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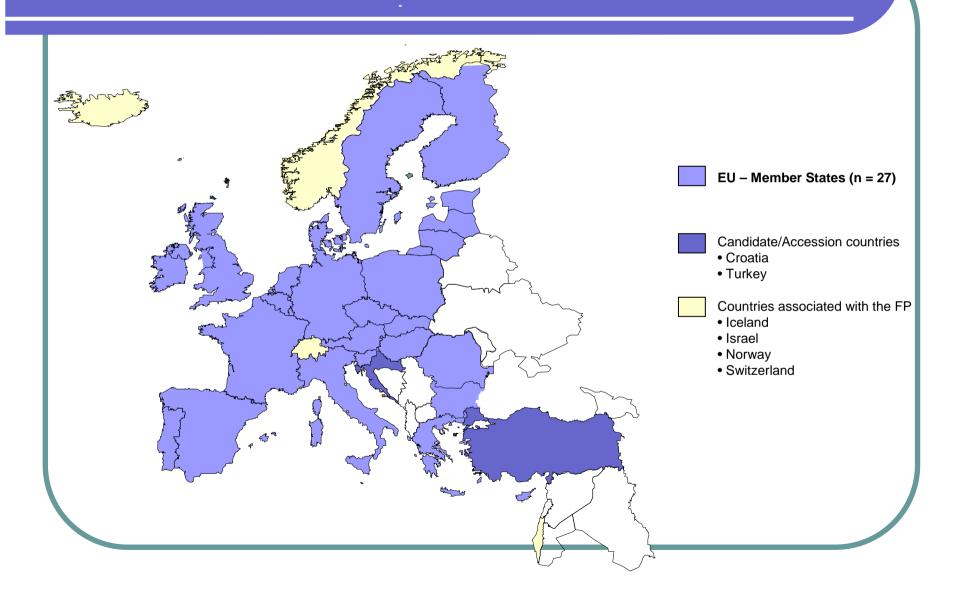
Best Information through Regional Outcomes

DG-RESEARCH OPPORTUNITIES The Third Pillar

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> > BIRO Technical Meeting Dundee, Scotland 26-27 March 2007

EU Research Partners



FP7 Health Collaborative Research

• Third Pillar:

Optimising the delivery of health care to European citizens

- Enhanced health promotion and disease prevention
- Translating clinical research into clinical practice
- Quality, solidarity and sustainability of health systems

Enhanced Health Promotion and Disease Prevention

- Evidence for best public health measures in terms of life style interventions
- Focus on the wider determinants of health and how they interact at the individual and community level
 - Diet, stress, tobacco, physical activity, nutrition, inequalities
 - Mental health to be addressed in life-course perspective

Translating clinical research into clinical practice

- > Better use of medicines, behavioural and organisational interventions, health technologies; focus on patient safety:
 - to identify the best clinical practice
 - to understand decision making in clinical settings in primary and specialised care
 - to foster evidence-based medicine and patient empowerment

Quality, solidarity and sustainability of health systems

- Basis for countries to adapt their health systems taking into account national contexts and population characteristics.
 - Organizational, financial and regulatory aspects
 - Implementation best practice
 - Outcomes effectiveness, efficiency and equity
 - Special attention on investment issues and human resources
 - Opportunities under "International Cooperation"

Funding Scheme

Collaborative project

At least 3 independent legal entities, each of which is established in a MS or AC, and no two of which are established in the same MS or AC

Collaborative project for specific cooperation actions dedicated to international cooperation partner countries (SICA)

At least 4 independent legal entities. Of these, 2 must be established in different MS or AC. The other two must be established in different international cooperation partner countries

Coordination and support action (coordination action)

•At least 3 independent legal entities, each of which is established in a MS or AC, and no two of which are established in the same MS or AC.

Coordination and support action (support action)

•At least 1 independent legal entity

Research for the benefit of specific groups, such as SMEs

•At least 3 independent legal entities, each of which is established in a MS or AC, and no two of which are established in the same MS or AC.

Third Pillar: Call for proposals

Call identifier: FP7-HEALTH-2007-B

- Date of publication: 11 May 2007
- Deadline: 18 September 2007, at 17.00, Brussels local time
- Indicative budget: ?
- <u>http://cordis.europa.eu/fp7/dc/index.cfm?fuseaction=U</u> <u>serSite.CooperationDetailsCallPage&call_id=10</u>

Third Pillar Topics Called (3.1)

3.1. TRANSLATING THE RESULTS OF CLINICAL RESEARCH OUTCOME INTO CLINICAL PRACTICE INCLUDING BETTER USE OF MEDICINES, AND APPROPRIATE USE OF BEHAVIOURAL AND ORGANISATIONAL INTERVENTIONS AND NEW HEALTH THERAPIES AND TECHNOLOGIES

HEALTH-2007-3.1-1: Implementation of research into healthcare practice (CP)
HEALTH-2007-3.1-2: Self-medication and patient safety (CP)
HEALTH-2007-3.1-3: Patient Safety Research Network (CA)
HEALTH-2007-3.1-4: Improving clinical decision making (CP)
HEALTH-2007-3.1-5: Better use of medicines (CP)
HEALTH-2007-3.1-6: Continuity of clinical care (CP)
HEALTH-2007-3.1-7: Patient self-management of chronic Disease (CP)

Third Pillar Topics Called (3.2)

3.2. QUALITY, EFFICIENCY AND SOLIDARITY OF HEALTH CARE SYSTEMS INCLUDING TRANSITIONAL HEALTH SYSTEMS

HEALTH-2007-3.2-1: Evaluation of disease management programmes (CP)
HEALTH-2007-3.2-2: Health systems and long term care of the elderly (CP)
HEALTH-2007-3.2-3: Mobility of health professionals (CP)
HEALTH-2007-3.2-4: Health care human resource planning in nursing (CP)
HEALTH-2007-3.2-5: Clinician working time and patient safety (CP)
HEALTH-2007-3.2-6: Health outcome measures and population ageing (CP)
HEALTH-2007-3.2-7: Trends of population health (CP)
HEALTH-2007-3.2-8: European system of Diagnosis-related groups (DRG) (CP)

Third Pillar Topics Called (3.3)

3.3. ENHANCED HEALTH PROMOTION AND DISEASE PREVENTION

HEALTH-2007-3.3-1: Promoting healthy behaviour in children and adolescents (CP)
HEALTH-2007-3.3-2: Interventions addressing the gradient of health inequalities (CP)
HEALTH-2007-3.3-3: Public health interventions addressing the abuse of alcohol (CP)
HEALTH-2007-3.3-4: Evaluation of suicide prevention strategies across and within European countries (CP)

•HEALTH-2007-3.3-5: Improve vaccination coverage (CP)

Third Pillar Topics Called (3.4)

3.4. HORIZONTAL COORDINATION AND SUPPORT ACTIONS ACROSS "OPTIMISING THE DELIVERY OF HEALTH CARE TO EUROPEAN CITIZENS"

HEALTH-2007-3.4-1: Disease networks of centres of reference (SSA)
HEALTH-2007-3.4-2: Effectiveness of health investments (SSA)
HEALTH-2007-3.4-3: Patient mobility and access to information (CA,SSA)
HEALTH-2007-3.4-4: Brokering research into policy (SSA)
HEALTH-2007-3.4-5: A road-map for ageing research (CA,SSA)
HEALTH-2007-3.4-6: Health Services Research conference (SSA)
HEALTH-2007-3.4-7: Mental health research conference (SSA)
HEALTH-2007-3.4-8: Public Health intervention research conference (SSA)

International Cooperation

3.5. SPECIFIC INTERNATIONAL COOPERATION ACTIONS FOR HEALTH SYSTEM RESEARCH

- •HEALTH-2007-3.5-1: Epidemiological investigations into longterm trends of population health as consequence of socioeconomic transitions, including life-style induced health problems (CP)
- •HEALTH-2007-3.5-2: Universal and equitable access to health care and health financing (CP)
- •HEALTH-2007-3.5-3: Health care intervention research: optimising hospital care (CP)
- •HEALTH-2007-3.5-4: Health care intervention research improving pre-natal and maternal care (CP)

Task: Disease Management

• HEALTH-2007-3.2-1:

Evaluation of disease management programmes.

Develop and validate a methodology to establish comparative analysis of disease management programmes (e.g. algorithmguided collaborative care systems) addressing the growing burden of chronic diseases including psychiatric disorders taking into account the diversity of European health care systems (including such factors as financing regimes, status of family practitioners, degree of medical autonomy, the existence of specialised home nursing systems etc.). Apply this method to evaluate large-scale population-based disease management programmes and their effect on cost, quality, and health outcomes to identify best practice.

Funding scheme: Collaborative projects (Small or medium-scale focused research projects)

Task: Continuity of Care

• HEALTH-2007-3.1-6:

Continuity of clinical care.

Analysis of clinical care at the primary care/hospital interface and its effect on quality in terms of health outcome and costs in different settings. Identify and validate factors determining the outcome of integration in different settings for a provision of a continuum of quality clinical care at the primary care/hospital interface.

Funding scheme: Collaborative projects (Small or medium-scale focused research projects).