

Project acronym: DigitalHealthUptake Grant Agreement Number: 101083929 Project full title: Uptake of Digital Solutions in Health and Care Website: digitalhealthuptake.eu

# **Call for Twinnings**





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# 1 Introduction and Purpose of Twinnings

# 1.1 EU Policy Priorities for the Uptake of Digital Solutions in Health and Care

The Digital Single Market (DSM) Strategy of the European Commission<sup>1</sup>, backed up by its mid-term review in May 2017<sup>2</sup>, recognised the beneficial role of digital technologies in transforming today's world, especially in several key policy areas, including health and care<sup>3</sup>.

In its Communication on "Enabling the digital transformation of health and care in the Digital Single Market, empowering citizens and building a healthier society" (COM/2018/233 final), the EC set out a number of measures for the large-scale use of digital tools for citizen empowerment and personcentred care. Person-centred approaches to organising health and care can allow citizens to assume responsibility for their health, improve their well-being and the quality of care and contribute to sustainable health systems. By using digital solutions, citizens can actively engage in health promotion and self-management of chronic conditions. This in turn can help control the rising demand for health and care. Digital tools hold great potential to disseminate scientific knowledge in an easily accessible form, so as to help people stay in good health – thus preventing them from turning into patients. Digital tools also enable citizens to provide feedback and data about their health to their doctors. This can improve the quality of health services and ultimately people's health and well-being.

So far, new care models utilising digital solutions have typically been deployed on a small scale, but initial evidence indicates their benefits for both patients and health and care systems. For a health and care transformation to truly materialise, there will have to be full-scale deployment of new care models.

This depends on active contributions from local and regional ecosystems, stakeholder groups and organisations including industry, civil society, academia and public administration.

# 1.2 DigitalHealthUptake's Role in Supporting the Policy Priorities

DigitalHealthUptake (DHU) is a Coordination and Support Action funded by the European Commission (EC) under the Digital Europe Programme (DIGITAL), with Grant Agreement No. 101083929. The project is coordinated by empirica Technology Research and comprises 7 partners from across Europe. It runs from November 2022 to October 2024.

One of DHU's objectives is to strengthen capacity building for implementation/ uptake by stimulating mutual learning and transferring of innovative practices between regions, Member States and associated countries to foster adoption, upscaling, large-scale deployment and capacity building.

More information about DHU can be found at https://digitalhealthuptake.eu/

# 1.3 The DigitalHealthUptake Twinning Programme

In DigitalHealthUptake, the twinning programme is a support mechanism for scaling up innovative digital solutions. Twinnings are used as a mechanism for accelerating fulfilment of key EU priorities for

COM(2015) 192 final, Brussels, 6.5.2015 http://europa.eu/rapid/attachment/IP-15-4919/en/DSM\_communication.pdf

COM(2017) 228 final, Brussels, 10.5.2017 https://ec.europa.eu/transparency/regdoc/rep/1/2017/EN/COM-2017-228-F1-EN-MAIN-PART-1.PDF

Transformation of Health and Care in the Digital Single Market: https://ec.europa.eu/digital-single-market/en/policies/ehealth

the uptake of digital solutions in health and care, by enabling the transfer of innovative solutions from one European region or country to another.

The DHU twinning programme builds on past experiences with running similar programmes, such as the DigitalHealthEurope twinnings<sup>4</sup> and the Scale-AHA twinnings<sup>5</sup>. The DigitalHealthEurope twinning brochure<sup>6</sup> provides a good overview of key concepts and examples of past successful twinnings.

The region/country with the innovative practice is called a **Twinning Originator**, and the implementing region/country is referred to as a **Twinning Adopter**. There can be more than one Twinning Adopter per twinning. In some cases, third parties may be involved, e.g. as an external facilitator or as Twinning Contractor, dealing with management and coordination of the work between the Twinning Originator and Twinning Adopter(s).

Twinning Activities may include, for example, hosting meetings, organising technical groups, travelling, accommodation. The duration of a twinning can vary depending on its complexity, but most twinnings typically last between 3 and 9 months.

# 1.4 Expected Digital Solutions to be Covered by Twinnings

An application for twinning must specify the twinning solution(s) to be addressed and how it (they) relate(s) to the policy priorities described above.

Twinning Solutions are the digital know-how which is transferred through the twinning activities to the Twinning Adopter. They may be evidence-based products, services, processes, methodologies, strategies and/or business models that have been scaled up in the Twinning Originator's country/region. The topics must be based on digital technologies. They must be innovative and should not have been used in the adopting region(s) before the twinning takes place.

The following non-exhaustive list relates to the policy priorities described above. It serves to provide guidance to applicants on what topics the proposed twinnings are expected to address. The list does not preclude submission of proposed twinnings relating to other topics linked to the policy priorities, provided that the relevance of the topics to the priorities is convincingly explained in the twinning application.

Citizen/patient-focused twinning topics:

- Digital tools to support health education (health literacy), digital health literacy
- ▶ mHealth systems, wearable devices for monitoring and prevention, alerts, reminders
- Digital tools to support patient feedback and reporting of outcomes and experiences
- Digital tools to support proactive prevention, self-management, homecare, telemonitoring
- ▶ Tele-mentoring/coaching, virtual consultations, virtual coach, personal assistant
- ► ICT supporting adherence to medication and care plans
- Robotics (e.g., companion robots)
- Use of digital therapeutics
- ► Tools and services supporting independent living, ambient assisted living technologies, telecare
- ...

<sup>4</sup> https://digitalhealtheurope.eu/twinnings/

<sup>5</sup> https://www.scale-aha.eu/2016-twinnings.html

<sup>6</sup> https://digitalhealtheurope.eu/results-and-publications/twinnings-brochure/

Innovation here is used to refer to a product, service, process, methodology, strategy, business model as described in https://ec.europa.eu/growth/industry/innovation\_en. For the novelty aspect of innovations, please refer to the definition here: https://ec.europa.eu/eurostat/statistics-explained/index.php/Glossary:Innovation

Care practitioner-focused twinning topics:

- Advanced digital tools to support Integrated Care, including integration of health and social care services
- ▶ Interoperable digital solutions to support person-centred and integrated care
- ▶ Regional and national Electronic Health Record (EHR) systems and ePrescription solutions enabling person-centred care
- ▶ Regional, national and local Electronic Integrated Care Record (EICR) systems, integration of EHR and social care records
- ▶ Digital shared care plans (e.g., support to multi-disciplinary team(s))
- ▶ Decision support for multi-morbidity and polypharmacy management
- ► ICT support for management of frailty
- ► ICT support for falls prevention
- ▶ eLearning to support workforce development for person-centred integrated care
- **.**..

# 1.5 Funding Budget and Budget Distribution

The total budget for all twinnings to be funded in this call is €96,000.

Twinning contracts will be awarded based on the available budget and the ranking of the evaluated twinnings, i.e. contracts will be awarded until the remaining budget is insufficient to fund the next best ranked twinning application that has passed the evaluation threshold. The exact number of twinnings finally awarded will thus depend on the prices offered and the number of twinning tenders that pass the evaluation.

Maximum funding per twinning	No twinnings expected to be funded <sup>8</sup>	Total
8,000 €	12	96,000 €

The funding for the twinnings is made available through the DigitalHealthUptake project. The funding is provided in the form of grants, provided as Financial Support to Third Parties (FSTP), also referred to as cascade funding<sup>9</sup>. While the budget is provided through the EU via the Digital Europe programme, the EU is not part of the award process.

# 1.6 Twinning Calendar

Date	Activity
13.06.2023	Publication of the Call for Twinnings documents on digitalhealthuptake.eu and on the funding & tender opportunities portal of the European Commission
21.06.2023 14:00-15:00 CEST	Webinar 1 for interested applicants: overview of the call, call topics, conditions, facilitation of twinning partnerships ( <u>Registration</u> )
18.07.2023 11:00-12:00 CEST	Webinar 2 for interested applicants: overview of the call, call topics, conditions, facilitation of twinning partnerships ( <u>Registration</u> )
13.08.2023	Deadline for questions by applicants
13.09.2023 17:00 CEST	Deadline for submission of twinning applications

This number may be higher or lower, depending on the number of submitted twinning applications, the price offered in the applications to carry out the twinning, and the results of the evaluation of the twinning applications

See Article 9.4 of the Digital Europe Programme Model Grant Agreement: https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/digital/agr-contr/mga\_dep\_en.pdf

02.10.2023	Award decision and notification
02.10 - 31.10.2023	Twinning contracting
01.11.2023	Earliest possibly start of twinning activities
31.08.2024	Latest end of all twinning activities

Note: All work related to a twinning shall be completed at the latest one month before end of the DigitalHealthUptake Grant Agreement.

Should any changes to the twinning calendar be necessary during the application period, the call documents will be updated.

Questions about the Call for Twinnings can be submitted in English to info@digitalhealthuptake.eu within the deadlines specified in the twinning calendar. The summary of all questions and answers posed will be presented in an anonymised question and answer (Q&A) document that will be published on the www.digitalhealthuptake.eu portal in the English language or sent to the persons who have downloaded the tender documents.

Unless otherwise instructed, do not use any other contact email address or contact any other persons in connection with this Call for Twinnings.

## 1.7 Expected Twinning Outputs

The table below summarises the expectations from the twinnings, based on a twinning duration of 6 months, (deliverable timings can be adjusted during the contracting phase depending on the submitted application, scope and complexity of the twinning).

#### Twinning overall objectives

Share knowledge and skills in a dedicated way (via specific workplan, involving appropriate experts and expertise) from the Twinning Originator to the Twinning Adopter(s) related to a specific Twinning Solution. Enable the Adopter(s) to fully adopt the Solution, or if not possible, to use the Solution and knowledge gained to develop new or improve existing solutions local to the Adopter(s). Demonstrate use of the Adopter's solution or the Adopter's local solutions that are using the elements of Twinning Solution.

#### Overall expected outcomes

The Twinning Adopter(s) is/are enabled to address the twinning topic in its respective health setting at local, regional or national level, including developing and applying a concrete plan of action informed by the twinning experiences on how the acquired knowledge is used to tackle the topic both during the twinning and beyond the twinning duration.

#### Milestones and deliverables

- D1 Twinning inception report (M2) An updated twinning workplan taking into account any evaluation comments.
- D2 Twinning interim report and publishable interim summary (M3) based on a report template with specific questions and format, to be provided in advance.
- D3 Twinning final report and final publishable summary (6) based on a report template with specific questions and format, to be provided in advance.
- M1 Participation of twinning representatives to an (online) event / training facilitated by DHU on the use of supporting tools for scaling up digital health solutions the timing depends on other work areas of DHU related to that activity and will be communicated in advance
- M2 Meeting with a DHU representative to discuss progress and twinning execution (M3) one-hour online meeting
- M3 Presentation of the twinning results at a DHU event, to be aligned with the DHU events calendar (M6) PowerPoint slides and attendance of the event (online)

# 2 Information for applicants

This section includes general information on the objectives of the application process and applicant conditions.

## 2.1 General information and objectives

The focus of twinning is on local, regional and national health and care providers in Europe that wish to adopt innovative solutions which are available for transfer from another local, regional and national health and care provider in Europe.

Applications should involve entities from countries that are participating in the Digital Europe Programme. At the time of launching this call, these countries are EU27, Iceland, Norway and Liechtenstein. An up-to-date country list can be found <a href="here">here</a>. If new countries join the Programme before the deadline for submission of twinning applications, entities from these countries will be eligible.

Note: Following the <u>Council Implementing Decision (EU) 2022/2506</u>, as of 16th December 2022, no legal commitments (including the grant agreement itself as well as subcontracts, purchase contracts, financial support to third parties etc.) can be signed with Hungarian public interest trusts established under Hungarian Act IX of 2021 or any entity they maintain.

Affected entities may continue to apply to calls for proposals. However, in case the Council measures are not lifted, such entities are not eligible to participate in any funded role (beneficiaries, affiliated entities, subcontractors, recipients of financial support to third parties).

Twinning activities must involve the transfer of digital know-how to at least one Twinning Adopter region from another region or organisation (Twinning Originator). Twinning Originator and Twinning Adopter(s) must be from different countries.

An organisation may participate in more than one twinning application, so long as the twinning solutions and the twinning activities are both significantly different.

#### 2.2 Contractual conditions

A twinning application must be submitted by a single organisation willing to become Twinning Contractor. A Twinning Contractor can be a Twinning Originator, a Twinning Adopter region or a Third Party. Successful applications will be offered a Twinning Contract by the DigitalHealthUptake coordinator 10. The Twinning Contractor is the main contact point between the DigitalHealthUptake coordinator and the Twinning participants for all matters related to the Twinning, both during the application and during execution.

Interested parties are required to submit twinning applications electronically no later than the dates specified in the twinning calendar. They should take full account of the call document and application template which must be downloaded from the project website <a href="https://digitalhealthuptake.eu/call-for-twinnings">https://digitalhealthuptake.eu/call-for-twinnings</a> after completion of a short online identification form.

The call document include:

- ► The DigitalHealthUptake Call for Twinnings (this document)
- Main Application Form
- Twinning Contract to be signed if awarded a Twnning (for reference)

 $<sup>^{10}</sup>$  The DigitalHealthUptake co-ordinator is empirica Gesellschaft für Kommunikations- und Technologieforschung mbH

Only the filled in application form needs to be submitted as part of the application.

An email must be sent to <a href="mailto:twinnings@digitalhealthuptake.eu">twinnings@digitalhealthuptake.eu</a> by the deadline specified in the time schedule. The email must contain one searchable PDF attachment, clearly named (e.g. DHU\_TwinningOffer\_ShortNameOfTwinning.pdf)

Any questions on the call documents and call process must be sent to <a href="mailto:twinnings@digitalhealthuptake.eu">twinnings@digitalhealthuptake.eu</a> before the deadline set in the twinning calendar.

Offers that do not comply with the formal requirements described in this section will be rejected.

## 2.3 Other application conditions

## Confidentiality

Applicants must keep confidential any information obtained in the context of the application procedure (including EU-classified information<sup>11</sup>).

#### Language

Applications, as well as outcomes in the form of deliverables must be submitted in English.

The twinning language is English and the twinning contract must be signed in its English version.

Communication (relating to either the application procedure or the implementation of the twinning contract) must be carried out in English.

With the submission of their applications, twinning applicants accept these requirements.

#### **Cancellation of the application procedure**

The DigitalHealthUptake co-ordinator may, at any moment, cease to proceed with the application procedure and cancel it. The DigitalHealthUptake co-ordinator reserves the right not to award any contracts at the end of the application procedure. The DigitalHealthUptake co-ordinator is not liable for any expense or loss the twinning applicants may have incurred in preparing their application.

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Commission Decision 2015/444/EC, Euratom of 13 March 2015 on the security rules for protecting EU-classified information

## 3 Evaluation and award

This section outlines the various exclusion criteria pertinent to an application; the award criteria and their maximum thresholds; the ranking of twinning offers; and the selection process.

# 3.1 Exclusion, selection and compliance criteria

Table 1. Overview of exclusion, selection and compliance criteria

Criteria type	Definition	Evidence	
	A) Conflict of interest		
Exclusion	B) Exclusion grounds as defined in Directive 2014/24/EU of the European Parliament and of the Council of 26 February 2014		
Selection	C) Ability to perform the twinning activities	Application Form Section	
Compliance	D) Compliance with the scope of the twinning call, including conformance with the definition of twinning solutions as defined in section 2.1	"ADMINISTRATIVE INFORMATION"	
Compliance	E) Compatibility with other public financing		
	F) Compliance with ethics and security requirements		

## A) Conflict of Interest

An applicant who is subject to a conflict of interest may be excluded. If there is a potential conflict of interest, an applicant must immediately notify the DigitalHealthUptake co-ordinator in writing.

A conflict of interest is any situation where the impartial and objective implementation of the evaluation of applications and/or implementation of the Twinning Contract is compromised for reasons relating to economic interests, political or national affinity, family, personal life (e.g. family of emotional ties) or any other shared interest.

**Note**: If an actual or potential conflict of interest arises at a later stage (i.e. during the implementation of the Twinning Contract), the contractor must contact the DigitalHealthUptake coordinator, who will notify the EC and take steps to rectify the situation. The EC may verify the measures taken and require additional information to be provided and/or further measures to be taken.

# B) Exclusion grounds as defined in Directive 2014/24/EU of the European Parliament and of the Council of 26 February 2014

#### Grounds relating to criminal convictions

An applicant will be excluded if it has been the subject of a conviction by final judgement for one of the following reasons:

- Participation in a criminal organisation, as defined in Article 2 of Council Framework Decision 2008/841/JHA;
- ➤ Corruption, as defined in Article 3 of the Convention on the fight against corruption involving officials of the European Communities or officials of Member States of the European Union and Article 2 of Council Framework Decision 2003/568/JHA (34), as well as corruption as defined in the national law of the DigitalHealthUptake co-ordinator or the economic operator;

- ► Fraud within the meaning of Article 1 of the Convention on the protection of the European Communities' financial interests;
- ➤ Terrorist offences or offences linked to terrorist activities, as defined in Articles 1 and 3 of Council Framework Decision 2002/475/JHA, respectively, or inciting or aiding or abetting or attempting to commit an offence, as referred to in Article 4 of the aforesaid Framework Decision;
- ► Money laundering or terrorist financing, as defined in Article 1 of Directive 2005/60/EC of the European Parliament and of the Council;
- ► Child labour and other forms of trafficking in human beings as defined in Article 2 of Directive 2011/36/EU of the European Parliament and of the Council.

The obligation to exclude an applicant shall also apply where the person convicted by final judgement is a member of the administrative, management or supervisory body of that application or has powers of representation, decision or control therein.

#### Grounds relating to the payment of taxes or social security contributions

An applicant shall be excluded from participation in the twinning where the DigitalHealthUptake coordinator is aware that the applicant is in breach of its obligations relating to the payment of taxes or social security contributions, and where this has been established by a judicial or administrative decision having final and binding effect in accordance with the legal provisions of the country in which it is established or with those of the country of the DigitalHealthUptake co-ordinator.

Furthermore, the DigitalHealthUptake co-ordinator may exclude from participation an alcant where the DigitalHealthUptake co-ordinator can demonstrate by any appropriate means that the applicant is in breach of its obligations relating to the payment of taxes or social security contributions.

This paragraph shall no longer apply when the applicant has fulfilled its obligations by paying or entering into a binding arrangement with a view to paying the taxes or social security contributions due, including, where applicable, any interest accrued or fines.

#### Grounds of insolvency or professional misconduct

The DigitalHealthUptake co-ordinator may exclude an applicant in any of the following situations:

- ▶ Where the applicant is bankrupt or is the subject of insolvency or winding-up proceedings, where its assets are being administered by a liquidator or by the court, where it is in an arrangement with creditors, where its business activities are suspended or it is in any analogous situation arising from a similar procedure under national laws and regulations;
- ▶ Where the DigitalHealthUptake co-ordinator can demonstrate by appropriate means that the applicant is guilty of grave professional misconduct, which renders its integrity questionable;
- ▶ Where the DigitalHealthUptake co-ordinator has sufficiently plausible indications to conclude that the applicant has entered into agreements with other economic operators with the intention of distorting competition;
- ▶ Where a conflict of interest cannot be effectively remedied by other less intrusive measures;
- ▶ Where a distortion of competition from the prior involvement of the applicant in the preparation of this twinning procedure cannot be remedied by other, less intrusive measures;
- ▶ Where the applicant has shown significant or persistent deficiencies in the performance of a substantive requirement under a prior public contract, a prior contract with a contracting entity or a prior concession contract which led to early termination of that prior contract, damages or other comparable sanctions;
- ▶ Where the applicant has been guilty of serious misrepresentation in supplying the information required for the verification of the absence of grounds for exclusion or the fulfilment of the selection criteria.
- ▶ Where the applicant has undertaken to unduly influence the decision-making process of the DigitalHealthUptake co-ordinator, to obtain confidential information that may confer upon it undue advantages in the procurement procedure, or to negligently provide misleading

information that may have a material influence on decisions concerning exclusion, selection or award.

## C) Digital Europe Programme applicable framework

Applicants need to comply with the rules of the Digital Europe Programme, under which DHU is funded, in accordance with Regulation (EU) 2021/694 of the European Parliament and of the Council of 29 April 2021 establishing the Digital Europe Programme and repealing Decision (EU) 2015/2240.

#### D) Ability to perform the Twinning Activities

This criterion is evaluated on a pass/fail basis. "Fail" means that the evidence given does not provide sufficient indication of the applicant's expertise, ability and/or equipment to meet twinning objectives. Any application that cannot meet the selection criteria requirements will not be selected.

To measure this criterion, applicants are asked to provide the following information (as part of the twinning application):

- ▶ Brief description of relevant references and /or previous projects
- ▶ Demonstrate the expertise and working experience required to carry out the twinning by providing short curriculum vitae (CVs) of key personnel and competences necessary to complete the twinning

Note: Applicants may be requested to provide additional information.

## E) Compliance with the scope of the twinning call

Applicants must confirm that the offer complies with the scope of twinnings as laid out in this document.

### F) Compatibility with other public financing

Applicants that receive public funding from other sources will be excluded if this leads to double public financing at the time of the twinning's implementation, or an accumulation of different types of public financing that is not permitted by EU legislation, including EU state aid rules.

#### G) Compliance with ethics and security requirements

Applications will be excluded if they:

- ▶ Do not comply with ethical principles (including the highest standards of research integrity, notably as set out in the European Code of Conduct for Research Integrity<sup>12</sup>, and, in particular, avoiding fabrication, falsification, plagiarism and other research misconduct)
- ▶ Include plans to carry out activities that are prohibited in all EU Member States.

If the application involves activities that raise ethical concerns, the applicant must submit an ethics self-assessment that:

- ▶ Describes how the application meets the legal and ethical requirements of the Member State(s) where the tasks raising ethical issues are to be carried out
- Explains in detail how the applicant intends to address the ethical issues identified, in particular as regards:
  - ▶ Objectives (e.g. dealing with vulnerable populations and dual-use goods<sup>13</sup>)

The European Code of Conduct for Research Integrity of ALLEA (All European Academies) and ESF (European Science Foundation) of March 2011

<sup>&</sup>lt;sup>13</sup> See Article 2(1) EU export control Regulation No 428/2009.

- ► Methodology (e.g. involvement of children and related consent procedure and protection of data collected)
- ▶ The potential impact (e.g. issues relating to the dual use of goods, environmental damage, stigmatisation of particular social groups, political or financial retaliation, benefit-sharing and malevolent use of results).

For information on ethics issues, see the guidance for EU grant beneficiaries <u>How to complete your</u> ethics self-assessment.

## 3.2 Award criteria

A twinning offer will be evaluated against the award criteria set out here only if the applicant is not excluded through application of the exclusion criteria, and only if the requirements are met in terms of the selection criteria, the compliance criteria, and the administrative instructions are met.

The table below specifies maximum points and thresholds for each of the award criteria. The evaluation of the award criteria is based on the information provided in the application under the section "technical information".

Table 2. Twinning award criteria

Award criteria	Maximum points	Threshold	
Excellence of the proposed twinning			
Extent to which the proposed twinning fits with the twinning definition, scope, expected outputs and relation to key EU policy priorities	15	10	
Innovativeness from the perspective of the Adopter(s)	5	2	
Maturity of solution of the Twinning Originator	5	2	
Adequacy of the scale of adoption of the twinning solution and size of the group to which knowledge is to be transferred	15	8	
Total for excellence	40	22	
Impact of the proposed twinning			
Value of benefits for patients	10	5	
Value of benefits for the Adopter(s') healthcare system(s)	10	5	
Feasibility of scaling up	10	5	
Sustainability and business case	10	5	
Total for impact	40	20	
Implementation of the proposed twinning			
Quality and completeness of the work-plan, detail of task and result descriptions	10	5	
Feasibility of plan and resources to meet the objectives specified	10	5	
Total for implementation	20	10	
Overall total score for twinning application	100	52	

Points will be given for each criterion, based on the following assessment table:

Assessment			
5-point criteria	10-point criteria	15-point criteria	Description
0	0	0	Insufficient (fails to address the criterion under examination or the criterion cannot be judged due to missing or incomplete information)
1	2	3	Poor (the criterion is addressed in an inadequate manner, or there are serious inherent weaknesses)
2	4	6	Fair (while the criterion is broadly addressed, there are some weaknesses to it)
3	6	9	Good (the criterion is addressed well, although improvements would have been highly desirable)
4	8	12	Very good (the criterion is addressed well, although certain improvements are still possible)
5	10	15	Excellent (all relevant aspects of the criterion are successfully addressed; any shortcomings are minor)

**Table 3.** Award criteria points system

# 3.3 Ranking of twinning offers

Twinning offers must score above the thresholds given, for each threshold. Offers that do not reach the minimum quality thresholds (individual and totals) will be rejected.

The contract will be awarded to the most economically advantageous offer, i.e. the offer scoring above all thresholds and offering the best value for money determined in accordance with the formula below. A weight of 70/30 is given to quality and price, respectively.



The offer ranked first after applying the formula will be offered a Twinning Contract. Twinning Contracts will then be awarded until the remaining budget is insufficient to fund the next best ranked twinning offer.

Should there be any doubt as to the application of any of these criteria to an offer, applicants may be requested to provide additional information.

# 3.4 Evaluation process

This section offers details about how the transparency of the evaluation process will be maintained, how applications will be opened, and the general process.

#### **Ensuring transparent evaluation**

Applications will be evaluated in a non-discriminatory manner in accordance with the legal requirements provided for in relevant provisions under European regulations.

The DigitalHealthUptake co-ordinator will appoint a Twinning Evaluation Committee (TEC) consisting of experts in the fields related to the twinning topics defined in the Call for Twinnings. In order to ensure fairness and transparency, the appointment of the members of the TEC and its establishment shall take place in good time to meet the deadlines set out for the evaluation of applications. TEC members will be hired by the DigitalHealthUptake co-ordinator. A Declaration of an absence of conflict of interest and protection of confidentiality will be signed with each nominated expert. The

DigitalHealthUptake co-ordinator will refuse to involve a TEC member for a given application's evaluation if a conflict of interest is identified.

Members of the TEC are appointed in their personal capacity. When carrying out their tasks, they shall not seek or take instructions regarding their scoring from the DigitalHealthUptake co-ordinator or from any other body.

#### Opening of twinning applications and requests for clarification

The DigitalHealthUptake co-ordinator will open the twinning application files submitted by email before the deadline and register them. An extract of the application documents (without the financial information) are then made available to the TEC members in an online repository. The TEC may request clarifications about the applications or additional evidence if needed, in which case the twinning applicant concerned will be notified by the DigitalHealthUptake co-ordinator by email. The applicant will have five calendar days (from the day of receipt of the notification) to send the clarifications and / or evidence requested. After this deadline, if no response is received from the applicant, the offer will be rejected and will be excluded from the evaluation. The applicant will be informed by the DigitalHealthUptake co-ordinator by email.

## **Evaluation of twinning offers**

The TEC will carry out the selection of twinning offers, apply the exclusion, compliance and selection criteria, and evaluate offers that are eligible for evaluation on the basis of the award criteria. Only offers that satisfy the criteria provided, that are not excluded on the basis of the exclusion criteria, and that meet the selection criteria, are admissible for evaluation under the award criteria. Applications that do not comply with the formal requirements will be excluded from the evaluation.

The TEC will issue its reports on the evaluation. The TEC will reach its decision on final quality scoring of the offers by a simple majority vote. The DigitalHealthUptake co-ordinator will then apply the price-quality formula to generate the final ranking and determine the number of twinnings that can be funded with the available budget.

The twinning applicants will receive a written report via email on the result of the evaluation, including the scoring and their rank.