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Health **E**xtended **A**lliance for **I**nnovative **T**herapies, **A**dvanced **L**ab-research, and **I**ntegrated **A**pproaches of Precision Medicine (PE\_00000019)

**BANDO A CASCATA**

**spoke N. 2 INTELLIGENT HEALTH**

ALMA MATER STUDIORUM - Università di Bologna

AVVISO PUBBLICO PER LA SELEZIONE DI PROPOSTE PROGETTUALI da finanziare sul territorio nazionale CON PREVALENZA DI RICADUTE NELLE REGIONI DEL MEZZOGIORNO per il rafforzamento della filiera di medicina di precisione nell’ambito DEL PROGRAMMA DI RICERCA DEL PARTENARIATO ESTESO “HEAL ITALIA – HEALTH EXTENDED ALLIANCE FOR INNOVATIVE THERAPIES, ADVANCED LAB-RESEARCH, AND INTEGRATED APPROACHES OF PRECISION MEDICINE” – PE\_00000019 A VALERE DELLE RISORSE del Piano Nazionale di Ripresa e Resilienza (PNRR), Missione 4 “Istruzione e Ricerca” – Componente 2 “Dalla Ricerca all'Impresa” – Investimento 1.3, finanziato dall’Unione europea – NextGeneration EU – a valere DEll’Avviso pubblico del Ministero dell'Università e della Ricerca n. 341 del 15.03.2022 (CUP J33C22002920006)

Annex 1 – Project PROPOSAL

Title and ACRONYM:\_\_\_\_

Topic addresses:\_\_\_\_

# Section 1. Details of the participating subject

|  |  |
| --- | --- |
| **Proposing subject – Proposal in Single Form** | |
| **Name of the proposing entity** |  |
| **Indication of the Legal form** | Indicate the legal form |
| Public administration/Micro-enterprise Small enterprise/Medium enterprise/Large enterprise/Innovative startup/Foreign enterprise/NHS body University or body supervised by the MUR Research body/Public foundation/Private foundation/Consortium company or consortium of international importance |
| **Tax ID code** |  |
| **VAT number** |  |
| **Registered office address** |  |
| **Operational headquarters address (intervention unit)** |  |
| **ATECO code** *(for businesses only)* |  |
| **REA number** *(for businesses only)* |  |
| **Attorney** |  |
| **E-mail** |  |
| **PEC** |  |
| **Phone number** |  |

**In the case of collaborations, fill in the information for each partner and repeat the table below for each partner**

# Partner N.1 With Lead Role

|  |  |
| --- | --- |
| **Lead proponent** | |
| **Name of the proposing entity** |  |
| **Indication of the Legal form** | Indicate the legal form |
| Public administration/Micro-enterprise Small enterprise/Medium enterprise/Large enterprise/Innovative startup/Foreign enterprise/NHS body University or body supervised by the MUR Research body/Public foundation/Private foundation/Consortium company or consortium of international importance |
| **Tax ID code** |  |
| **VAT number** |  |
| **Registered office address** |  |
| **Operational headquarters address (intervention unit)** |  |
| **ATECO code** *(for businesses only)* |  |
|  |  |
| **REA number** *(for businesses only)* |  |
| **Attorney** |  |
| **E-mail** |  |
| **PEC** |  |
| **Phone number** |  |

# Partner No. 2 Associated

|  |  |
| --- | --- |
| **Subject Partner N…** | |
| **Name of the proposing entity** |  |
| **Indication of the Legal form** | Indicate the legal form |
| Public administration/Micro-enterprise Small enterprise/Medium enterprise/Large enterprise/Innovative startup/Foreign enterprise/NHS body University or body supervised by the MUR Research body/Public foundation/Private foundation/Consortium company or consortium of international importance |
| **Tax ID code** |  |
| **VAT number** |  |
| **Registered office address** |  |
| **Operational headquarters address (intervention unit)** |  |
| **ATECO code** *(for businesses only)* |  |
| **REA number** *(for businesses only)* |  |
| **Attorney** |  |
| **E-mail** |  |
| **PEC** |  |
| **Phone number** |  |

# Partner N.3 Associated

|  |  |
| --- | --- |
| **Subject Partner N…** | |
| **Name of the proposing entity** |  |
| **Indication of the Legal form** | Indicate the legal form |
| Public administration/Micro-enterprise Small enterprise/Medium enterprise/Large enterprise/Innovative startup/Foreign enterprise/NHS body University or body supervised by the MUR Research body/Public foundation/Private foundation/Consortium company or consortium of international importance |
| **Tax ID code** |  |
| **VAT number** |  |
| **Registered office address** |  |
| **Operational headquarters address (intervention unit)** |  |
| **ATECO code** *(for businesses only)* |  |
| **REA number** *(for businesses only)* |  |
| **Attorney** |  |
| **E-mail** |  |
| **PEC** |  |
| **Phone number** |  |

# Partner N. 4 Associated

|  |  |
| --- | --- |
| **Subject Partner N…** | |
| **Name of the proposing entity** |  |
| **Indication of the Legal form** | Indicate the legal form |
| Public administration/Micro-enterprise Small enterprise/Medium enterprise/Large enterprise/Innovative startup/Foreign enterprise/NHS body University or body supervised by the MUR Research body/Public foundation/Private foundation/Consortium company or consortium of international importance |
| **Tax ID code** |  |
| **VAT number** |  |
| **Registered office address** |  |
| **Operational headquarters address (intervention unit)** |  |
| **ATECO code** *(only for businesses)* |  |
| **REA number** *(for businesses only)* |  |
| **Attorney** |  |
| **E-mail** |  |
| **PEC** |  |
| **Phone number** |  |

**SECTION 2. GENERAL INFORMATION**

General information about the project

|  |  |  |
| --- | --- | --- |
| **Project Title** | | *Maximum 200 characters including spaces* |
| **Acronym** |  | |
| **Reference Topic of the Spoke** |  | |
| **Duration (max 15 months)** |  | |
| **Total budget in euros** |  | |
| **Main contact person**  (in case of collaborative project, please indicate a project coordinator) *(Surname, name, affiliation, e-mail, telephone number)* |  | |
| **Initial TRL and brief description** |  | |
| **Final TRL - higher than three and short description** |  | |
| **Keywords** *(Indicate the main significant keywords of the project separated by commas)* |  | |

**Project abstract (maximum 1500 characters including spaces)**

*(Briefly, clearly, and concisely describe the know-how, experience, and competence of the proposing subject(s), project objectives, expected results, methods of carrying out the activities, and the impact on the chosen research topic and Precision Medicine. Use plain text, avoiding formulas and special characters. Maximum 1500 characters including spaces.[[1]](#footnote-1))*

|  |
| --- |
|  |

**Profile of the proposer (s).**

*Briefly describe the profile of each partner and the project group, including names, surnames, genders, skills, and roles in the project. Repeat this sheet for each proposer/partner, with a maximum of two pages per sheet. Indicate the Lead Partner for collaborative projects. Use plain text, avoiding formulas and special characters. Maximum 1500 characters including spaces*

|  |
| --- |
|  |

*Additionally, indicate how each partner contributes to the project's implementation, leveraging their experiences and specificities in relation to the objectives, and how they share risks and results with other partners. Describe the planned management of result exploitation, starting from specific measures proposed in the project, particularly concerning intellectual property. Use plain text, avoiding formulas and special characters. Maximum 1500 characters including spaces*

|  |
| --- |
| **….** |

**DNSH principle**

*(Provide a summary regarding compliance with the Do Not Significant Harm principle. Max 1500 characters including spaces)*

**SECTION 3 - TECHNICAL DESCRIPTION OF THE PROJECT**

*The structure of this template is designed to assist in preparing the proposal. It ensures that key aspects of the proposed activity are clearly presented, enabling experts to effectively evaluate the proposal against the specified criteria. The sections on quality, impact, and execution align with these criteria, as detailed in the (see art. 6.2 "Merit evaluation of project proposals" of the Call). Proposals are to be evaluated as submitted; significant modifications to content, budget, financial requests, or partnership composition will not be permissible during the grant award phase. All tables, images, references, and additional elements must be fully integrated into these sections.* ***Formatting*** *guidelines are as follows: Use Calibri or Arial font, with a minimum size of 11. Standard character spacing and single line spacing are required for both text and tables. Supplementary elements like titles, headings, captions, and formulas may be smaller but must remain legible. The document should be formatted to A4 size with all margins (top, bottom, left, right) set to a minimum of 15mm, excluding headers and footers.*

**Project Acronym**

**Project Title**

**Proposer/partnership**

|  |  |  |
| --- | --- | --- |
| **Partner no. \*** | **Partner's name** | **In the case of companies, indicate the size of the company** |
| 1 (Lead partner) |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |

1. **Detailed description of the project** *(Maximum 3 pages)*
   1. **General objective and specific objectives of the proposal.**

Clearly outline the general objective and specific objectives of the project, ensuring their alignment with the Spoke Research Program, the chosen Research Topic, and the HEAL ITALIA Research Program.

* 1. **Implementation strategy, results and expected impacts of the proposal.**

Clearly detail how the project is structured, highlighting the alignment between specific objectives, planned activities to achieve them, expected results, and their impacts. Elucidate how the proposal, through technological transfer, will contribute to the implementation of 4.0 technologies (Big Data, IoT, AI, etc.) in Precision Medicine.

1. **Realization and execution** *(Maximum 2 pages)*
   1. **Work plan.**

Illustrate a clear and realistic work plan that outlines the activities to be conducted, their timelines, and the necessary resources, incorporating a GANTT chart. Detail the logical structure of the work plan, including the articulation of the project's activity lines, the timetable for these activities, and the alignment of allocated resources with the objectives, consistent with what is reported in Annex 2 -Budget and Annex 3 - Gantt chart budget. Define both intermediate and final objectives/goals to be achieved through the planned activities, positioned at specific points in the project's timeline to enable progress monitoring. In developing the work plan, prioritize coordination and alignment with the Spoke work program, which the project must integrate with.

* 1. **Risk Management.**

Identify the main risks for the implementation of the project and the related mitigation strategies that will be implemented.

* 1. **Innovation of the project.**

Describe the positioning of the project with respect to current international drivers and trends, illustrate the starting and expected arrival TRL, define in detail the type of innovation (product, process, service or combination) and the originality of the proposed solutions.

1. **Impact** (Maximum 2 pages).

Discuss the relevance of the project's scientific and technological impact in relation to the HEAL ITALIA Extended Partnership and the selected topic, particularly concerning the advancement of knowledge, techniques, and technologies. Describe how the project's results are anticipated to create an impact that extends beyond its immediate objectives and duration. This includes: (i) the unique contributions the project will make in terms of results to the specific sector and broader, long-term impacts, including to reference/interest groups or the relevant technological sector (e.g., new products, services, processes); (ii) the magnitude and significance of the project's contribution in terms of expected results and impacts in case of success; (iii) potential challenges and obstacles that might affect the achievement of the project's objectives, such as other research and innovation projects, regulatory frameworks, reference markets, user behavior, and anticipated mitigation measures. Also, explain how the project, within the Topic's framework, can enhance the impact of HEAL ITALIA's communication and dissemination efforts. Finally, outline the general strategy proposed for managing intellectual property and integrating project results into the HEAL ITALIA Extended Partnership.

* 1. **Economic impact***.*

Outline the project's **potential** to create economic opportunities, such as developing new products or services and attracting investment.

* 1. **Social and environmental impact**

Describe how the project will address significant social issues and its anticipated positive effects on people's quality of life.

* 1. **Dissemination and exploitation of results**

Indicate whether the project has effective plans for disseminating its findings to the scientific community, industry, policymakers, or the general public. Present a comprehensive strategy for commercially or practically exploiting the results, with a focus on facilitating coordination with the communication and dissemination actions of HEAL ITALIA.

* 1. **Contribution to European and national policies on Research & Innovation**

Explain how the project will support the political or strategic goals of the European Union, align with the Smart Innovation Strategy for at least one target intervention region, and relate specifically to the objectives of the PNRR.

1. **Participants** (Maximum 1 page for each participant).

Please provide, for each participant, the following (if available):

* a description of the legal entity and its main tasks, with an explanation of how its profile matches the tasks in the proposal;
* a description of the profile of the persons, including their gender, who will be primarily responsible for carrying out the proposed activities;
* a list of up to 5 relevant publications, and/or products, services (including widelyused datasets or software), or other achievements relevant to the call content;
* a list of up to 5 relevant previous projects or activities, connected to the subject of this proposal;
* a description of any significant infrastructure and/or any major items of technical equipment, relevant to the proposed work.

In order to have more marks in the award criteria (art. 6.3), please insert the following table:

|  |  |  |
| --- | --- | --- |
| **Name and Surname of the team member** | **Gender** | **Age (years)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Report clearly and concisely the objectives of the project, how they will be achieved and their relevance to the topics of the tender; use plain text, avoiding formulas and special characters. [↑](#footnote-ref-1)