21 March 2024

2024 Flagships Call

Pitching Days

Guidelines for applicants – Cut Off 1

1 PURPOSE

The purpose of the Pitching Days is to decide which proposals will progress further in the evaluation process of the EIT Health Flagships 2024 call, to be finally included in EIT Health's portfolio. Being selected to move forward to the Pitching Days means you and your team will have the opportunity to present your proposal to an Evaluation Board and to receive valuable feedback on your project from experts in your field of interest. Each pitch will be evaluated based on the key areas highlighted in the call document.
The jury will have access to the short proposal and all information submitted on the platform by each team before the Pitching Days.

In this document, you will find all the information you need about logistics for the Pitching Days, presentation requirements and evaluation criteria.

2 USEFUL INFORMATION

Dates: 10-12 April 2024

Location: Hybrid Microsoft Teams session. A panel of 3 experts will meet face-to-face at EIT Health's Co-location Center (CLC) premises. Applicant teams will present online to the experts.

Participants:

On the Team side (4 people max, online via Microsoft Teams):

- the Activity Leader presence is mandatory;
- 4 relevant consortium members maximum, from at least 2 entities, including the Activity Leader;

Note: no professional presenter should be invited unless this representative will participate actively in the project

On EIT Health side at the CLC (7-8 people, max):

- the CLC Managing Director will chair the session;
- the panel of 3 independent experts will evaluate the proposals;
- 1 CLC staff member will join as rapporteur;
- 2-3 staff members may join as observers for learning purposes (either online or in-person);

Session structure:

The pitching session will have a duration of 40 minutes + 30 minutes of experts' discussion and scoring (applicant team will be asked to leave) and will follow the structure below. The session will be recorded for audit purposes only and stored for 3 months.

Time	Content	Recorded
5 min	Introduction	Yes
15 min	Presentation	
20 min	Q&A	
Closed session: Proposal presenters leave the call		
30 min	Discussion & Scoring	No

- The chair will launch a quick *tour de table* where all attendants will briefly introduce themselves (5');
- The chair will then give the floor to the presenter to pitch the proposal (15');
- After 15 minutes, presenter will be asked to conclude the presentation and reviewers will start the Q&A session (20');
- The partners will be invited to leave the call by the chair just after the Q&A session. Partners will be automatically disconnected by the rapporteur if they do not leave the call right after the Q&A session;
- All observers will leave the session after the panel discussion is concluded.

Session etiquette:

- Please, connect 10 min before and wait in the lobby until you are invited to enter;
- Make sure your name and your institution are visible when connecting to the video call;
- Please mute yourself when you are not speaking;
- If you disconnect during the presentation, please join the meeting again using the same dial-in/link sent by EIT Health. If you still face problems, reach out to the CLC contact provided in the email invitation;
- Please respect the rules of participation as well as your role and responsibilities.

Results notification: Results will be notified by e-mail on 22 April 2024.

3 EVALUATION PANELS

Technology Development Panel



Agnieszka Gaczkowska (MD, MBA) graduated from the Medical University of Warsaw, Faculty of Medicine and completed her MBA in healthcare (Kozminski University in Warsaw). She worked as a teaching fellow in the Medicine and Neuroscience Department at Singularity University, which is part of the NASA Ames Research Park in Mountain View, USA. There, she was responsible for medical projects focusing on new technologies. Since 2013, she has been an expert in the Consumers, Health, Agriculture and Food Executive Agency (CHAFEA - Currently HADEA) of the European Commission and a guest lecturer at Maastricht University. In 2018 she graduated from The Execuitve Program at The Amsterdam School of Creative Leadership (THNK). For the last few years, Agnieszka has been involved in medical startups such as Nightly App and HigoSense. Currently, she runs a family-owned business - a primary and ambulatory care clinic and advises Sundose which produces smart supplements. She is passionate about healthcare innovations and their impact.

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Michel Barth possesses extensive expertise in strategic and management consulting, which he has acquired through diverse assignments, including his tenure as a director at A.T. Kearney. Additionally, Michel has honed his skills in the field of innovation and healthcare, having served as an R&D manager in the automotive industry at Valeo and actively participating in pivotal innovative technological programs under French and European public funding. Over the past decade, Michel has been dedicated to working with clients in the healthcare sector, with a keen focus on leveraging the benefits of digital disruption and strategic innovation. Furthermore, Michel shares his knowledge and insights as a lecturer at multiple business and engineering schools.

https://www.linkedin.com/in/michel-barth/



Sauro Vicini is an Executive Manager and Cluster Director of two regional industrial and research organizations: the Life Science & MedTech cluster in Emilia-Romagna Region and the Smart City's cluster in Lombardia Region in Italy. He graduated as a computer scientist with a MSc in Technology & Innovation Management held at Business School of the Bologna University. He started over 20+ years research activity, leading and collaborating on numerous European Projects (from FP6 to Horizon Europe) covering innovation areas such as Smart Cities, Digital Health, Blockchain, IoT, Artificial Intelligence, Machine Learning, Cloud Computing, data security, privacy-by-design, wearable technologies, living lab methodologies and semantic engines, mainly in the San Raffaele Scientific Institute of Milan (2006-2017) for well-being and disease prevention. During that time he also founded and led 4 startups to 3 successful exit and 1 failure. In 2012 Sauro founded the "City of the Future Living Lab", the Open Innovation Lab of the San Raffaele Hospital, looking over the concept of Co-Creation and defining a new methodology for the involvement of users in the design and development of innovative smart cities' services.

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Teresa Meneu Barreira is the LifeSciences Business Development Coordinator at T4S by VASS Group, an international advanced technology consultancy company working in supporting digitalization and technology deployment in diverse sectors. She is expert is supporting ehealth and pharma industry in implementing and deploying IT technologies In parallel, she has supported the European Commission and other international entities like IMI2, EIT Health or Enterprise Ireland, in evaluating projects in the areas of digital health, clinical studies, remote monitoring and innovation. Before joining T4S, Teresa was eHealth research coordinator in TSB at the Polytechnical University of Valencia (UPV), a leading Spanish research group in applied IT in health and social care. She is also founding partner of 2 spin-off SMEs. Teresa is a Telecommunications Engineer by the Polytechnical University of Valencia, MBA and master's in project management.

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Michal Plit At LUX MED for 16 years, a strategist, innovator, financier, graduate of Warsaw School of Economics (SGH), and member of ACCA. He began his professional career at RSM Salustro Reydel, working in the Audit Department. He gained experience in positions such as Financial Controller (Sephora, LUX MED), Finance Director (Alshaya CEE, Ultimate Fashion), Director of Analysis (LUX MED). Currently, as Director of Strategy and Innovation, he supports the development of strategy and innovation within the LUX MED Group, co-creating many innovative projects recently: pre-interview, medical documentation indexing and summarization, opengate. Specializes in assisting organizations in making and supporting changes, organizing and facilitating processes, simplifying them, asking difficult questions, and taking responsibility for their implementation. Plays a role as a change initiator, introducing new ideas, drawing inspiration from others, and convincing and motivating others to act.

https://www.linkedin.com/in/michalplit/



Christoph Meyer-Delpho is Founder and CEO of DHSBI, a Digital Health Strategy, Business Development and Innovation Boutique Consulting Company with 100% focus on implementational success of digital health. Before founding DHSBI, Christoph worked 12 years for Deutsche Telekom Healthcare Solutions GmbH (DTHS) in Germany in different leading functions regarding strategy, business development and innovation. Most recently he headed the department of New Business & Strategy for DTHS. Christoph is also involved in different Digital Health research projects, author of various scientific publications and speaker on digital health innovations. Christoph holds a PhD in Medical Economics from University of Witten/Herdecke and completed a year-long executive management program at Stanford University.

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Service Development Panel



Leo Lewis has a keen interest in rural health and wellbeing, vulnerable populations, innovation and transformation and is International Lead in the Bevan Commission, Wales's independent think tank, where she supports its Exemplars and Fellows to promote and share their initiatives internationally and learn from others across the world for the benefit of people living and working in Wales. Prior to this, Leo worked as a health informatician for more than 20 years in academic, NHS and UK government sectors and successfully led and managed a range of information and communication technology enabled health and social care service improvement and transformation projects. In 2013, Leo became a Senior Fellow in IFIC, leading IFIC's participation in a range of EU-funded integrated care projects and became Director of Research and Development prior to stepping away from a full-time position in mid-2021.



Florian Koerber is responsible for the digital health startup and scaleup program at Flying Health and a professor for digital health at IU Bad Honnef. Prior to that, he was CEO of Newsenselab, a pioneer in digital migraine care delivery and one of the first DiGAs. Previously, Florian held different local and global commercial positions with GlaxoSmithKline. He furthermore gained experience as strategy consultant, investor and coach. Florian studied economics and business studies at LMU München and HEC Lausanne. He holds a PhD in health economics.

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Aletta (Bakker) Debernardi is Director at Palga. Palga is the Dutch nationwide infrastructure for pathology. Structured pathology data from over the last 50 years are used for patient health care and scientific research. Palga ensures that the pathologist can make the best possible diagnosis. Secondly Palga helps researchers do research with the anonimised data and thereby contributes to better healthcare. Data availability and a learning healthcare system go hand in hand with patient privacy. Expert and jury member European Innovation council for the European Commission for large tech innovation funds such as the Accelerator Fund with 2.5 M Euro in grant per company and up to 15 M Euro in equity.

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Education Programmes Panel



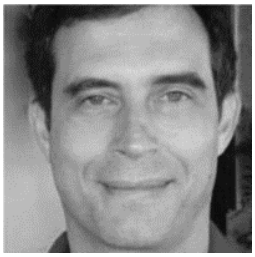
Sarah Wamala Andersson is a Professor of Health and Welfare Technology at Mälardalen University (MDU)in Sweden. Sarah founded and leads the PREVIVE research group where she conducts multidisciplinary research focusing on implementation, usability, policies, reimbursement models, real-world evidence to demonstrate value and effectiveness of digital health and welfare technology, as well as equity and ethical aspects of AI-based solutions. Prior to MDU, Sarah has served the Swedish Government as the Director General of the Swedish Public Health Institute and worked as: principal research scientist at a multi-national pharmaceutical industry, as Professor of Health policy at Karolinska Institute and as Director of the Department of Health Promotion and Disease management, Region Stockholm.

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Paula Kersten is an executive leader and education expert with 30 years experience in Higher Education. She trained in the Netherlands as a physiotherapist, and has experience of working in the UK, New Zealand, Germany and the Netherlands. She was a full Professor at Auckland University of Technology, the University of Brighton and most recently at Canterbury Christ Church University. Paula has substantial experience in reviewing applications for research and innovative educational programmes. She served as panel member for career awards, European and national grants (e.g. for EIT Health, Karolinska Institutet, UK Stroke Association, New Zealand Health research Council, Netherlands Organisation for Scientific Research, UK National Institute for Health Research). In 2018, she was an International Panel Member for the New Zealand Performance Based Research Funding. Paula prioritises equality, diversity, and inclusion in her work, and actively participates in - and promotes - local/national initiatives that bring benefit to staff and students.

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Spyros Arsenis is Vice Director of Business Strategy Sector at National Bank of Greece. Head of Business Innovation Development Unit.Excited to lead the first Greek Bank's Operational Unit for Innovative SMEs. An ardent disruptor, stays in the frontline of the innovation ecosystem by forging partnerships and synergies. Greek Fintech Hub Co-founder. NBG Business Seeds Program Manager since the program's initiation and member of the advisory board of Big Pi, Unifund, Metavallon and Synergia VCs, Archimedes - Center for Research, Innovation and Entrepreneurship of NKUA and OK!Thess pre-incubator. Member of the Selection committee of Elevate Greece. Initial manager for the act4Greece crowdfunding platform, coordinating implementation and launch. Official EU programs expert, loves to write about science (6 scientific books), and explain the use of technology (another 4 books). Plus, teaching startup economics at Business School of Athens University. Has taught entrepreneurship, e-commerce and ICT in university courses (7 years as a visiting professor).

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4 EVALUATION CRITERIA

As stated in the 2024 Call document (page 35), the evaluation criteria for Pitching Days will be as follows:

Project Excellence and Strategic Fit	**50%**
Impact and Sustainability	**40%**
Implementation	**10%**

The reviewers will use specific scorecards to evaluate the proposals. Those scorecards are annexed to this document.

5 THE PITCH

The duration of your pitch should not exceed 15 minutes. Please prepare the number of slides accordingly with succinct and coherent information for the jury (15-20 slides are recommended).

The jury is **not** expecting to have all the project details in the slides, but rather to see your team prepared to **answer** the questions during the Q&A session.

As a general recommendation, your pitch should follow the main structure of the short proposal template:

- **Project Excellence and Strategic Fit**
- **Impact and sustainability**
- **Implementation**

Specific information requirements

Technology Development

- Unmet need and description of the solution (extent of the problem and currently available solutions, clear explanation of how it addresses the problem and clarification of the type of your product/service);
- Strategic fit and ground for EIT Health involvement;
- Certification pathway, explaining any pre-identified markets with the corresponding certification needs;
- If applicable: Use of registries and biobanks. You should identify the registry you are planning to use and provide information about the current access to data status;
- Impact (social, economic, health);
- Sustainability and scalability beyond project;
- Feasibility of the project;

- Team;
- KIC13: Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs;
- At least one customized KPI linked to Patient Reported Outcome Measure (PROM);
- EITHE02.4: Innovations launched on the market with a sales revenue of at least 10 000 EUR documented - to be reported during the KAVA duration or within 1 year after completion.

Service Development

- Unmet need and description of the solution (extent of the problem and currently available solutions, clear explanation of how it addresses the problem and clarification of the type of your product/service);
- Strategic fit and ground for EIT Health involvement;
- Outcome measures;
- Impact (social, economic, health);
- Sustainability and replicability beyond project. Plans of large-scale implementation on year 3;
- Feasibility of the project;
- Team - Identification of clinical partners. Please make sure the two clinical partners (from different countries) involved in the project are represented during the call and Q&A;
- KIC13: Number of citizens/patients that benefitted from solutions developed or implemented in KAVAs;
- At least one customized KPI linked to Patient Reported Outcome Measure (PROM).

Education Programmes

- Description of the unmet educational need among the target audience including the process to identify the educational gap (in the target audience and educational offerings on the market);
- Mention the learner pre-requirements (if any) as well as the profile and attributes (this is, skills, competencies and knowledge) of the participants at the end of the programme;
- Strategic fit and ground for EIT Health involvement
- Show the link between the proposed modules and the challenges described in the specific flagship. Present the vision of the proposed modules;
- Educational design leading to demonstrable outcomes
- Describe how the modules allow personalised learning pathways;
- Sustainability and scalability beyond project
- Feasibility of the project
- Team

For any doubt or question, please be in touch with your local CLC contact (provided in the invitation email).

6 ANNEXES

Annex 1. Technology Development Project Scorecard

Criteria	Question	Help Text Scoring 0-5 scoring (with 0.5 increments)
Project Excellence and Strategic Fit (50%)	Unmet needs	To what extent is the proposed solution addressing a clearly defined unmet clinical need relevant at European level, considering problem severity and people impacted)?
	Strategic fit and ground for EIT Health involvement	To what extent is this project aligned with EIT Health's (public funding) ambition and strategy (EIT Health goals, EIT Health Flagships)?
	Description of the solution	To what extent is there evidence that the suggested approach is unique/novel or better than the existing ones (e.g. 30% faster; 25% cheaper; 5x more accurate…) and has there been previous developments accomplished so far?
	Certification pathway	To what extent is the identified certification pathway that the project suggests to follow relevant to the target markets?
Implementation and Feasibility (10%)	Feasibility of the project	To what extent is there evidence that this project will be able to scale the solution/service into the market (or an additional one) 1 year after the end of the EIT Health funding period?
	Team	To what extent are the currently involved partners having clear and irreplaceable roles in driving the project forward and show commitment? And have applicants clearly identified the needs of additional partners' expertise? Please consider: Expertise: Synergies, complementarity, or previous experience in similar projects Responsibility: Meaningful role of assigned personnel Commitment: engagement plans within and after EIT Health funding
Impact and sustainability (40%)	Impact (social, economic, health)	To what extent is the impact (social, economic, health) generated by the proposed solution clearly described with realistic and achievable target values?
	Sustainability and Scalability beyond project	How would you rate the description on how will the project become sustainable beyond EIT Health funding? Please consider: business model elements like identified stakeholders (targeted user, payer, beneficiary etc.), defined revenue streams and other business plan elements such as product launch or market access with a feasible timeline.

Annex 2. Service Development Project Scorecard

Criteria	Question	Help Text Scoring 0-5 scoring (with 0.5 increments)
Project Excellence and Strategic Fit (50%)	Unmet needs	To what extent is the proposed solution addressing a clearly defined unmet clinical need relevant at European level (considering problem severity and people impacted), and takes a holistic perspective into account considering the whole healthcare pathway?
	Strategic fit and ground for EIT Health involvement	To what extent is this project aligned with EIT Health's (public funding) ambition and strategy (EIT Health goals, EIT Health Flagships)?
	Description of the solution	To what extent is there evidence that the suggested approach is unique/novel or better than the existing ones (e.g. 30% faster; 25% cheaper; 5x more accurate…) and has there been previous developments accomplished so far?
	Outcomes measures	To what extent is the identified metrics (process, clinical and PROMS/PREMS) that the project suggests to measure relevant to the identified target group (patients or citizens)?
Implementation and Feasibility (10%)	Feasibility of the project	To what extent is there evidence that this project will be able to scale the solution/service into the market (or an additional one) 1 year after the end of the EIT Health funding period?
	Team	To what extent are the currently involved partners having clear and irreplaceable roles in driving the project forward and show commitment? And have applicants clearly identified the needs of additional partners' expertise? Please consider: Expertise: Synergies, complementarity, or previous experience in similar projects Responsibility: Meaningful role of assigned personnel Commitment: engagement plans within and after EIT Health funding
Impact and sustainability (40%)	Impact (social, economic, health)	To what extent is the impact (social, economic, health) generated by the proposed solution clearly described with realistic and achievable target values?
	Sustainability and Replicability beyond project	How would you rate the potential for sustainability of the proposed approach in the form of a VBHC contract and its replicability, meaning that it should be possible to implement the results of the project in multiple healthcare settings based on the results of the project?

Annex 3. Labelled Fellowship Programme Scorecard

Criteria	Question	Help Text Scoring 0-5 scoring (with 0.5 increments)
Project Excellence and Strategic Fit (50%)	Unmet needs	To what extent was your original programme addressing a clearly defined unmet educational need relevant at European level when you first developed it?
	Unmet needs	Are the skills, knowledge and competence gaps it aims to solve clearly described, and do you plan the delivery of at least 15/30 ECTS worth of courses for those? (15 ECTS in case of DTH, 30 ECTS in case of NMDH)
	Strategic fit and ground for EIT Health involvement	To what extent is the project aligned with EIT Health's (public funding) ambition and strategy (EIT Health goals, EIT Health Flagships)?
	Description of the content of the educational programme and pedagogical approach	What is the extent of subject matter expertise in the flagship topic among the consortium members?
	Description of the content of the educational programme and value proposition	How innovative/unique is the proposed programme compared to existing programmes and/or compared to the current state of the art?
Implementation and Feasibility (10%)	Feasibility of the project	To what extent do the modules allow personalised learning pathways?
	Team	To what extent are the currently involved partners having clear and irreplaceable roles in driving the project forward and show commitment? Have applicants clearly identified the needs of additional partners' expertise? Please consider: Expertise: Synergies, complementarity, or previous experience in similar projects Responsibility: Meaningful role of assigned personnel Commitment: engagement plans within and after EIT Health funding
Impact and sustainability (40%)	Definition of the learning outcomes	To what extent are the expected learning outcomes described?
	Content design and the learning outcomes	To what extent is the programme adequate to achieve the learning outcomes? Is there a clear and direct correspondence between educational design, content and chosen format, and the expected learning outcomes?
	Programme structure and coherence	To what extend are the modules developed on previous efficacy/deployment?

Annex 4. Training Modules towards EIT Labelled Certification Scorecard

Criteria	Question	Help Text Scoring 0-5 scoring (with 0.5 increments)
Project Excellence and Strategic Fit (50%)	Unmet needs	To what extent is the proposed programme addressing a clearly defined unmet educational need relevant at European level?
	Strategic fit and ground for EIT Health involvement	Has the team provided a good justification for their target audience definition? To what extent is the target audience precisely defined in terms of groups and subgroups and in terms of skills, knowledge and competence gaps? Have they included evidence (literature, surveys) to support the selection?
	Description of the content of the educational programme and pedagogical approach	To what extent is the programme adequate to achieve the learning outcomes? Is there a clear and direct correspondence between educational design, content and chosen format, and the expected learning outcomes? To what extent the format of delivery is well-structured, coherent? Will the proposed evaluation methodology correctly assess the achievement of the intended Learning Outcomes?
Implementation and Feasibility (10%)	Programme's structure and coherence	To what extent the format of delivery is well-structured, coherent? Will the proposed evaluation methodology correctly assess the achievement of the intended Learning Outcomes?
	Team and expertise	To what extent are the partners having clear roles in driving the project forward and showing commitment? Is the proposal providing convincing elements of expertise in instructional design and understanding of the use of the EIT Health Academy Platform?
Impact and sustainability (40%)	Content design and the learning outcomes	Are the intended learning outcomes precisely defined in terms of short-term/medium and long-term outcomes and expressed in terms of skills, knowledge and attitude?