Advantages of the new procedure

- Sustainability: the partnership will be based on alignment at the strategic level
 - One FPA call covering three years of operations
- Predictability: Invitation based (i.e. no Call) submission of SGA proposals for each year of the FPA
 - SGA co-funding will be based on alignment between strategic plan and operational objectives
- Simplification: less administrative burden on beneficiaries
 - No need to re-submit supporting documents each year





Priority topics for 2014:

- Chronic diseases
- Cancer
- HIV/AIDS
- Rare diseases in general
- Smoking prevention.

AMOUNT: € 4 650 000



Key dates

	Stages	Date/period
a)	Publication of the call	06/06/2014
b)	Deadline for submitting applications	25 September 2014
c)	Evaluation period (indicative)	26 September – 31 October 2014
d)	Information to applicants (indicative):	
	Official letters concerning the award of Framework Partnership Agreements and Specific Grant Agreements	≥ 14/11/2014
g)	Signature of grant agreement (indicative)	≤ 31/12/2014
h)	Starting date of the action (indicative)	≥ 01/01/2015



EU co-funding level

- Total budget EUR 4.650.000
- 60% of the total eligible cost
- 80% in cases of exceptional utility; 2 criteria:
 - 25 % of the members or candidate members of the non-governmental bodies come from Member States whose gross national income (GNI) per inhabitant is less than 90 % of the Union average
 - The proposal demonstrates excellence in furthering public health in Europe and has a very high EU added value





Eligible applicant organisations for an Operating Grant

- A non-governmental body:
 - o that it is active in at least half of the EU Member States;
 - that it is non-profit-making and independent of industry, commercial and business or other conflicting interests
- A network i.e. a formal or informal group:
 - that is active at the Union level and in at least half of the EU Member States
 - that has established rules of cooperation (e.g. SOPs, MoU or CA) proving the network's membership;
 - that is non-governmental, non-profit-making and independent of industry, commercial and business or other conflicting interests





Exclusion criteria

Exclusion from participation:

- being bankrupt
- convicted of an offence concerning professional conduct
- guilty of grave professional misconduct
- not in compliance with their obligations relating to the payment of taxes

Exclusion from granting procedure:

- conflict of interest
- guilty of misrepresenting the information required by the Agency



Selection criteria

Financial capacity

- Not necessary if < 100 000€ EU co-funding or if the applicant organisation qualifies as a public body
- Necessary if > 100 000€ EU co-funding
- Audit report necessary if > 750 000€ EU co-funding

Performed through a financial viability self-check

 If the self-check result is "weak" do not be discouraged from applying!

Operational capacity: self-declaration & information provided in the proposal provided in the provided in the proposal provided in the provided in the proposal provided in the provided in the provided in the proposal provided in the provided in



NEW in 2014: electronic submission

- On-line submission system used for H2020 and other programmes
- No paper / e-mail submission!
- Information will be on Chafea, SANCO web and the Participant Portal
- Evaluation & grant agreement: on-line



Important steps

- Get an ECAS account
- Register in the beneficiary registry
 - Ensure that your potential partners are registered as well
- Get familiar with the Participant Portal
- Search for a call
- Create a submission
 - Part A
 - Part B
 - Annex



Proposal Framework Partnership Agreement (FPA 2015-2017)

Structure of the **Operating Grant Proposal**

Administrative Part

Technical Narrative Part B.1 (3yr.)

Technical Narrative Part B.2 (1yr) Annex 1: Detailed Budget Member-ship
List

Annex 3:
Statute and
Rules

Annex 4:
Annual Activity
Report

Annex 2:

Annex 6: Financial Independence

Annex 5:

Trans-

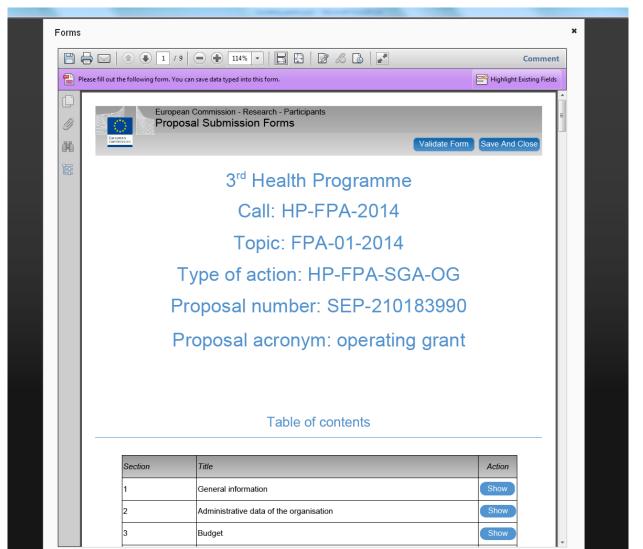
parency Statement

Proposal
Specific
Operating
Grant
Agreement
(SGA 2015)





Administrative part – part A





The FPA technical proposal structure follows the award criteria

Criterion	Maximum	Threshold	Threshold in
	points		% of max.
			points
1 – Policy and contextual	10	8	80%
relevance of the operation of the			
non-governmental body			
2 – Technical quality of the multi-	10	7	70%
annual work programme			
proposed			
3 – Management quality	10	7	70%
TOTAL	30	22	



FPA technical proposal – part B1



Proposal template B.1:

3-year Work programme 2015-2017 for the Framework Partnership Agreement (FPA) for an Operating Grant (HP-FPA-OG)

3rd EU Health Programme

Please follow the structure of this template when preparing your proposal. It is designed to ensure that the important aspects of your planned work are presented in a way that will enable the evaluators to make an effective assessment against the evaluation criteria.

Please be aware that proposals will be evaluated as submitted, rather than on their potential if certain changes were to be made. This means that only proposals that successfully address all the required aspects will have a chance of being funded. There will be no possibility for significant changes to content and budget during grant preparation.



The SGA technical proposal structure follows the award criteria

Criterion	Maximum	Threshold	Threshold in
	points		% of max.
			points
1 – Coherence with the 3-year work	10	6	60%
programme annexed to the FPA			
2 – Quality of the proposed	10	6	60%
activities for 2015			
3 – Quality of the proposed budget	10	6	60%
for 2015			
TOTAL	30	18	60%





SGA proposal – part B2



Proposal template B.2:

1-year Work programme 2015 for the Specific Grant Agreement (SGA) for an Operating Grant (HP-FPA-SGA-OG)

3rd EU Health Programme

Please follow the structure of this template when preparing your proposal. It is designed to ensure that the important aspects of your planned work are presented in a way that will enable the evaluators to make an effective assessment against the award criteria.

Please be aware that proposals will be evaluated as submitted, rather than on their potential if certain changes were to be made. This means that only proposals that successfully address all the required aspects will have a chance of being funded. There will be no possibility for significant changes to content and budget during grant preparation.

Page limit: Full proposals should not be longer than 30 pages. All tables or graphs, flow charts etc. in these sections must be included within this limit. The minimum font size allowed is



Annexes – key points

- Parts B1 and B2: you use an blank WORD document and you fill it in following the template structure
- Documents to be provided from website of the applicant organisation as PDFs:
 - o Annex 2: Members' list
 - Annex 5: Position statement on transparency
- Financial & budgetary documents:
 - Annex 1: detailed budget for 2015
 - Annex 6: financial independence form
- Other supporting documents:
 - Annex 3: applicant organisation's statutes and rules
 - Annex 4: applicant organisation's most recent annual activity
 report



Any questions about the FPA and SGA?



Procurement

CALL FOR TENDERS



Overview:

- What is procurement
- EU Health Annual Work Plan for 2014- Call for tenders
- Procedure
 - Publication
 - Submission of the offer
 - Evaluation
 - Award

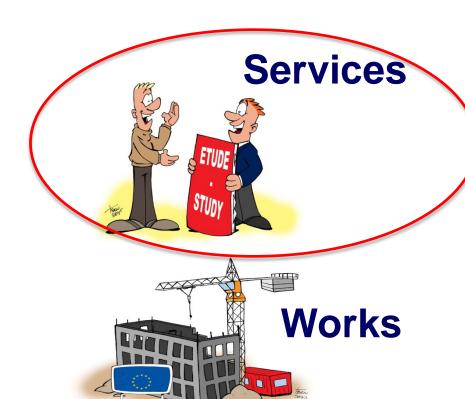


1. Procurement



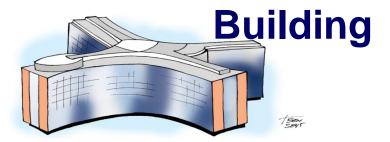
Calls for Tenders

EU Purchases - Public Procurement = Call for tenders



Supplies







Call for Tenders

Procurement vs. Grant

To acquire a product or a service.	Purpose	To encourage actions indicated in the Work Plan, which fall primarily within the scope of the beneficiary's activities
Call for tender	Procedure	Call for proposals
Service Contract	Legal outcome	Grant Agreement
The EU pays 100 % of the contract price	EU financial contribution	EU-contribution to the overall costs (Co-funding)
Since the service or product has been purchased and paid for by the EU, in general it belongs to the EU in its entirety	Ownership	The ownership as a rule is vested in the beneficiary of the grant.
The operator's remuneration should include an element of profit.	Profit	The grant must not have the purpose or the effect of producing a profit for the beneficiary.



Procurement principles

- Principle of transparency
- Principle of proportionality
- Principle of equal tratment and nondiscrimination

3 rd EU HEALTH PROGRAMME	Tittle of the new Call for tenders	Type of contract
priority 1	Disseminating good practice on mental health through the European Compass for Action on Mental Health and Wellbeing	Direct service contract
priority 2	Study on cost-benefit of reference laboratories for human pathogens	Direct Service contract
priority 3	Assessment of implementation of Patients' Rights directive: Study on mapping of patients' rights in all Member States	Direct Service contract
	Support for the definition of core competences of healthcare assistants	Direct Service contract
	Implementation of the Cross-border Healthcare Directive:	
	Technical assistance: Development of a manual and toolbox for the assessment of European Reference Networks	Direct Service contract
priority 4	Identification and definition of the typology and elements of the healthcare services to be provided by the European Reference Networks	Direct Service contract
	Selection of the independent assessment/evaluation body(ies) in charge of the assessment of the applications of Network and membership proposals.	New FRAMEWORK service contract



TITLE

Disseminating good practice on mental health through the European Compass for Action on Mental Health and Well-being

OBJECTIVE

The objective is to implement the invitation contained in the Council conclusions on 'The European Pact for Mental Health and Well-being. This action covers (a) good practice collection; (b) supporting Member States developing a format for the regular collection of information; and (c) supporting and networking health and non-health stakeholders establishing a web based Multi-Stakeholder Partnership of Leaders in Action for Mental Health and Well-being.



TITLE

Study on cost-benefit of reference laboratories for human athogens

OBJECTIVE

The overall objective of this study is to strengthen the existing coordination of reference microbiology provision in the EU in order to support the European response coordination to outbreaks of highly pathogenic infectious agents. This study will complement findings of a study on a European system of reference laboratories for pathogens for humans with a cost-benefit analysis to assess possible options for establishing such an EU wide approach.



TITLE

Assessment of implementation of Patients' Rights directive: Study on mapping of patients' rights in all Member States

OBJECTIVE

This mapping exercise should give a general overview of the laws, structures, procedures and mechanisms in place in the different Member States guaranteeing patients' rights. This is to increase the predictability for each citizen who wants to seek healthcare in another Member State and ease the utilisation of these arrangements. In addition to exploring the different legal provisions in place in each Member State, an assessment on if and/or how these provisions are implemented in terms of structures, procedures and mechanisms will also be undertaken.



TITLE

Support for the definition of core competences of healthcare assistants

OBJECTIVE

Establishment of a network: To encourage greater intra EU mobility, while ensuring a high quality of care and patient safety, the development of a common training framework according to the modernised professional qualification directive for healthcare assistants should be prepared by setting up a network to build consensus on common knowledge, core competences and skills for healthcare assistants.



TITLE

Implementation of the Cross-border Healthcare Directive:

Technical assistance: Development of a manual and toolbox for the assessment of European Reference Networks.

OBJECTIVE

A tenderer will be contracted to develop a complete and exhaustive assessment and evaluation manual and toolbox that will be used for the assessment of candidate ERNs projects and the healthcare providers wishing to become Members of a Network as well as for their evaluation.



TITLE

Implementation of the Cross-border Healthcare Directive:

Identification and definition of the typology and elements of the healthcare services to be provided by the European Reference Networks.

OBJECTIVE

This action seeks to support the implementation ERN and

in particular the goal "to facilitate improvements in diagnosis and the delivery of high-quality, accessible and cost-effective healthcare for all patients with a medical condition requiring a

particular concentration of expertise in medical domains where expertise is rare;".

116



TITLE

Implementation of the Cross-border Healthcare Directive:

Selection of the independent assessment/evaluation body(ies) in charge of the assessment of the applications of Network and membership proposals.

OBJECTIVE

This new Framework service contract should be launched subsequently to the production of the assessment and evaluation manual. The objective is to select the independent bodies capable to fulfil strong requisites, experience and technical capacity.



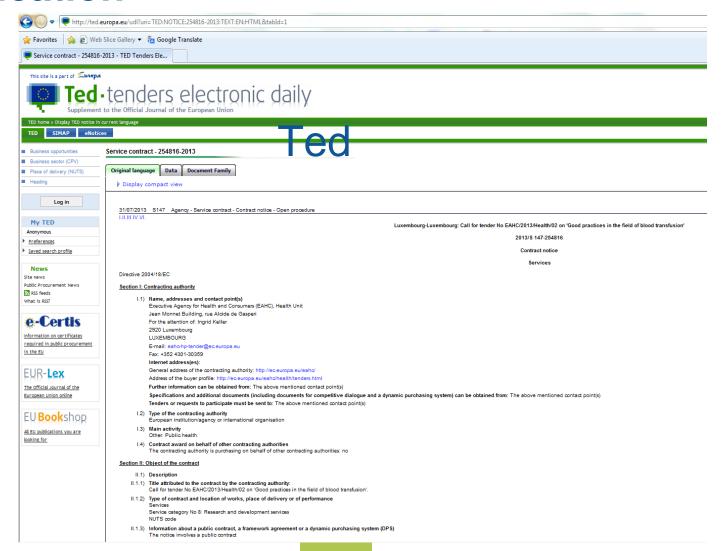
Procedure

- 1. Publication
- 2. Preparation of the Tenders
- 3. Submission of the tenders
- 4. Evaluation





1. Publication





| Accessibility | A-Z Index Sitemap | Legal notice | Contact | Search



CONSUMERS, HEALTH AND FOOD EXECUTIVE AGENCY

Health Programme

EUROPA > European Commission > Chafea > Health Programme > Call 2013: Tenders



.....

🥵 Health Programme

Grants for projects Operating grants Grants for conferences Calls for tender Joint actions Funded projects Projects database FAQ Previous calls

Consumer Programme

X Better Training for Safer Food

€ Funding

Managing grant agreements &

Contracts Publications

News & Events

About Chafea

Contacts

Health Programme

Call 2013: Tenders

Please note that the deadline for submission of tenders has expired.

Calls for tenders

Call for tender n° EAHC/2013/Health/01 for concluding Multiple Framework Contracts with reopening of competition to support the implementation of the Health Programme through health reports and economic analysis

Call for tender n° EAHC/2013/Health/02 on good practices in the field of blood transfusion

Call for tender no EAHC/2013/Health/03 concerning training packages for health professionals to improve access and quality of health services for migrants and ethnic minorities, including the Roma

Call for tender no EAHC/2013/Health/04 concerning empowering patients in the management of chronic diseases

Call for tender n° EAHC/2013/Health/05 concerning a Life Table Analysis: health system cost-effectiveness assessments across Europe

Call for tender n° EAHC/2013/Health/06 on overview of the national laws on electronic health records in the EU Member States and their interaction with the provision of cross-border eHealth services

Call for tender n° EAHC/2013/Health/07 concerning the review and mapping of continuous professional development and lifelong learning for health professionals in the EU

Call for tender no EAHC/2013/Health/08 concerning Effective Recruitment and Retention Strategies for Health Workers

Call for tender n° EAHC/2013/Health/09 concerning pilots on early dialogue between health technology assessors and healthcare product developers during the development phase of medicinal products and medical devices

Call for tender n° EAHC/2013/Health/10 concerning Multiple Framework Contracts with reopening of competition to support tobacco policies

Links and documents

- National Focal Points for Health Programme
- Jobs: Register to be an expert for EU Health Programme
- Projects database
- Health Programme decision
- Previous programme

DG Health and

Public Health Portal

EU Agencies



| Accessibility | A-Z Index Sitemap | Legal notice | Contact | Search



CONSUMERS, HEALTH AND FOOD EXECUTIVE AGENCY

Health Programme

EUROPA > European Commission > Chafea > Health Programme > Call 2013: Tenders - Good practices in the field of blood transfusion



- FAQ Previous calls
- Consumer Programme
- Better Training for Safer Food
- € Funding
- Managing grant agreements &
- Contracts Publications
- News & Events
- About Chafea
- **d** Contacts

Health Programme

Call 2013: Tenders

Please note that the deadline for submission of tenders passed.

Call for tender n° EAHC/2013/Health/02 on good practices in the field of blood transfusion

CALL FOR TENDER

The general objective of the call for tender is to increase the implementation of best practices in the field of patient blood management by professionals and hospitals in the EU Member States.

Specifically, the successful tenderer shall:

- Develop a EU guide for Member States and health professionals to help implement good practices for patient blood management: This shall take into account earlier guides, such as the "Donor Management Manual" and the "Manual of Optimal Blood Use", but it shall differ from these in focusing on strategies to minimize individual patients' risk of transfusion;
- Implement patient blood management programs in 5 teaching hospitals in EU Member States, which shall be evaluated after 12 months;
- Prepare an implementation strategy to help national authorities to disseminate and implement patient blood management in hospitals across the EU.

The deadline to submit tenders is the 27 September 2013.

- Questions and Answers (last update: 24-09-2013)
- Contract award notice en

Documents

- Contract Notice en Propried

PDF tender form 📾 উ 🌣 (Adobe Reader 9.5 or higher is required)

How to complete the call for tender form - Step by step guide 🖭 🏗 🍽

Note: this PDF form contains the following annexes:

- Annex Ia: Tender submission form Statement
- Annex Ib: Letter of mandate (consortium member) / written commitment (subcontractor)

Links and documents

- National Focal Points for Health Programme
- Jobs: Register to be an expert for EU Health Programme
- **▶** Projects database
- Health Programme decision
- Previous programme

DG Health and Consumers

Public Health Portal

EU Agencies

Deadline

Tender Specifications

PDF Form

121





2. Preparation



Who can participate?

Natural and legal persons from:

- The Member States of the European Union
- Countries of the European Economic Area

Types of tenderer:

- Single tenderer
- Single Tenderer with Subcontractor
- Consortium
- Consortium with Subcontractor





Consortia (Groups of economic operators)

The offer shall clearly specify the role and tasks of each member of the consortium:

- -The **consortium leader:** with full authority to bind the consortium and each of its members
- -Each partner shall fulfil the requirements and accept the terms and conditions set out in the ToR, the contract as well as in all the relevant Annexes.

In case of awarded the tender:

all members of the consortium will be jointly and severally liable towards the contracting authority for the performance of the contract.



3. Submission

The Tender must include 3 envelopes:

- Envelope A: Administrative proposal
- Envelope B: Technical proposal
- Envelope C: Financial proposal

(see PDF form which has to be completed).

The offer has to be sent to Chafea by registered mail or by courier post mail, in a sealed packet containing the 3 envelops, before the date of deadline.





A) Adminsitrative:

PDF document:

- Annex la: Tender submission form Statement
- Annex Ib: Letter of mandate (consortium member) / written commitment (subcontractor)
- Annex IIa: Legal entity form for public entities
- Annex IIb: Legal entity form for private entities
- Annex IIc: Legal entity form for natural persons
- Annex III: Financial identification form
- Annex IV: Declaration of honour
- Annex VII: Economic and financial capacity overview form
- + othe documents: e.g. judicial recors, certificates regarding taxes and social security dues...
- + Balance sheets and profit and loss accounts
- + CVs, Annex IX (Check list)...

B) Technical

The technical offer Write yourself

C) Financial proposal

Annex V: financial offer form



List of the annexes to be filled depending on the type of member

To help you to prepare the offer, please consult the Step by step guide for the PDF

Type of tenderer	Member status	Annex Ia Letter of Mandate	Annex Ia Written commitment	Annex II a/b/c Legal Entity	Annex III Financial IIdentification	Annex IV Declaration of Honour	Annex VII Financial Capacity
Single Tenderer	Single Tenderer			X	X	X	X
Single Tenderer with	Single Tenderer			X	X	X	X
Subcontractor	Subcontractor		X			X	X*
Consortium	Consortium leader			X	X	X	X
Consol tum	Consortium member	X				X	X
	Consortium leader			X	X	X	X
Consortium with Subcontractor	Consortium member	X				X	X
	Subcontractor		X			X	X*

^{*} Only if the field "The amount to be received by the Subcontractor IS >= 60.000 €" is checked.





4. Evaluation

Exclusion Criteria

Administrative part

evidence

Administrative part

Administrative part

evidence

Technical and financial

evidence

parts



In case of Consortium : evidence for each member In case of
Subconbracting:
evidence if private
body and the value is
>60.000 euros

a)Exclusion criteria

Evidence that shall be provided when submitted the offer:

-Annex IV: Declaration of honour

 -Recent extract from the judicial record or, failing that, an equivalent document recently issued by a judicial or administrative authority in the country of origin or provenance showing that those requirements are satisfied;

-Certificates by the competent authority regarding the fact that the taxes and the social security dues are paid (including for example VAT, income tax (natural perons only), company tax (legal persons only) and social security contributions.

If the documents are not issued in the country, they may be replaced by a **sworn** or, failing that, **a solemn statement** made by the interested party before a judicial or administrative authority, a notary or a qualified professional body in his country of origin or provenance



Ann

Annex IV Declaration of honour

with respect to

the exclusion criteria and absence of conflict of interest

Navigation pane

Envelope A

Table of Content

General Information

Tenderer composition

> Member details

Add New Member



Print entire document

* Mandatory fields

* Fields auto completed



vigation

Envelope A

Table of

Content

General

Information

Tenderer

composition

Member

details

tattt

Official name in full* tattt

tattt

Official address*

2128 - luxembourg

Official legal form* Natural Person

VAT registration * 84758458

declares that the above-mentioned legal person / he / she is not in one of the following situations:

a) is bankrupt or being wound up, is having its affairs administered by the courts, has entered into an
arrangement with creditors, has suspended business activities, is the subject of proceedings concerning
those matters, or is in any analogous situation arising from a similar procedure provided for in national
legislation or regulations;

b) has been convicted of an offence concerning professional conduct by a judgment of a competent authority of a Member State which has the force of res judicata;

- c) has been guilty of grave professional misconduct proven by any means which the contracting authorities can justify including by decisions of the European Investment Bank and international organisations;
- d) is not in compliance with all its obligations relating to the payment of social security contributions and the payment of taxes in accordance with the legal provisions of the country in which it is established, with those of the country of the contracting authority and those of the country where the contract is to be performed;
- e) has been the subject of a judgement which has the force of res judicata for fraud, corruption, involvement in a criminal organisation, money laundering or any other illegal activity, where such activity is detrimental to the Union's financial interests;

f) is a subject of an administrative penalty for being guilty of misrepresentation in supplying the information required by the contracting authority as a condition of participation in a procurement procedure or failing to supply this information, or having been declared to be in serious breach of its obligations under contracts covered by the Union's budget. declares that the above-mentioned legal person / he /she:

g) has no conflict of interest in connection with the contract; a conflict of interest could arise in particular as a result of economic interests, political or national affinity, family, emotional life or any other shared interest:

has no conflict of interest with other commitments or contracts recently concluded or likely to be concluded by the tenderer either individually or through any consortium with which the tenderer belongs or through any subsidiary or related company;

h) will inform the contracting authority, without delay, of any situation considered a conflict of interest or which could give rise to a conflict of interest;

 i) has not granted and will not grant, has not sought and will not seek, has not attempted and will not attempt to obtain, and has not accepted and will not accept any advantage, financial or in kind, to or from any party whatsoever, where such advantage constitutes an illegal practice or involves corruption, either directly or indirectly, inasmuch as it is an incentive or reward relating to award of the contract;

j) provided accurate, sincere and complete information to the contracting authority within the context of this procurement procedure;

acknowledges that the above-mentioned legal person / he / she may be subject to administrative and financial penalties² if any of the declarations or information provided prove to be false.



b)Selection criteria I

1. Proof of eligitibility

- a) In which State it has its headquarters or domicile

 Annex la: Tender submission form Statement
 - b) it indicates its VAT number (Annex IIa/IIb: Legal entity);
 - c) it indicates the name and position of the person authorised to sign the contract (Annex Ia);
 - d) it indicates **its bank account number and bank address** (R.I.B. or standard form in Annex III
 Financial identification form);
- e) if the tenderer is a **natural person**, Annex IIc Legal entity form for natural persons





Member(s) detailed information

ope A	Member Status*
e of	CSingle Tenderer CConsortium Leader Update Status
ent	Subcontractor Consortium Member Private Entity
eral	The amount to be received by the Subcontractor IS >= 60.000 € ☐ ☐ Public Entity
ation	Tenderer
erer	/member name*
	Address*
iber alls	Postcode* City* Country*
	VAT registration * Registration no*
	Website*
	E-mail*
	The person authorised to represent the tenderer and to sign the contract is
New	Name *
ber	Position/Funct.*
v all	Office address*
xes	Office address
	Telephone* Fax*
ntire ment	E-mail*
	The contact person for this tender is



b)Selection criteria II

1. Proof of eligitibility II

f) In case of a **consortium**, the consortium leader shall submit the **Mandate**letters (Annex lb Letter of mandate (consortium member) / written commitment (subcontractor) signed and dated by the consortium members and co-signed by the consortium leader:

In case of **subcontracting** the tenderer shall submit the **written commitment** proving the willingness of the subcontractor(s) to accept the task proposed to it / them by tenderer



Navigation

Envelope A

Table of Content

General Information

Tenderer composition

Member

details

Statement

form". If the tender is su	bmitted by a consortium, the "Tende	tenderer shall sign the "Tender submissic er submission form" shall be signed by ti om the other consortium members shou
have examined and a		above tenderer, hereby declare that v tion the entire content of the tend- ferred to above.
We propose to provide offer.	e the services requested in the te	nder specifications on the basis of o
	e the services requested in the te	nder specifications on the basis of o



b)Selection criteria III

2. Economic and financial capacity

- Balance sheets or extracts from balance sheets and profit and loss accounts for at least the last two years for which accounts have been closed, where publication of the balance sheet is required under the law of the country in which the tenderer is established.
- Tenderers (and in case of a consortium, the consortium leader and the consortium members) are also requested to fill in the form 'Economic and Financial Capacity Overview' in Annex VII:





b)Selection criteria IV

3. Technical and professional capacity

The tenderer must meet the criteria specified in the Terms of Reference

Evidence:

- a) CV in the Europass formatt
- b) Checklist on Selection Criteria (Annex IX)
- c) E.g. Publications, English language knowledge





c)Award criteria

The contract will be awarded to the tenderer who submits the most economically advantageous bid, as assessed on the basis of the following factors:

A. Technical evaluation criteria

Quality Award Criteria will be specified in the ToR.

Minimun threshold will be required (tenders falling below will be eliminated).

B.Price

The price must be presented in an standard format (Annex V)

A formula will be applied and the contract will be awarded to the tender achieving the highest score.





No obligation to award the contract

Completing the adjudication or the procedure of the call for tenders in no way imposes on the Executive Agency an obligation to award the contract.

Chafea shall not be liable for any compensation with respect to tenderers whose tenders have not been accepted, not shall it be liable when deciding not to award the contract.



Any questions about the Calls for tenders??



Thank you for your attention!

Ana Mancho Rojo
Project Officer
European Commission
Consumers, Health and Food Executive Agency
Health Unit

CHAFEA-HP-CALLS@ec.europa.eu http://ec.europa.eu/eahc/

