

Kick-off meeting CHRODIS +

Joint action management – administrative aspects

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Consumers, Health, Agriculture and Food Executive Agency (CHAFEA)



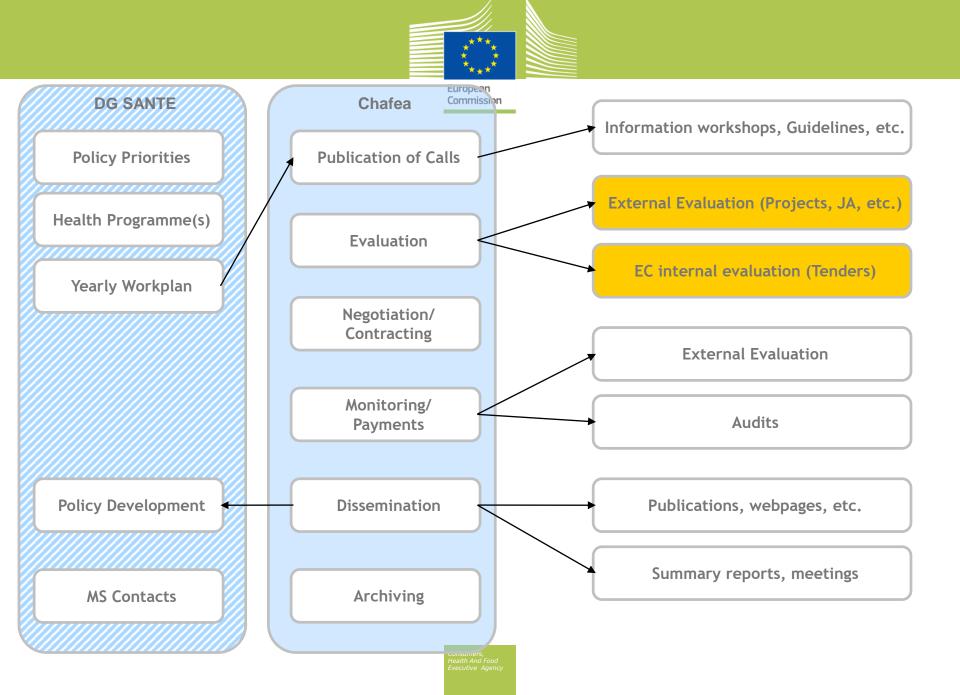




Consumers, Health, Agriculture and Food Executive Agency

CHAFEA







History, Objectives and Budget

3RD HEALTH PROGRAMME







CHAFEA Website - Health Programme

Factsheet on the 3rd Health Programme

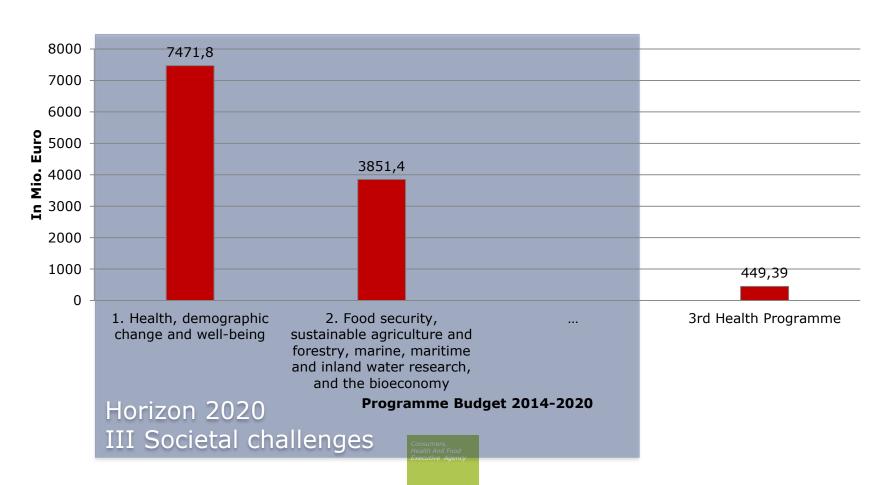




1993-2002	8 different Action Programmes (health promotion, cancer, drug dependence, AIDS and other communicable diseases, health monitoring, rare diseases, accidents and injuries, pollution-related diseases)
2003-2007 € 312 Million	Community Action Programme for Public Health •Health Information •Health Threats •Health Determinants
2008-2013 € 321,5 Million	2 nd Programme of Community Action in the field of Health •Health Security and Safety •Health Promotion and Health Inequality •Health Information
2014-2020 € 449,4 Million	3rd Programme of Community Action in the field of Health •Promote health, prevent diseases and foster supportive environments for health lifestyles •Protect citizens from serious cross-border health threats •Facilitate access to better and safer healthcare for Union Citizens •Contribute to innovative, efficient and sustainable Health Systems

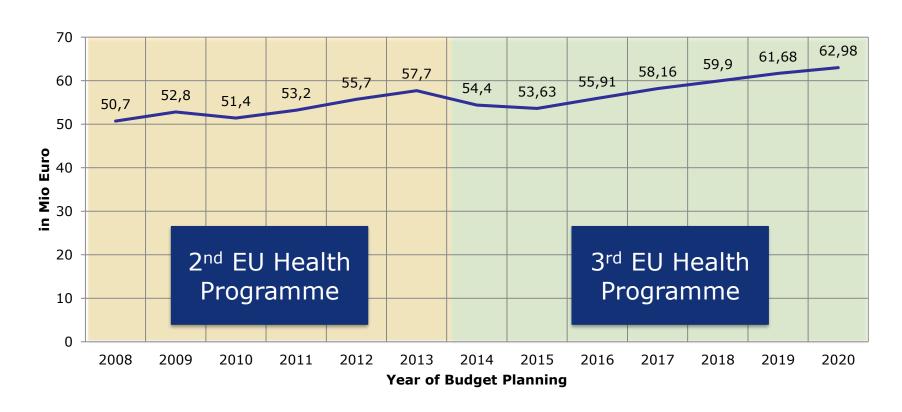


Budget Comparison to other EU Programmes





Yearly Health Programme Budget









DG SANTE / POLICY PROGRAMME DEFINITION

CHAFEA / PROGRAMME IMPLEMENTATION / FEEDING OF POLICY CYCLE

BUDGET OF THE THIRD HEALTH PROGRAMME (comparison, increase)





The EU Health Programme: a tool for investing in health(*)

for spending **smarter**but not necessarily
more in sustainable
health systems

for investing in people's health, particularly through health-promotion programmes

for investing in health coverage as a way of reducing inequalities and tackling social exclusion

(*) Investing in health – Commission staff working document – published in February 2013 as part of the Social Investment Package for growth and cohesion.



The objectives

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 key risk factors with a focus on the Union added value.

Coherent approaches integrated into MS preparedness plans

> Innovative tools and mechanisms in health and health prevention

Increase
access to
medical
expertise and
information for
specific
conditions



EU added value: a key concept



- Implementing EU legislation and ensuring that the legislation implemented is correct
- **Economies of scale** with the aim of saving money and providing citizens with better service
- Promotion of best practice in all participating Member States in order for EU citizens to benefit from the state of the art best practices
- Benchmarking for decision making requiring a strong commitment to use results with the aim of facilitating evidence based decision making
- Focus on cross border threats in order to reduce risks and mitigate their consequences
- **Free movement of persons** with the aim of ensuring high quality Public Health across Member States
- Networking as an important tool for disseminating results to all Member States including non-participants





CHAFEA Website
- Health
Programme

Factsheet on the concept of EU-added value

Message to take home







Message to take home





More information

DG SANTE website

for Health Programmes including the Commission proposal for the new Programme

http://ec.europa.eu/health/programme/policy/index_en.htm

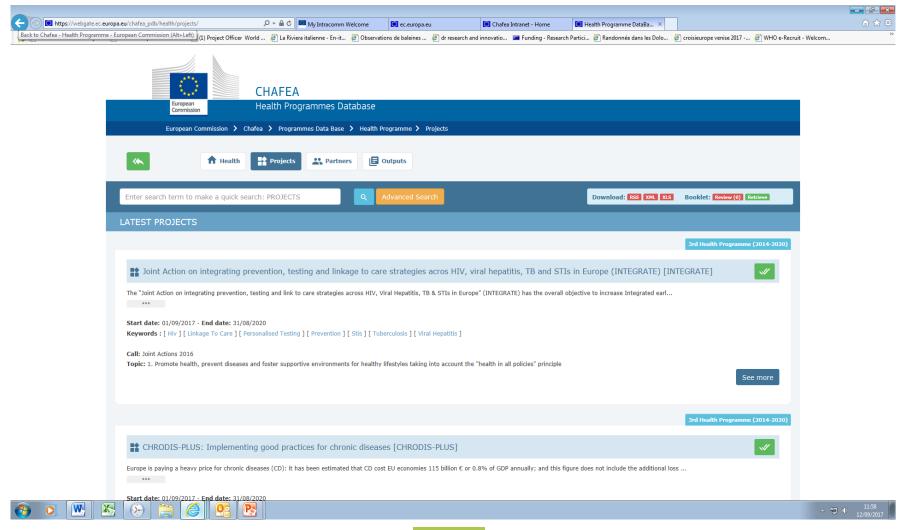
Chafea Database

for the results of previous Health Programmes

http://ec.europa.eu/chafea/projects/database.html









The new Database https://webgate.acceptance.ec.europa.eu/chafea pdb







CHAFEA

European Commission > Chafea > Programmes Data Base > Health Programme















Enter search term to make a quick search: HOME





NEWS

No $\ensuremath{\text{\textbf{News}}}$ $\ensuremath{\text{\textbf{related}}}$ to the current project

See all news

Welcome to the Health Programmes Data Base

This tool provides results of grants awarded by the First, Second and Third Programmes of Community action in the field of public health.

NUMBER OF ACTIONS FINANCED THROUGH THE DIFFERENT PROGRAMMES BY COUNTRY





Actions: Projects and Joint Actions



















Dissemination of results

Publications





JOINT ACTIONS AND PROJECT MANAGEMENT





Topics for Joint Actions in 2016

- JA-01-2016 Quality of HIV/AIDS/STI, viral Hepatitis and tuberculosis prevention and linkage to care (€ 2 000 000 EU co-funding)
- JA-02-2016 Action on chronic diseases (€ 5 000 000 EU co-funding)
- JA-03-2016 Tobacco control (€ 2 000 000 EU cofunding)
- JA-04-2016 Antimicrobial resistance and Health Care Associated Infections(€ 4 000 000 EU co-funding)
- JA-05-2016 Authorisation of preparation processes in blood and tissues and cells (€ 800 000 EU co-funding)





2016 Joint Actions

- Actions having a clear EU added value;
- Co-financed by the competent authorities of Member States/ participating countries responsible for Health or by public sector bodies and non-governmental organisations, acting individually or as a network, mandated by these competent authorities;
- Allowing the nominated national authorities and the European Commission to take forward work on jointly identified issues.





PROCEDURE

- Direct Grant without an open call;
- More structured nomination procedure;
- Electronic submission system;
- External evaluation with simplified award criteria;
- New grant with enhanced role for coordinator;
- Fully electronic monitoring system.







CHRODIS + ≠ **CHRODIS**

Title of the grant agreement

Focus and Objectives implementation and pilot testing of CHRODIS results



Applying for funding Find Find Submit a Register an a Call partners organisation proposal Evaluation & Grant signature **Evaluation of** Grant preparation Grant signature proposals **Grant Management**

Reports

Dissemination of results

Amend-ments

Audits & certifications

Experts opinion

Expert registration

Contracting & payment

Expert roles & tasks



PROJECT MANAGEMENT

- What's new in the 3rd Health Programme?
 - Some financing Instruments have changed
 - Model Grant Agreement has changed
- Use of Electronic Exchange Systems, via the Participant Portal
 - Electronic Submission & Evaluation
 - Electronic Grant preparation and signature
 - Electronic Technical and Financial Reporting
 - Electronic Amendments





GRANT AGREEMENT

MAIN DOCUMENT!

- Disclaimer!
- Co-funding visibility
- http://ec.europa.eu/chafea/images/HP logo/EU f lag and co-funded by health programme.jpg



Co-funded by the Health Programme of the European Union





CONSORTIUM AGREEMENT

- How to interact between partners?
- Accession forms to be adapted, filled in and signed
- Role of the coordinator





Technical and Financial Reporting

- Is split into 2 processes:
 - Continuous Reporting

Deliverables, Milestones, Publishable Summary, Critical Risks

Periodic Reporting

Payment Requests

Periodic Technical Report (Interim Report, Final Report)

Financial Reporting





Continuous Reporting

- Continuously Open
- Upload of deliverables
- Reporting on milestones and critical risks
- Continuous update of publishable summary
- Accessible through process "Continuous Reporting" in Participant Portal

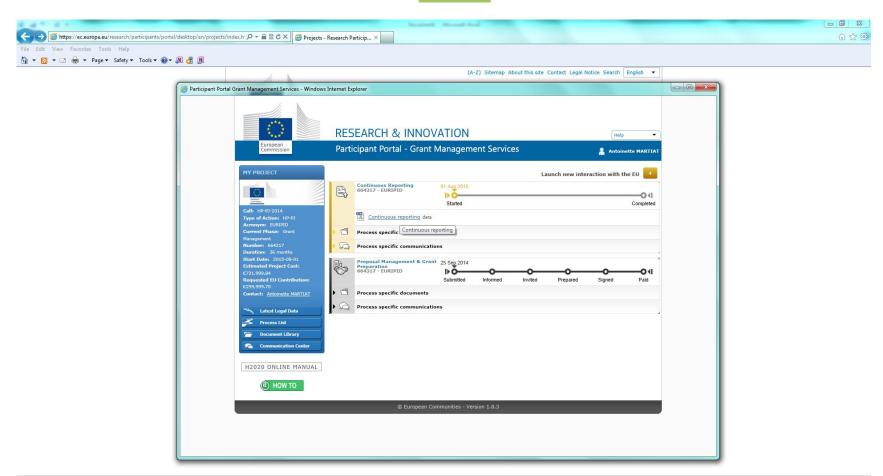




PARTICIPANT PORTAL



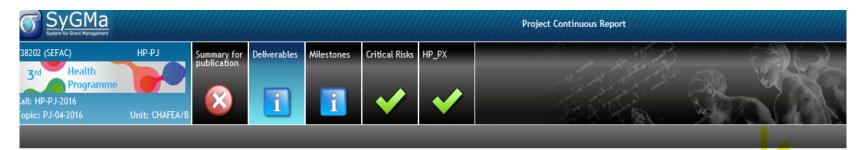




₫ 100% ▼



SYGMA



Deliverables

WP No	Del Rel. I	Del 🔺	Title	Lead Beneficiary	Nature	Dissemin	Est. Del. Date (Receipt Date	Approval Date	Status
WP2	D2.1	D1	Dissemination plan, website, leaflet to promote the project	ELISAN	Websites	Public	31 Aug 2017			Pending
WP2	D2.2	D2	Report on the outcome of the final event and layman version of the final report	ELISAN	Report	Public	31 Mar 2020			Pending
WP3	D3.1	D3	Report describing how the consortium reaches the 7 objectives of SEFAC	UVEG	Report	Public	31 Mar 2020			Pending
WP4	D4.1	D4	A SEFAC template and toolkit, including guidelines for train the trainers format	AGE UK	Report	Public	30 Jun 2018			Pending
WP5	D5.1	D5	Train the trainers toolkit manual, including health lifestyle coaching protocol	ISRAA	Report	Public	30 Jun 2018			Pending
WP6	D6.1	D6	SEFAC ICT Tool	VIDAVO	Report	Public	30 Jun 2018			Pending
WP7	D7.1	D7	Report regarding the implementation of SEFAC in 4 European pilot area's	MEDRI	Report	Public	31 Jan 2020			Pending
WP8	D8.1	D8	Report with the synthesis of the results regarding characteristics of citizens and impact \boldsymbol{c}	EMC	Report	Public	29 Feb 2020			Pending
WP9	D9.1	D9	Tool box for SEFAC implementation in EU cities	UVEG	Report	Public	31 Mar 2020			Pending
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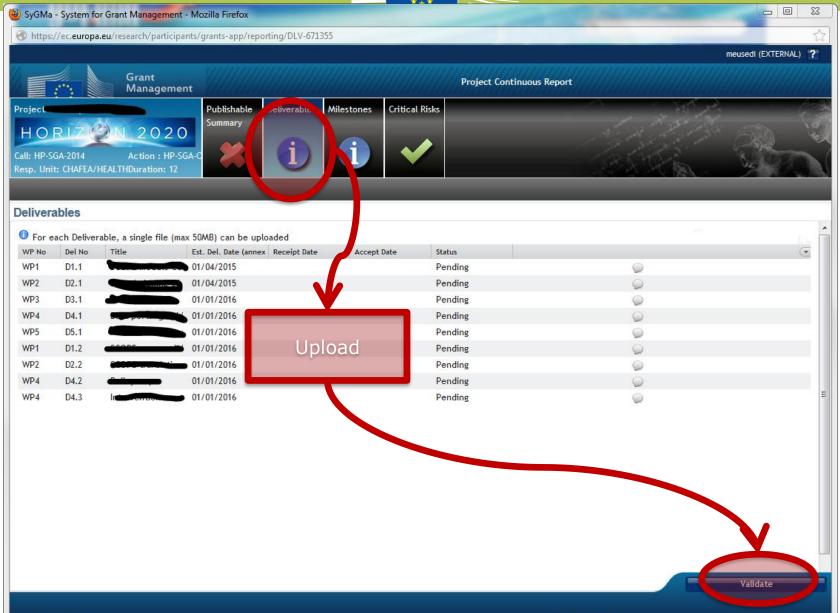


Deliverables

- 1 file per deliverable
- Format: pdf, zip file
- Size: up to 20 MB
- Upload, comment and submit
- PO in Chafea will accept (acknowledgement of receipt) or reject with comments for revision







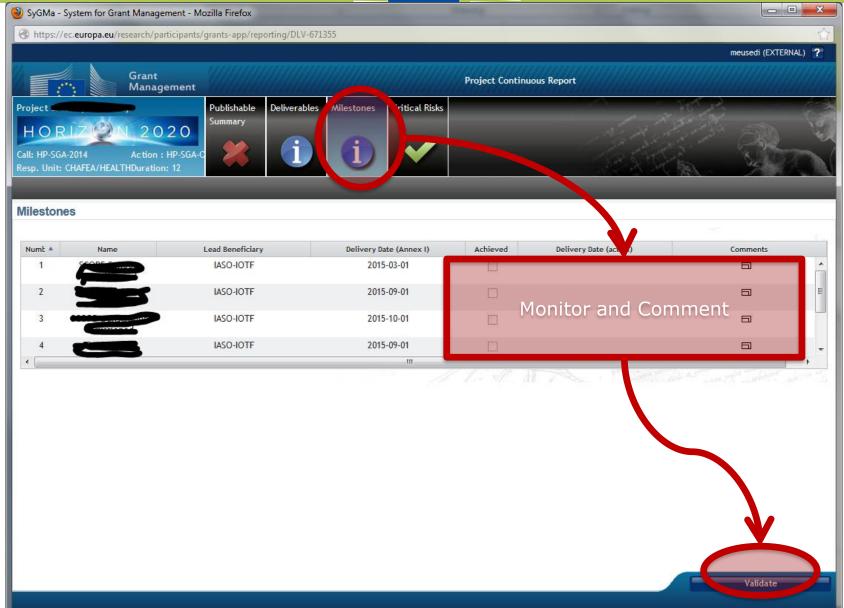


Milestones

- Continuous Reporting on milestone's achievement
- Please use comments







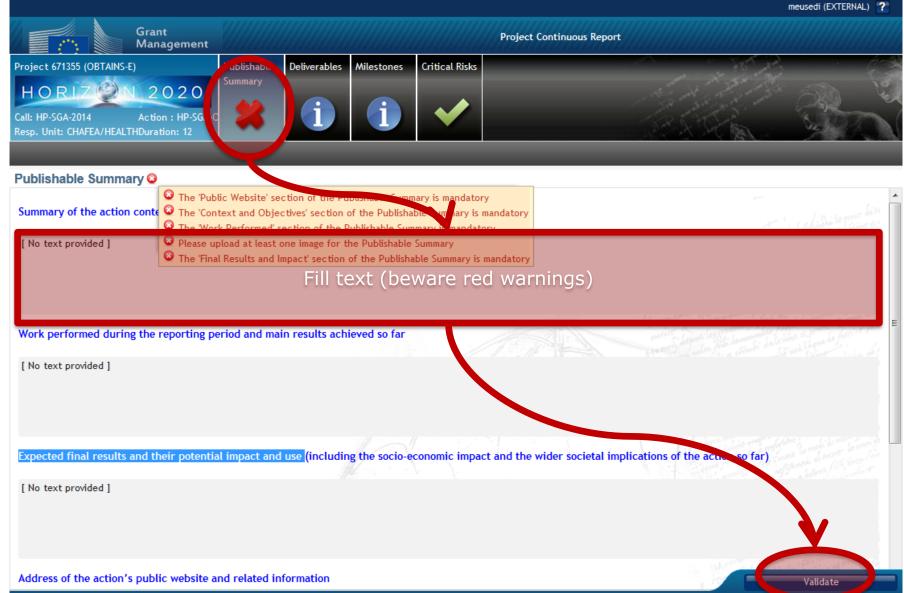


Summary for publication

- Used for dissemination purposes
- Please keep up-to-date
- Beware the changing timing of text:
 - "The project's aims are..." is becoming "The project's aim was... The project has achieved... "
 - Summary of the action context and objectives
 - Work performed during the reporting period and main results achieved so far
 - Expected final results and their potential impact and use











REPORTING

Straight to the point Objective driven Consistent

EU added value concept



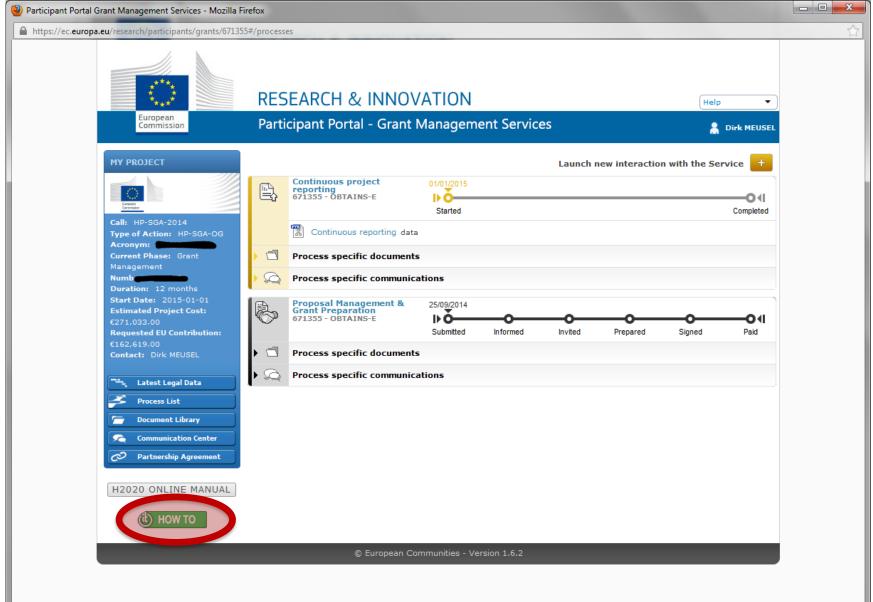


Further useful instructions:

- Further information is available online (® ном то)
- Please be aware:
 - The System is still under development, screens and parts of the procedure might be updated during the duration of your action



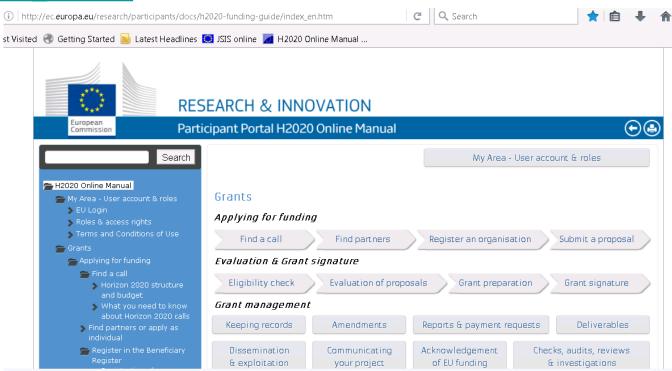




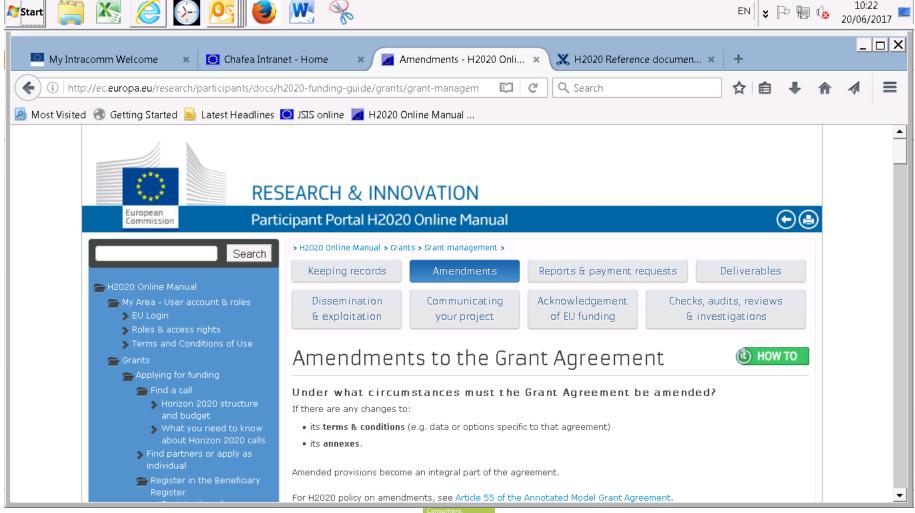


Online Manual

 http://ec.europa.eu/research/participants/docs/h2020-fundingguide/index en.htm

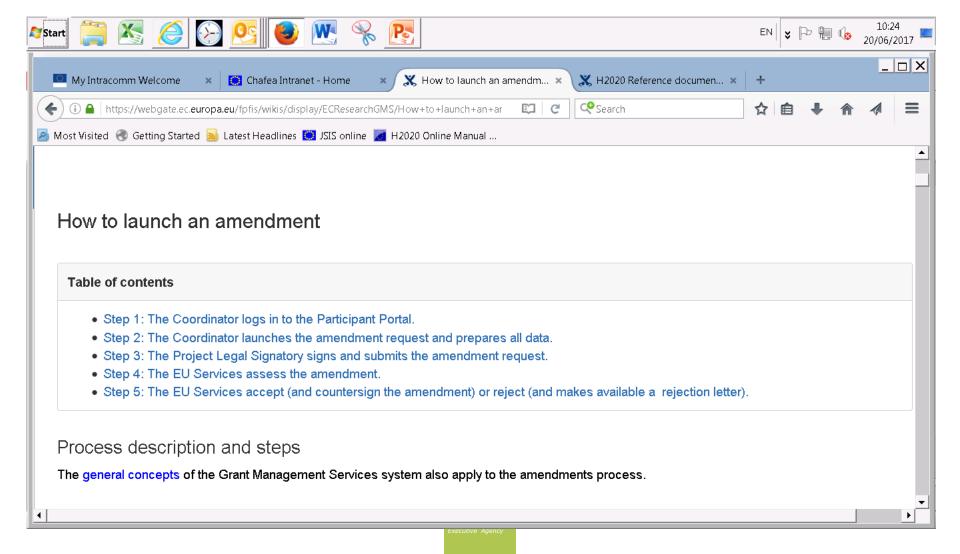






Health And Food Executive Agency







Amendments to GA: simplification

- Submitted electronically via the IT tool (inform CHAFEA first).
- The change of legal representative done directly into the system without need to submit an official amendment.
- If an amendment involves the change of name of a beneficiary, the system will implement a "bulk" automatic amendment. This means that all the GA involving that organisation will be automatically amended. No need to submit and treat multiple amendments.
- If different topics to changed (budget, technical change), please do not mix and make different requests (simpler).





Amendments to GA: simplification

- To simplify the financial management of the action and to optimise the use of financial resources, beneficiaries are 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.







PROJECT COORDINATOR ROLE AND TASKS

PARTICIPANT PORTAL





Have a fruitful meeting...

Anne-Marie Yazbeck Marc Vandenbroeck

European Commission Consumers, Health, Agriculture and Food Executive Agency (Chafea)

Health and Food Safety Unit

http://ec.europa.eu/chafea/

