SYMPOSIUM INSERM NETWORK FIBER CLUSTER HEALTH - HORIZON EUROPE MAIN OBJECTIVES & RULES FOR PARTICIPATION

Aude RAIMBAULT

EU Policy officer

Cluster Health-Mission

Cancer-IHI partnership

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INSERM - CELLULE EUROPE

Pôle Relations Européennes (PRE)



Guillaume Fusai Responsable du Pôle Europe



Laurence Garric ERC, EIT Health



Aude Raimbault
Cluster Santé (IHI EDCTP3), mission cancer



Géraldine Camilleri ElC Pathfinder



Ivone Alves
Communication

Département des Ressources Humaines (DRH)



Morgane Bureau
Actions Marie S. Curie









Marion Di Maria
Aspects Juridiques et Financiers



Plan d'action pour la mise en œuvre de la stratégie européenne de l'Inserm



MANY INSERM ACTORS CAN HELP YOU FROM YOUR PROJECT IDEA TO YOUR PROJECT SUBMISSION!

If management mandate held by Inserm

CELLULE EUROPE / SIÈGE

- **Identify** the relevant instrument for your project
- Check that your project is in line with the call you have targeted
- Analysis of success factors in winning projects, writing tips
- Rules for participation
- Statistics
- Proof Reading (ERC and MSCA)

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YOUR REGIONAL DELEGATION

- Identify the relevant instrument for your project
- Check that your project is in line with the call you have targeted
- Assistance with budgetary and legal arrangements
- Financial management of the project if it is selected

INSERM TRANSFERT

- To coordinate projects with several partners
- Dedicated project manager
- Planning, structuring, contribution to drafting
- Administrative organisation
 (partner data collection, meetings, submissic
- Set-up cc



>Complementary actors working closely together





HORIZON EUROPE FUNDING OPPORTUNITIES

SPECIFIC PROGRAMME IMPLEMENTING HORIZON EUROPE & EIT

Exclusive focus on civil applications



European Research Council

Marie Skłodowska-Curie

Research Infrastructures



Pillar III
INNOVATIVE EUROPE

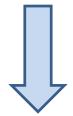
European Innovation Council

European Innovation Ecosystems

European Institute of Innovation & Technology* Top-down approach

 Collaborative project with societal and economic impact

In response to detailed calls for proposals



Calls for proposals 2026-2027 DRAFT!

WIDENING PARTICIPATION AND STRENGTHENING THE EUROPEAN RESEARCH AREA

Joint Research Centre

Widening participation & spreading excellence

Reforming & Enhancing the European R&I system



ELIGIBILITY CRITERIA



A consortium of partners brought together to carry out a collaborative, multidisciplinary research and development project, with both a societal impact for the benefit of citizens (and patients) and an economic impact on healthcare systems.

Consortium funding 2 possible roles:

COORDINATOR:

Single point of contact for the EC, ensuring the smooth running of the project and its deliverables, and interaction between the partners.

PARTNER (Beneficiary): responsible for a work-package or an activity

As many partners as expertise needed to complete the project

CONSORTIUM COMPOSITION

At least 3 legal entities independent
from each other: at least 1
independent legal entity established in
a Member State + at least 2 other
independent legal entities each
established either in a different
Member state or an Associated country

Any legal entity can participate (research body, university, patient association, private company, public health agencies, regulatory agencies, SMEs, etc.).

Countries eligible for funding:

EU Member States
Associated countries to HEU (such as UK/Switzerland)

Some third countries

- Low- and middle-income countries
 - Countries specified in calls



STATISTICS



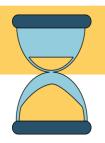
AVERAGE BUDGET FOR CLUSTERS PROJECTS

EU:

From 3 to 15M€ (7,7M€ for Cluster Health)

INSERM:

- Average budget per coordination (Inserm): 2M€
- Average budget as partner (Inserm): 572 570€



NUMBER OF PARTNERS + DURATION

From 5 to 20 partners.

Duration: From 4 to 6 years

Examples – Inserm successful projects:



















3 MAIN EVALUATION CRITERIA

After verification of eligibility criteria:



4/5

Clarity and pertinence of the project's objectives, and the extent to which the proposed work is ambitious and goes beyond the state of the art

Credibility of the proposed methodology, in particular the underlying concepts, models, assumptions and inter-disciplinary approaches; sound scientific methodology

Appropriate consideration of the gender dimension in research and innovation content

Quality of open science practices including sharing and management of research outputs and engagement of citizens, civil society and end users where appropriate.

IMPACT OF THE PROJECT

4/5

To what extent will the project achieve the expected impacts?

Credibility of the pathways to achieved the expected outcomes and impact specified in the work programme, and the likely scale and significance of the contribution due to the project

Suitability and quality of the measures to maximise expected outcomes and impacts, as set out in the dissemination and exploitation plan, including communication activities

IMPLEMENTATION

4/5

Quality and efficiency of the implementation: quality and effectiveness of the work plan, assessment of risks and appropriatness of the effor assigned to work package and the resources overall

Capacity and role of each participant, and extent to which the consortium as a whole brings together the necessary expertise

Treshold :12/15

Part A Application form Part B Technical description (45 pages)





DRAFT WP 2026-2027 CLUSTER SANTE

2026	2027
14 calls – 1 step	14 calls
Opening : 10/02/2026	Opening: 10/02/2027
Deadline: 16/04/2026	Deadline (1 stage) : 13/04/2027
_	Deadline (2 stage) : 22/09/2027



HORIZON-HLTH-2027-02-DISEASE-01-TWO-STAGE: INNOVATIVE HEALTHCARE INTERVENTIONS FOR NON-COMMUNICABLE DISEASES

AAP 2027 – 2 steps

RIA

Deadline: 16/04/2027 8 projects- 7-8M€/projet

Scope:

Non-communicable diseases represent over 80% of the disease burden in Europe and the leading cause of avoidable premature deaths.

> Innovative and effective healthcare interventions are required to provide treatment and disease management solutions and assure best quality of care for patients suffering from NCDs when prevention strategies have failed.

NCDs = cardiovascular diseases, diabetes, chronic respiratory diseases or chronic kidney diseases. Other diseases are not within the scope of this topic.

All the following aspects:

- Perform rigorous early stage clinical trial(s) [for pharmacological interventions: phase 1 and phase 2 clinical trials] to validate novel or refined healthcare interventions* (for treatment and/or disease management solutions for patients suffering from NCDs. Whenever relevant, existing co- and multimorbidities should be addressed in the trial design. (*Applicants may address any mono- or combinatorial pharmacological and/or non-pharmacological interventions)
- Clinical trial(s) should be supported by completed proof-of-concept of clinical safety and efficacy. Comparative effectiveness studies are not within the scope of this topic.
- Both preclinical research and the draft clinical trial protocol should be completed at the time of submission of the proposal. Proposals should also demonstrate evidence of preliminary consultations with ethics and regulatory authorities at the time of submission

HORIZON-HLTH-2027-02-DISEASE-01-TWO-STAGE: INNOVATIVE HEALTHCARE INTERVENTIONS FOR NON-COMMUNICABLE DISEASES

- A sound feasibility assessment, including an appropriate patient selection and realistic recruitment plans, justified by publications or preliminary results should be provided
- Take into account sex and gender differences in all relevant aspects throughout the research process, and consider stratification criteria such as age, disability, ethnicity, socio-economic status, genetic and epigenetic variations, etc., where relevant.
- Use and/or develop technologies, including digital ones (e.g., (generative) AI, wearable technologies) to help implement and monitor the long-term efficacy of the intervention(s), as well as manage the disease and/or monitor their progression (e.g. with unobtrusive technologies suitable for patient monitoring at home and in real-world conditions), whilst also ensuring they are bias-free, inclusive, and ethically sound. The use of virtual human twins could also be considered, where relevant
- Exploit existing data, health data infrastructures, biobanks, registries and/or cohorts, together with the generation of new data that should be managed in line with the FAIR principles, when relevant; For instance BBMRI, ELIXIR, EU-OPENSCREEN, EATRIS, ECRIN, EATRIS, etc.

Consortium:

- Engage all relevant stakeholders (especially patients and patients' representatives, caregivers, clinicians, counsellors, regulators, etc.) to design end-user optimised interventions.
- Engage with **national public health authorities and regulators** to ensure a robust development pathway and further uptake of the intervention.
- **SMEs** to strengthen their scientific and technological foundations, enhancing their innovation potential, and exploring possibilities for commercial exploitation.
- SHS



Destination 1			
Addressing disabilities though the life course to support independent living and inclusion	2027 – 1 étape RIA	7 projets 6-8M€/projet	
Behavioural interventions as primary prevention for non- communicable diseases (NCDs) among young people	2026 – 1 étape RIA	2 projets 9-10M€/projet	
Destination 2			
Towards a better understanding and anticipation of the impacts of climate change on health	2026 – 1 étape RIA	7 projets 7-8M€/projet	
Integrating climate-related exposures into the human exposome and and characterising its changes in response to climate change	2027 – 1 étape RIA	4 projets 10-11M€/projet	
Tools and technologies to support health adaptation to climate change	2027 – 1 étape PCP	4 projets 4-5M€/projet	
Towards climate resilient, prepared and carbon neutral populations and healthcare systems	2026 – 1 étape RIA	7 projets 7-8M€/projet	
Support for a multilateral initiative on climate change and health research	2026 – 1 étape CSA	1 projet 3M€	



Destination 3			
Innovative healthcare interventions for non-communicable diseases (cardiovascular diseases, diabetes, chronic respiratory diseases or chronic kidney diseases)	2027 – 2 étapes RIA	10 projets 7-8M€/projet	
Innovative interventions to prevent the harmful effects of using digital technologies on the mental health of children and young adults	2026 – 1 étape RIA	7 projets 8M€/projet	
Advancing research on the prevention, diagnosis, and management of post-infection long-term conditions	2026 – 1 étape RIA	5 projets 6-8M€/projet	
Development of novel vaccines for pathogens with epidemic potential	2026 – 1 étape RIA	5 projets 10 M€/projet	
Development of novel broad spectrum small molecule antiviral therapeutics for pathogens with epidemic potential	2027 – 1 étape RIA	5 projets 10 M€/projet	
Development of monoclonal antibodies to prevent and treat infections from Flaviviridae	2026 – 1 étape RIA	5 projets 10 M€/projet	
Development of monoclonal antibodies to prevent and treat infections from Filo- Phenui-, Picorna- and Toga Viridae	2027 – 1 étape RIA	5 projets 10 M€/projet	



Destination 3			
Development of innovative antimicrobials or antibody-based therapies against critical pathogens resistant to antimicrobials (AMR)	2027 – 1 étape RIA	5 projets 8-10 M€/projet	
Multisectoral approach to tackle chronic non-communicable diseases: implementation research maximising collaboration and coordination with sectors and in settings beyond the healthcare system (GACD)	2026-1 étape RIA	3 projets 3-4 M€/projet	
Prevention and management of chronic non-communicable diseases in children and young people (GACD)	2027 – 1 étape RIA	3 projets 3-4 M€/projet	
Understanding of gender-specific mechanisms of cardiovascular diseases: determinants, risk factors and pathways	2026-1 étape RIA	7 projets 5-7M€/projet	
Advancing innovative interventions for neurodegenerative diseases	2027-1 étape RIA	5 projets 10M€/projet	
Innovation upscaling in Cardiovascular Health	2026-1 étape CSA	1 projet 2M€	

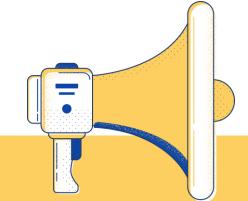


lic procurement of innovative solutions (PPI) for improving citizen's access to healthcare through integrated care	2026 – 1 étape PPI	5 projets 3-5 M€/projet	
		J-J Wie/projet	
rsonalised approaches to reduce risks from Adverse Drug Reactions due to administration of multiple medications	2027 – 1 étape RIA	5 projets 8-10M€/projet	
tifying and Addressing Low-Benefit Care in Health and Care Systems	2026 – 1 étape RIA	5 projets 10M€/projet	
Destination 5			
opment of predictive biomarkers of disease progression and eatment response by using AI methodologies for chronic communicable diseases	2027 — 1 étape RIA	7 projets 6-8M€/projet	
ancing bio-printing of living cells for regenerative medicine	2027 – 1 étape RIA *Ouverture: 3/06/2027 Deadline : 21/09/2027	5 projets 7-10M€/projet	
egrating New Approach Methodologies (NAMs) to advance biomedical research and regulatory testing	2026 – 1 étape RIA	7 projets 5-8M€/projet	
Human Twins (VHTs) for integrated clinical decision support in prevention and diagnosis	2027 – 1 étape RIA	4 projets 10-12M€/projet	

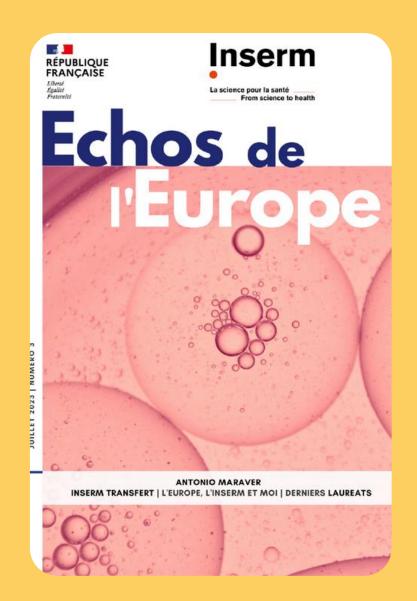


Destination 6			
Cell-free protein synthesis platforms for discovery and/or production of biologicals	2027 – 1 étape RIA	5 projets 6-8M€/projet	
Portable and versatile Point-of-care diagnostics	2027 – 2 étapes IA	7 projets 5-7M€/projet	
Regulatory science to support translational development of patient-centred health technologies	2026-1 étape RIA	4 projets 4-6M€/projet	





COMMUNICATION AND VISIBILITY INITIATIVES



https://www.calameo.com/books/ 005154450893789c14fb7



europeens pas vous? La Cellule Europe de l'Inserm vous accompagne! E-MAIL : HORIZON & EUROPE & INSERM.FR LINKEDIN : INSERM | CELLULE EUROPE



Horizon Europe: quels outils pour financer mon projet - Inserm pro







Replay – <u>Table ronde</u> – **Devenir expert**évaluateur auprès de la **CE (juin 2024)** Work as an expert | EU **Funding & Tenders** Portal (europa.eu)

