



ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑ
ΥΠΟΥΡΓΕΙΟ ΥΓΕΙΑΣ
ΓΕΝ. Δ/ΝΣΗ ΔΙΟΙΚΗΤΙΚΗΣ ΥΠΟΣΤΗΡΙΞΗΣ
& ΤΕΧΝΙΚΩΝ ΥΠΟΔΟΜΩΝ
Δ/ΝΣΗ ΔΙΕΘΝΩΝ ΣΧΕΣΕΩΝ
ΤΜΗΜΑ Β'

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Αθήνα 30 - 7 - 2014
Αρ. πρωτ. οικ. 67654

ΘΕΜΑ: «3^ο Πρόγραμμα Δράσης της ΕΕ για την Υγεία 2014-2020: Πρόσκληση εκδήλωσης ενδιαφέροντος για συμμετοχή στην υλοποίηση των συγχρηματοδοτούμενων Κοινών Δράσεων του Ετήσιου Προγράμματος Εργασίας 2014»

Ο ΥΠΟΥΡΓΟΣ ΥΓΕΙΑΣ

Έχοντας υπόψη:

1. Το άρθρο 168 της Συνθήκης για την λειτουργία της Ευρωπαϊκής Ένωσης.
2. Τον Κανονισμό (ΕΕ) αριθ. 282/2014 του Ευρωπαϊκού Κοινοβουλίου και του Συμβουλίου της 11ης Μαρτίου 2014 περί θέσπισης Τρίτου Προγράμματος για τη δράση της Ένωσης στον τομέα της υγείας (2014 - 2020) και την κατάργηση της απόφασης αριθ. 1350/2007/ΕΚ.
3. Την αριθμ. C(2014) 3383/26.5.2014 Απόφαση της Επιτροπής περί έγκρισης του Ετήσιου Προγράμματος Εργασίας 2014 στο πλαίσιο υλοποίησης του Τρίτου Προγράμματος για τη δράση της Ένωσης στον τομέα της υγείας (2014 - 2020).
4. Το υπ' αριθμ. (2014) 1573813/16.5.2014 έγγραφο της Επιτροπής προς τα κράτη - μέλη της ΕΕ περί υλοποίησης των Κοινών Συγχρηματοδοτούμενων Δράσεων έτους 2014.
5. Τις διατάξεις του ΠΔ 95/2000 «Οργανισμός του Υπουργείου Υγείας και Πρόνοιας», όπως τροποποιήθηκε και ισχύει, (ΦΕΚ 76/Α).
6. Τις διατάξεις του ΠΔ 89/2014 «Διορισμός Υπουργών, Αναπληρωτών Υπουργών και Υφυπουργών», (ΦΕΚ 134/Α).
7. Τις διατάξεις του Ν. 3861/2010 «Ενίσχυση της διαφάνειας με την υποχρεωτική ανάρτηση νόμων και πράξεων των κυβερνητικών, διοικητικών και αυτοδιοικητικών οργάνων στο διαδίκτυο «Πρόγραμμα Διαύγεια» και άλλες διατάξεις». (ΦΕΚ 112/Α).

ΚΑΛΕΙ

στο πλαίσιο υλοποίησης των Κοινών Δράσεων του Ετήσιου Προγράμματος Εργασίας 2014 του Τρίτου Προγράμματος Δράσης της ΕΕ στον τομέα της Υγείας 2014 - 2020, τους ενδιαφερόμενους δυνητικούς Δικαιούχους να υποβάλλουν αίτηση συμμετοχής για την υλοποίηση των ακόλουθων συγχρηματοδοτούμενων Δράσεων:

-
1. **«Διατροφή και φυσική δραστηριότητα»**, προϋπολογισθείσας δαπάνης 1,2 εκατομμυρίων ευρώ.
 2. **«Πρόληψη του HIV και συνλοίμωξεων»**, προϋπολογισθείσας δαπάνης 3 εκατομμυρίων ευρώ.
 3. **«Άνοια»**, προϋπολογισθείσας δαπάνης 1,5 εκατομμυρίων ευρώ.
 4. **«Αντιμετώπιση των αναδυόμενων και υψηλής επικινδυνότητας παθογόνων οργανισμών στην ΕΕ»**, προϋπολογισθείσας δαπάνης 1,2 εκατομμυρίων ευρώ.
 5. **«Βελτίωση του συντονισμού και κατανομής των πόρων για τα ιατροτεχνολογικά προϊόντα»**, προϋπολογισθείσας δαπάνης 200 χιλ. ευρώ.
 6. **«Υποστήριξη των ηλεκτρονικών δικτύων στον τομέα της Υγείας (eHealth Network)»**, προϋπολογισθείσας δαπάνης 2,4 εκατομμυρίων ευρώ.
 7. **«Δημιουργία βάσεων δεδομένων για την ευρεία ενημέρωση\πληροφόρηση στην ΕΕ αναφορικά με τα σπάνια νοσήματα»**, προϋπολογισθείσας δαπάνης 4,3 εκατομμυρίων ευρώ.
 8. **«Μετάγγιση αίματος και μεταμόσχευση ανθρωπίνων ιστών και κυττάρων»**, προϋπολογισθείσας δαπάνης 4,3 εκατομμυρίων ευρώ.

Η συνολική προϋπολογισθείσα δαπάνη των ως άνω Κοινών Δράσεων ανέρχεται σε περίπου 18,6 ευρώ. Το περιεχόμενο, οι όροι και προϋποθέσεις υλοποίησης των Κοινών Δράσεων περιγράφονται αναλυτικά στο Παράρτημα Ι της υπ' αριθμ. C(2014) 3383/26.5.2014 Απόφασης της Επιτροπής περί έγκρισης του Ετήσιου Προγράμματος Εργασίας 2014 (Παράρτημα Ι, παρ. 2.2, σελ. 9-17), το οποίο επισυνάπτεται ως αναπόσπαστο μέρος της παρούσας.

Κριτήρια επιλεξιμότητας δυνητικών Δικαιούχων: σύμφωνα με τις διατάξεις των άρθρων 7, παρ. 2, εδαφ. α και 8 παρ. 1 του Κανονισμού (ΕΕ) 282/2014, εκτός από το Υπουργείο Υγείας, δικαίωμα συμμετοχής για την υλοποίηση των Κοινών Δράσεων, οι οποίες έχουν σαφή προστιθέμενη αξία για την Ένωση και συγχρηματοδοτούνται από τις αρμόδιες Αρχές που είναι υπεύθυνες για την υγεία στα κράτη - μέλη, έχουν:

- α)** Τα εποπτευόμενα από το Υπουργείο Υγείας Νομικά Πρόσωπα Δημοσίου ή Ιδιωτικού Δικαίου.
- β)** Όλοι οι Δημόσιοι Οργανισμοί που δραστηριοποιούνται σε πεδία σχετικά με το αντικείμενο των προαναφερόμενων συγχρηματοδοτούμενων Κοινών Δράσεων έτους 2014 και ιδίως Ερευνητικά και Ακαδημαϊκά Ιδρύματα.
- γ)** Μη κυβερνητικοί Φορείς μη κερδοσκοπικού χαρακτήρα, που έχουν συσταθεί και λειτουργούν νόμιμα και δραστηριοποιούνται σε πεδία σχετικά με το αντικείμενο των προαναφερόμενων συγχρηματοδοτούμενων Κοινών Δράσεων.

Η διαδικασία επιλογής και ορισμού του συμμετέχοντα Φορέα στις προαναφερόμενες Κοινές Δράσεις θα πραγματοποιηθεί από το Υπουργείο Υγείας, **το αργότερο έως την 16^η Σεπτεμβρίου 2014.**

Χρηματοδότηση: Η ΕΕ συμμετέχει κατά 60% στη χρηματοδότηση υλοποίησης κάθε Κοινής Δράσης και μόνο σε περιπτώσεις που η προστιθέμενη αξία από την υλοποίησή της μπορεί να θεωρηθεί ως εξαιρετικά σημαντική δύναται να ανέλθει σε ποσοστό 80%. Η χρηματοδότηση

παρέχεται μόνο για το κόστος των ενεργειών που πραγματοποιούνται μετά την ημερομηνία έναρξης υλοποίησης της Κοινής Δράσης, όπως αυτή αποτυπώνεται στην σύμβαση υλοποίησης. Τα κριτήρια επιλογής και χρηματοδότησης αναφέρονται αναλυτικά στα Παραρτήματα VII (σελ.70-71) και IV (σελ.63-65) της υπ' αριθμ. C(2014) 3383 final/26.5.2014 Απόφασης της Επιτροπής και επισυνάπτονται ως Παράρτημα της παρούσας.

Οι Κοινές Δράσεις οφείλουν να έχουν Ευρωπαϊκή Διάσταση. Ανάλογα με τη Θεματική Προτεραιότητα και τους στόχους, οι Κοινές Δράσεις που χρηματοδοτήθηκαν στο πλαίσιο υλοποίησης των προηγούμενων πολυετών Προγραμμάτων Δράσης της ΕΕ στον τομέα της υγείας περιελάμβαναν κατά μέσο όρο είκοσι πέντε (25) εταίρους.

Οι ενδιαφερόμενοι Φορείς που εμπίπτουν στις προαναφερόμενες κατηγορίες δυνητικών Δικαιούχων καλούνται μέχρι και τις 5 Σεπτεμβρίου 2014 να υποβάλλουν στο Υπουργείο Υγείας (Διεύθυνση Διεθνών Σχέσεων, Αριστοτέλους 17, 101 87 Αθήνα) αίτηση συμμετοχής για την υλοποίηση μιας ή/και περισσοτέρων Κοινών Δράσεων έτους 2014, με συνημμένα δικαιολογητικά από τα οποία να προκύπτουν:

- ✓ η νόμιμη σύσταση και λειτουργία του Φορέα,
- ✓ η συνάφεια του Φορέα με το αντικείμενο της Κοινής Δράσης,
- ✓ η διοικητική και διαχειριστική επάρκεια του Φορέα,
- ✓ η δυνατότητα εξασφάλισης εθνικής συμμετοχής,
- ✓ η ανεξαρτησία από βιομηχανικά, εμπορικά, επιχειρηματικά ή άλλα συγκρουόμενα συμφέροντα.

Για περισσότερες πληροφορίες ή διευκρινήσεις μπορείτε να απευθύνεστε στην Διεύθυνση Διεθνών Σχέσεων του Υπουργείου Υγείας (τηλ. 213 216 1603, 213 1629, fax: 210 5236023, email: intrel@yyka.gov.gr).

Συν/να: σελ. (20)

Ο ΥΠΟΥΡΓΟΣ

ΜΑΥΡΟΥΔΗΣ ΒΟΡΙΔΗΣ

ΠΙΝΑΚΑΣ ΑΠΟΔΕΚΤΩΝ:

(Διαβίβαση με ηλεκτρονικό ταχυδρομείο από την Δ/νση Διεθνών Σχέσεων)

1. Όλες οι Διοικήσεις των Υγειονομικών Περιφερειών (με υποχρέωση ενημέρωσης των Φορέων αρμοδιότητάς τους)
2. Όλες οι Περιφερειακές Αυτοδιοικήσεις της χώρας
Υπόψη: κ.κ. Προϊσταμένων Γεν. Δ/σεων Δημ. Υγείας & Κοινωνικής. Μέριμνας (Έδρες τους)
3. ΕΚΕΠΥ
4. ΕΣΔΥ
5. ΚΕΕΛΠΝΟ
6. ΚΕΣΥ
7. ΕΠΥ
8. ΕΚΕΑ
9. ΙΝΣΤΙΤΟΥΤΟ ΥΓΕΙΑΣ ΤΟΥ ΠΑΙΔΙΟΥ
10. ΕΘΝ. ΟΡΓΑΝΙΣΜΟΣ ΜΕΤΑΜΟΣΧΕΥΣΕΩΝ
11. ΕΚΕΔΙ
12. ΕΟΦ
13. ΕΛΛΗΝΙΚΟ ΙΝΣΤΙΤΟΥΤΟ ΠΑΣΤΕΡ
14. ΙΑΤΡΙΚΗ ΣΧΟΛΗ ΠΑΝΕΠΙΣΤΗΜΙΟΥ ΑΘΗΝΩΝ
15. ΙΑΤΡΙΚΗ ΣΧΟΛΗ ΠΑΝΕΠΙΣΤΗΜΙΟΥ ΘΕΣΣΑΛΟΝΙΚΗΣ
16. ΙΑΤΡΙΚΗ ΣΧΟΛΗ ΠΑΝΕΠΙΣΤΗΜΙΟΥ ΠΑΤΡΩΝ
17. ΙΑΤΡΙΚΗ ΣΧΟΛΗ ΠΑΝΕΠΙΣΤΗΜΙΟΥ ΙΩΑΝΝΙΝΩΝ
18. ΙΑΤΡΙΚΗ ΣΧΟΛΗ ΠΑΝΕΠΙΣΤΗΜΙΟΥ ΘΡΑΚΗΣ
19. ΙΑΤΡΙΚΗ ΣΧΟΛΗ ΠΑΝΕΠΙΣΤΗΜΙΟΥ ΚΡΗΤΗΣ
20. ΙΑΤΡΙΚΗ ΣΧΟΛΗ ΠΑΝΕΠΙΣΤΗΜΙΟΥ ΘΕΣΣΑΛΙΑΣ
21. ΕΘΝΙΚΟ ΜΕΤΣΟΒΙΟ ΠΟΛΥΤΕΧΝΕΙΟ
22. Τ.Ε.Ι. ΑΘΗΝΩΝ
23. Τ.Ε.Ι. ΠΕΙΡΑΙΑ
24. Τ.Ε.Ι. ΠΑΤΡΩΝ
25. Τ.Ε.Ι. ΔΥΤ. ΜΑΚΕΔΟΝΙΑΣ
26. Τ.Ε.Ι. ΘΕΣΣΑΛΟΝΙΚΗΣ
27. Τ.Ε.Ι. ΗΠΕΙΡΟΥ
28. Τ.Ε.Ι. ΚΡΗΤΗΣ
29. Τ.Ε.Ι. ΛΑΜΙΑΣ
30. Τ.Ε.Ι. ΜΕΣΣΟΛΟΓΓΙΟΥ
31. Τ.Ε.Ι. ΛΑΡΙΣΑΣ
32. Τ.Ε.Ι. ΚΑΛΑΜΑΤΑΣ
33. Τ.Ε.Ι. ΚΑΒΑΛΑΣ
34. Τ.Ε.Ι. ΧΑΛΚΙΔΑΣ
35. Τ.Ε.Ι. ΣΕΡΡΩΝ
36. Υπουργείο Εργασίας, Κοιν. Ασφάλισης και Πρόνοιας, Γεν. Γραμματεία Πρόνοιας
37. Εταιρεία Νόσου Alzheimer & Συναφών Διαταραχών, Γραφείο κ. Προέδρου
38. Πανελλήνιος Ιατρικός Σύλλογος Αθηνών
39. Πανελλήνιος Φαρμακευτικός Ιατρικός Σύλλογος Αττικής
40. Ένωση Νοσηλευτών Ελλάδας

Εσωτερική Διανομή:

1. Γραφείο κ. Υπουργού
2. Γραφείο κ. Αναπληρωτή Υπουργού
3. Γραφείο κας Υφυπουργού
4. Γραφείο κ. Γενικού Γραμματέα
5. Γραφείο κας Γενικής Γραμματέως Δημόσιας Υγείας
6. Όλες οι Γενικές Διευθύνσεις



EUROPEAN
COMMISSION

Brussels, 26.5.2014
C(2014) 3383 final

COMMISSION IMPLEMENTING DECISION

of 26.5.2014

concerning the work programme for 2014 in the framework of the third Programme of the Union's action in the field of health (2014-2020) and the EU financial contribution to the WHO Framework Convention on Tobacco Control, serving as a financing decision

(Text with EEA relevance)

COMMISSION IMPLEMENTING DECISION

of 26.5.2014

concerning the work programme for 2014 in the framework of the third Programme of the Union's action in the field of health (2014-2020) and the EU financial contribution to the WHO Framework Convention on Tobacco Control, serving as a financing decision

(Text with EEA relevance)

THE EUROPEAN COMMISSION,

Having regard to the Treaty on the Functioning of the European Union,

Having regard to Regulation (EU) No 282/2014 of the European Parliament and of the Council of 11 March 2014 on the establishment of a third Programme for the Union's action in the field of health (2014-2020) and repealing Decision No 1350/2007/EC¹, and in particular Article 11 thereof,

Having regard to Regulation (EU, Euratom) No 966/2012 of the European Parliament and of the Council of 25 October 2012 on the financial rules applicable to the general budget of the Union and repealing Council Regulation (EC, Euratom) No 1605/2002², and in particular Article 84(2) thereof,

Whereas:

- (1) In order to ensure implementation of the third Programme for the Union's action in the field of health (2014-2020), it is necessary to adopt a financing decision and the work programme for 2014. Article 94 of Commission Delegated Regulation (EU) No 1268/2012³ establishes detailed rules on financing decisions.
- (2) It is appropriate to authorise award of grants without a call for proposals to the bodies identified in the work programme and for the reasons provided therein.
- (3) This Decision should allow for the payment of interest due for late payment on the basis of Article 92 of the Financial Regulation and Article 111(4) of Delegated Regulation (EU) No 1268/2012.
- (4) For the application of this Decision, it is appropriate to define the term 'substantial change' within the meaning of Article 94(4) of Delegated Regulation (EU) No 1268/2012.
- (5) The measures provided for in this Decision are in accordance with the opinion of the Programme Committee established by Article 17 of Regulation (EU) No 282/2014.

¹ OJ L 86, 21.3.2014, p. 1.

² OJ L 298, 26.10.2012, p. 1.

³ Commission Delegated Regulation (EU, Euratom) No 1268/2012 of 29 October 2012 on the rules of application of Regulation (EU, Euratom) No 966/2012 of the European Parliament and of the Council on the financial rules applicable to the general budget of the Union (OJ L 362, 31.12.2012, p. 1).

HAS DECIDED AS FOLLOWS:

Article 1
The work programme

The 2014 annual work programme for the implementation of the third Programme of the Union's action in the field of health (2014-2020), as set out in Annex I, and the selection, award and other criteria for financial contributions to the actions of this programme, as set out in Annexes II, III, IV, V, VI and VII, and the EU payment to the WHO Framework Convention on Tobacco Control, are adopted.

The annual work programme constitutes a financing decision within the meaning of Article 84 of the Financial Regulation.

Article 2
Union contribution

The maximum contribution for the implementation of the Programme for the year 2014 is set at EUR 58 579 000, and shall be financed from the following lines of the general budget of the European Union for 2014:

(a) budget line 17 03 01 — Encouraging innovation in healthcare and increasing the sustainability of health systems, improving the health of the Union citizens and protecting them from cross-border health threats: EUR 52 870 000;

(b) budget line 17 01 04 02 — Support expenditure for Health for Growth programme: EUR 1 500 000;

(c) budget line 17 01 06 02 — Consumers, Health and Food Executive Agency – CHAFEA (hereinafter 'the Agency') – Contribution from Health for Growth programme: EUR 4 209 000.

Estimated additional contributions from EFTA countries members of the European Economic Area for their participation in the Health Programme are: EUR 1 757 370.

The maximum contribution for the EU payment to the WHO Framework Convention on Tobacco Control is set at EUR 200 000 and shall be financed from the following line of the General Budget of the European Union for 2014:

— budget line 17 03 13 — International agreements and membership of international organisations in the field of public health and tobacco control.

The appropriations provided for in the first, second and third paragraph may also cover interest due for late payment.

Article 3
Flexibility clause

Cumulated changes to the allocations to specific actions not exceeding 20% of the maximum contribution set in Article 2 of this Decision shall not be considered to be substantial within the meaning of Article 94(4) of Delegated Regulation (EU) No 1268/2012, where those changes do not significantly affect the nature of the actions and objective of the work programme. The increase of the maximum contribution set in Article 2 of this Decision shall not exceed 20%.

The authorising officer responsible may adopt the changes referred to in the first paragraph in accordance with the principles of sound financial management and proportionality.

Article 4
Grants

Grants may be awarded without a call for proposals to the bodies identified in Annex I in accordance with the conditions specified therein.

Done at Brussels, 26.5.2014

For the Commission
Tonio BORG
Member of the Commission



EUROPEAN COMMISSION
HEALTH AND CONSUMERS DIRECTORATE-GENERAL

Public health
Director

Luxembourg,
sanco.ddg1.c.1IA/ol(2014)1565835

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 :

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

The Consumer, Health and Food Executive Agency (Chafea) is mandated to implement these actions. Funding for these actions will be awarded via a direct grant procedure. This requires the grantees to be known before Chafea sends invitations to prepare the proposals in view of signing grant agreements.

Articles 6, 7(2)(a) and 8 of the Health Programme Regulation 282/2014/EU (third Health Programme) and subsequently the work plan 2014 define the eligibility criteria, which are annexed to this letter for your convenience (Annex 3).

I hereby invite you to nominate competent authorities / other bodies to participate in one or more of the joint actions listed above. Please use the templates attached and send them, together with the supporting documents (if applicable), to Chafea via email:

CHAFEA-HP-JA@ec.europa.eu

and on paper (originals):

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

The deadline is 16 September 2014.

I would be grateful if you could forward this message and the enclosed forms and information to the relevant competent authorities in order to ensure your country's participation in one or more of the 2014 joint actions.

Yours faithfully,



John F. Ryan
Acting Director

Cc.: Programme Committee Members and National Focal Points

Encl.: Annex 1: Notification of competent authorities to participate in joint actions
Annex 2: Notification of bodies other than competent authorities to participate in joint actions
Annex 3: Draft annual work plan 2014

ANNEX I TO VII

ANNEX I

Public Health Programme - Work Programme for 2014

1. INTRODUCTION

1.1. Policy and legal context

This work plan sets out the priorities and actions to be undertaken, including the allocation of resources, to implement the third Programme of the Union's action in the field of health (2014-2020) ⁽¹⁾ for the year 2014. It is based on Article 168 of the Treaty on the Functioning of the European Union (TFEU) and ensuing legal obligations and policy commitments. Article 168 of the TFEU sets out the scope of EU action in the area of public health which is to carry out actions to support, coordinate or supplement the actions of the Member States.

The EU Health Strategy ⁽²⁾ provides a policy framework for all the areas covered by this work plan. The 'Investing in health' Staff Working Document ⁽³⁾ of February 2013 linked this policy framework more closely to the broader Europe 2020 strategy. More specifically, it stressed the necessity to invest in sustainable health systems, invest in people's health and invest in reducing health inequalities.

Taken together, these three strands demonstrate that a healthy population and sustainable health systems are decisive for a smart, sustainable and inclusive growth.

The third Programme of the Union's action in the field of health (2014-2020) follows this approach and:

- Complements supports and adds value to the policies of Member States aimed at improving the health of Union citizens and reducing health inequalities by promoting health, encouraging innovation in health, increasing the sustainability of health systems and protecting Union citizens from serious cross-border health threats.

⁽¹⁾ Regulation (EU) No 282/2014 of the European Parliament and of the Council of 11 March 2014 on the establishment of a third Programme for the Union's action in the field of health (2014-2020) and repealing Decision No 1350/2007/EC http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=OJ:JOL_2014_086_R_0001_01&from=EN

⁽²⁾ Commission White Paper *Together for Health: A strategic approach for the EU 2008-2013* (COM(2007) 630 final)

⁽³⁾ Commission Staff Working Document Investing in Health. SWD(2013)43 final. Brussels; 20 February 2013. Accompanying the Communication: Towards Social Investment for Growth and Cohesion – including implementing the European Social Fund 2014-2020. COM(2013)83 final, available at: http://ec.europa.eu/health/strategy/docs/swd_investing_in_health.pdf.

2.2. Grants for actions co-financed with Member State authorities

Under the overall operational budget reserved for grants, EUR 18 593 000 will be reserved for grants for actions co-financed with Member State authorities. The budget line is 17.03.01.

Grants for actions co-financed with Member State authorities (in short 'Joint Actions') are, according to Article 7.2(a) of the Programme Regulation, *'actions having a clear Union added value co-financed by the competent authorities that are responsible for health in the Member States or in the third countries participating in the Programme pursuant to article 6, or by public sector bodies and non-governmental bodies, as referred to in Article 8(1), acting individually or as a network, mandated by these competent authorities.'*

Hence, they allow the nominated national authorities of the Member States/other countries participating in the Programme and the European Commission to take forward work on jointly identified issues.

Grants for such actions are calculated on the basis of eligible costs incurred. The maximum rate of EU co-financing is 60 %. This may be up to 80 % if a proposal meets the criteria for exceptional utility set out in Annex VII. Annex IV contains the eligibility, exclusion, selection and award criteria for these actions.

2.2.1. Actions under thematic priority 1 - Promoting health, preventing diseases and fostering supportive environments for healthy lifestyles taking into account the ‘health in all policies’ principle

2.2.1.1. Facilitating the sharing of good practices between the EU Member States on national policies related to unbalanced dietary habits and physical inactivity (Point 1.1. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

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 [COM(2007)279]⁽⁷⁾ 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.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

The activities should include: (a) capacity building for the development and the implementation of effective public health policies related to nutrition, dietary habits and physical activity; (b) the identification of comparable data across the Member States on the reduction of the levels of fat, saturated and trans fats, salt and sugar in manufactured foods and the development of common tools such as a methodology for food reformulation surveys; (c) the reflection on the monitoring of national policies related to nutrition, dietary habits and physical activity, including those promoting healthier environments, especially in schools and pre-schools; and (d) the production of guidelines related to these policies as well as print and online instruments for information dissemination. Work should take into account social inequalities and be taken forward in cooperation with WHO.

Implementation

Implementation by the Agency

Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 1 200 000

⁽⁷⁾ White Paper COM(2007) 279 of 30 May 2007 on a Strategy for Europe on Nutrition, Overweight and Obesity related health issues.

2.2.1.2. Improvement of HIV and co-infection prevention and treatment in priority regions and priority groups in the European Union (Point 1.3. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

This action supports the implementation of the Commission Communication on ‘Combating HIV/AIDS in the European Union and neighbouring countries, 2009-2013’ [COM(2009) 569 final of 26 October 2009] and the ‘Action Plan on HIV/AIDS in the EU and neighbouring countries: prolongation 2014-2016’⁽⁸⁾. The Communication and Action Plan provide the framework for evidence based prevention and integrated treatment of HIV/AIDS and co-infection (viral hepatitis, tuberculosis and STIs), which will be focused on priority groups.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

The activities taken forward by national bodies mandated in this field should particularly address the growing HIV/AIDS epidemic among drug users, their sexual partners and offspring in East and Southern European countries, some of which are most affected by the economic crisis. This action will build on best practice models of several EU networks, which bring together health authorities, civil society and patient organisations. Furthermore, 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. In addition, outreach work and referral systems will be bridged, by bringing together low threshold services to deliver primary health care interventions and specialised care for the management of HIV/AIDS and co-infections in the community and prison health settings. The action will promote: quality of services by fostering integration of care for HIV/AIDS and co-infections; integration of care between prison health and community public health services; use of European standards in evidence for drug prevention, and the scaling up of harm reduction by improving access to drug treatment and harm reduction programmes. In addition the action will aim to develop guidance on the utilization of funding mechanisms for actions on HIV/AIDS and co-infections, and also address discrimination in relation to HIV/AIDS.

Implementation

Implementation by the Agency

⁽⁸⁾ Commission Staff Working Document SWD(2014) 106 of 14 March 2014 on an Action Plan on HIV/AIDS in the EU and neighbouring countries: 2014-2016.

Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 3 000 000

2.2.1.3. Promoting the implementation in Member States of coordinated actions to improve the situation of people with dementia and their carers (Point 1.4. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

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.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

The activities to be undertaken by national bodies mandated in this field will include: improved post-diagnostic support services, improvement of care pathways, assessment of the use of medicinal products and of psychotropic substances, the health of family carers, the qualification of the personnel involved in the care chain, and the availability and the quality of day-care homes for people with dementia.

Implementation

Implementation by the Agency

Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 1 500 000

2.2.2. Actions under thematic priority 2 - Protecting Union citizens from serious cross-border health threats

2.2.2.1. Efficient response to highly dangerous and emerging pathogens at EU level - Phase II (Point 2.3. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

Against the background of the entering into force of Decision No 1082/2013/EU on serious cross-border threats to health there is need of efficient, rapid and coordinated responses to emerging threats caused by new pathogens. The objective of this action is hence 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 which are already active in the field of identification of dangerous bacterial and viral human pathogens. This action will enable an efficient and coherent EU level response to potentially devastating cross-border events. This is of particular value for Member States with less capacity and expertise to respond to threats caused by emerging and dangerous pathogens and it will also support Member States in implementing the International Health Regulations. It will be fully linked to the existing mechanisms and structures developed and put in place in other sectors, such as the network operating under the FP7 for research and development and the existing initiative developed by the European Centre for Disease Prevention and Control and in the context of the WHO Reference Laboratory Networks.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

The action will in phase II build on previous work of the '*Quality Assurance Exercises and Networking on the Detection of Highly Infectious Pathogens*' (QUANDHIP) consortium and will integrate activities of two different networks (Establishment of Quality Assurances for Detection of Highly Pathogenic Bacteria of Potential Bioterrorism Risk – EQADeBa and European Network of level 4 laboratories- EuronetP4). It will be taken forward by national bodies mandated in this field and be extended to the 28 EU Member States and EEA Countries offering the following specific services: (a) rapid identification of pathogens causing serious cross-border threats to health (bacterial and viral); (b) rapid mechanisms for sample sharing in case of an event to be managed under Decision No 1082/2013/EU; (c) confirmation of laboratory diagnosis; (d) quality assurances for detection of highly pathogenic bacteria of potential bioterrorism risk; (e) training, capacity building in the infection control area and in the biosafety/biosecurity quality management; (f) consolidation of biodiverse repository of reference materials; and (g) promotion of interoperability with other relevant EU and international research and public health networks/projects/organizations in the field of emerging infection.

Implementation

Implementation by the Agency

Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 3 500 000

2.2.3. Actions under thematic priority 3 - Contributing to innovative, efficient and sustainable health systems

2.2.3.1. Technical and scientific co-operation allowing improved coordination and resource sharing between Member States (Point 3.1. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

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.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

Co-operation between Member States allowing development of best practise, training and knowledge and resource sharing in the operation of the medical device legislation, in particular in relation to Member States tasks such as the designation of notified bodies, assessment of clinical studies, the operation of the Vigilance system and market surveillance.

Implementation

Implementation by the Agency

Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 203 000

2.2.3.2. eHealth support for the eHealth Network by national competent authorities (Point 3.2. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

eHealth and health services based on eHealth applications are broadly recognized as an essential element to support sustainability of health care systems. Directive 2011/24/EU on patients' rights in cross-border healthcare sets broad objectives and deliverables for EU cooperation in eHealth and sets up the eHealth Network. For the Network to deliver, a preparatory structure to work on policy and technical aspects is a prerequisite. This 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.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

The activities of this action to be taken forward by national bodies mandated in this field will be based on: (1) the deliverables mentioned in Directive 2011/24/EU (e.g. guidelines on ePrescription, the use of medical information for public health and research); (2) the priorities identified in the eHealth Action Plan 2012-2020; and (3) the strategic aspects of the interoperability agenda as agreed by the Network. The action will also contribute to the sharing of good practises between Member States on how eHealth tools are used in health promotion and disease management.

Implementation

Implementation by the Agency

Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 2 400 000

2.2.4. Actions under thematic priority 4 - Facilitating access to better and safer healthcare for Union citizens

2.2.4.1. Support to the implementation of Council Recommendation and Commission Communication on Rare Diseases, in particular to an EU wide rare diseases information database (Point 4.1. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

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 ⁽⁹⁾.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

This action which will be taken forward by national bodies mandated in this field will focus in particular on the implementation of actions in the areas of information provision, codification, European reference networks, gathering expertise and provision of support for the Commission expert group on rare diseases.

⁽⁹⁾ Council Recommendation (2009/C 151/02) of 8 June 2009 on an action in the field of rare diseases, OJ C 151 (3.7.2009).

In respect to the information and inventorying of rare diseases it will aim to support the further development of the Orphanet database on rare diseases which is run by a large consortium of European partners and is the biggest global repository of information about rare diseases.

Implementation

Implementation by the Agency

Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 4 290 000

2.2.4.2. Strengthening the Member States' capacity of monitoring and control in the field of blood transfusion and tissue and cell transplantation (Point 4.5. of Annex I to the Programme Regulation)

Priorities of the year, objectives pursued and expected results

This action aims to support Member States in their efforts to improve the implementation of the EU requirements for the safety and quality of blood and blood components and tissue and cell products.

Description of the activities to be funded by a grant awarded without a call for proposals on the basis of Article 190(1)(d) of the Rules of Application

This action will promote further cooperation between Member States competent authorities in the area of blood transfusion and tissue and cell transplantation. The action, to be taken forward by national bodies mandated in this field, should build on the outcome of previous EU-funded projects (e.g. EUBIS, CATIE, EUSTITE, SOHO V&S, etc.) 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. Common practical concerns and best practices should be identified, allowing for cross-fertilisation between the transfusion and transplantation sectors.

Implementation

Implementation by the Agency

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Indicative timetable and indicative amount

Reference	Date	Amount
Signature of the grant awarded without a call for proposals	First quarter of 2015	EUR 2 500 000

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2. FINANCIAL INDEPENDENCE

A non-governmental body or a network and its coordinating body must be financially independent at the time of applying i.e. not receiving more than 20 % of their core funding from private sector organisations ⁽¹³⁾ representing a conflicting interest, or from other sources representing a conflicting interest.

Core funding shall mean financing required for the basic structure of an organisation, including salaries of full-time staff, facilities, equipment, communications, and the direct expenses of day-to-day work. Core funding also includes financing of all permanent or regularly repeated activities (e.g. annual general assembly or other statutory meetings, website, databases, newsletters). Core funding requirements are usually budgeted separately from other costs such as specific actions or projects.

3. TRANSPARENCY OF THE APPLICANT'S ACTIVITIES AND FUNDING

All activities should be published in the applicant's annual report ⁽¹⁴⁾.

All information on funding is to be made available to the public via the applicant's website, broken down by type (core and project funding, contribution in kind) and by funding entity.

4. ASSESSMENT OF INDEPENDENCE

Legal independence and transparency is assessed based on the latest available information provided by the applicant together with the application.

Financial independence will be assessed based on the latest available financial information, in particular the financial independence form. This must be provided by the applicant together with the application based on the specification in the call text.

⁽¹³⁾ The term 'private sector' covers 'for-profit' companies/enterprises/corporations, business organisations or other entities irrespective of their legal nature (registered/not registered), ownership (wholly or partially privately owned/state owned) or size (large/small), if they are not controlled by the public.

⁽¹⁴⁾ Collaborators in a position that could lead to a conflict of interest (Article 57 of the Financial Regulation and Article 32 of the Rules of Application) shall be listed.

ANNEX VII

Criteria to assess the exceptional utility of projects, operating grants, actions co-financed with Member State authorities applications under the third Programme for the Union's action in the field of health (2014-2020)

Regulation (EU) No 282/2014, Article 7(3)

1. INTRODUCTION

Actions co-funded under the third Health Programme may receive a co-funding of 80% of the total eligible cost for the action, if they are deemed to be of exceptional utility towards achieving the objectives of the Programme. This concerns projects, operating grants and actions co-financed with Member States authorities. To receive 80% of co-funding, the proposals must comply with the criteria set out below.

2. CRITERIA FOR THE EXCEPTIONAL UTILITY OF PROJECTS

1. At least 60 % of the total budget of the action must be used to fund staff. This criterion intends to promote capacity building for development and implementation of effective health policies.
2. 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. This criterion intends to promote the participation of health actors from Member States with a low GNI.
3. The proposal must demonstrate excellence in furthering public health in Europe and a very high EU added value.

3. CRITERIA FOR THE EXCEPTIONAL UTILITY OF OPERATING GRANTS

1. At least 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. This criterion intends to promote the participation of non-governmental bodies from Member States with a low GNI.
2. The reduction of health inequalities at EU, national or regional level is manifested in the mission as well as the annual work programme of the applicant. This criterion aims to ensure that co-funded non-governmental bodies directly contribute to one of

ANNEX IV

Criteria for financial contributions to actions co-financed with Member State authorities under the third Programme for the Union's action in the field of health (2014-2020)

Regulation (EU) No 282/2014, Article 7(2) and Article 8(1)

The Financial Regulation and its Rules of Application are applicable for the implementation of the Health Programme.

The Member State authorities will be invited to submit proposals for co-funding.

Proposals for actions will be evaluated based on four categories of criteria:

1. Eligibility criteria, to assess the applicant's eligibility (Article 131 of the Financial Regulation),
2. Exclusion criteria (Articles 106 (1), 107 and 131 of the Financial Regulation),
3. Selection criteria, to assess the applicant's financial and operational capacity to complete a proposed action (Articles 131 and 132 of the Financial Regulation and Article 202 of the Rules of Application),
4. Award criteria, to assess the quality of the proposal taking into account its cost (Article 132 of the Financial Regulation and Article 203 of the Rules of Application).

1. ELIGIBILITY CRITERION

According to Article 7(2)(a) of the Health Programme Regulation, applicants must be the competent authorities that are responsible for health in the Member States or in third countries participating pursuant to Article 6 of that Regulation, or public sector bodies and non-governmental bodies, as referred to in Article 8(1) of that Regulation, acting individually or as a network, mandated by those competent authorities. According to Article 8(1) of the Health Programme Regulation, the grants for actions referred to under Article 7(2)(a) may be awarded to legally established organisations, public authorities, public sector bodies, in particular research and health institutions, universities and higher education establishments.

According to Article 190(1)(d) of the Financial Regulation grants may be awarded without a call for proposals to bodies identified by a basic act, within the meaning of Article 54 of the Financial Regulation, as beneficiaries of a grant or to bodies designated by the Member States, under their responsibility, where those Member States are identified by a basic act as beneficiaries of a grant.

‘Competent authority’ means the central authority of a Member State competent for health/specific (public) health topic or any other authority to which that competence has been conferred; it shall also include, where appropriate, the corresponding authority of a third country. A competent authority can also be one at regional level, depending on the governance structure of the Member State/third country.

If the participating entity is a competent authority, the competent ministry/government organisation shall by way of an official notification, duly signed by an authorised representative, confirm that the entity is the eligible body to participate on behalf of the respective Member State/regional entity and under its responsibility in the relevant action.

If the chosen entity is a non-governmental body or a public body other than a competent authority, the competent ministry/government organisation shall officially designate the body that will be eligible to participate on behalf of the respective Member State/regional entity and under its responsibility in the relevant action.

The competent ministry/government organisation shall confirm that the designation procedure was executed and concluded in the respect of the national legislation in force in the respective country and that all the transparency requirements for the use of public EU and national funds in the respective country have been fully met. The authorised representative signing the official notification of the designation shall confirm that the Ministry/government organisation is fully responsible for this designation and its legality.

2. EXCLUSION CRITERION

The applicants are not in any of the situations of exclusion listed in Articles 106 and 107 of the Financial Regulation.

3. SELECTION CRITERIA

Only proposals which meet the eligibility and exclusion criteria will be assessed on the basis of the selection criteria.

The following selection criteria have to be met:

2.1. Financial capacity

Applicants must have stable and sufficient sources of funding to maintain their activity throughout the period during which the activity is being carried out and to participate in its co-financing.

The verification of financial capacity will not apply to public bodies.

2.2. Operational capacity

Applicants must have the professional resources, competences and qualifications required to complete the proposed action.

4. AWARD CRITERIA

Only actions co-financed with Member State authorities which meet the exclusion and eligibility and selection criteria will be assessed on the basis of the following award criteria.

4.1. Contribution to public health in Europe

The following sub-criteria are taken into account in the assessment:

- Quality of the contribution of the Joint Action to public health in Europe,
- Consideration of social, cultural and political context.

4.2. Technical quality

The following sub-criteria are taken into account in the assessment:

- Quality of the evidence base,
- Quality of the content,
- Innovative nature, technical complementarity and avoidance of duplication of other existing actions at EU level,
- Quality of the evaluation strategy,
- Quality of the dissemination strategy and plan.

4.3. Management quality

The following sub-criteria are taken into account in the assessment: