Call for Applications

Regions4PerMed Best Practices Award
"Interregional coordination for a fast and deep uptake of personalised health"

~~Submission deadline for applications: December 15th, 2022~~

Updated deadline for applications: January 18th, 2023

For further information:

https://www.regions4permed.eu/

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GENERAL INFORMATION

GRANT AGREEMENT NUMBER	825812
PROJECT FULL TITLE	Interregional coordination for a fast and deep uptake of personalised health
PROJECT ACRONYM	Regions4PerMed
PROJECT WEBSITE	http://www.regions4permed.eu/
PARTNER ORGANISATION	Axencia Galega de Coñecemento en Saúde (Galician Health Knowledge Agency) - ACIS
OTHER PARTNER ORGANISATIONS INVOLVED	Fondazione Toscana Life Sciences (TLS) Sächsisches Staatministerium Für Wissenschaft, Kultur und Tourismus (SMWK) Fondazione Regionale per la Ricerca Biomedica (FRRB) Wroclaw Medical University (WMU) Urząd Marszałkowski Województwa Dolnośląskiego (UMWD)
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About Regions4PerMed

Personalised Medicine (PM) is a medical model using characterization of individuals' phenotypes and genotypes (e.g. molecular profiling, medical imaging, and lifestyle data) to tailor the right therapeutic strategy to the right person at the right time, determine the predisposition to disease and deliver timely and targeted prevention.

The challenge for national and regional authorities is thus to enable this shift from a reactive healthcare system, based on episodic and acute care model, to a preventive, stratifying at-risk individuals and ensuring that preventive action is taken to intervene well before the onset of symptoms and illness, to a predictive system – the so-called Personalised Health (PH). Identifying the mechanisms of a disorder before it becomes an advanced, pathology defined disease is thus the envisioned future of PM and PH.

In the face of this potential huge leap forward, PH still lacks the cooperation and coordination needed to organise the still very fragmented field. While the high-level concepts are becoming clear, many barriers remain in terms of information, integration, translation, logistics and acceptance across Europe, that will need to be addressed. This is a severe drawback to its development and to the placement of investments in an effective manner. Thus, it is crucial to direct more efforts towards coordinating and aligning relevant stakeholders in personalised health action across Europe and beyond. A participatory approach needs to be created, trust needs to be built, and a multi-stakeholder process enabled to channel investments towards PM and PH.

Regions4PerMed supports the coordination of regional policies and innovation programmes in PM and PH to accelerate its deployment for citizens and patients. The project reinforces the cooperation between H2020, Horizon Europe and structural funds on this topic, strengthens industrial specialisation areas in Europe and allows PH to flourish as an emerging industry, enables interregional joint investment on PH, including a stable link with Vanguard Initiative and with the European Innovation Council.

The project activities have been structured around 5 Key Thematic Areas:

- Big Data, electronic health records and health governance for Personalised Medicine

- Health Technology and Connected and Integrated Care for Personalised Medicine

- Personalising Health Industry

- Innovation Flow in the Health Care for Personalised Medicine

- Tackling ethical, economical, legal and social aspects of Personalised Medicine

For each topic, international conferences, workshops and co-creation activities were organised in which the state-of-the art, current hurdles and barriers, and latest developments to overcome these, including current best practices, were showcased aiming to further engage stakeholders from the European regions.

In addition, Regions4PerMed collected and disseminated **Best Practices (BPs)** that are successful in pushing forward the implementation of Personalised Medicine (particularly at regional level).

Aim of the Award

The Best Practice award is intended to highlight and give more visibility to European players (from university, industry, and civil society) that are currently contributing to PM (particularly at regional level) and can thus serve as models for stakeholders from other regions that intend to implement PM projects, programmes and initiatives. In this sense, the term Best Practice refers to research projects, programmes and, in general, approaches which have proven to successfully advance the field of PM.

A best practice is a practice that that has been proven to work well and produce relevant results for advancing PM in the regional context and it is therefore recommended as a model for other regions. It is a successful experience, which has been tested and validated, in the broad sense and deserves to be shared so that a greater number of people can adopt it.

The Best Practice Award of Regions4PerMed, assigned through an international peer reviewed process, will be awarded through a dedicated ceremony during the project's Final Conference that will be organised in Brussels on **March 21st and 22nd, 2023**. The selected BPs will showcase topics and models (i.e. research projects, pilot projects, initiatives, etc.) of regional relevance belonging to the five different categories represented by the five Key Thematic Areas (KAs) of Regions4PerMed (see above).

With the Best Practice Award, the consortium will increase the visibility of the selected BPs in Europe with the goal to inspire other regional European stakeholders to take further action in promoting and implementing Personalised Medicine and Health within their respective regions, also leveraging regional and structural funds. By showcasing the potential positive impact of PM and PH on regional healthcare and at the same time the impact of regions on PM and PH implementation, Regions4PerMed wants to further motivate regions to engage in the topic of Personalised Medicine and Health for the benefit of their citizens.

General Procedure and Best Practice categories

The Best Practice Award will be assigned in five different categories that correspond to the five key thematic areas (KAs) of Regions4PerMed. The categories are:

1. Big Data, electronic health records and health governance for Personalised Medicine: data is a key enabler for digital transformation and for developing a new form of technology for the benefit of patients and healthcare staff, but also for medical research and health technologies industries. Despite its pivotal role in PM, the access and use of health-related data for research and innovation purposes is still limited.

   Under this topic we expect to receive BPs that have proven to tackle one of the main challenges (regulatory, technological, policy) for the use of data to improve prevention, diagnostic and therapeutic strategies and have enabled innovation in PM (intended also as prevention or predictive strategies).

2. Health Technology and Connected and Integrated Care for Personalised Medicine are among the most important concepts related to the more efficient management and organization of healthcare systems. They are becoming prominent components of healthcare and encompass a vast spectrum of healthcare services. Many pilot projects are being done worldwide and areas of opportunity are being identified on a global scale and impact. Despite the potential of the topic, the majority of initiatives fail in the pilot stage, thus limiting long term impact.

   In this area we expect to receive nominations of health technologies that implement advanced intelligent and integrated care strategies towards the adoption of PM and PH approaches that enable early disease interception, improve diagnosis and treatment decisions, improve care pathways, better adapt treatment, and reduce its duration while optimizing health care expenditures.

   Under this topic we expect to receive BPs that have advanced regional ecosystems for the uptake of PM and PH in industry. We expect BPs that improve knowledge transfer and translation and foster interdisciplinary collaboration among industry and relevant stakeholders. BPs should act as facilitators and catalysers for transfer into industry or support industry access to resources, knowledge, or funding relevant for PM.

3. Personalising Health Industry: Health industry, consisting of large multinational companies, but also many SMEs, including start-ups, is currently transitioning toward PM and PM, However, many barriers for industry development toward PM and PH still exist that slow the

translation of innovative R&D into marketable products. The regional level can provide support in overcoming these.

Under this topic we expect to receive BPs that have advanced regional ecosystems for the uptake of PM and PH in industry. We expect BPs that improve knowledge transfer and translation and foster interdisciplinary collaboration among industry and relevant stakeholders. BPs should act as facilitators and catalysers for transfer into industry or support industry access to resources, knowledge, or funding relevant for PM.

4. Innovation Flow in the Health Care for Personalised Medicine: the combination of medical devices, high-technology, innovative precision diagnostics have been transforming the healthcare during recent years. More and more frequently regional bodies have promoted programs to facilitate the development or adoption of innovative solutions.

Under this topic we expect to receive BPs which showcase how regional organization (hospitals, health providers, health authorities, etc) have promoted or adopted innovative health technologies to improve the person-centred approach to healthcare.

5. Tackling ethical, economical, legal, and social aspects of Personalised Medicine: While more and more countries are introducing whole genomic and Personalised Medicine approaches into clinical care, the awareness about the ethical, economic, legal and social implication of Personalised Medicine are becoming central in the public discourse.

Under this topic we expect to receive Best Practices that have tackled ethical, economic, equality, diversity and inclusion aspects related to PM and health innovation to reduce inequalities or reduced/prevented discriminations.

Other relevant information related to the Best Practices Call is accessible at the following link: https://www.regions4permed.eu/ .

After the deadline all the Best Practices submitted will be assigned to a Board of international experts who will assess the BPs according to their background, expertise, and experience. The responsible partner of the procedure is ACIS.

ACIS will collect evaluations and integrate these into a ranking list for each category. The highest ranked BP will win the awards in their respective categories. With this vision the winners and the finalists of the Best Practice Award will be invited to the final event of Regions4PerMed and will be honoured with an Award Ceremony.

The summaries of the 5 awarded BPs will be published on the website of Regions4PerMed and on the consortium's official social networks.

Best Practices Collection

The Best Practices need to be submitted by the responsible PI to Regions4PerMed through the following link: https://www.regions4permed.eu/best-practice-award/ .

There, a template can be downloaded (in a .docx format) to be filled in with complete information regarding the Best Practice. It needs to be uploaded in the application form in a .pdf format. Administrative data and information regarding the organisation applying for the Award also needs to be provided.

Only documents submitted in English are considered admissible.

Best Practices can be presented starting from **October 28th, 2022,** while the updated deadline is **January 18th, 2023.**

Peer Reviewing Process

A qualified panel of experts will be set up. At least 10 external experts will be selected for the peer review process. Each Best Practice will be reviewed **by at least 2 experts**.

When the final ranking list is established, the 1st ranked in each category will be considered winner. In case of ex-aequo Gender, Ethical, Diversity and Inclusivity aspects will be considered to select the winning BP.

The aim of this double assessment is to ensure that the best good practices are awarded.

The ranking list will be then approved by the Regions4PerMed Executive Board and communicated to the Awardees. They will be invited in Brussels to join the awarding ceremony, as well as the Final Conference. Travel and accommodation expenses will be paid by Regions4PerMed.

In addition, in order to further support the selected Best Practices and the PIs involved, the BPs is planned to get published in a **special issue of the EPMA Journal**, Springer Nature (IF 8.836, CiteScore 11.3) - the journal of the European Association for Predictive, Preventive and Personalised Medicine (EPMA). For several years, the journal has been scored within top 2% in the category "Heath policy". More information can be found here: https://www.epmanet.eu/journal/journal.

Evaluation Criteria

Excellence:

Conceptual soundness of the Best Practice

1. The approach used in order to address the initial issue is scientifically valid and has led to a successful outcome.

2. Replicability: potential ability of the BP to be replicated in or adapted to other regional ecosystems.

3. Regional and Interregional Dimension: Capacity of the Best Practice to generate collaboration dynamics (academy, industry and patient organisation and policy maker) within a regional or interregional dimension.

4. Clarity of the objectives and methodology

Impact:

Direct and indirect impact of the Best Practice

5. Direct and indirect impact of the Best Practice on Outcomes relevant for its respective topic.

6. Economic and Societal impact: capacity of the Best Practice to generate value for the patients, industry, healthcare system or the territorial (regional) communities.

7. Sustainability: capacity of the Best Practice to be financially and technologically sustainable over time. Is it believed that the practice can be applied in the short term or in the long term?

8. Suitability and quality of the measures to maximize expected outcomes and impacts.

For each criterion, different points have been proposed to be assessed. The criteria are not a closed list to be evaluated and it is not necessary that the BP includes all of them.

The Best Practice will be scored from 0 to 5, with the possibility of obtaining a half score. The meaning of the scores can be expressed as follow:

- Poor (0 – 1). The Best Practice does not meet criteria or, if it does, it is scarce and weak.

- Fair (1.5 – 2). The Best Practice addresses the issue but with several shortcomings.

- Good (2.5 – 3). The Best Practice addresses criteria but in a simple way and with minor shortcomings.

- Great (3.5 – 4). The Best Practice addresses criteria in a comprehensive and outstanding manner. There are few shortcomings.

- Excellent (4.5 – 5). The Best Practice addresses criteria successfully. There are no deficiencies.

The highest rated Best Practice in each category will be the winner and will receive the Award. The following two highest rated Best Practices in each category will be finalists and published on the Regions4PerMed website.

Timelines

Publish Call	28.10.2022
Deadline Call	18.01.2023
Evaluation by Reviewers	31.01.2023
Invitation of Awardees to Conference	15.02.2023
Final Conference	21.03.2023 − 22.03.2023

All Best Practices must be sent through the registration form on the website by **January 18th, 2023, EOB.**

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This is the list of contacts for each Consortium Partner:

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