EUROPEAN HEALTH AND DIGITAL EXECUTIVE AGENCY (HADEA)

Director

GRANT AGREEMENT

Project 101233428 — JA-SAFE

PREAMBLE

This **Agreement** ('the Agreement') is **between** the following parties:

on the one part,

the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and

on the other part,

1. 'the coordinator':

ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA), PIC 999643007, established in 6 CHRISTOU LADA STR, ATHINA 10561, Greece,

and the following other beneficiaries, if they sign their 'accession form' (see Annex 3 and Article 40):

2. **SCIENSANO (SCIENSANO)**, PIC 906160809, established in JULIETTE WYTSMANSTRAAT 14, ELSENE 1050, Belgium,

3. **UNIVERZITET U BANJOJ LUCI (UNIBL)**, PIC 995591705, established in BULEVAR VOJVODE PETRA BOJOVICA 1 A, BANJA LUKA 78000, Bosnia and Herzegovina,

4. **FEDERAL MINISTRY OF HEALTH (FMZ)**, PIC 916051608, established in TITOVA 9, SARAJEVO 71000, Bosnia and Herzegovina,

5. **FARMACEUTSKO DRUSTVO REPUBLIKE SRPSKE (PSRS)**, PIC 872196162, established in ALEJA SVETOG SAVE BB, BANJA LUKA 78000, Bosnia and Herzegovina,

6. **CYPRUS NATIONAL ADDICTIONS AUTHORITY (NAAC)**, PIC 893266502, established in 35 IOSIF HADJIOSIF AND ANDREAS AVRAAMIDES 1ST FLOOR, STROVOLOS NICOSIA 2028, Cyprus,

7. **STATNI ZDRAVOTNI USTAV (SZU)**, PIC 999478689, established in Srobarova 48, PRAHA 10 10042, Czechia,

8. **HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO (CIPH)**, PIC 998128255, established in ROCKEFELLEROVA 7, ZAGREB 10000, Croatia,

9. **AARHUS KOMMUNE (AAKS)**, PIC 992597994, established in RADHUSPLADSEN 2, ARHUS C 8100, Denmark,

10. **REGION SYDDANMARK (UHSD)**, PIC 999602073, established in DAMHAVEN 12, VEJLE 7100, Denmark,

11. **REGION SJAELLAND (RZ)**, PIC 998373665, established in ALLEEN 15, SOROE 4180, Denmark,

12. **TERVISE ARENGU INSTITUUT (TAI)**, PIC 997543539, established in PALDISKI MNT 80, TALLINN 10617, Estonia,

13. **TERVEYDEN JA HYVINVOINNIN LAITOS (THL)**, PIC 996697893, established in MANNERHEIMINTIE 166, HELSINKI 00271, Finland,

14. **MINISTRE DE LA SANTE ET DE L'ACCES AUX SOINS (MoH FR)**, PIC 998887377, established in AVENUE DUQUESNE 14, PARIS CEDEX 75350, France,

15. **TobaccoFree Research Institute Ireland LBG (TFRI)**, PIC 997995947, established in 18 HUME STREET, DUBLIN 2 D02 WE19, Ireland,

16. **ETHNIKOS ORGANISMOS DIMOSIAS YGEIAS (NPHO)**, PIC 896563726, established in 3-5 AGRAFON ST., ATHENS 151 23, Greece,

17. **ORSZAGOS KORANYI PULMONOLOGIAI INTEZET (NKIP)**, PIC 999554543, established in KORANYI FRIGYES UT 1, BUDAPEST 1121, Hungary,

18. **ISTITUTO SUPERIORE DI SANITA (ISS)**, PIC 999978821, established in Viale Regina Elena 299, ROMA 00161, Italy,

19. **RIGAS STRADINA UNIVERSITATE (RSU)**, PIC 999843118, established in Dzirciema street 16, RIGA 1007, Latvia,

20. **LIETUVOS SVEIKATOS MOKSLU UNIVERSITETAS (LSMU)**, PIC 972782446, established in A MICKEVICIAUS GATVE 9, KAUNAS 44307, Lithuania,

21. **LIETUVOS RESPUBLIKOS SVEIKATOS APSAUGOS MINISTERIJA (SAM LT)**, PIC 933839468, established in VILNIAUS G 33, VILNIUS LT 01506, Lithuania,

22. **NACIONALINIS VEZIO INSTITUTAS (NVI)**, PIC 912763114, established in SANTARISKIU STR. 1, VILNIUS 08660, Lithuania,

23. **VILNIAUS UNIVERSITETAS (VU)**, PIC 999893170, established in UNIVERSITETO G. 3, VILNIUS 01513, Lithuania,

24. **RIJKSINSTITUUT VOOR VOLKSGEZONDHEID EN MILIEU (RIVM)**, PIC 999991431, established in Antonie Van Leeuwenhoeklaan 9, BILTHOVEN 3721 MA, Netherlands,

25. **MINISTERIO DA SAUDE (DGS)**, PIC 986364095, established in Av. João Crisóstomo, 9, LISBOA 1049-062, Portugal,

26. **INSTITUTO PARA OS COMPORTAMENTOS ADITIVOS E AS DEPENDENCIAS, IP (ICAD)**, PIC 877389833, established in PARQUE DE SAUDE POLIDO VALENTE ALAMEDA DAS LINHAS DE TORRES N.117 ED. ICAD, LISBOA 1750-147, Portugal,

27. **INSTITUTUL DE PNEUMOFTIZIOLOGIE MARIUS NASTA (IPMN)**, PIC 997406575, established in SOSEAUA VIILOR 90 SECTOR 5, BUCURESTI 050159, Romania,

28. **UNIVERSITATEA DE MEDICINA SI FARMACIE CAROL DAVILA DIN BUCURESTI (CDU)**, PIC 999875613, established in DIONISIE LUPU 37, BUCURESTI 020021, Romania,

29. **NACIONALNI INSTITUT ZA JAVNO ZDRAVJE (NIJZ)**, PIC 948891346, established in TRUBARJEVA CESTA 2, LJUBLJANA 1000, Slovenia,

30. **INSTITUT CATALA D'ONCOLOGIA (ICO)**, PIC 998420031, established in AV GRAN VIA DE L'HOSPITALET 199-203, L'HOSPITALET DEL LLOBREGAT 08908, Spain,

31. **FUNDACION PUBLICA GALEGA INSTITUTO DE INVESTIGACION SANITARIA DE SANTIAGO DE COMPOSTELA (IDIS)**, PIC 986488255, established in TRAVESA DA CHOUPANA, SANTIAGO DE COMPOSTELA 15706, Spain,

32. **FUNDACION INSTITUTO DE INVESTIGACION MARQUES DE VALDECILLA (IDIVAL)**, PIC 946556944, established in AVENIDA CARDENAL HERRERA ORIA S N, SANTANDER 39011, Spain,

33. **Agencia de Salut Publica de Barcelona (ASPB)**, PIC 983180264, established in Plaça Lesseps 1, Barcelona 08023, Spain,

34. **REGION SKANE (LUND)**, PIC 998165794, established in REGION SKANE, KRISTIANSTAD 291 89, Sweden,

35. **STATE INSTITUTION PUBLIC HEALTH CENTER OF THE MINISTRY OF HEALTH OF UKRAINE (PHC)**, PIC 906650465, established in 41 YAROSLAVSKA STR, KYIV 04071, Ukraine,

Unless otherwise specified, references to ‘beneficiary’ or ‘beneficiaries’ include the coordinator and affiliated entities (if any).

If only one beneficiary signs the grant agreement (‘mono-beneficiary grant’), all provisions referring to the ‘coordinator’ or the ‘beneficiaries’ will be considered — mutatis mutandis — as referring to the beneficiary.

The parties referred to above have agreed to enter into the Agreement.

By signing the Agreement and the accession forms, the beneficiaries accept the grant and agree to implement the action under their own responsibility and in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

The Agreement is composed of:

Preamble

Terms and Conditions (including Data Sheet)

Annex 1 Description of the action[1]

Annex 2 Estimated budget for the action

Annex 2a Additional information on unit costs and contributions (if applicable)

Annex 3 Accession forms (if applicable)[2]

Annex 3a Declaration on joint and several liability of affiliated entities (if applicable)[3]

Annex 4 Model for the financial statements

Annex 5 Specific rules (if applicable)

[1] Template published on Portal Reference Documents.
[2] Template published on Portal Reference Documents.
[3] Template published on Portal Reference Documents.

TERMS AND CONDITIONS

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Project summary:

Project summary
The aim of this joint action is to reduce the burden of NCDs including cancer, and their risk factors, both at the individual and population level. Smoking and other forms of tobacco consumption are considered the single most important cause of preventable morbidity and premature mortality worldwide, with tobacco being the single major cause of premature deaths in the European Union (EU). The Joint Action on Health Promotion and Disease Prevention including Smoke and Aerosol Free Environments" (JA-SAFE) aims to significantly reduce tobacco use and exposure to secondhand smoke across Europe, contributing to the EU's goal of achieving a tobacco-free generation. The project encompasses nine work packages under five thematic areas, smoke free environments, alcohol prevention, cessation, steps towards a tobacco free generation and supporting health promotion and disease prevention in Europe.

Keywords:

– TOBACCO, SECOND HAND SMOKE, AEROSOL, ALCOHOL, NCD PREVENTION

Project number: 101233428

Project name: Joint Action on Health Promotion and Disease Prevention including Smoke and Aerosol Free Environments

Project acronym: JA-SAFE

Call: EU4H-2024-JA-IBA-03

Topic: EU4H-2024-JA-IBA-07

Type of action: EU4H Project Grants

Granting authority: European Health and Digital Executive Agency

Grant managed through EU Funding & Tenders Portal: Yes (eGrants)

Project starting date: fixed date: 15 October 2025

Project end date: 14 October 2029

Project duration: 48 months

Consortium agreement: Yes

2. Participants

List of participants:

N°	Role	Short name	Legal name	Ctry	PIC	Total eligible costs (BEN and AE)	Max grant amount
1	COO	UOA	ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON	EL	999643007	2 452 140.40	1 961 712.32
2	BEN	SCIENSANO	SCIENSANO	BE	906160809	597 987.17	478 389.74
3	BEN	UNIBL	UNIVERZITET U BANJOJ LUCI	BA	995591705	9 951.00	7 960.80
4	BEN	FMZ	FEDERAL MINISTRY OF HEALTH	BA	916051608	9 951.00	7 960.80
5	BEN	PSRS	FARMACEUTSKO DRUSTVO REPUBLIKE SRPSKE	BA	872196162	9 951.00	7 960.80
6	BEN	NAAC	CYPRUS NATIONAL ADDICTIONS AUTHORITY	CY	893266502	14 980.00	11 984.00
6.1	AE	UCY	UNIVERSITY OF CYPRUS	CY	999835843	14 980.00	11 984.00
7	BEN	SZU	STATNI ZDRAVOTNI USTAV	CZ	999478689	103 053.84	82 443.07

N°	Role	Short name	Legal name	Ctry	PIC	Total eligible costs (BEN and AE)	Max grant amount
8	BEN	CIPH	HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO	HR	998128255	169 862.50	135 890.00
9	BEN	AAKS	AARHUS KOMMUNE	DK	992597994	260 732.25	208 585.80
10	BEN	UHSD	REGION SYDDANMARK	DK	999602073	404 567.00	323 653.60
11	BEN	RZ	REGION SJAELLAND	DK	998373665	978 928.87	783 143.10
11.1	AE	MFK	MARIAGERFJORD KOMMUNE	DK	888849219	108 164.16	86 531.33
11.2	AE	ODSHERRED	ODSHERRED KOMMUNE	DK	877136760	134 851.03	107 880.82
11.3	AE	VALLENSBAEK	Vallensbaek Municipality	DK	870788692	84 837.63	67 870.10
12	BEN	TAI	TERVISE ARENGU INSTITUUT	EE	997543539	19 902.00	15 921.60
13	BEN	THL	TERVEYDEN JA HYVINVOINNIN LAITOS	FI	996697893	1 040 982.02	832 785.62
13.1	AE	CSF	SUOMEN SYOPAYHDISTYS -CANCERFORENINGEN I FINLAND RY - CANCER SOCIETY OF FINLAND CSF	FI	999483636	99 103.40	79 282.72
13.2	AE	FILHA	FILHA RY	FI	899377502	186 762.01	149 409.61
14	BEN	MoH FR	MINISTRE DE LA SANTE ET DE L'ACCES AUX SOINS	FR	998887377	121 384.22	97 107.38
15	BEN	TFRI	TobaccoFree Research Institute Ireland LBG	IE	997995947	51 360.00	41 088.00
16	BEN	NPHO	ETHNIKOS ORGANISMOS DIMOSIAS YGEIAS	EL	896563726	400 180.00	320 144.00
17	BEN	NKIP	ORSZAGOS KORANYI PULMONOLOGIAI INTEZET	HU	999554543	172 750.00	138 200.00
17.1	AE	NNGYK	NEMZETI NEPEGESZSEGUGYI ES GYOGYSZERESZETI KOZPONT	HU	998706957	231 134.98	184 907.98
17.2	AE	ÉBSZJCK	ESZAK-BUDAI SZENT JANOS CENTRUMKORHAZ	HU	889719212	60 350.00	48 280.00
17.3	AE	OKFŐ	ORSZAGOS KORHAZI FOIGAZGATOSAG	HU	891516331	82 965.41	66 372.33
17.4	AE	GOKVI	GOTTSEGEN GYÖRGY ORSZÁGOS KARDIOVASZKULÁRIS INTÉZET	HU	968000443	1 308 388.19	1 046 710.55
18	BEN	ISS	ISTITUTO SUPERIORE DI SANITA	IT	999978821	460 076.46	368 061.17
18.1	AE	FPG	FONDAZIONE POLICLINICO UNIVERSITARIO AGOSTINO GEMELLI IRCCS	IT	918081430	114 100.52	91 280.42
18.2	AE	LIGURIA	REGIONE LIGURIA	IT	996097851	245 312.63	196 250.10
18.3	AE	LOMBARDIA	REGIONE LOMBARDIA	IT	999654065	237 112.00	189 689.60
18.4	AE	IRFMN	ISTITUTO DI RICERCHE FARMACOLOGICHE MARIO NEGRI	IT	999661146	584 830.97	467 864.78
18.5	AE	ULSS 6	AZIENDA ULSS 6 EUGANEA	IT	937042990	84 946.10	67 956.88
19	BEN	RSU	RIGAS STRADINA UNIVERSITATE	LV	999843118	669 606.00	535 684.80
19.1	AE	SPKC	SLIMIBU PROFILAKSES UN KONTROLES CENTRS	LV	952714019	65 689.44	52 551.55
19.2	AE	MoH LV	VESELIBAS MINISTRIJA	LV	887695695	41 302.00	33 041.60
19.3	AE	PSCUH	PAULA STRADINA KLINISKA UNIVERSITATES SLIMNICA	LV	953605449	80 211.48	64 169.18
20	BEN	LSMU	LIETUVOS SVEIKATOS MOKSLU UNIVERSITETAS	LT	972782446	420 526.05	336 420.84
21	BEN	SAM LT	LIETUVOS RESPUBLIKOS SVEIKATOS APSAUGOS MINISTERIJA	LT	933839468	285 225.62	228 180.50
22	BEN	NVI	NACIONALINIS VEZIO INSTITUTAS	LT	912763114	80 335.60	64 268.48
23	BEN	VU	VILNIAUS UNIVERSITETAS	LT	999893170	141 347.00	113 077.60
24	BEN	RIVM	RIJKSINSTITUUT VOOR VOLKSGEZONDHEID EN MILIEU	NL	999991431	74 816.50	59 853.20
25	BEN	DGS	MINISTERIO DA SAUDE	PT	986364095	49 819.50	39 855.60
26	BEN	ICAD	INSTITUTO PARA OS COMPORTAMENTOS ADITIVOS E AS DEPENDENCIAS, IP	PT	877389833	100 152.00	80 121.60
27	BEN	IPMN	INSTITUTUL DE PNEUMOFTIZIOLOGIE MARIUS NASTA	RO	997406575	124 976.00	99 980.80
27.1	AE	INSP	INSTITUTUL NATIONAL DE SANATATE PUBLICA	RO	985926237	35 417.00	28 333.60

N°	Role	Short name	Legal name	Ctry	PIC	Total eligible costs (BEN and AE)	Max grant amount
28	BEN	CDU	UNIVERSITATEA DE MEDICINA SI FARMACIE CAROL DAVILA DIN BUCURESTI	RO	999875613	24 963.10	19 970.48
29	BEN	NIJZ	NACIONALNI INSTITUT ZA JAVNO ZDRAVJE	SI	948891346	414 698.53	331 758.82
30	BEN	ICO	INSTITUT CATALA D'ONCOLOGIA	ES	998420031	829 989.57	663 991.66
30.1	AE	GENCAT	DEPARTAMENT DE SALUT - GENERALITAT DE CATALUNYA	ES	999826919	51 514.27	41 211.42
30.2	AE	IDIBAPS-CERCA	FUNDACIO DE RECERCA CLINIC BARCELONA-INSTITUT D INVESTIGACIONS BIOMEDIQUES AUGUST PI I SUNYER	ES	999477525	177 577.20	142 061.76
31	BEN	IDIS	FUNDACION PUBLICA GALEGA INSTITUTO DE INVESTIGACION SANITARIA DE SANTIAGO DE COMPOSTELA	ES	986488255	98 146.37	78 517.10
31.1	AE	USC	UNIVERSIDAD DE SANTIAGO DE COMPOSTELA	ES	999829635	394 680.20	315 744.16
31.2	AE	CSG	Conselleria de Sanidade de Galicia	ES	952925770	0.00	0.00
32	BEN	IDIVAL	FUNDACION INSTITUTO DE INVESTIGACION MARQUES DE VALDECILLA	ES	946556944	165 775.10	132 620.08
32.1	AE	SCS	Servicio Cántabro de Salud	ES	991294023	37 995.70	30 396.56
33	BEN	ASPB	Agencia de Salut Publica de Barcelona	ES	983180264	153 855.30	123 084.24
33.1	AE	IRSANTPAU CERCA	INSTITUT DE RECERCA DE L'HOSPITAL DE LA SANTA CREU I SANT PAU FUNDACION	ES	998869432	181 675.30	145 340.24
34	BEN	LUND	REGION SKANE	SE	998165794	222 762.23	178 209.78
35	BEN	PHC	STATE INSTITUTION PUBLIC HEALTH CENTER OF THE MINISTRY OF HEALTH OF UKRAINE	UA	906650465	218 750.00	175 000.00
36	AP	MoH LUX	MINISTERE DE LA SANTE ET DE LA SECURITE SOCIALE	LU	998888153	0.00	0.00
37	AP	SU	SEMMELWEIS EGYETEM	HU	999860675	0.00	0.00
Total						15 998 385.82	12 798 708.67

Coordinator:

– ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA)

3. Grant

Maximum grant amount, total estimated eligible costs and contributions and funding rate:

Total eligible costs (BEN and AE)	Funding rate (%)	Maximum grant amount (Annex 2)	Maximum grant amount (award decision)
15 998 385.82	80	12 798 708.67	12 798 708.67

Grant form: Budget-based

Grant mode: Action grant

Budget categories/activity types:

- A. Personnel costs
  - A.1 Employees, A.2 Natural persons under direct contract, A.3 Seconded persons
  - A.4 SME owners and natural person beneficiaries
- B. Subcontracting costs
- C. Purchase costs

  - C.1 Travel and subsistence
  - C.2 Equipment
  - C.3 Other goods, works and services

- D. Other cost categories
  - D.1 Financial support to third parties

- E. Indirect costs

Cost eligibility options:

- Standard supplementary payments

- Limitation for subcontracting

- Travel and subsistence:
  - Travel: Unit or Actual costs
  - Accommodation: Unit or Actual costs
  - Subsistence: Unit or Actual costs

- Equipment: depreciation only

- Costs for providing financial support to third parties (actual cost; max amount for each recipient: EUR 0.00)

- Indirect cost flat-rate: 7% of the eligible direct costs (categories A-D, except volunteers costs and exempted specific cost categories, if any)

- VAT: Yes

- Other ineligible costs

Budget flexibility: Yes (no flexibility cap)

4. Reporting, payments and recoveries

4.1 Continuous reporting (art 21)

Deliverables: see Funding & Tenders Portal Continuous Reporting tool

4.2 Periodic reporting and payments

Reporting and payment schedule (art 21, 22):

Reporting					Payments	
Reporting periods			Type	Deadline	Type	Deadline (time to pay)
RP No	Month from	Month to				
					Initial prefinancing	30 days from entry into force/10 days before starting date/ financial guarantee (if required) – whichever is the latest
1	1	24	Periodic report	60 days after end of reporting period	Interim payment	90 days from receiving periodic report
2	25	48	Periodic report	60 days after end of reporting period	Final payment	90 days from receiving periodic report

Prefinancing payments and guarantees:

Prefinancing payment		Prefinancing guarantee		
Type	**Amount**	**Guarantee amount**	**Division per participant**	
Prefinancing 1 (initial)	6 399 354.34	n/a	1 - UOA	n/a
			2 - SCIENSANO	n/a
			3 - UNIBL	n/a
			4 - FMZ	n/a
			5 - PSRS	n/a
			6 - NAAC	n/a
			6.1 - UCY	n/a
			7 - SZU	n/a
			8 - CIPH	n/a
			9 - AAKS	n/a
			10 - UHSD	n/a
			11 - RZ	n/a
			11.1 - MFK	n/a
			11.2 - ODSHERRED	n/a
			11.3 - VALLENSBAEK	n/a
			12 - TAI	n/a
			13 - THL	n/a
			13.1 - CSF	n/a
			13.2 - FILHA	n/a
			14 - MoH FR	n/a
			15 - TFRI	n/a
			16 - NPHO	n/a
			17 - NKIP	n/a
			17.1 - NNGYK	n/a
			17.2 - ÉBSZJCK	n/a
			17.3 - OKFŐ	n/a
			17.4 - GOKVI	n/a
			18 - ISS	n/a
			18.1 - FPG	n/a
			18.2 - LIGURIA	n/a
			18.3 - LOMBARDIA	n/a
			18.4 - IRFMN	n/a
			18.5 - ULSS 6	n/a
			19 - RSU	n/a
			19.1 - SPKC	n/a
			19.2 - MoH LV	n/a
			19.3 - PSCUH	n/a
			20 - LSMU	n/a
			21 - SAM LT	n/a
			22 - NVI	n/a
			23 - VU	n/a
			24 - RIVM	n/a

Prefinancing payment		Prefinancing guarantee		
Type	Amount	Guarantee amount	Division per participant	
			25 - DGS	n/a
			26 - ICAD	n/a
			27 - IPMN	n/a
			27.1 - INSP	n/a
			28 - CDU	n/a
			29 - NIJZ	n/a
			30 - ICO	n/a
			30.1 - GENCAT	n/a
			30.2 - IDIBAPS-CERCA	n/a
			31 - IDIS	n/a
			31.1 - USC	n/a
			31.2 - CSG	n/a
			32 - IDIVAL	n/a
			32.1 - SCS	n/a
			33 - ASPB	n/a
			33.1 - IRSANTPAU CERCA	n/a
			34 - LUND	n/a
			35 - PHC	n/a

Reporting and payment modalities (art 21, 22):

Mutual Insurance Mechanism (MIM): No

Restrictions on distribution of initial prefinancing: The prefinancing may be distributed only if the minimum number of beneficiaries set out in the call condititions (if any) have acceded to the Agreement and only to beneficiaries that have acceded.

Interim payment ceiling (if any): 90% of the maximum grant amount

No-profit rule: Yes

Late payment interest: ECB + 3.5%

Bank account for payments:

GR0301408020802002001000227 CRBAGRAAXXX

Conversion into euros: Double conversion

Reporting language: Language of the Agreement

4.3 Certificates (art 24):

Certificates on the financial statements (CFS):

Conditions:

Schedule: interim/final payment, if threshold is reached

Standard threshold (beneficiary-level):

- financial statement: requested EU contribution to costs ≥ EUR 325 000.00

4.4 Recoveries (art 22)

First-line liability for recoveries:

Beneficiary termination: Beneficiary concerned

Final payment: Coordinator

After final payment: Beneficiary concerned

Joint and several liability for enforced recoveries (in case of non-payment):

Limited joint and several liability of other beneficiaries — up to the maximum grant amount of the beneficiary

Joint and several liability of affiliated entities — n/a

5. Consequences of non-compliance, applicable law & dispute settlement forum

Applicable law (art 43):

Standard applicable law regime: EU law + law of Belgium

Dispute settlement forum (art 43):

Standard dispute settlement forum:

EU beneficiaries: EU General Court + EU Court of Justice (on appeal)

Non-EU beneficiaries: Courts of Brussels, Belgium (unless an international agreement provides for the enforceability of EU court judgements)

6. Other

Specific rules (Annex 5): Yes

Standard time-limits after project end:

Confidentiality (for X years after final payment): 5

Record-keeping (for X years after final payment): 5 (or 3 for grants of not more than EUR 60 000)

Reviews (up to X years after final payment): 5 (or 3 for grants of not more than EUR 60 000)

Audits (up to X years after final payment): 5 (or 3 for grants of not more than EUR 60 000)

Extension of findings from other grants to this grant (no later than X years after final payment): 5 (or 3 for grants of not more than EUR 60 000)

Impact evaluation (up to X years after final payment): 5 (or 3 for grants of not more than EUR 60 000)

CHAPTER 1 GENERAL

ARTICLE 1 — SUBJECT OF THE AGREEMENT

This Agreement sets out the rights and obligations and terms and conditions applicable to the grant awarded for the implementation of the action set out in Chapter 2.

ARTICLE 2 — DEFINITIONS

For the purpose of this Agreement, the following definitions apply:

Actions — The project which is being funded in the context of this Agreement.

Grant — The grant awarded in the context of this Agreement.

EU grants — Grants awarded by EU institutions, bodies, offices or agencies (including EU executive agencies, EU regulatory agencies, EDA, joint undertakings, etc.).

Participants — Entities participating in the action as beneficiaries, affiliated entities, associated partners, third parties giving in-kind contributions, subcontractors or recipients of financial support to third parties.

Beneficiaries (BEN) — The signatories of this Agreement (either directly or through an accession form).

Affiliated entities (AE) — Entities affiliated to a beneficiary within the meaning of Article 190 of EU Financial Regulation 2024/2509[4] which participate in the action with similar rights and obligations as the beneficiaries (obligation to implement action tasks and right to charge costs and claim contributions).

Associated partners (AP) — Entities which participate in the action, but without the right to charge costs or claim contributions.

Purchases — Contracts for goods, works or services needed to carry out the action (e.g. equipment, consumables and supplies) but which are not part of the action tasks (see Annex 1).

Subcontracting — Contracts for goods, works or services that are part of the action tasks (see Annex 1).

In-kind contributions — In-kind contributions within the meaning of Article 2(38) of EU Financial Regulation 2024/2509, i.e. non-financial resources made available free of charge by third parties.

[4] For the definition, see Article 190 Regulation (EU, Euratom) 2024/2509 of the European Parliament and of the Council of 23 September 2024 on the financial rules applicable to the general budget of the Union (recast) ('EU Financial Regulation') (OJ L, 2024/2509, 26.9.2024): "**affiliated entities** [are]:

(a) entities that form a sole beneficiary [(i.e. where an entity is formed of several entities that satisfy the criteria for being awarded a grant, including where the entity is specifically established for the purpose of implementing an action to be financed by a grant)];

(b) entities that satisfy the eligibility criteria and that do not fall within one of the situations referred to in Article 138(1) and 143(1) and that have a link with the beneficiary, in particular a legal or capital link, which is neither limited to the action nor established for the sole purpose of its implementation".

Fraud — Fraud within the meaning of Article 3 of EU Directive 2017/1371[5] and Article 1 of the Convention on the protection of the European Communities' financial interests, drawn up by the Council Act of 26 July 1995[6], as well as any other wrongful or criminal deception intended to result in financial or personal gain.

Irregularities — Any type of breach (regulatory or contractual) which could impact the EU financial interests, including irregularities within the meaning of Article 1(2) of EU Regulation 2988/95[7].

Grave professional misconduct — Any type of unacceptable or improper behaviour in exercising one's profession, especially by employees, including grave professional misconduct within the meaning of Article 138(1)(c) of EU Financial Regulation 2024/2509[8].

Applicable EU, international and national law — Any legal acts or other (binding or non-binding) rules and guidance in the area concerned.

Portal — EU Funding & Tenders Portal; electronic portal and exchange system managed by the European Commission and used by itself and other EU institutions, bodies, offices or agencies for the management of their funding programmes (grants, procurements, prizes, etc.).

CHAPTER 2 ACTION

ARTICLE 3 — ACTION

The grant is awarded for the action **101233428** — **JA-SAFE** ('action'), as described in Annex 1.

ARTICLE 4 — DURATION AND STARTING DATE

The duration and the starting date of the action are set out in the Data Sheet (see Point 1).

CHAPTER 3 GRANT

ARTICLE 5 — GRANT

5.1 Form of grant

[5] Directive (EU) 2017/1371 of the European Parliament and of the Council of 5 July 2017 on the fight against fraud to the Union's financial interests by means of criminal law (OJ L 198, 28.7.2017, p. 29).

[6] OJ C 316, 27.11.1995, p. 48.

[7] Council Regulation (EC, Euratom) No 2988/95 of 18 December 1995 on the protection of the European Communities financial interests (OJ L 312, 23.12.1995, p. 1).

[8] 'Professional misconduct' includes, in particular, the following: violation of ethical standards of the profession; wrongful conduct with impact on professional credibility; breach of generally accepted professional ethical standards; false declarations/misrepresentation of information; participation in a cartel or other agreement distorting competition; violation of IPR; attempting to influence decision-making processes by taking advantage, through misrepresentation, of a conflict of interests, or to obtain confidential information from public authorities to gain an advantage; incitement to discrimination, hatred or violence or similar activities contrary to the EU values where negatively affecting or risking to affect the performance of a legal commitment.

The grant is an action grant[9] which takes the form of a budget-based mixed actual cost grant (i.e. a grant based on actual costs incurred, but which may also include other forms of funding, such as unit costs or contributions, flat-rate costs or contributions, lump sum costs or contributions or financing not linked to costs).

5.2 Maximum grant amount

The maximum grant amount is set out in the Data Sheet (see Point 3) and in the estimated budget (Annex 2).

5.3 Funding rate

The funding rate for costs is 80% of the action's eligible costs.

Contributions are not subject to any funding rate.

5.4 Estimated budget, budget categories and forms of funding

The estimated budget for the action is set out in Annex 2.

It contains the estimated eligible costs and contributions for the action, broken down by participant and budget category.

Annex 2 also shows the types of costs and contributions (forms of funding)[10] to be used for each budget category.

If unit costs or contributions are used, the details on the calculation will be explained in Annex 2a.

5.5 Budget flexibility

The budget breakdown may be adjusted — without an amendment (see Article 39) — by transfers (between participants and budget categories), as long as this does not imply any substantive or important change to the description of the action in Annex 1.

However:

- changes to the budget category for volunteers (if used) always require an amendment
- changes to budget categories with lump sums costs or contributions (if used; including financing not linked to costs) always require an amendment
- changes to budget categories with higher funding rates or budget ceilings (if used) always require an amendment
- addition of amounts for subcontracts not provided for in Annex 1 either require an amendment or simplified approval in accordance with Article 6.2

[9] For the definition, see Article 183(2)(a) EU Financial Regulation 2024/2509: '**action grant**' means an EU grant to finance "an action intended to help achieve a Union policy objective".

[10] See Article 125 EU Financial Regulation 2024/2509.

- other changes require an amendment or simplified approval, if specifically provided for in Article 6.2

- flexibility caps: not applicable.

ARTICLE 6 — ELIGIBLE AND INELIGIBLE COSTS AND CONTRIBUTIONS

In order to be eligible, costs and contributions must meet the **eligibility** conditions set out in this Article.

6.1 General eligibility conditions

The **general eligibility conditions** are the following:

(a) for actual costs:

(i) they must be actually incurred by the beneficiary

(ii) they must be incurred in the period set out in Article 4 (with the exception of costs relating to the submission of the final periodic report, which may be incurred afterwards; see Article 21)

(iii) they must be declared under one of the budget categories set out in Article 6.2 and Annex 2

(iv) they must be incurred in connection with the action as described in Annex 1 and necessary for its implementation

(v) they must be identifiable and verifiable, in particular recorded in the beneficiary's accounts in accordance with the accounting standards applicable in the country where the beneficiary is established and with the beneficiary's usual cost accounting practices

(vi) they must comply with the applicable national law on taxes, labour and social security and

(vii) they must be reasonable, justified and must comply with the principle of sound financial management, in particular regarding economy and efficiency

(b) for unit costs or contributions (if any):

(i) they must be declared under one of the budget categories set out in Article 6.2 and Annex 2

(ii) the units must:

- be actually used or produced by the beneficiary in the period set out in Article 4 (with the exception of units relating to the submission of the final periodic report, which may be used or produced afterwards; see Article 21)

- be necessary for the implementation of the action and

(iii) the number of units must be identifiable and verifiable, in particular supported by records and documentation (see Article 20)

(c) for flat-rate costs or contributions (if any):

(i) they must be declared under one of the budget categories set out in Article 6.2 and Annex 2

(ii) the costs or contributions to which the flat-rate is applied must:

- be eligible
- relate to the period set out in Article 4 (with the exception of costs or contributions relating to the submission of the final periodic report, which may be incurred afterwards; see Article 21)

(d) for lump sum costs or contributions (if any):

(i) they must be declared under one of the budget categories set out in Article 6.2 and Annex 2

(ii) the work must be properly implemented by the beneficiary in accordance with Annex 1

(iii) the deliverables/outputs must be achieved in the period set out in Article 4 (with the exception of deliverables/outputs relating to the submission of the final periodic report, which may be achieved afterwards; see Article 21)

(e) for unit, flat-rate or lump sum costs or contributions according to usual cost accounting practices (if any):

(i) they must fulfil the general eligibility conditions for the type of cost concerned

(ii) the cost accounting practices must be applied in a consistent manner, based on objective criteria, regardless of the source of funding

(f) for financing not linked to costs (if any): the results must be achieved or the conditions must be fulfilled as described in Annex 1.

In addition, for direct cost categories (e.g. personnel, travel & subsistence, subcontracting and other direct costs) only costs that are directly linked to the action implementation and can therefore be attributed to it directly are eligible. They must not include any indirect costs (i.e. costs that are only indirectly linked to the action, e.g. via cost drivers).

6.2 Specific eligibility conditions for each budget category

For each budget category, the **specific eligibility conditions** are as follows:

Direct costs

A. Personnel costs

A.1 Costs for employees (or equivalent) are eligible as personnel costs, if they fulfil the general eligibility conditions and are related to personnel working for the beneficiary under an employment contract (or equivalent appointing act) and assigned to the action.

They must be limited to salaries, social security contributions, taxes and other costs linked to the

remuneration, if they arise from national law or the employment contract (or equivalent appointing act) and be calculated on the basis of the costs actually incurred, in accordance with the following method:

{daily rate for the person

multiplied by

number of day-equivalents worked on the action (rounded up or down to the nearest half-day)}.

The daily rate must be calculated as:

{annual personnel costs for the person

divided by

215}.

The number of day-equivalents declared for a person must be identifiable and verifiable (see Article 20).

The total number of day-equivalents declared in EU grants, for a person for a year, cannot be higher than 215.

The personnel costs may also include supplementary payments for personnel assigned to the action (including payments on the basis of supplementary contracts regardless of their nature), if:

- it is part of the beneficiary's usual remuneration practices and is paid in a consistent manner whenever the same kind of work or expertise is required

- the criteria used to calculate the supplementary payments are objective and generally applied by the beneficiary, regardless of the source of funding used.

A.2 and **A.3 Costs for natural persons working under a direct contract** other than an employment contract and costs for **seconded persons by a third party against payment** are also eligible as personnel costs, if they are assigned to the action, fulfil the general eligibility conditions and:

(a) work under conditions similar to those of an employee (in particular regarding the way the work is organised, the tasks that are performed and the premises where they are performed) and

(b) the result of the work belongs to the beneficiary (unless agreed otherwise).

They must be calculated on the basis of a rate which corresponds to the costs actually incurred for the direct contract or secondment and must not be significantly different from those for personnel performing similar tasks under an employment contract with the beneficiary.

A.4 The work of **SME owners** for the action (i.e. owners of beneficiaries that are small and medium-sized enterprises[11] not receiving a salary) or **natural person beneficiaries** (i.e. beneficiaries that are

[11] For the definition, see Commission Recommendation 2003/361/EC: micro, small or medium-sized enterprise (SME) are enterprises

- engaged in an economic activity, irrespective of their legal form (including, in particular, self- employed persons and family businesses engaged in craft or other activities, and partnerships or associations regularly engaged in an economic activity) and

natural persons not receiving a salary) may be declared as personnel costs, if they fulfil the general eligibility conditions and are calculated as unit costs in accordance with the method set out in Annex 2a.

B. Subcontracting costs

Subcontracting costs for the action (including related duties, taxes and charges, such as non-deductible or non-refundable value added tax (VAT)) are eligible, if they are calculated on the basis of the costs actually incurred, fulfil the general eligibility conditions and are awarded using the beneficiary's usual purchasing practices — provided these ensure subcontracts with best value for money (or if appropriate the lowest price) and that there is no conflict of interests (see Article 12).

Beneficiaries that are 'contracting authorities/entities' within the meaning of the EU Directives on public procurement must also comply with the applicable national law on public procurement.

Subcontracting may cover only a limited part of the action.

The tasks to be subcontracted and the estimated cost for each subcontract must be set out in Annex 1 and the total estimated costs of subcontracting per beneficiary must be set out in Annex 2 (or may be approved ex post in the periodic report, if the use of subcontracting does not entail changes to the Agreement which would call into question the decision awarding the grant or breach the principle of equal treatment of applicants; 'simplified approval procedure').

C. Purchase costs

Purchase costs for the action (including related duties, taxes and charges, such as non-deductible or non-refundable value added tax (VAT)) are eligible if they fulfil the general eligibility conditions and are bought using the beneficiary's usual purchasing practices — provided these ensure purchases with best value for money (or if appropriate the lowest price) and that there is no conflict of interests (see Article 12).

Beneficiaries that are 'contracting authorities/entities' within the meaning of the EU Directives on public procurement must also comply with the applicable national law on public procurement.

C.1 Travel and subsistence

Purchases for **travel, accommodation** and **subsistence** must be calculated as follows:

- travel: as unit costs in accordance with the method set out in Annex 2a if covered by Decision C(2021)35[12] or otherwise as costs actually incurred and in line with the beneficiary's usual practices on travel

- accommodation: as unit costs in accordance with the method set out in Annex 2a if covered by

- employing fewer than 250 persons (expressed in 'annual working units' as defined in Article 5 of the Recommendation) and which have an annual turnover not exceeding EUR 50 million, and/or an annual balance sheet total not exceeding EUR 43 million.

[12] Commission Decision of 12 January 2021 authorising the use of unit costs for travel, accommodation and subsistence costs under an action or work programme under the 2021-2027 multi-annual financial framework (C(2021)35).

Decision C(2021)35[13] or otherwise as costs actually incurred and in line with the beneficiary's usual practices on travel

- subsistence: as unit costs in accordance with the method set out in Annex 2a if covered by Decision C(2021)35[14] or otherwise as costs actually incurred and in line with the beneficiary's usual practices on travel.

C.2 Equipment

Purchases of **equipment, infrastructure or other assets** used for the action must be declared as depreciation costs, calculated on the basis of the costs actually incurred and written off in accordance with international accounting standards and the beneficiary's usual accounting practices.

Only the portion of the costs that corresponds to the rate of actual use for the action during the action duration can be taken into account.

Costs for **renting or leasing** equipment, infrastructure or other assets are also eligible, if they do not exceed the depreciation costs of similar equipment, infrastructure or assets and do not include any financing fees.

C.3 Other goods, works and services

Purchases of **other goods, works and services** must be calculated on the basis of the costs actually incurred.

Such goods, works and services include, for instance, consumables and supplies, promotion, dissemination, protection of results, translations, publications, certificates and financial guarantees, if required under the Agreement.

D. Other cost categories

D.1 Financial support to third parties

Costs for providing financial support to third parties (in the form of **grants, prizes** or similar forms of support; if any) are eligible, if and as declared eligible in the call conditions, if they fulfil the general eligibility conditions, are calculated on the basis of the costs actually incurred and the support is implemented in accordance with the conditions set out in Annex 1.

These conditions must ensure objective and transparent selection procedures and include at least the following:

(a) for grants (or similar):

(i) the maximum amount of financial support for each third party ('recipient'); this amount may not exceed the amount set out in the Data Sheet (see Point 3) or otherwise agreed with the granting authority

[13] Commission Decision of 12 January 2021 authorising the use of unit costs for travel, accommodation and subsistence costs under an action or work programme under the 2021-2027 multi-annual financial framework (C(2021)35).

[14] Commission Decision of 12 January 2021 authorising the use of unit costs for travel, accommodation and subsistence costs under an action or work programme under the 2021-2027 multi-annual financial framework (C(2021)35).

(ii) the criteria for calculating the exact amount of the financial support

(iii) the different types of activity that qualify for financial support, on the basis of a closed list

(iv) the persons or categories of persons that will be supported and

(v) the criteria and procedures for giving financial support

(b) for prizes (or similar):

(i) the eligibility and award criteria

(ii) the amount of the prize and

(iii) the payment arrangements.

Indirect costs

E. Indirect costs

Indirect costs will be reimbursed at the flat-rate of 7% of the eligible direct costs (categories A-D, except volunteers costs and exempted specific cost categories, if any).

Contributions

Not applicable

6.3 Ineligible costs and contributions

The following costs or contributions are **ineligible**:

(a) costs or contributions that do not comply with the conditions set out above (Article 6.1 and 6.2), in particular:

(i) costs related to return on capital and dividends paid by a beneficiary

(ii) debt and debt service charges

(iii) provisions for future losses or debts

(iv) interest owed

(v) currency exchange losses

(vi) bank costs charged by the beneficiary's bank for transfers from the granting authority

(vii) excessive or reckless expenditure

(viii) deductible or refundable VAT (including VAT paid by public bodies acting as public authority)

(ix) costs incurred or contributions for activities implemented during grant agreement suspension (see Article 31)

(x) in-kind contributions by third parties

(b) costs or contributions declared under other EU grants (or grants awarded by an EU Member State, non-EU country or other body implementing the EU budget), except for the following cases:

(i) Synergy actions: not applicable

(ii) if the action grant is combined with an operating grant[15] running during the same period and the beneficiary can demonstrate that the operating grant does not cover any (direct or indirect) costs of the action grant

(c) costs or contributions for staff of a national (or regional/local) administration, for activities that are part of the administration's normal activities (i.e. not undertaken only because of the grant)

(d) costs or contributions (especially travel and subsistence) for staff or representatives of EU institutions, bodies or agencies

(e) other :

(i) country restrictions for eligible costs: not applicable

(ii) costs or contributions declared specifically ineligible in the call conditions.

6.4 Consequences of non-compliance

If a beneficiary declares costs or contributions that are ineligible, they will be rejected (see Article 27).

This may also lead to other measures described in Chapter 5.

CHAPTER 4 GRANT IMPLEMENTATION

SECTION 1 CONSORTIUM: BENEFICIARIES, AFFILIATED ENTITIES AND OTHER PARTICIPANTS

ARTICLE 7 — BENEFICIARIES

The beneficiaries, as signatories of the Agreement, are fully responsible towards the granting authority for implementing it and for complying with all its obligations.

They must implement the Agreement to their best abilities, in good faith and in accordance with all the obligations and terms and conditions it sets out.

They must have the appropriate resources to implement the action and implement the action under their own responsibility and in accordance with Article 11. If they rely on affiliated entities or other

[15] For the definition, see Article 183(2)(b) EU Financial Regulation 2024/2509: '**operating grant**' means an EU grant to finance "the functioning of a body which has an objective forming part of and supporting an EU policy".

participants (see Articles 8 and 9), they retain sole responsibility towards the granting authority and the other beneficiaries.

They are jointly responsible for the *technical* implementation of the action. If one of the beneficiaries fails to implement their part of the action, the other beneficiaries must ensure that this part is implemented by someone else (without being entitled to an increase of the maximum grant amount and subject to an amendment; see Article 39). The *financial* responsibility of each beneficiary in case of recoveries is governed by Article 22.

The beneficiaries (and their action) must remain eligible under the EU programme funding the grant for the entire duration of the action. Costs and contributions will be eligible only as long as the beneficiary and the action are eligible.

The **internal roles and responsibilities** of the beneficiaries are divided as follows:

(a) Each beneficiary must:

(i) keep information stored in the Portal Participant Register up to date (see Article 19)

(ii) inform the granting authority (and the other beneficiaries) immediately of any events or circumstances likely to affect significantly or delay the implementation of the action (see Article 19)

(iii) submit to the coordinator in good time:

- the prefinancing guarantees (if required; see Article 23)
- the financial statements and certificates on the financial statements (CFS) (if required; see Articles 21 and 24.2 and Data Sheet, Point 4.3)
- the contribution to the deliverables and technical reports (see Article 21)
- any other documents or information required by the granting authority under the Agreement

(iv) submit via the Portal data and information related to the participation of their affiliated entities.

(b) The coordinator must:

(i) monitor that the action is implemented properly (see Article 11)

(ii) act as the intermediary for all communications between the consortium and the granting authority, unless the Agreement or granting authority specifies otherwise, and in particular:

- submit the prefinancing guarantees to the granting authority (if any)
- request and review any documents or information required and verify their quality and completeness before passing them on to the granting authority
- submit the deliverables and reports to the granting authority

- inform the granting authority about the payments made to the other beneficiaries (report on the distribution of payments; if required, see Articles 22 and 32)

(iii) distribute the payments received from the granting authority to the other beneficiaries without unjustified delay (see Article 22).

The coordinator may not delegate or subcontract the above-mentioned tasks to any other beneficiary or third party (including affiliated entities).

However, coordinators which are public bodies may delegate the tasks set out in Point (b)(ii) last indent and (iii) above to entities with 'authorisation to administer' which they have created or which are controlled by or affiliated to them. In this case, the coordinator retains sole responsibility for the payments and for compliance with the obligations under the Agreement.

Moreover, coordinators which are 'sole beneficiaries'[16] (or similar, such as European research infrastructure consortia (ERICs)) may delegate the tasks set out in Point (b)(i) to (iii) above to one of their members. The coordinator retains sole responsibility for compliance with the obligations under the Agreement.

The beneficiaries must have **internal arrangements** regarding their operation and co-ordination, to ensure that the action is implemented properly.

If required by the granting authority (see Data Sheet, Point 1), these arrangements must be set out in a written **consortium agreement** between the beneficiaries, covering for instance:

- the internal organisation of the consortium
- the management of access to the Portal
- different distribution keys for the payments and financial responsibilities in case of recoveries (if any)
- additional rules on rights and obligations related to background and results (see Article 16)
- settlement of internal disputes
- liability, indemnification and confidentiality arrangements between the beneficiaries.

The internal arrangements must not contain any provision contrary to this Agreement.

ARTICLE 8 — AFFILIATED ENTITIES

The following entities which are linked to a beneficiary will participate in the action as 'affiliated entities':

- **UNIVERSITY OF CYPRUS (UCY)**, PIC 999835843, linked to CYPRUS NATIONAL ADDICTIONS AUTHORITY (NAAC)

[16] For the definition, see Article 190(2) EU Financial Regulation 2024/2509: "Where several entities satisfy the criteria for being awarded a grant and together form one entity, that entity may be treated as the **sole beneficiary**, including where it is specifically established for the purpose of implementing the action financed by the grant."

- **MARIAGERFJORD KOMMUNE (MFK)**, PIC 888849219, linked to REGION SJAELLAND (RZ)
- **ODSHERRED KOMMUNE (ODSHERRED)**, PIC 877136760, linked to REGION SJAELLAND (RZ)
- **Vallensbaek Municipality (VALLENSBAEK)**, PIC 870788692, linked to REGION SJAELLAND (RZ)
- **SUOMEN SYOPAYHDISTYS -CANCERFORENINGEN I FINLAND RY - CANCER SOCIETY OF FINLAND CSF (CSF)**, PIC 999483636, linked to TERVEYDEN JA HYVINVOINNIN LAITOS (THL)
- **FILHA RY (FILHA)**, PIC 899377502, linked to TERVEYDEN JA HYVINVOINNIN LAITOS (THL)
- **NEMZETI NEPEGESZSEGUGYI ES GYOGYSZERESZETI KOZPONT (NNGYK)**, PIC 998706957, linked to ORSZAGOS KORANYI PULMONOLOGIAI INTEZET (NKIP)
- **ESZAK-BUDAI SZENT JANOS CENTRUMKORHAZ (ÉBSZJCK)**, PIC 889719212, linked to ORSZAGOS KORANYI PULMONOLOGIAI INTEZET (NKIP)
- **ORSZAGOS KORHAZI FOIGAZGATOSAG (OKFŐ)**, PIC 891516331, linked to ORSZAGOS KORANYI PULMONOLOGIAI INTEZET (NKIP)
- **GOTTSEGEN GYÖRGY ORSZÁGOS KARDIOVASZKULÁRIS INTÉZET (GOKVI)**, PIC 968000443, linked to ORSZAGOS KORANYI PULMONOLOGIAI INTEZET (NKIP)
- **FONDAZIONE POLICLINICO UNIVERSITARIO AGOSTINO GEMELLI IRCCS (FPG)**, PIC 918081430, linked to ISTITUTO SUPERIORE DI SANITA (ISS)
- **REGIONE LIGURIA (LIGURIA)**, PIC 996097851, linked to ISTITUTO SUPERIORE DI SANITA (ISS)
- **REGIONE LOMBARDIA (LOMBARDIA)**, PIC 999654065, linked to ISTITUTO SUPERIORE DI SANITA (ISS)
- **ISTITUTO DI RICERCHE FARMACOLOGICHE MARIO NEGRI (IRFMN)**, PIC 999661146, linked to ISTITUTO SUPERIORE DI SANITA (ISS)
- **AZIENDA ULSS 6 EUGANEA (ULSS 6)**, PIC 937042990, linked to ISTITUTO SUPERIORE DI SANITA (ISS)
- **SLIMIBU PROFILAKSES UN KONTROLES CENTRS (SPKC)**, PIC 952714019, linked to RIGAS STRADINA UNIVERSITATE (RSU)
- **VESELIBAS MINISTRIJA (MoH LV)**, PIC 887695695, linked to RIGAS STRADINA UNIVERSITATE (RSU)
- **PAULA STRADINA KLINISKA UNIVERSITATES SLIMNICA (PSCUH)**, PIC 953605449, linked to RIGAS STRADINA UNIVERSITATE (RSU)

- **INSTITUTUL NATIONAL DE SANATATE PUBLICA (INSP)**, PIC 985926237, linked to INSTITUTUL DE PNEUMOFTIZIOLOGIE MARIUS NASTA (IPMN)

- **DEPARTAMENT DE SALUT - GENERALITAT DE CATALUNYA (GENCAT)**, PIC 999826919, linked to INSTITUT CATALA D'ONCOLOGIA (ICO)

- **FUNDACIO DE RECERCA CLINIC BARCELONA-INSTITUT D INVESTIGACIONS BIOMEDIQUES AUGUST PI I SUNYER (IDIBAPS-CERCA)**, PIC 999477525, linked to INSTITUT CATALA D'ONCOLOGIA (ICO)

- **UNIVERSIDAD DE SANTIAGO DE COMPOSTELA (USC)**, PIC 999829635, linked to FUNDACION PUBLICA GALEGA INSTITUTO DE INVESTIGACION SANITARIA DE SANTIAGO DE COMPOSTELA (IDIS)

- **Conselleria de Sanidade de Galicia (CSG)**, PIC 952925770, linked to FUNDACION PUBLICA GALEGA INSTITUTO DE INVESTIGACION SANITARIA DE SANTIAGO DE COMPOSTELA (IDIS)

- **Servicio Cántabro de Salud (SCS)**, PIC 991294023, linked to FUNDACION INSTITUTO DE INVESTIGACION MARQUES DE VALDECILLA (IDIVAL)

- **INSTITUT DE RECERCA DE L'HOSPITAL DE LA SANTA CREU I SANT PAU FUNDACION (IRSANTPAU CERCA)**, PIC 998869432, linked to Agencia de Salut Publica de Barcelona (ASPB)

Affiliated entities can charge costs and contributions to the action under the same conditions as the beneficiaries and must implement the action tasks attributed to them in Annex 1 in accordance with Article 11.

Their costs and contributions will be included in Annex 2 and will be taken into account for the calculation of the grant.

The beneficiaries must ensure that all their obligations under this Agreement also apply to their affiliated entities.

The beneficiaries must ensure that the bodies mentioned in Article 25 (e.g. granting authority, OLAF, Court of Auditors (ECA), etc.) can exercise their rights also towards the affiliated entities.

Breaches by affiliated entities will be handled in the same manner as breaches by beneficiaries. Recovery of undue amounts will be handled through the beneficiaries.

If the granting authority requires joint and several liability of affiliated entities (see Data Sheet, Point 4.4), they must sign the declaration set out in Annex 3a and may be held liable in case of enforced recoveries against their beneficiaries (see Article 22.2 and 22.4).

ARTICLE 9 — OTHER PARTICIPANTS INVOLVED IN THE ACTION

9.1 Associated partners

The following entities which cooperate with a beneficiary will participate in the action as ‘associated partners’:

- **MINISTERE DE LA SANTE ET DE LA SECURITE SOCIALE (MoH LUX)**, PIC 998888153

- **SEMMELWEIS EGYETEM (SU)**, PIC 999860675

Associated partners must implement the action tasks attributed to them in Annex 1 in accordance with Article 11. They may not charge costs or contributions to the action and the costs for their tasks are not eligible.

The tasks must be set out in Annex 1.

The beneficiaries must ensure that their contractual obligations under Articles 11 (proper implementation), 12 (conflict of interests), 13 (confidentiality and security), 14 (ethics), 17.2 (visibility), 18 (specific rules for carrying out action), 19 (information) and 20 (record-keeping) also apply to the associated partners.

The beneficiaries must ensure that the bodies mentioned in Article 25 (e.g. granting authority, OLAF, Court of Auditors (ECA), etc.) can exercise their rights also towards the associated partners.

9.2 Third parties giving in-kind contributions to the action

Other third parties may give in-kind contributions to the action (i.e. personnel, equipment, other goods, works and services, etc. which are free-of-charge), if necessary for the implementation.

Third parties giving in-kind contributions do not implement any action tasks. They may not charge costs or contributions to the action and the costs for the in-kind contributions are not eligible.

The third parties and their in-kind contributions should be set out in Annex 1.

9.3 Subcontractors

Subcontractors may participate in the action, if necessary for the implementation.

Subcontractors must implement their action tasks in accordance with Article 11. The costs for the subcontracted tasks (invoiced price from the subcontractor) are eligible and may be charged by the beneficiaries, under the conditions set out in Article 6. The costs will be included in Annex 2 as part of the beneficiaries' costs.

The beneficiaries must ensure that their contractual obligations under Articles 11 (proper implementation), 12 (conflict of interest), 13 (confidentiality and security), 14 (ethics), 17.2 (visibility), 18 (specific rules for carrying out action), 19 (information) and 20 (record-keeping) also apply to the subcontractors.

The beneficiaries must ensure that the bodies mentioned in Article 25 (e.g. granting authority, OLAF, Court of Auditors (ECA), etc.) can exercise their rights also towards the subcontractors.

9.4 Recipients of financial support to third parties

If the action includes providing financial support to third parties (e.g. grants, prizes or similar forms of support), the beneficiaries must ensure that their contractual obligations under Articles 12 (conflict of interest), 13 (confidentiality and security), 14 (ethics), 17.2 (visibility), 18 (specific rules for carrying

out action), 19 (information) and 20 (record-keeping)also apply to the third parties receiving the support (recipients).

The beneficiaries must also ensure that the bodies mentioned in Article 25 (e.g. granting authority, OLAF, Court of Auditors (ECA), etc.) can exercise their rights also towards the recipients.

ARTICLE 10 — PARTICIPANTS WITH SPECIAL STATUS

10.1 Non-EU participants

Participants which are established in a non-EU country (if any) undertake to comply with their obligations under the Agreement and:

- to respect general principles (including fundamental rights, values and ethical principles, environmental and labour standards, rules on classified information, intellectual property rights, visibility of funding and protection of personal data)
- for the submission of certificates under Article 24: to use qualified external auditors which are independent and comply with comparable standards as those set out in EU Directive 2006/43/EC[17]
- for the controls under Article 25: to allow for checks, reviews, audits and investigations (including on-the-spot checks, visits and inspections) by the bodies mentioned in that Article (e.g. granting authority, OLAF, Court of Auditors (ECA), etc.).

Special rules on dispute settlement apply (see Data Sheet, Point 5).

10.2 Participants which are international organisations

Participants which are international organisations (IOs; if any) undertake to comply with their obligations under the Agreement and:

- to respect general principles (including fundamental rights, values and ethical principles, environmental and labour standards, rules on classified information, intellectual property rights, visibility of funding and protection of personal data)
- for the submission of certificates under Article 24: to use either independent public officers or external auditors which comply with comparable standards as those set out in EU Directive 2006/43/EC[18]
- for the controls under Article 25: to allow for the checks, reviews, audits and investigations by the bodies mentioned in that Article, taking into account the specific agreements concluded by them and the EU (if any).

For such participants, nothing in the Agreement will be interpreted as a waiver of their privileges or immunities, as accorded by their constituent documents or international law.

[17] Directive 2006/43/EC of the European Parliament and of the Council of 17 May 2006 on statutory audits of annual accounts and consolidated accounts (OJ L 157, 9.6.2006, p. 87).

[18] Directive 2006/43/EC of the European Parliament and of the Council of 17 May 2006 on statutory audits of annual accounts and consolidated accounts (OJ L 157, 9.6.2006, p. 87).

Special rules on applicable law and dispute settlement apply (see Article 43 and Data Sheet, Point 5).

10.3 Pillar-assessed participants

Pillar-assessed participants (if any) may rely on their own systems, rules and procedures, in so far as they have been positively assessed and do not call into question the decision awarding the grant or breach the principle of equal treatment of applicants or beneficiaries.

'Pillar-assessment' means a review by the European Commission on the systems, rules and procedures which participants use for managing EU grants (in particular internal control system, accounting system, external audits, financing of third parties, rules on recovery and exclusion, information on recipients and protection of personal data; see Article 157 EU Financial Regulation 2024/2509).

Participants with a positive pillar assessment may rely on their own systems, rules and procedures, in particular for:

- record-keeping (Article 20): may be done in accordance with internal standards, rules and procedures
- currency conversion for financial statements (Article 21): may be done in accordance with usual accounting practices
- guarantees (Article 23): for public law bodies, prefinancing guarantees are not needed
- certificates (Article 24):
    - certificates on the financial statements (CFS): may be provided by their regular internal or external auditors and in accordance with their internal financial regulations and procedures
    - certificates on usual accounting practices (CoMUC): are not needed if those practices are covered by an ex-ante assessment

and use the following specific rules, for:

- recoveries (Article 22): in case of financial support to third parties, there will be no recovery if the participant has done everything possible to retrieve the undue amounts from the third party receiving the support (including legal proceedings) and non-recovery is not due to an error or negligence on its part
- checks, reviews, audits and investigations by the EU (Article 25): will be conducted taking into account the rules and procedures specifically agreed between them and the framework agreement (if any)
- impact evaluation (Article 26): will be conducted in accordance with the participant's internal rules and procedures and the framework agreement (if any)
- grant agreement termination (Article 32): the final grant amount and final payment will be calculated taking into account also costs relating to contracts due for execution only after termination takes effect, if the contract was entered into before the pre-information letter was received and could not reasonably be terminated on legal grounds

- liability for damages (Article 33.2): the granting authority must be compensated for damage it sustains as a result of the implementation of the action or because the action was not implemented in full compliance with the Agreement only if the damage is due to an infringement of the participant's internal rules and procedures or due to a violation of third parties' rights by the participant or one of its employees or individual for whom the employees are responsible.

Participants whose pillar assessment covers procurement and granting procedures may also do purchases, subcontracting and financial support to third parties (Article 6.2) in accordance with their internal rules and procedures for purchases, subcontracting and financial support.

Participants whose pillar assessment covers data protection rules may rely on their internal standards, rules and procedures for data protection (Article 15).

The participants may however not rely on provisions which would breach the principle of equal treatment of applicants or beneficiaries or call into question the decision awarding the grant, such as in particular:

- eligibility (Article 6)
- consortium roles and set-up (Articles 7-9)
- security and ethics (Articles 13, 14)
- IPR (including background and results, access rights and rights of use), communication, dissemination and visibility (Articles 16 and 17)
- information obligation (Article 19)
- payment, reporting and amendments (Articles 21, 22 and 39)
- rejections, reductions, suspensions and terminations (Articles 27, 28, 29-32)

If the pillar assessment was subject to remedial measures, reliance on the internal systems, rules and procedures is subject to compliance with those remedial measures.

Participants must inform the coordinator without delay of any changes to the systems, rules and procedures that were part of the pillar assessment. The coordinator must immediately inform the granting authority.

Pillar-assessed participants that have also concluded a framework agreement with the EU, may moreover — under the same conditions as those above (i.e. not call into question the decision awarding the grant or breach the principle of equal treatment of applicants or beneficiaries) — rely on the provisions set out in that framework agreement.

SECTION 2 RULES FOR CARRYING OUT THE ACTION

ARTICLE 11 — PROPER IMPLEMENTATION OF THE ACTION

11.1 Obligation to properly implement the action

The beneficiaries must implement the action as described in Annex 1 and in compliance with the provisions of the Agreement, the call conditions and all legal obligations under applicable EU, international and national law.

11.2 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 12 — CONFLICT OF INTERESTS

12.1 Conflict of interests

The beneficiaries must take all measures to prevent any situation where the impartial and objective implementation of the Agreement could be compromised for reasons involving family, emotional life, political or national affinity, economic interest or any other direct or indirect interest (‘conflict of interests’).

They must formally notify the granting authority without delay of any situation constituting or likely to lead to a conflict of interests and immediately take all the necessary steps to rectify this situation.

The granting authority may verify that the measures taken are appropriate and may require additional measures to be taken by a specified deadline.

12.2 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28) and the grant or the beneficiary may be terminated (see Article 32).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 13 — CONFIDENTIALITY AND SECURITY

13.1 Sensitive information

The parties must keep confidential any data, documents or other material (in any form) that is identified as sensitive in writing (‘sensitive information’) — during the implementation of the action and for at least until the time-limit set out in the Data Sheet (see Point 6).

If a beneficiary requests, the granting authority may agree to keep such information confidential for a longer period.

Unless otherwise agreed between the parties, they may use sensitive information only to implement the Agreement.

The beneficiaries may disclose sensitive information to their personnel or other participants involved in the action only if they:

(a) need to know it in order to implement the Agreement and

(b) are bound by an obligation of confidentiality.

The granting authority may disclose sensitive information to its staff and to other EU institutions and bodies.

It may moreover disclose sensitive information to third parties, if:

(a) this is necessary to implement the Agreement or safeguard the EU financial interests and

(b) the recipients of the information are bound by an obligation of confidentiality.

The confidentiality obligations no longer apply if:

(a) the disclosing party agrees to release the other party

(b) the information becomes publicly available, without breaching any confidentiality obligation

(c) the disclosure of the sensitive information is required by EU, international or national law.

Specific confidentiality rules (if any) are set out in Annex 5.

13.2 Classified information

The parties must handle classified information in accordance with the applicable EU, international or national law on classified information (in particular, Decision 2015/444[19] and its implementing rules).

Deliverables which contain classified information must be submitted according to special procedures agreed with the granting authority.

Action tasks involving classified information may be subcontracted only after explicit approval (in writing) from the granting authority.

Classified information may not be disclosed to any third party (including participants involved in the action implementation) without prior explicit written approval from the granting authority.

Specific security rules (if any) are set out in Annex 5.

13.3 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 14 — ETHICS AND VALUES

14.1 Ethics

The action must be carried out in line with the highest ethical standards and the applicable EU, international and national law on ethical principles.

[19] Commission Decision 2015/444/EC, Euratom of 13 March 2015 on the security rules for protecting EU classified information (OJ L 72, 17.3.2015, p. 53).

Specific ethics rules (if any) are set out in Annex 5.

14.2 Values

The beneficiaries must commit to and ensure the respect of basic EU values (such as respect for human dignity, freedom, democracy, equality, the rule of law and human rights, including the rights of minorities).

Specific rules on values (if any) are set out in Annex 5.

14.3 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 15 — DATA PROTECTION

15.1 Data processing by the granting authority

Any personal data under the Agreement will be processed under the responsibility of the data controller of the granting authority in accordance with and for the purposes set out in the Portal Privacy Statement.

For grants where the granting authority is the European Commission, an EU regulatory or executive agency, joint undertaking or other EU body, the processing will be subject to Regulation 2018/1725[20].

15.2 Data processing by the beneficiaries

The beneficiaries must process personal data under the Agreement in compliance with the applicable EU, international and national law on data protection (in particular, Regulation 2016/679[21]).

They must ensure that personal data is:

- processed lawfully, fairly and in a transparent manner in relation to the data subjects
- collected for specified, explicit and legitimate purposes and not further processed in a manner that is incompatible with those purposes
- adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed
- accurate and, where necessary, kept up to date

[20] Regulation (EU) 2018/1725 of the European Parliament and of the Council of 23 October 2018 on the protection of natural persons with regard to the processing of personal data by the Union institutions, bodies, offices and agencies and on the free movement of such data, and repealing Regulation (EC) No 45/2001 and Decision No 1247/2002/EC (OJ L 295, 21.11.2018, p. 39).

[21] Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (‘GDPR’) (OJ L 119, 4.5.2016, p. 1).

- kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the data is processed and

- processed in a manner that ensures appropriate security of the data.

The beneficiaries may grant their personnel access to personal data only if it is strictly necessary for implementing, managing and monitoring the Agreement. The beneficiaries must ensure that the personnel is under a confidentiality obligation.

The beneficiaries must inform the persons whose data are transferred to the granting authority and provide them with the Portal Privacy Statement.

15.3 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 16 — INTELLECTUAL PROPERTY RIGHTS (IPR) — BACKGROUND AND RESULTS —ACCESS RIGHTS AND RIGHTS OF USE

16.1 Background and access rights to background

The beneficiaries must give each other and the other participants access to the background identified as needed for implementing the action, subject to any specific rules in Annex 5.

‘Background’ means any data, know-how or information — whatever its form or nature (tangible or intangible), including any rights such as intellectual property rights — that is:

(a) held by the beneficiaries before they acceded to the Agreement and

(b) needed to implement the action or exploit the results.

If background is subject to rights of a third party, the beneficiary concerned must ensure that it is able to comply with its obligations under the Agreement.

16.2 Ownership of results

The granting authority does not obtain ownership of the results produced under the action.

‘Results’ means any tangible or intangible effect of the action, such as data, know-how or information, whatever its form or nature, whether or not it can be protected, as well as any rights attached to it, including intellectual property rights.

16.3 Rights of use of the granting authority on materials, documents and information received for policy, information, communication, dissemination and publicity purposes

The granting authority has the right to use non-sensitive information relating to the action and materials and documents received from the beneficiaries (notably summaries for publication, deliverables, as well as any other material, such as pictures or audio-visual material, in paper or

electronic form) for policy, information, communication, dissemination and publicity purposes — during the action or afterwards.

The right to use the beneficiaries' materials, documents and information is granted in the form of a royalty-free, non-exclusive and irrevocable licence, which includes the following rights:

(a) **use for its own purposes** (in particular, making them available to persons working for the granting authority or any other EU service (including institutions, bodies, offices, agencies, etc.) or EU Member State institution or body; copying or reproducing them in whole or in part, in unlimited numbers; and communication through press information services)

(b) **distribution to the public** (in particular, publication as hard copies and in electronic or digital format, publication on the internet, as a downloadable or non-downloadable file, broadcasting by any channel, public display or presentation, communicating through press information services, or inclusion in widely accessible databases or indexes)

(c) **editing or redrafting** (including shortening, summarising, inserting other elements (e.g. meta-data, legends, other graphic, visual, audio or text elements), extracting parts (e.g. audio or video files), dividing into parts, use in a compilation)

(d) **translation**

(e) **storage** in paper, electronic or other form

(f) **archiving**, in line with applicable document-management rules

(g) the right to authorise **third parties** to act on its behalf or sub-license to third parties the modes of use set out in Points (b), (c), (d) and (f), if needed for the information, communication and publicity activity of the granting authority

(h) **processing**, analysing, aggregating the materials, documents and information received and **producing derivative works**.

The rights of use are granted for the whole duration of the industrial or intellectual property rights concerned.

If materials or documents are subject to moral rights or third party rights (including intellectual property rights or rights of natural persons on their image and voice), the beneficiaries must ensure that they comply with their obligations under this Agreement (in particular, by obtaining the necessary licences and authorisations from the rights holders concerned).

Where applicable, the granting authority will insert the following information:

> "© – [year] – [name of the copyright owner]. All rights reserved. Licensed to the [name of granting authority] under conditions."

16.4 Specific rules on IPR, results and background

Specific rules regarding intellectual property rights, results and background (if any) are set out in Annex 5.

16.5 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such a breach may also lead to other measures described in Chapter 5.

ARTICLE 17 — COMMUNICATION, DISSEMINATION AND VISIBILITY

17.1 Communication — Dissemination — Promoting the action

Unless otherwise agreed with the granting authority, the beneficiaries must promote the action and its results by providing targeted information to multiple audiences (including the media and the public), in accordance with Annex 1 and in a strategic, coherent and effective manner.

Before engaging in a communication or dissemination activity expected to have a major media impact, the beneficiaries must inform the granting authority.

17.2 Visibility — European flag and funding statement

Unless otherwise agreed with the granting authority, communication activities of the beneficiaries related to the action (including media relations, conferences, seminars, information material, such as brochures, leaflets, posters, presentations, etc., in electronic form, via traditional or social media, etc.), dissemination activities and any infrastructure, equipment, vehicles, supplies or major result funded by the grant must acknowledge EU support and display the European flag (emblem) and funding statement (translated into local languages, where appropriate):

Funded by the
European Union

Co-funded by the
European Union

The emblem must remain distinct and separate and cannot be modified by adding other visual marks, brands or text.

Apart from the emblem, no other visual identity or logo may be used to highlight the EU support.

When displayed in association with other logos (e.g. of beneficiaries or sponsors), the emblem must be displayed at least as prominently and visibly as the other logos.

For the purposes of their obligations under this Article, the beneficiaries may use the emblem without first obtaining approval from the granting authority. This does not, however, give them the right to exclusive use. Moreover, they may not appropriate the emblem or any similar trademark or logo, either by registration or by any other means.

17.3 Quality of information — Disclaimer

Any communication or dissemination activity related to the action must use factually accurate information.

Moreover, it must indicate the following disclaimer (translated into local languages where appropriate):

> "Funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or [name of the granting authority]. Neither the European Union nor the granting authority can be held responsible for them."

17.4 Specific communication, dissemination and visibility rules

Specific communication, dissemination and visibility rules (if any) are set out in Annex 5.

17.5 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 18 — SPECIFIC RULES FOR CARRYING OUT THE ACTION

18.1 Specific rules for carrying out the action

Specific rules for implementing the action (if any) are set out in Annex 5.

18.2 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such a breach may also lead to other measures described in Chapter 5.

SECTION 3 GRANT ADMINISTRATION

ARTICLE 19 — GENERAL INFORMATION OBLIGATIONS

19.1 Information requests

The beneficiaries must provide — during the action or afterwards and in accordance with Article 7 —

any information requested in order to verify eligibility of the costs or contributions declared, proper implementation of the action and compliance with the other obligations under the Agreement.

The information provided must be accurate, precise and complete and in the format requested, including electronic format.

19.2 Participant Register data updates

The beneficiaries must keep — at all times, during the action or afterwards — their information stored in the Portal Participant Register up to date, in particular, their name, address, legal representatives, legal form and organisation type.

19.3 Information about events and circumstances which impact the action

The beneficiaries must immediately inform the granting authority (and the other beneficiaries) of any of the following:

(a) **events** which are likely to affect or delay the implementation of the action or affect the EU's financial interests, in particular:

(i) changes in their legal, financial, technical, organisational or ownership situation (including changes linked to one of the exclusion grounds listed in the declaration of honour signed before grant signature)

(ii) linked action information: not applicable

(b) **circumstances** affecting:

(i) the decision to award the grant or

(ii) compliance with requirements under the Agreement.

19.4 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 20 — RECORD-KEEPING

20.1 Keeping records and supporting documents

The beneficiaries must — at least until the time-limit set out in the Data Sheet (see Point 6) — keep records and other supporting documents to prove the proper implementation of the action in line with the accepted standards in the respective field (if any).

In addition, the beneficiaries must — for the same period — keep the following to justify the amounts declared:

(a) for actual costs: adequate records and supporting documents to prove the costs declared (such as contracts, subcontracts, invoices and accounting records); in addition, the beneficiaries'

usual accounting and internal control procedures must enable direct reconciliation between the amounts declared, the amounts recorded in their accounts and the amounts stated in the supporting documents

(b) for flat-rate costs and contributions (if any): adequate records and supporting documents to prove the eligibility of the costs or contributions to which the flat-rate is applied

(c) for the following simplified costs and contributions: the beneficiaries do not need to keep specific records on the actual costs incurred, but must keep:

(i) for unit costs and contributions (if any): adequate records and supporting documents to prove the number of units declared

(ii) for lump sum costs and contributions (if any): adequate records and supporting documents to prove proper implementation of the work as described in Annex 1

(iii) for financing not linked to costs (if any): adequate records and supporting documents to prove the achievement of the results or the fulfilment of the conditions as described in Annex 1

(d) for unit, flat-rate and lump sum costs and contributions according to usual cost accounting practices (if any): the beneficiaries must keep any adequate records and supporting documents to prove that their cost accounting practices have been applied in a consistent manner, based on objective criteria, regardless of the source of funding, and that they comply with the eligibility conditions set out in Articles 6.1 and 6.2.

Moreover, the following is needed for specific budget categories:

(e) for personnel costs: time worked for the beneficiary under the action must be supported by declarations signed monthly by the person and their supervisor, unless another reliable time-record system is in place; the granting authority may accept alternative evidence supporting the time worked for the action declared, if it considers that it offers an adequate level of assurance

(f) additional record-keeping rules: not applicable

The records and supporting documents must be made available upon request (see Article 19) or in the context of checks, reviews, audits or investigations (see Article 25).

If there are on-going checks, reviews, audits, investigations, litigation or other pursuits of claims under the Agreement (including the extension of findings; see Article 25), the beneficiaries must keep these records and other supporting documentation until the end of these procedures.

The beneficiaries must keep the original documents. Digital and digitalised documents are considered originals if they are authorised by the applicable national law. The granting authority may accept non-original documents if they offer a comparable level of assurance.

20.2 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, costs or contributions insufficiently substantiated will be ineligible (see Article 6) and will be rejected (see Article 27), and the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 21 — REPORTING

21.1 Continuous reporting

The beneficiaries must report on the progress of the action (e.g. **deliverables, milestones, outputs/ outcomes, critical risks, indicators,** etc; if any), in the Portal Continuous Reporting tool and in accordance with the timing and conditions it sets out (as agreed with the granting authority).

Standardised deliverables (e.g. progress reports not linked to payments, reports on cumulative expenditure, special reports, etc; if any) must be submitted using the templates published on the Portal.

21.2 Periodic reporting: Technical reports and financial statements

In addition, the beneficiaries must provide reports to request payments, in accordance with the schedule and modalities set out in the Data Sheet (see Point 4.2):

- for additional prefinancings (if any): an **additional prefinancing report**
- for interim payments (if any) and the final payment: a **periodic report**.

The prefinancing and periodic reports include a technical and financial part.

The technical part includes an overview of the action implementation. It must be prepared using the template available in the Portal Periodic Reporting tool.

The financial part of the additional prefinancing report includes a statement on the use of the previous prefinancing payment.

The financial part of the periodic report includes:

- the financial statements (individual and consolidated; for all beneficiaries/affiliated entities)
- the explanation on the use of resources (or detailed cost reporting table, if required)
- the certificates on the financial statements (CFS) (if required; see Article 24.2 and Data Sheet, Point 4.3).

The **financial statements** must detail the eligible costs and contributions for each budget category and, for the final payment, also the revenues for the action (see Articles 6 and 22).

All eligible costs and contributions incurred should be declared, even if they exceed the amounts indicated in the estimated budget (see Annex 2). Amounts that are not declared in the individual financial statements will not be taken into account by the granting authority.

By signing the financial statements (directly in the Portal Periodic Reporting tool), the beneficiaries confirm that:

- the information provided is complete, reliable and true
- the costs and contributions declared are eligible (see Article 6)

- the costs and contributions can be substantiated by adequate records and supporting documents (see Article 20) that will be produced upon request (see Article 19) or in the context of checks, reviews, audits and investigations (see Article 25)

- for the final periodic report: all the revenues have been declared (if required; see Article 22).

Beneficiaries will have to submit also the financial statements of their affiliated entities (if any). In case of recoveries (see Article 22), beneficiaries will be held responsible also for the financial statements of their affiliated entities.

21.3 Currency for financial statements and conversion into euros

The financial statements must be drafted in euro.

Beneficiaries with general accounts established in a currency other than the euro must convert the costs recorded in their accounts into euro, at the average of the daily exchange rates published in the C series of the *Official Journal of the European Union* (ECB website), calculated over the corresponding reporting period.

If no daily euro exchange rate is published in the *Official Journal* for the currency in question, they must be converted at the average of the monthly accounting exchange rates published on the European Commission website (InforEuro), calculated over the corresponding reporting period.

Beneficiaries with general accounts in euro must convert costs incurred in another currency into euro according to their usual accounting practices.

21.4 Reporting language

The reporting must be in the language of the Agreement, unless otherwise agreed with the granting authority (see Data Sheet, Point 4.2).

21.5 Consequences of non-compliance

If a report submitted does not comply with this Article, the granting authority may suspend the payment deadline (see Article 29) and apply other measures described in Chapter 5.

If the coordinator breaches its reporting obligations, the granting authority may terminate the grant or the coordinator's participation (see Article 32) or apply other measures described in Chapter 5.

ARTICLE 22 — PAYMENTS AND RECOVERIES — CALCULATION OF AMOUNTS DUE

22.1 Payments and payment arrangements

Payments will be made in accordance with the schedule and modalities set out in the Data Sheet (see Point 4.2).

They will be made in euro to the bank account indicated by the coordinator (see Data Sheet, Point 4.2) and must be distributed without unjustified delay (restrictions may apply to distribution of the initial prefinancing payment; see Data Sheet, Point 4.2).

Payments to this bank account will discharge the granting authority from its payment obligation.

The cost of payment transfers will be borne as follows:

- the granting authority bears the cost of transfers charged by its bank
- the beneficiary bears the cost of transfers charged by its bank
- the party causing a repetition of a transfer bears all costs of the repeated transfer.

Payments by the granting authority will be considered to have been carried out on the date when they are debited to its account.

22.2 Recoveries

Recoveries will be made, if — at beneficiary termination, final payment or afterwards — it turns out that the granting authority has paid too much and needs to recover the amounts undue.

The general liability regime for recoveries (first-line liability) is as follows: At final payment, the coordinator will be fully liable for recoveries, even if it has not been the final recipient of the undue amounts. At beneficiary termination or after final payment, recoveries will be made directly against the beneficiaries concerned.

Beneficiaries will be fully liable for repaying the debts of their affiliated entities.

In case of enforced recoveries (see Article 22.4):

- the beneficiaries will be jointly and severally liable for repaying debts of another beneficiary under the Agreement (including late-payment interest), if required by the granting authority (see Data Sheet, Point 4.4)
- affiliated entities will be held liable for repaying debts of their beneficiaries under the Agreement (including late-payment interest), if required by the granting authority (see Data Sheet, Point 4.4).

22.3 Amounts due

22.3.1 Prefinancing payments

The aim of the prefinancing is to provide the beneficiaries with a float.

It remains the property of the EU until the final payment.

For **initial prefinancings** (if any), the amount due, schedule and modalities are set out in the Data Sheet (see Point 4.2).

For **additional prefinancings** (if any), the amount due, schedule and modalities are also set out in the Data Sheet (see Point 4.2). However, if the statement on the use of the previous prefinancing payment shows that less than 70% was used, the amount set out in the Data Sheet will be reduced by the difference between the 70% threshold and the amount used.

Prefinancing payments (or parts of them) may be offset (without the beneficiaries' consent) against amounts owed by a beneficiary to the granting authority — up to the amount due to that beneficiary.

For grants where the granting authority is the European Commission or an EU executive agency,

offsetting may also be done against amounts owed to other Commission services or executive agencies.

Payments will not be made if the payment deadline or payments are suspended (see Articles 29 and 30).

22.3.2 Amount due at beneficiary termination — Recovery

In case of beneficiary termination, the granting authority will determine the provisional amount due for the beneficiary concerned. Payments (if any) will be made with the next interim or final payment.

The **amount due** will be calculated in the following step:

Step 1 — Calculation of the total accepted EU contribution

Step 1 — Calculation of the total accepted EU contribution

The granting authority will first calculate the 'accepted EU contribution' for the beneficiary for all reporting periods, by calculating the 'maximum EU contribution to costs' (applying the funding rate to the accepted costs of the beneficiary), taking into account requests for a lower contribution to costs and CFS threshold cappings (if any; see Article 24.5) and adding the contributions (accepted unit, flat-rate or lump sum contributions and financing not linked to costs, if any).

After that, the granting authority will take into account grant reductions (if any). The resulting amount is the 'total accepted EU contribution' for the beneficiary.

The **balance** is then calculated by deducting the payments received (if any; see report on the distribution of payments in Article 32), from the total accepted EU contribution:

{total accepted EU contribution for the beneficiary

minus

{prefinancing and interim payments received (if any)}}.

If the balance is **positive**, the amount will be included in the next interim or final payment to the consortium.

If the balance is **negative**, it will be **recovered** in accordance with the following procedure:

The granting authority will send a **pre-information letter** to the beneficiary concerned:

- formally notifying the intention to recover, the amount due, the amount to be recovered and the reasons why and
- requesting observations within 30 days of receiving notification.

If no observations are submitted (or the granting authority decides to pursue recovery despite the observations it has received), it will confirm the amount to be recovered and ask this amount to be paid to the coordinator (**confirmation letter**).

The amounts will later on also be taken into account for the next interim or final payment.

22.3.3 Interim payments

Interim payments reimburse the eligible costs and contributions claimed for the implementation of the action during the reporting periods (if any).

Interim payments (if any) will be made in accordance with the schedule and modalities set out the Data Sheet (see Point 4.2).

Payment is subject to the approval of the periodic report. Its approval does not imply recognition of compliance, authenticity, completeness or correctness of its content.

The **interim payment** will be calculated by the granting authority in the following steps:

Step 1 — Calculation of the total accepted EU contribution

Step 2 — Limit to the interim payment ceiling

Step 1 — Calculation of the total accepted EU contribution

The granting authority will calculate the 'accepted EU contribution' for the action for the reporting period, by first calculating the 'maximum EU contribution to costs' (applying the funding rate to the accepted costs of each beneficiary), taking into account requests for a lower contribution to costs and CFS threshold cappings (if any; see Article 24.5) and adding the contributions (accepted unit, flat-rate or lump sum contributions and financing not linked to costs, if any).

After that, the granting authority will take into account grant reductions from beneficiary termination (if any). The resulting amount is the 'total accepted EU contribution'.

Step 2 — Limit to the interim payment ceiling

The resulting amount is then capped to ensure that the total amount of prefinancing and interim payments (if any) does not exceed the interim payment ceiling set out in the Data Sheet (see Point 4.2).

Interim payments (or parts of them) may be offset (without the beneficiaries' consent) against amounts owed by a beneficiary to the granting authority — up to the amount due to that beneficiary.

For grants where the granting authority is the European Commission or an EU executive agency, offsetting may also be done against amounts owed to other Commission services or executive agencies.

Payments will not be made if the payment deadline or payments are suspended (see Articles 29 and 30).

22.3.4 Final payment — Final grant amount — Revenues and Profit — Recovery

The final payment (payment of the balance) reimburses the remaining part of the eligible costs and contributions claimed for the implementation of the action (if any).

The final payment will be made in accordance with the schedule and modalities set out in the Data Sheet (see Point 4.2).

Payment is subject to the approval of the final periodic report. Its approval does not imply recognition of compliance, authenticity, completeness or correctness of its content.

The **final grant amount for the action** will be calculated in the following steps:

Step 1 — Calculation of the total accepted EU contribution

Step 2 — Limit to the maximum grant amount

Step 3 — Reduction due to the no-profit rule

Step 1 — Calculation of the total accepted EU contribution

The granting authority will first calculate the 'accepted EU contribution' for the action for all reporting periods, by calculating the 'maximum EU contribution to costs' (applying the funding rate to the total accepted costs of each beneficiary), taking into account requests for a lower contribution to costs, CFS threshold cappings (if any; see Article 24.5) and adding the contributions (accepted unit, flat-rate or lump sum contributions and financing not linked to costs, if any).

After that, the granting authority will take into account grant reductions (if any). The resulting amount is the 'total accepted EU contribution'.

Step 2 — Limit to the maximum grant amount

If the resulting amount is higher than the maximum grant amount set out in Article 5.2, it will be limited to the latter.

Step 3 — Reduction due to the no-profit rule

If the no-profit rule is provided for in the Data Sheet (see Point 4.2), the grant must not produce a profit (i.e. surplus of the amount obtained following Step 2 plus the action's revenues, over the eligible costs and contributions approved by the granting authority).

'Revenue' is all income generated by the action, during its duration (see Article 4), for beneficiaries that are profit legal entities.

If there is a profit, it will be deducted in proportion to the final rate of reimbursement of the eligible costs approved by the granting authority (as compared to the amount calculated following Steps 1 and 2 minus the contributions).

The **balance** (final payment) is then calculated by deducting the total amount of prefinancing and interim payments already made (if any), from the final grant amount:

{final grant amount

minus

{prefinancing and interim payments made (if any)}}.

If the balance is **positive**, it will be **paid** to the coordinator.

The final payment (or part of it) may be offset (without the beneficiaries' consent) against amounts owed by a beneficiary to the granting authority — up to the amount due to that beneficiary.

For grants where the granting authority is the European Commission or an EU executive agency, offsetting may also be done against amounts owed to other Commission services or executive agencies.

Payments will not be made if the payment deadline or payments are suspended (see Articles 29 and 30).

If the balance is **negative**, it will be **recovered** in accordance with the following procedure:

The granting authority will send a **pre-information letter** to the coordinator:

- formally notifying the intention to recover, the final grant amount, the amount to be recovered and the reasons why
- requesting observations within 30 days of receiving notification.

If no observations are submitted (or the granting authority decides to pursue recovery despite the observations it has received), it will confirm the amount to be recovered (**confirmation letter**), together with a **debit note** with the terms and date for payment.

If payment is not made by the date specified in the debit note, the granting authority will **enforce recovery** in accordance with Article 22.4.

22.3.5 Audit implementation after final payment — Revised final grant amount — Recovery

If — after the final payment (in particular, after checks, reviews, audits or investigations; see Article 25) — the granting authority rejects costs or contributions (see Article 27) or reduces the grant (see Article 28), it will calculate the **revised final grant amount** for the beneficiary concerned.

The **beneficiary revised final grant amount** will be calculated in the following step:

Step 1 — Calculation of the revised total accepted EU contribution

Step 1 — Calculation of the revised total accepted EU contribution

The granting authority will first calculate the 'revised accepted EU contribution' for the beneficiary, by calculating the 'revised accepted costs' and 'revised accepted contributions'.

After that, it will take into account grant reductions (if any). The resulting 'revised total accepted EU contribution' is the beneficiary revised final grant amount.

If the revised final grant amount is lower than the beneficiary's final grant amount (i.e. its share in the final grant amount for the action), it will be **recovered** in accordance with the following procedure:

The **beneficiary final grant amount** (i.e. share in the final grant amount for the action) is calculated as follows:

{{total accepted EU contribution for the beneficiary

divided by

total accepted EU contribution for the action}

multiplied by

final grant amount for the action}.

The granting authority will send a **pre-information letter** to the beneficiary concerned:

- formally notifying the intention to recover, the amount to be recovered and the reasons why and
- requesting observations within 30 days of receiving notification.

If no observations are submitted (or the granting authority decides to pursue recovery despite the observations it has received), it will confirm the amount to be recovered (**confirmation letter**), together with a **debit note** with the terms and the date for payment.

Recoveries against affiliated entities (if any) will be handled through their beneficiaries.

If payment is not made by the date specified in the debit note, the granting authority will **enforce recovery** in accordance with Article 22.4.

22.4 Enforced recovery

If payment is not made by the date specified in the debit note, the amount due will be recovered:

(a) by offsetting the amount — without the coordinator or beneficiary's consent — against any amounts owed to the coordinator or beneficiary by the granting authority.

In exceptional circumstances, to safeguard the EU financial interests, the amount may be offset before the payment date specified in the debit note.

For grants where the granting authority is the European Commission or an EU executive agency, debts may also be offset against amounts owed by other Commission services or executive agencies.

(b) by drawing on the financial guarantee(s) (if any)

(c) by holding other beneficiaries jointly and severally liable (if any; see Data Sheet, Point 4.4)

(d) by holding affiliated entities jointly and severally liable (if any, see Data Sheet, Point 4.4)

(e) by taking legal action (see Article 43) or, provided that the granting authority is the European Commission or an EU executive agency, by adopting an enforceable decision under Article 299 of the Treaty on the Functioning of the EU (TFEU) and Article 100(2) of EU Financial Regulation 2024/2509.

The amount to be recovered will be increased by **late-payment interest** at the rate set out in Article 22.5, from the day following the payment date in the debit note, up to and including the date the full payment is received.

Partial payments will be first credited against expenses, charges and late-payment interest and then against the principal.

Bank charges incurred in the recovery process will be borne by the beneficiary, unless Directive 2015/2366[22] applies.

[22] Directive (EU) 2015/2366 of the European Parliament and of the Council of 25 November 2015 on payment services in the internal market, amending Directives 2002/65/EC, 2009/110/EC and 2013/36/EU and Regulation (EU) No 1093/2010, and repealing Directive 2007/64/EC (OJ L 337, 23.12.2015, p. 35).

For grants where the granting authority is an EU executive agency, enforced recovery by offsetting or enforceable decision will be done by the services of the European Commission (see also Article 43).

22.5 Consequences of non-compliance

22.5.1 If the granting authority does not pay within the payment deadlines (see above), the beneficiaries are entitled to **late-payment interest** at the rate applied by the European Central Bank (ECB) for its main refinancing operations in euros ('reference rate'), plus the rate specified in the Data Sheet (Point 4.2). The reference rate is the rate in force on the first day of the month in which the payment deadline expires, as published in the C series of the *Official Journal of the European Union*.

If the late-payment interest is lower than or equal to EUR 200, it will be paid to the coordinator only on request submitted within two months of receiving the late payment.

Late-payment interest is not due if all beneficiaries are EU Member States (including regional and local government authorities or other public bodies acting on behalf of a Member State for the purpose of this Agreement).

If payments or the payment deadline are suspended (see Articles 29 and 30), payment will not be considered as late.

Late-payment interest covers the period running from the day following the due date for payment (see above), up to and including the date of payment.

Late-payment interest is not considered for the purposes of calculating the final grant amount.

22.5.2 If the coordinator breaches any of its obligations under this Article, the grant may be reduced (see Article 28) and the grant or the coordinator may be terminated (see Article 32).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 23 — GUARANTEES

23.1 Prefinancing guarantee

If required by the granting authority (see Data Sheet, Point 4.2), the beneficiaries must provide (one or more) prefinancing guarantee(s) in accordance with the timing and the amounts set out in the Data Sheet.

The coordinator must submit them to the granting authority in due time before the prefinancing they are linked to.

The guarantees must be drawn up using the template published on the Portal and fulfil the following conditions:

(a) be provided by a bank or approved financial institution established in the EU or — if requested by the coordinator and accepted by the granting authority — by a third party or a bank or financial institution established outside the EU offering equivalent security

(b) the guarantor stands as first-call guarantor and does not require the granting authority to first have recourse against the principal debtor (i.e. the beneficiary concerned) and

(c) remain explicitly in force until the final payment and, if the final payment takes the form of a recovery, until five months after the debit note is notified to a beneficiary.

They will be released within the following month.

23.2 Consequences of non-compliance

If the beneficiaries breach their obligation to provide the prefinancing guarantee, the prefinancing will not be paid.

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 24 — CERTIFICATES

24.1 Operational verification report (OVR)

Not applicable

24.2 Certificate on the financial statements (CFS)

If required by the granting authority (see Data Sheet, Point 4.3), the beneficiaries must provide certificates on their financial statements (CFS), in accordance with the schedule, threshold and conditions set out in the Data Sheet.

The coordinator must submit them as part of the periodic report (see Article 21).

The certificates must be drawn up using the template published on the Portal, cover the costs declared on the basis of actual costs and costs according to usual cost accounting practices (if any), and fulfil the following conditions:

(a) be provided by a qualified approved external auditor which is independent and complies with Directive 2006/43/EC[23] (or for public bodies: by a competent independent public officer)

(b) the verification must be carried out according to the highest professional standards to ensure that the financial statements comply with the provisions under the Agreement and that the costs declared are eligible.

The certificates will not affect the granting authority's right to carry out its own checks, reviews or audits, nor preclude the European Court of Auditors (ECA), the European Public Prosecutor’s Office (EPPO) or the European Anti-Fraud Office (OLAF) from using their prerogatives for audits and investigations under the Agreement (see Article 25).

If the costs (or a part of them) were already audited by the granting authority, these costs do not need to be covered by the certificate and will not be counted for calculating the threshold (if any).

24.3 Certificate on the compliance of usual cost accounting practices (CoMUC)

Not applicable

[23] Directive 2006/43/EC of the European Parliament and of the Council of 17 May 2006 on statutory audits of annual accounts and consolidated accounts (OJ L 157, 9.6.2006, p. 87).

24.4 Systems and process audit (SPA)

Not applicable

24.5 Consequences of non-compliance

If a beneficiary does not submit a certificate on the financial statements (CFS) or the certificate is rejected, the accepted EU contribution to costs will be capped to reflect the CFS threshold.

If a beneficiary breaches any of its other obligations under this Article, the granting authority may apply the measures described in Chapter 5.

ARTICLE 25 — CHECKS, REVIEWS, AUDITS AND INVESTIGATIONS — EXTENSION OF FINDINGS

25.1 Granting authority checks, reviews and audits

25.1.1 Internal checks

The granting authority may — during the action or afterwards — check the proper implementation of the action and compliance with the obligations under the Agreement, including assessing costs and contributions, deliverables and reports.

25.1.2 Project reviews

The granting authority may carry out reviews on the proper implementation of the action and compliance with the obligations under the Agreement (general project reviews or specific issues reviews).

Such project reviews may be started during the implementation of the action and until the time-limit set out in the Data Sheet (see Point 6). They will be formally notified to the coordinator or beneficiary concerned and will be considered to start on the date of the notification.

If needed, the granting authority may be assisted by independent, outside experts. If it uses outside experts, the coordinator or beneficiary concerned will be informed and have the right to object on grounds of commercial confidentiality or conflict of interest.

The coordinator or beneficiary concerned must cooperate diligently and provide — within the deadline requested — any information and data in addition to deliverables and reports already submitted (including information on the use of resources). The granting authority may request beneficiaries to provide such information to it directly. Sensitive information and documents will be treated in accordance with Article 13.

The coordinator or beneficiary concerned may be requested to participate in meetings, including with the outside experts.

For **on-the-spot visits**, the beneficiary concerned must allow access to sites and premises (including to the outside experts) and must ensure that information requested is readily available.

Information provided must be accurate, precise and complete and in the format requested, including electronic format.

On the basis of the review findings, a **project review report** will be drawn up.

The granting authority will formally notify the project review report to the coordinator or beneficiary concerned, which has 30 days from receiving notification to make observations.

Project reviews (including project review reports) will be in the language of the Agreement, unless otherwise agreed with the granting authority (see Data Sheet, Point 4.2).

25.1.3 Audits

The granting authority may carry out audits on the proper implementation of the action and compliance with the obligations under the Agreement.

Such audits may be started during the implementation of the action and until the time-limit set out in the Data Sheet (see Point 6). They will be formally notified to the beneficiary concerned and will be considered to start on the date of the notification.

The granting authority may use its own audit service, delegate audits to a centralised service or use external audit firms. If it uses an external firm, the beneficiary concerned will be informed and have the right to object on grounds of commercial confidentiality or conflict of interest.

The beneficiary concerned must cooperate diligently and provide — within the deadline requested — any information (including complete accounts, individual salary statements or other personal data) to verify compliance with the Agreement. Sensitive information and documents will be treated in accordance with Article 13.

For **on-the-spot** visits, the beneficiary concerned must allow access to sites and premises (including for the external audit firm) and must ensure that information requested is readily available.

Information provided must be accurate, precise and complete and in the format requested, including electronic format.

On the basis of the audit findings, a **draft audit report** will be drawn up.

The auditors will formally notify the draft audit report to the beneficiary concerned, which has 30 days from receiving notification to make observations (contradictory audit procedure).

The **final audit report** will take into account observations by the beneficiary concerned and will be formally notified to them.

Audits (including audit reports) will be in the language of the Agreement, unless otherwise agreed with the granting authority (see Data Sheet, Point 4.2).

25.2 European Commission checks, reviews and audits in grants of other granting authorities

Where the granting authority is not the European Commission, the latter has the same rights of checks, reviews and audits as the granting authority.

25.3 Access to records for assessing simplified forms of funding

The beneficiaries must give the European Commission access to their statutory records for the periodic assessment of simplified forms of funding which are used in EU programmes.

25.4 OLAF, EPPO and ECA audits and investigations

The following bodies may also carry out checks, reviews, audits and investigations — during the action or afterwards:

- the European Anti-Fraud Office (OLAF) under Regulations No 883/2013[24] and No 2185/96[25]
- the European Public Prosecutor's Office (EPPO) under Regulation 2017/1939
- the European Court of Auditors (ECA) under Article 287 of the Treaty on the Functioning of the EU (TFEU) and Article 263 of EU Financial Regulation 2024/2509.

If requested by these bodies, the beneficiary concerned must provide full, accurate and complete information in the format requested (including complete accounts, individual salary statements or other personal data, including in electronic format) and allow access to sites and premises for on-the-spot visits or inspections — as provided for under these Regulations.

To this end, the beneficiary concerned must keep all relevant information relating to the action, at least until the time-limit set out in the Data Sheet (Point 6) and, in any case, until any ongoing checks, reviews, audits, investigations, litigation or other pursuits of claims have been concluded.

25.5 Consequences of checks, reviews, audits and investigations — Extension of results of reviews, audits or investigations

25.5.1 Consequences of checks, reviews, audits and investigations in this grant

Findings in checks, reviews, audits or investigations carried out in the context of this grant may lead to rejections (see Article 27), grant reduction (see Article 28) or other measures described in Chapter 5.

Rejections or grant reductions after the final payment will lead to a revised final grant amount (see Article 22).

Findings in checks, reviews, audits or investigations during the action implementation may lead to a request for amendment (see Article 39), to change the description of the action set out in Annex 1.

Checks, reviews, audits or investigations that find systemic or recurrent errors, irregularities, fraud or breach of obligations in any EU grant may also lead to consequences in other EU grants awarded under similar conditions ('extension to other grants').

Moreover, findings arising from an OLAF or EPPO investigation may lead to criminal prosecution under national law.

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[24] Regulation (EU, Euratom) No 883/2013 of the European Parliament and of the Council of 11 September 2013 concerning investigations conducted by the European Anti-Fraud Office (OLAF) and repealing Regulation (EC) No 1073/1999 of the European Parliament and of the Council and Council Regulation (Euratom) No 1074/1999 (OJ L 248, 18/09/2013, p. 1).

[25] Council Regulation (Euratom, EC) No 2185/96 of 11 November 1996 concerning on-the-spot checks and inspections carried out by the Commission in order to protect the European Communities' financial interests against fraud and other irregularities (OJ L 292, 15/11/1996, p. 2).

25.5.2 Extension from other grants

Results of checks, reviews, audits or investigations in other grants may be extended to this grant, if:

(a) the beneficiary concerned is found, in other EU grants awarded under similar conditions, to have committed systemic or recurrent errors, irregularities, fraud or breach of obligations that have a material impact on this grant and

(b) those findings are formally notified to the beneficiary concerned — together with the list of grants affected by the findings — within the time-limit for audits set out in the Data Sheet (see Point 6).

The granting authority will formally notify the beneficiary concerned of the intention to extend the findings and the list of grants affected.

If the extension concerns **rejections of costs or contributions**: the notification will include:

(a) an invitation to submit observations on the list of grants affected by the findings

(b) the request to submit revised financial statements for all grants affected

(c) the correction rate for extrapolation, established on the basis of the systemic or recurrent errors, to calculate the amounts to be rejected, if the beneficiary concerned:

(i) considers that the submission of revised financial statements is not possible or practicable or

(ii) does not submit revised financial statements.

If the extension concerns **grant reductions**: the notification will include:

(a) an invitation to submit observations on the list of grants affected by the findings and

(b) the **correction rate for extrapolation**, established on the basis of the systemic or recurrent errors and the principle of proportionality.

The beneficiary concerned has **60 days** from receiving notification to submit observations, revised financial statements or to propose a duly substantiated **alternative correction method/rate**.

On the basis of this, the granting authority will analyse the impact and decide on the implementation (i.e. start rejection or grant reduction procedures, either on the basis of the revised financial statements or the announced/alternative method/rate or a mix of those; see Articles 27 and 28).

25.6 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, costs or contributions insufficiently substantiated will be ineligible (see Article 6) and will be rejected (see Article 27), and the grant may be reduced (see Article 28).

Such breaches may also lead to other measures described in Chapter 5.

ARTICLE 26 — IMPACT EVALUATIONS

26.1 Impact evaluation

The granting authority may carry out impact evaluations of the action, measured against the objectives and indicators of the EU programme funding the grant.

Such evaluations may be started during implementation of the action and until the time-limit set out in the Data Sheet (see Point 6). They will be formally notified to the coordinator or beneficiaries and will be considered to start on the date of the notification.

If needed, the granting authority may be assisted by independent outside experts.

The coordinator or beneficiaries must provide any information relevant to evaluate the impact of the action, including information in electronic format.

26.2 Consequences of non-compliance

If a beneficiary breaches any of its obligations under this Article, the granting authority may apply the measures described in Chapter 5.

CHAPTER 5 CONSEQUENCES OF NON-COMPLIANCE

SECTION 1 REJECTIONS AND GRANT REDUCTION

ARTICLE 27 — REJECTION OF COSTS AND CONTRIBUTIONS

27.1 Conditions

The granting authority will — at beneficiary termination, interim payment, final payment or afterwards — reject any costs or contributions which are ineligible (see Article 6), in particular following checks, reviews, audits or investigations (see Article 25).

The rejection may also be based on the extension of findings from other grants to this grant (see Article 25).

Ineligible costs or contributions will be rejected.

27.2 Procedure

If the rejection does not lead to a recovery, the granting authority will formally notify the coordinator or beneficiary concerned of the rejection, the amounts and the reasons why. The coordinator or beneficiary concerned may — within 30 days of receiving notification — submit observations if it disagrees with the rejection (payment review procedure).

If the rejection leads to a recovery, the granting authority will follow the contradictory procedure with pre-information letter set out in Article 22.

27.3 Effects

If the granting authority rejects costs or contributions, it will deduct them from the costs or

contributions declared and then calculate the amount due (and, if needed, make a recovery; see Article 22).

ARTICLE 28 — GRANT REDUCTION

28.1 Conditions

The granting authority may — at beneficiary termination, final payment or afterwards — reduce the grant for a beneficiary, if:

(a) the beneficiary (or a person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed:

(i) substantial errors, irregularities or fraud or

(ii) serious breach of obligations under this Agreement or during its award (including improper implementation of the action, non-compliance with the call conditions, submission of false information, failure to provide required information, breach of ethics or security rules (if applicable), failure to cooperate with checks, reviews, audits and investigations, etc.), or

(b) the beneficiary (or a person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed — in other EU grants awarded to it under similar conditions — systemic or recurrent errors, irregularities, fraud or serious breach of obligations that have a material impact on this grant (see Article 25).

The amount of the reduction will be calculated for each beneficiary concerned and proportionate to the seriousness and the duration of the errors, irregularities or fraud or breach of obligations, by applying an individual reduction rate to their accepted EU contribution.

28.2 Procedure

If the grant reduction does not lead to a recovery, the granting authority will formally notify the coordinator or beneficiary concerned of the reduction, the amount to be reduced and the reasons why. The coordinator or beneficiary concerned may — within 30 days of receiving notification — submit observations if it disagrees with the reduction (payment review procedure).

If the grant reduction leads to a recovery, the granting authority will follow the contradictory procedure with pre-information letter set out in Article 22.

28.3 Effects

If the granting authority reduces the grant, it will deduct the reduction and then calculate the amount due (and, if needed, make a recovery; see Article 22).

SECTION 2 SUSPENSION AND TERMINATION

ARTICLE 29 — PAYMENT DEADLINE SUSPENSION

29.1 Conditions

The granting authority may — at any moment — suspend the payment deadline if a payment cannot be processed because:

(a) the required report (see Article 21) has not been submitted or is not complete or additional information is needed

(b) there are doubts about the amount to be paid (e.g. ongoing audit extension procedure, queries about eligibility, need for a grant reduction, etc.) and additional checks, reviews, audits or investigations are necessary, or

(c) there are other issues affecting the EU financial interests.

29.2 Procedure

The granting authority will formally notify the coordinator of the suspension and the reasons why.

The suspension will **take effect** the day the notification is sent.

If the conditions for suspending the payment deadline are no longer met, the suspension will be **lifted** — and the remaining time to pay (see Data Sheet, Point 4.2) will resume.

If the suspension exceeds two months, the coordinator may request the granting authority to confirm if the suspension will continue.

If the payment deadline has been suspended due to the non-compliance of the report and the revised report is not submitted (or was submitted but is also rejected), the granting authority may also terminate the grant or the participation of the coordinator (see Article 32).

ARTICLE 30 — PAYMENT SUSPENSION

30.1 Conditions

The granting authority may — at any moment — suspend payments, in whole or in part for one or more beneficiaries, if:

(a) a beneficiary (or a person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed or is suspected of having committed:

  (i) substantial errors, irregularities or fraud or

  (ii) serious breach of obligations under this Agreement or during its award (including improper implementation of the action, non-compliance with the call conditions, submission of false information, failure to provide required information, breach of ethics or security rules (if applicable), failure to cooperate with checks, reviews, audits and investigations, etc.), or

(b) a beneficiary (or a person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed — in other EU grants awarded to it under similar conditions — systemic or recurrent errors, irregularities, fraud or serious breach of obligations that have a material impact on this grant.

If payments are suspended for one or more beneficiaries, the granting authority will make partial payment(s) for the part(s) not suspended. If suspension concerns the final payment, the payment (or recovery) of the remaining amount after suspension is lifted will be considered to be the payment that closes the action.

30.2 Procedure

Before suspending payments, the granting authority will send a **pre-information letter** to the beneficiary concerned:

- formally notifying the intention to suspend payments and the reasons why and
- requesting observations within 30 days of receiving notification.

If the granting authority does not receive observations or decides to pursue the procedure despite the observations it has received, it will confirm the suspension (**confirmation letter**). Otherwise, it will formally notify that the procedure is discontinued.

At the end of the suspension procedure, the granting authority will also inform the coordinator.

The suspension will **take effect** the day after the confirmation notification is sent.

If the conditions for resuming payments are met, the suspension will be **lifted**. The granting authority will formally notify the beneficiary concerned (and the coordinator) and set the suspension end date.

During the suspension, no prefinancing will be paid to the beneficiaries concerned. For interim payments, the periodic reports for all reporting periods except the last one (see Article 21) must not contain any financial statements from the beneficiary concerned (or its affiliated entities). The coordinator must include them in the next periodic report after the suspension is lifted or — if suspension is not lifted before the end of the action — in the last periodic report.

ARTICLE 31 — GRANT AGREEMENT SUSPENSION

31.1 Consortium-requested GA suspension

31.1.1 Conditions and procedure

The beneficiaries may request the suspension of the grant or any part of it, if exceptional circumstances — in particular *force majeure* (see Article 35) — make implementation impossible or excessively difficult.

The coordinator must submit a request for **amendment** (see Article 39), with:

- the reasons why
- the date the suspension takes effect; this date may be before the date of the submission of the amendment request and
- the expected date of resumption.

The suspension will **take effect** on the day specified in the amendment.

Once circumstances allow for implementation to resume, the coordinator must immediately request another **amendment** of the Agreement to set the suspension end date, the resumption date (one day after suspension end date), extend the duration and make other changes necessary to adapt the action to the new situation (see Article 39) — unless the grant has been terminated (see Article 32). The suspension will be **lifted** with effect from the suspension end date set out in the amendment. This date may be before the date of the submission of the amendment request.

During the suspension, no prefinancing will be paid. Costs incurred or contributions for activities implemented during grant suspension are not eligible (see Article 6.3).

31.2 EU-initiated GA suspension

31.2.1 Conditions

The granting authority may suspend the grant or any part of it, if:

(a) a beneficiary (or a person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed or is suspected of having committed:

  (i) substantial errors, irregularities or fraud or

  (ii) serious breach of obligations under this Agreement or during its award (including improper implementation of the action, non-compliance with the call conditions, submission of false information, failure to provide required information, breach of ethics or security rules (if applicable), failure to cooperate with checks, reviews, audits and investigations, etc.), or

(b) a beneficiary (or a person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed — in other EU grants awarded to it under similar conditions — systemic or recurrent errors, irregularities, fraud or serious breach of obligations that have a material impact on this grant

(c) other:

  (i) linked action issues: not applicable

  (ii) additional GA suspension grounds: not applicable.

31.2.2 Procedure

Before suspending the grant, the granting authority will send a **pre-information letter** to the coordinator:

- formally notifying the intention to suspend the grant and the reasons why and
- requesting observations within 30 days of receiving notification.

If the granting authority does not receive observations or decides to pursue the procedure despite the observations it has received, it will confirm the suspension (**confirmation letter**). Otherwise, it will formally notify that the procedure is discontinued.

The suspension will **take effect** the day after the confirmation notification is sent (or on a later date specified in the notification).

Once the conditions for resuming implementation of the action are met, the granting authority will formally notify the coordinator a **lifting of suspension letter**, in which it will set the suspension end date and invite the coordinator to request an amendment of the Agreement to set the resumption date (one day after suspension end date), extend the duration and make other changes necessary to adapt the action to the new situation (see Article 39) — unless the grant has been terminated (see Article 32). The suspension will be **lifted** with effect from the suspension end date set out in the lifting of suspension letter. This date may be before the date on which the letter is sent.

During the suspension, no prefinancing will be paid. Costs incurred or contributions for activities implemented during suspension are not eligible (see Article 6.3).

The beneficiaries may not claim damages due to suspension by the granting authority (see Article 33).

Grant suspension does not affect the granting authority's right to terminate the grant or a beneficiary (see Article 32) or reduce the grant (see Article 28).

ARTICLE 32 — GRANT AGREEMENT OR BENEFICIARY TERMINATION

32.1 Consortium-requested GA termination

32.1.1 Conditions and procedure

The beneficiaries may request the termination of the grant.

The coordinator must submit a request for **amendment** (see Article 39), with:

- the reasons why
- the date the consortium ends work on the action ('end of work date') and
- the date the termination takes effect ('termination date'); this date must be after the date of the submission of the amendment request.

The termination will **take effect** on the termination date specified in the amendment.

If no reasons are given or if the granting authority considers the reasons do not justify termination, it may consider the grant terminated improperly.

32.1.2 Effects

The coordinator must — within 60 days from when termination takes effect — submit a **periodic report** (for the open reporting period until termination).

The granting authority will calculate the final grant amount and final payment on the basis of the report submitted and taking into account the costs incurred and contributions for activities implemented before the end of work date (see Article 22). Costs relating to contracts due for execution only after the end of work are not eligible.

If the granting authority does not receive the report within the deadline, only costs and contributions

which are included in an approved periodic report will be taken into account (no costs/contributions if no periodic report was ever approved).

Improper termination may lead to a grant reduction (see Article 28).

After termination, the beneficiaries' obligations (in particular Articles 13 (confidentiality and security), 16 (IPR), 17 (communication, dissemination and visibility), 21 (reporting), 25 (checks, reviews, audits and investigations), 26 (impact evaluation), 27 (rejections), 28 (grant reduction) and 42 (assignment of claims)) continue to apply.

32.2 Consortium-requested beneficiary termination

32.2.1 Conditions and procedure

The coordinator may request the termination of the participation of one or more beneficiaries, on request of the beneficiary concerned or on behalf of the other beneficiaries.

The coordinator must submit a request for **amendment** (see Article 39), with:

- the reasons why
- the opinion of the beneficiary concerned (or proof that this opinion has been requested in writing)
- the date the beneficiary ends work on the action ('end of work date')
- the date the termination takes effect ('termination date'); this date must be after the date of the submission of the amendment request.

If the termination concerns the coordinator and is done without its agreement, the amendment request must be submitted by another beneficiary (acting on behalf of the consortium).

The termination will **take effect** on the termination date specified in the amendment.

If no information is given or if the granting authority considers that the reasons do not justify termination, it may consider the beneficiary to have been terminated improperly.

32.2.2 Effects

The coordinator must — within 60 days from when termination takes effect — submit:

(i) a **report on the distribution of payments** to the beneficiary concerned

(ii) a **termination report** from the beneficiary concerned, for the open reporting period until termination, containing an overview of the progress of the work, the financial statement, the explanation on the use of resources, and, if applicable, the certificate on the financial statement (CFS; see Articles 21 and 24.2 and Data Sheet, Point 4.3)

(iii) a second **request for amendment** (see Article 39) with other amendments needed (e.g. reallocation of the tasks and the estimated budget of the terminated beneficiary; addition of a new beneficiary to replace the terminated beneficiary; change of coordinator, etc.).

The granting authority will calculate the amount due to the beneficiary on the basis of the report

submitted and taking into account the costs incurred and contributions for activities implemented before the end of work date (see Article 22). Costs relating to contracts due for execution only after the end of work are not eligible.

The information in the termination report must also be included in the periodic report for the next reporting period (see Article 21).

If the granting authority does not receive the termination report within the deadline, only costs and contributions which are included in an approved periodic report will be taken into account (no costs/ contributions if no periodic report was ever approved).

If the granting authority does not receive the report on the distribution of payments within the deadline, it will consider that:

- the coordinator did not distribute any payment to the beneficiary concerned and that
- the beneficiary concerned must not repay any amount to the coordinator.

If the second request for amendment is accepted by the granting authority, the Agreement is **amended** to introduce the necessary changes (see Article 39).

If the second request for amendment is rejected by the granting authority (because it calls into question the decision awarding the grant or breaches the principle of equal treatment of applicants), the grant may be terminated (see Article 32).

Improper termination may lead to a reduction of the grant (see Article 31) or grant termination (see Article 32).

After termination, the concerned beneficiary's obligations (in particular Articles 13 (confidentiality and security), 16 (IPR), 17 (communication, dissemination and visibility), 21 (reporting), 25 (checks, reviews, audits and investigations), 26 (impact evaluation), 27 (rejections), 28 (grant reduction) and 42 (assignment of claims)) continue to apply.

32.3 EU-initiated GA or beneficiary termination

32.3.1 Conditions

The granting authority may terminate the grant or the participation of one or more beneficiaries, if:

(a) one or more beneficiaries do not accede to the Agreement (see Article 40)

(b) a change to the action or the legal, financial, technical, organisational or ownership situation of a beneficiary is likely to substantially affect the implementation of the action or calls into question the decision to award the grant (including changes linked to one of the exclusion grounds listed in the declaration of honour)

(c) following termination of one or more beneficiaries, the necessary changes to the Agreement (and their impact on the action) would call into question the decision awarding the grant or breach the principle of equal treatment of applicants

(d) implementation of the action has become impossible or the changes necessary for its

continuation would call into question the decision awarding the grant or breach the principle of equal treatment of applicants

(e) a beneficiary (or person with unlimited liability for its debts) is subject to bankruptcy proceedings or similar (including insolvency, winding-up, administration by a liquidator or court, arrangement with creditors, suspension of business activities, etc.)

(f) a beneficiary (or person with unlimited liability for its debts) is in breach of social security or tax obligations

(g) a beneficiary (or person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has been found guilty of grave professional misconduct

(h) a beneficiary (or person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed fraud, corruption, or is involved in a criminal organisation, money laundering, terrorism-related crimes (including terrorism financing), child labour or human trafficking

(i) a beneficiary (or person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) was created under a different jurisdiction with the intent to circumvent fiscal, social or other legal obligations in the country of origin (or created another entity with this purpose)

(j) a beneficiary (or person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed:

  (i) substantial errors, irregularities or fraud or

  (ii) serious breach of obligations under this Agreement or during its award (including improper implementation of the action, non-compliance with the call conditions, submission of false information, failure to provide required information, breach of ethics or security rules (if applicable), failure to cooperate with checks, reviews, audits and investigations, etc.)

(k) a beneficiary (or person having powers of representation, decision-making or control, or person essential for the award/implementation of the grant) has committed — in other EU grants awarded to it under similar conditions — systemic or recurrent errors, irregularities, fraud or serious breach of obligations that have a material impact on this grant (extension of findings from other grants to this grant; see Article 25)

(l) despite a specific request by the granting authority, a beneficiary does not request — through the coordinator — an amendment to the Agreement to end the participation of one of its affiliated entities or associated partners that is in one of the situations under points (d), (f), (e), (g), (h), (i) or (j) and to reallocate its tasks, or

(m) other:

  (i) linked action issues: not applicable

  (ii) additional GA termination grounds: not applicable.

32.3.2 Procedure

Before terminating the grant or participation of one or more beneficiaries, the granting authority will send **a pre-information letter** to the coordinator or beneficiary concerned:

- formally notifying the intention to terminate and the reasons why and
- requesting observations within 30 days of receiving notification.

If the granting authority does not receive observations or decides to pursue the procedure despite the observations it has received, it will confirm the termination and the date it will take effect (**confirmation letter**). Otherwise, it will formally notify that the procedure is discontinued.

For beneficiary terminations, the granting authority will — at the end of the procedure — also inform the coordinator.

The termination will **take effect** the day after the confirmation notification is sent (or on a later date specified in the notification; 'termination date').

32.3.3 Effects

(a) for **GA termination**:

The coordinator must — within 60 days from when termination takes effect — submit a **periodic report** (for the last open reporting period until termination).

The granting authority will calculate the final grant amount and final payment on the basis of the report submitted and taking into account the costs incurred and contributions for activities implemented before termination takes effect (see Article 22). Costs relating to contracts due for execution only after termination are not eligible.

If the grant is terminated for breach of the obligation to submit reports, the coordinator may not submit any report after termination.

If the granting authority does not receive the report within the deadline, only costs and contributions which are included in an approved periodic report will be taken into account (no costs/contributions if no periodic report was ever approved).

Termination does not affect the granting authority's right to reduce the grant (see Article 28) or to impose administrative sanctions (see Article 34).

The beneficiaries may not claim damages due to termination by the granting authority (see Article 33).

After termination, the beneficiaries' obligations (in particular Articles 13 (confidentiality and security), 16 (IPR), 17 (communication, dissemination and visibility), 21 (reporting), 25 (checks, reviews, audits and investigations), 26 (impact evaluation), 27 (rejections), 28 (grant reduction) and 42 (assignment of claims)) continue to apply.

(b) for **beneficiary termination**:

The coordinator must — within 60 days from when termination takes effect — submit:

(i) a **report on the distribution of payments** to the beneficiary concerned

(ii) a **termination report** from the beneficiary concerned, for the open reporting period until termination, containing an overview of the progress of the work, the financial statement, the explanation on the use of resources, and, if applicable, the certificate on the financial statement (CFS; see Articles 21 and 24.2 and Data Sheet, Point 4.3)

(iii) a **request for amendment** (see Article 39) with any amendments needed (e.g. reallocation of the tasks and the estimated budget of the terminated beneficiary; addition of a new beneficiary to replace the terminated beneficiary; change of coordinator, etc.).

The granting authority will calculate the amount due to the beneficiary on the basis of the report submitted and taking into account the costs incurred and contributions for activities implemented before termination takes effect (see Article 22). Costs relating to contracts due for execution only after termination are not eligible.

The information in the termination report must also be included in the periodic report for the next reporting period (see Article 21).

If the granting authority does not receive the termination report within the deadline, only costs and contributions included in an approved periodic report will be taken into account (no costs/ contributions if no periodic report was ever approved).

If the granting authority does not receive the report on the distribution of payments within the deadline, it will consider that:

- the coordinator did not distribute any payment to the beneficiary concerned and that
- the beneficiary concerned must not repay any amount to the coordinator.

If the request for amendment is accepted by the granting authority, the Agreement is **amended** to introduce the necessary changes (see Article 39).

If the request for amendment is rejected by the granting authority (because it calls into question the decision awarding the grant or breaches the principle of equal treatment of applicants), the grant may be terminated (see Article 32).

After termination, the concerned beneficiary's obligations (in particular Articles 13 (confidentiality and security), 16 (IPR), 17 (communication, dissemination and visibility), 21 (reporting), 25 (checks, reviews, audits and investigations), 26 (impact evaluation), 27 (rejections), 28 (grant reduction) and 42 (assignment of claims)) continue to apply.

SECTION 3 OTHER CONSEQUENCES: DAMAGES AND ADMINISTRATIVE SANCTIONS

ARTICLE 33 — DAMAGES

33.1 Liability of the granting authority

The granting authority cannot be held liable for any damage caused to the beneficiaries or to third parties as a consequence of the implementation of the Agreement, including for gross negligence.

The granting authority cannot be held liable for any damage caused by any of the beneficiaries or other participants involved in the action, as a consequence of the implementation of the Agreement.

33.2 Liability of the beneficiaries

The beneficiaries must compensate the granting authority for any damage it sustains as a result of the implementation of the action or because the action was not implemented in full compliance with the Agreement, provided that it was caused by gross negligence or wilful act.

The liability does not extend to indirect or consequential losses or similar damage (such as loss of profit, loss of revenue or loss of contracts), provided such damage was not caused by wilful act or by a breach of confidentiality.

ARTICLE 34 — ADMINISTRATIVE SANCTIONS AND OTHER MEASURES

Nothing in this Agreement may be construed as preventing the adoption of administrative sanctions (i.e. exclusion from EU award procedures and/or financial penalties) or other public law measures, in addition or as an alternative to the contractual measures provided under this Agreement (see, for instance, Articles 137 to 148 EU Financial Regulation 2024/2509 and Articles 4 and 7 of Regulation 2988/95[26]).

SECTION 4 FORCE MAJEURE

ARTICLE 35 — FORCE MAJEURE

A party prevented by force majeure from fulfilling its obligations under the Agreement cannot be considered in breach of them.

‘Force majeure’ means any situation or event that:

- prevents either party from fulfilling their obligations under the Agreement
- was unforeseeable, exceptional situation and beyond the parties’ control
- was not due to error or negligence on their part (or on the part of other participants involved in the action) and
- proves to be inevitable in spite of exercising all due diligence.

Any situation constituting force majeure must be formally notified to the other party without delay, stating the nature, likely duration and foreseeable effects.

The parties must immediately take all the necessary steps to limit any damage due to force majeure and do their best to resume implementation of the action as soon as possible.

[26] Council Regulation (EC, Euratom) No 2988/95 of 18 December 1995 on the protection of the European Communities financial interests (OJ L 312, 23.12.1995, p. 1).

CHAPTER 6 FINAL PROVISIONS

ARTICLE 36 — COMMUNICATION BETWEEN THE PARTIES

36.1 Forms and means of communication — Electronic management

EU grants are managed fully electronically through the EU Funding & Tenders Portal ('Portal').

All communications must be made electronically through the Portal, in accordance with the Portal Terms and Conditions and using the forms and templates provided there (except if explicitly instructed otherwise by the granting authority).

Communications must be made in writing and clearly identify the grant agreement (project number and acronym).

Communications must be made by persons authorised according to the Portal Terms and Conditions. For naming the authorised persons, each beneficiary must have designated — before the signature of this Agreement — a 'legal entity appointed representative (LEAR)'. The role and tasks of the LEAR are stipulated in their appointment letter (see Portal Terms and Conditions).

If the electronic exchange system is temporarily unavailable, instructions will be given on the Portal.

36.2 Date of communication

The sending date for communications made through the Portal will be the date and time of sending, as indicated by the time logs.

The receiving date for communications made through the Portal will be the date and time the communication is accessed, as indicated by the time logs. Formal notifications that have not been accessed within 10 days after sending, will be considered to have been accessed (see Portal Terms and Conditions).

If a communication is exceptionally made on paper (by e-mail or postal service), general principles apply (i.e. date of sending/receipt). Formal notifications by registered post with proof of delivery will be considered to have been received either on the delivery date registered by the postal service or the deadline for collection at the post office.

If the electronic exchange system is temporarily unavailable, the sending party cannot be considered in breach of its obligation to send a communication within a specified deadline.

36.3 Addresses for communication

The Portal can be accessed via the Europa website.

The address for paper communications to the granting authority (if exceptionally allowed) is the official mailing address indicated on its website.

For beneficiaries, it is the legal address specified in the Portal Participant Register.

ARTICLE 37 — INTERPRETATION OF THE AGREEMENT

The provisions in the Data Sheet take precedence over the rest of the Terms and Conditions of the Agreement.

Annex 5 takes precedence over the Terms and Conditions; the Terms and Conditions take precedence over the Annexes other than Annex 5.

Annex 2 takes precedence over Annex 1.

ARTICLE 38 — CALCULATION OF PERIODS AND DEADLINES

In accordance with Regulation No 1182/71[27], periods expressed in days, months or years are calculated from the moment the triggering event occurs.

The day during which that event occurs is not considered as falling within the period.

'Days' means calendar days, not working days.

ARTICLE 39 — AMENDMENTS

39.1 Conditions

The Agreement may be amended, unless the amendment entails changes to the Agreement which would call into question the decision awarding the grant or breach the principle of equal treatment of applicants.

Amendments may be requested by any of the parties.

39.2 Procedure

The party requesting an amendment must submit a request for amendment signed directly in the Portal Amendment tool.

The coordinator submits and receives requests for amendment on behalf of the beneficiaries (see Annex 3). If a change of coordinator is requested without its agreement, the submission must be done by another beneficiary (acting on behalf of the other beneficiaries).

The request for amendment must include:

- the reasons why
- the appropriate supporting documents and
- for a change of coordinator without its agreement: the opinion of the coordinator (or proof that this opinion has been requested in writing).

The granting authority may request additional information.

If the party receiving the request agrees, it must sign the amendment in the tool within 45 days of receiving notification (or any additional information the granting authority has requested). If it does

[27] Regulation (EEC, Euratom) No 1182/71 of the Council of 3 June 1971 determining the rules applicable to periods, dates and time-limits (OJ L 124, 8/6/1971, p. 1).

not agree, it must formally notify its disagreement within the same deadline. The deadline may be extended, if necessary for the assessment of the request. If no notification is received within the deadline, the request is considered to have been rejected.

An amendment **enters into force** on the day of the signature of the receiving party.

An amendment **takes effect** on the date of entry into force or other date specified in the amendment.

ARTICLE 40 — ACCESSION AND ADDITION OF NEW BENEFICIARIES

40.1 Accession of the beneficiaries mentioned in the Preamble

The beneficiaries which are not coordinator must accede to the grant by signing the accession form (see Annex 3) directly in the Portal Grant Preparation tool, within 30 days after the entry into force of the Agreement (see Article 44).

They will assume the rights and obligations under the Agreement with effect from the date of its entry into force (see Article 44).

If a beneficiary does not accede to the grant within the above deadline, the coordinator must — within 30 days — request an amendment (see Article 39) to terminate the beneficiary and make any changes necessary to ensure proper implementation of the action. This does not affect the granting authority's right to terminate the grant (see Article 32).

40.2 Addition of new beneficiaries

In justified cases, the beneficiaries may request the addition of a new beneficiary.

For this purpose, the coordinator must submit a request for amendment in accordance with Article 39. It must include an accession form (see Annex 3) signed by the new beneficiary directly in the Portal Amendment tool.

New beneficiaries will assume the rights and obligations under the Agreement with effect from the date of their accession specified in the accession form (see Annex 3).

Additions are also possible in mono-beneficiary grants.

ARTICLE 41 — TRANSFER OF THE AGREEMENT

In justified cases, the beneficiary of a mono-beneficiary grant may request the transfer of the grant to a new beneficiary, provided that this would not call into question the decision awarding the grant or breach the principle of equal treatment of applicants.

The beneficiary must submit a request for **amendment** (see Article 39), with

- the reasons why
- the accession form (see Annex 3) signed by the new beneficiary directly in the Portal Amendment tool and
- additional supporting documents (if required by the granting authority).

The new beneficiary will assume the rights and obligations under the Agreement with effect from the date of accession specified in the accession form (see Annex 3).

ARTICLE 42 — ASSIGNMENTS OF CLAIMS FOR PAYMENT AGAINST THE GRANTING AUTHORITY

The beneficiaries may not assign any of their claims for payment against the granting authority to any third party, except if expressly approved in writing by the granting authority on the basis of a reasoned, written request by the coordinator (on behalf of the beneficiary concerned).

If the granting authority has not accepted the assignment or if the terms of it are not observed, the assignment will have no effect on it.

In no circumstances will an assignment release the beneficiaries from their obligations towards the granting authority.

ARTICLE 43 — APPLICABLE LAW AND SETTLEMENT OF DISPUTES

43.1 Applicable law

The Agreement is governed by the applicable EU law, supplemented if necessary by the law of Belgium.

Special rules may apply for beneficiaries which are international organisations (if any; see Data Sheet, Point 5).

43.2 Dispute settlement

If a dispute concerns the interpretation, application or validity of the Agreement, the parties must bring action before the EU General Court — or, on appeal, the EU Court of Justice — under Article 272 of the Treaty on the Functioning of the EU (TFEU).

For non-EU beneficiaries (if any), such disputes must be brought before the courts of Brussels, Belgium — unless an international agreement provides for the enforceability of EU court judgements.

For beneficiaries with arbitration as special dispute settlement forum (if any; see Data Sheet, Point 5), the dispute will — in the absence of an amicable settlement — be settled in accordance with the Rules for Arbitration published on the Portal.

If a dispute concerns administrative sanctions, offsetting or an enforceable decision under Article 299 TFEU (see Articles 22 and 34), the beneficiaries must bring action before the General Court — or, on appeal, the Court of Justice — under Article 263 TFEU.

For grants where the granting authority is an EU executive agency (see Preamble), actions against offsetting and enforceable decisions must be brought against the European Commission (not against the granting authority; see also Article 22).

ARTICLE 44 — ENTRY INTO FORCE

The Agreement will enter into force on the day of signature by the granting authority or the coordinator, depending on which is later.

SIGNATURES

For the coordinator

Efstathios Efstathopoulos with ECAS id nsfiktho signed in the Participant Portal on 23/10/2025 at 12:05:46 (transaction id SigId-13601-f8B9o3UIGOFx36AjGd5zU8zIjJvCpG8SGJYnpgmiJcZaB9w1F4yKzLztUuU9MnsCDL4cOGxJyEJDu7bFZSmEALe-R2zIpfT8xjMzjWupzYa7V4m-kh5bI8gpowEMS9zk6G0wQw57Fjl8SeFdA7eCm89EDcYUDneGMfQbKEcCROJaQ4tC5rzzdbJJbvmszVRbat7yViK). Timestamp by third party at 2025.10.23 12:05:52 CEST

For the granting authority

Signed by Nadia ELHAGGAGI with ECAS id elhagni as an authorised representative on 23-10-2025 12:17:26 (transaction id SigId-13760-PA9tNg6XE6ak0XIjfqyUBrgnT6WuVB3YQEvNjr5Tps6l8Cw1AhZ0NHvWgHMF1E5n42SSFPzyHI8IC6DwfumOP4-R2zIpfT8xjMzjWupzYa7V4m-zMCKHfqD76kZgxh9mL1pzZB9XFENEcPWkIRzmzXn9WizZcs3hipCeXDNHuXis2fg9L1hywll5tG9mvegy9Z0Xjzm) 2025.10.23 12:17:30 CEST

ANNEX 1

EU4Health Programme (EU4H)

Description of the action (DoA)

Part A

Part B

DESCRIPTION OF THE ACTION (PART A)

COVER PAGE

Part A of the Description of the Action (DoA) must be completed directly on the Portal Grant Preparation screens.

PROJECT *Grant Preparation (General Information screen) — Enter the info.*	
Project number:	101233428
Project name:	Joint Action on Health Promotion and Disease Prevention including Smoke and Aerosol Free Environments
Project acronym:	JA-SAFE
Call:	EU4H-2024-JA-IBA-03
Topic:	EU4H-2024-JA-IBA-07
Type of action:	EU4H-PJG
Service:	HADEA/A/01
Project starting date:	fixed date: 15 October 2025
Project duration:	48 months

TABLE OF CONTENTS

PROJECT SUMMARY

Project summary

Grant Preparation (General Information screen) — Provide an overall description of your project (including context and overall objectives, planned activities and main achievements, and expected results and impacts (on target groups, change procedures, capacities, innovation etc)). This summary should give readers a clear idea of what your project is about.

Use the project summary from your proposal.

The aim of this joint action is to reduce the burden of NCDs including cancer, and their risk factors, both at the individual and population level. Smoking and other forms of tobacco consumption are considered the single most important cause of preventable morbidity and premature mortality worldwide, with tobacco being the single major cause of premature deaths in the European Union (EU). The Joint Action on Health Promotion and Disease Prevention including Smoke and Aerosol Free Environments" (JA-SAFE) aims to significantly reduce tobacco use and exposure to secondhand smoke across Europe, contributing to the EU's goal of achieving a tobacco-free generation. The project encompasses nine work packages under five thematic areas, smoke free environments, alcohol prevention, cessation, steps towards a tobacco free generation and supporting health promotion and disease prevention in Europe.

LIST OF PARTICIPANTS

PARTICIPANTS

Grant Preparation (Beneficiaries screen) — Enter the info.

Number	Role	Short name	Legal name	Country	PIC
1	COO	UOA	ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON	EL	999643007
2	BEN	SCIENSANO	SCIENSANO	BE	906160809
3	BEN	UNIBL	UNIVERZITET U BANJOJ LUCI	BA	995591705
4	BEN	FMZ	FEDERAL MINISTRY OF HEALTH	BA	916051608
5	BEN	PSRS	FARMACEUTSKO DRUSTVO REPUBLIKE SRPSKE	BA	872196162
6	BEN	NAAC	CYPRUS NATIONAL ADDICTIONS AUTHORITY	CY	893266502
6.1	AE	UCY	UNIVERSITY OF CYPRUS	CY	999835843
7	BEN	SZU	STATNI ZDRAVOTNI USTAV	CZ	999478689
8	BEN	CIPH	HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO	HR	998128255
9	BEN	AAKS	AARHUS KOMMUNE	DK	992597994
10	BEN	UHSD	REGION SYDDANMARK	DK	999602073
11	BEN	RZ	REGION SJAELLAND	DK	998373665
11.1	AE	MFK	MARIAGERFJORD KOMMUNE	DK	888849219
11.2	AE	ODSHERRED	ODSHERRED KOMMUNE	DK	877136760
11.3	AE	VALLENSBAEK	Vallensbaek Municipality	DK	870788692
12	BEN	TAI	TERVISE ARENGU INSTITUUT	EE	997543539
13	BEN	THL	TERVEYDEN JA HYVINVOINNIN LAITOS	FI	996697893

PARTICIPANTS

Grant Preparation (Beneficiaries screen) — Enter the info.

Number	Role	Short name	Legal name	Country	PIC
13.1	AE	CSF	SUOMEN SYOPAYHDISTYS - CANCERFORENINGEN I FINLAND RY - CANCER SOCIETY OF FINLAND CSF	FI	999483636
13.2	AE	FILHA	FILHA RY	FI	899377502
14	BEN	MoH FR	MINISTRE DE LA SANTE ET DE L'ACCES AUX SOINS	FR	998887377
15	BEN	TFRI	TobaccoFree Research Institute Ireland LBG	IE	997995947
16	BEN	NPHO	ETHNIKOS ORGANISMOS DIMOSIAS YGEIAS	EL	896563726
17	BEN	NKIP	ORSZAGOS KORANYI PULMONOLOGIAI INTEZET	HU	999554543
17.1	AE	NNGYK	NEMZETI NEPEGESZSEGUGYI ES GYOGYSZERESZETI KOZPONT	HU	998706957
17.2	AE	ÉBSZJCK	ESZAK-BUDAI SZENT JANOS CENTRUMKORHAZ	HU	889719212
17.3	AE	OKFŐ	ORSZAGOS KORHAZI FOIGAZGATOSAG	HU	891516331
17.4	AE	GOKVI	GOTTSEGEN GYÖRGY ORSZÁGOS KARDIOVASZKULÁRIS INTÉZET	HU	968000443
18	BEN	ISS	ISTITUTO SUPERIORE DI SANITA	IT	999978821
18.1	AE	FPG	FONDAZIONE POLICLINICO UNIVERSITARIO AGOSTINO GEMELLI IRCCS	IT	918081430
18.2	AE	LIGURIA	REGIONE LIGURIA	IT	996097851
18.3	AE	LOMBARDIA	REGIONE LOMBARDIA	IT	999654065
18.4	AE	IRFMN	ISTITUTO DI RICERCHE FARMACOLOGICHE MARIO NEGRI	IT	999661146
18.5	AE	ULSS 6	AZIENDA ULSS 6 EUGANEA	IT	937042990
19	BEN	RSU	RIGAS STRADINA UNIVERSITATE	LV	999843118
19.1	AE	SPKC	SLIMIBU PROFILAKSES UN KONTROLES CENTRS	LV	952714019
19.2	AE	MoH LV	VESELIBAS MINISTRIJA	LV	887695695
19.3	AE	PSCUH	PAULA STRADINA KLINISKA UNIVERSITATES SLIMNICA	LV	953605449
20	BEN	LSMU	LIETUVOS SVEIKATOS MOKSLU UNIVERSITETAS	LT	972782446
21	BEN	SAM LT	LIETUVOS RESPUBLIKOS SVEIKATOS APSAUGOS MINISTERIJA	LT	933839468
22	BEN	NVI	NACIONALINIS VEZIO INSTITUTAS	LT	912763114
23	BEN	VU	VILNIAUS UNIVERSITETAS	LT	999893170
24	BEN	RIVM	RIJKSINSTITUUT VOOR VOLKSGEZONDHEID EN MILIEU	NL	999991431

PARTICIPANTS

Grant Preparation (Beneficiaries screen) — Enter the info.

Number	Role	Short name	Legal name	Country	PIC
25	BEN	DGS	MINISTERIO DA SAUDE	PT	986364095
26	BEN	ICAD	INSTITUTO PARA OS COMPORTAMENTOS ADITIVOS E AS DEPENDENCIAS, IP	PT	877389833
27	BEN	IPMN	INSTITUTUL DE PNEUMOFTIZIOLOGIE MARIUS NASTA	RO	997406575
27.1	AE	INSP	INSTITUTUL NATIONAL DE SANATATE PUBLICA	RO	985926237
28	BEN	CDU	UNIVERSITATEA DE MEDICINA SI FARMACIE CAROL DAVILA DIN BUCURESTI	RO	999875613
29	BEN	NIJZ	NACIONALNI INSTITUT ZA JAVNO ZDRAVJE	SI	948891346
30	BEN	ICO	INSTITUT CATALA D'ONCOLOGIA	ES	998420031
30.1	AE	GENCAT	DEPARTAMENT DE SALUT - GENERALITAT DE CATALUNYA	ES	999826919
30.2	AE	IDIBAPS-CERCA	FUNDACIO DE RECERCA CLINIC BARCELONA-INSTITUT D INVESTIGACIONS BIOMEDIQUES AUGUST PI I SUNYER	ES	999477525
31	BEN	IDIS	FUNDACION PUBLICA GALEGA INSTITUTO DE INVESTIGACION SANITARIA DE SANTIAGO DE COMPOSTELA	ES	986488255
31.1	AE	USC	UNIVERSIDAD DE SANTIAGO DE COMPOSTELA	ES	999829635
31.2	AE	CSG	Conselleria de Sanidade de Galicia	ES	952925770
32	BEN	IDIVAL	FUNDACION INSTITUTO DE INVESTIGACION MARQUES DE VALDECILLA	ES	946556944
32.1	AE	SCS	Servicio Cántabro de Salud	ES	991294023
33	BEN	ASPB	Agencia de Salut Publica de Barcelona	ES	983180264
33.1	AE	IRSANTPAU CERCA	INSTITUT DE RECERCA DE L'HOSPITAL DE LA SANTA CREU I SANT PAU FUNDACION	ES	998869432
34	BEN	LUND	REGION SKANE	SE	998165794
35	BEN	PHC	STATE INSTITUTION PUBLIC HEALTH CENTER OF THE MINISTRY OF HEALTH OF UKRAINE	UA	906650465
36	AP	MoH LUX	MINISTERE DE LA SANTE ET DE LA SECURITE SOCIALE	LU	998888153
37	AP	SU	SEMMELWEIS EGYETEM	HU	999860675

LIST OF WORK PACKAGES

Work packages

Grant Preparation (Work Packages screen) — Enter the info.

Work Package No	Work Package name	Lead Beneficiary	Effort (Person-Months)	Start Month	End Month	Deliverables
WP1	Project Coordination	1 - UOA	251.48	1	48	D1.1 – First periodical technical and financial report D1.2 – Final JA-SAFE Report D1.3 – Overview of planned activities to develop synergies with the action grant RELIEF D1.4 – Report on the first period of activities to build and strengthen synergies with the action grant RELIEF D1.5 – Final report on synergies/ sustainability with the action grant RELIEF D1.6 – Report 1 on cumulative expenditure D1.7 – Report 2 on cumulative expenditure D1.8 – Report 3 on cumulative expenditure D1.9 – Report 4 on cumulative expenditure
WP2	Communication and Dissemination Activities	17.4 - GOKVI	325.02	1	48	D2.1 – Final dissemination report D2.2 – Layman version of the final report D2.3 – Project Leaflet D2.4 – Project Website
WP3	Project Evaluation and Benchmarking	19 - RSU	109.81	1	48	D3.1 – Final Evaluation Report
WP4	Sustainability Actions	18 - ISS	126.28	1	48	D4.1 – Sustainability Plan report
WP5	Promoting a Smoke and Aerosol Free (SAFE) Europe	30 - ICO	286.87	1	48	D5.1 – Report on best practices for SAFE in EU MS D5.2 – Report on practices related to SAFE in EU MS

Work packages

Grant Preparation (Work Packages screen) — Enter the info.

Work Package No	Work Package name	Lead Beneficiary	Effort (Person-Months)	Start Month	End Month	Deliverables
						D5.3 – Report on the JA SAFE actions at the EU MS level
WP6	Preventing Alcohol-Related Harm in Europe	13 - THL	312.94	1	48	D6.1 – Summary of the results concerning Prevention of Alcohol-Related Harm in Europe (WP6) D6.2 – Article draft on exposure to online marketing
WP7	Scaling up Interventions for Tobacco Control and SAFE in Healthcare Settings	11 - RZ	447.79	1	48	D7.1 – Final WP7 report
WP8	Accelerating the Path to a Tobacco-Free Generation in Europe	1 - UOA	615.85	1	48	D8.1 – Final report on the EU Youth prevalence and driving factors study D8.2 – Final WP8 report
WP9	Strengthening Disease Prevention and Health Promotion in Europe	18.4 - IRFMN	392.80	1	48	D9.1 – Report on the EU-CEG Task force activities D9.2 – Report on the sensory panel activities and ability to sustain EU MS requests. D9.3 – Final WP9 report

Work package WP1 – Project Coordination

Work Package Number	WP1	Lead Beneficiary	1 - UOA
Work Package Name	Project Coordination		
Start Month	1	End Month	48

Objectives
- Objective 1.A- To ensure the overall management of the project; - Objective 1.B- To coordinate financial management and oversight of the project; - bjective 1.C- To provide scientific support to the work in individual WPs; - Objective 1.D- To communicate with the European Commission, its working groups, and other EU projects and initiatives. - Objective 1.E- To ensure synergies with other EU-funded projects in the same field

Description
The general objective is to coordinate the overall management of the project and to coordinate and support the activities of individual work packages.

Work package WP2 – Communication and Dissemination Activities

Work Package Number	WP2	Lead Beneficiary	17.4 - GOKVI
Work Package Name	Communication and Dissemination Activities		
Start Month	1	End Month	48

Objectives
- Objective 2.A - To identify stakeholder groups and formulate a dissemination strategy; - Objective 2.B – To facilitate and enhance communication and dissemination efforts throughout the duration of the project.

Description
The overall objective of WP2 is to support and implement the communication and dissemination activities of JA-SAFE building on communication methodologies, best practices, and established networks from previous and ongoing successful joint actions and Horizon2020 projects. This will be performed by applying established frameworks for identifying and engaging stakeholders, disseminating deliverables, and driving awareness across the health/public health sector through adapting methodologies from other JA projects and tailoring methodologies to the unique challenges and objectives of JA-SAFE.

Work package WP3 – Project Evaluation and Benchmarking

Work Package Number	WP3	Lead Beneficiary	19 - RSU
Work Package Name	Project Evaluation and Benchmarking		
Start Month	1	End Month	48

Objectives
- Objective 3.A: To create and implement an evaluation plan, that will describe the criteria, methods, activities and timeline for project evaluation, as well as the

procedures and tools for project's quality assurance; - Objective 3.B: To implement the evaluation plan throughout the duration of the project; - Objective 3.C: To assess the external impact of JA-SAFE with regards to its utility for Health Promotion and Disease Prevention in Europe.

Description
The overall objective of WP3 is to evaluate the progress of JA-SAFE against its internal milestone and deliverable progress, internal communication and and to evaluate its benchmarking in supporting Health promotion and Disease prevention in Europe.

Work package WP4 – Sustainability Actions

Work Package Number	WP4	**Lead Beneficiary**	18 - ISS
Work Package Name	Sustainability Actions		
Start Month	1	**End Month**	48

Objectives
- Objective 4.A: To identify strategies and resources for the sustainability of activities and results of the WPs; - Objective 4.B: To facilitate the exchange of knowledge and the sharing of material developed through the vertical WPs to key stakeholders and policymakers at the EU MS level.

Description
The overall objective of this WP is to support the sustainability and continuation of the JA-SAFE activities both during and after the end of the project, in order to ensure a constant implantation of actions supporting policies across EU MS that promote EU public health.

Work package WP5 – Promoting a Smoke and Aerosol Free (SAFE) Europe

Work Package Number	WP5	**Lead Beneficiary**	30 - ICO
Work Package Name	Promoting a Smoke and Aerosol Free (SAFE) Europe		
Start Month	1	**End Month**	48

Objectives
- Objective 5.A - To facilitate collaboration and exchange of best practices of SAFE in EU MS; - Objective 5.B - To facilitate real-world data collection on the expansion of SAFE in EU MS; - Objective 5.C - To support uptake and compliance with the adoption of SAFE in EU MS.

Description
The overall objective of this WP is to support the implementation of the planned revised Council Recommendation on Smoke-free Environments through appropriate measures at the local, regional, and national levels that support the compliance to and enforcement of smoke and aerosol-free environments (SAFE). Through the provision of a solid scientific evidence base, this WP also aims to contribute to reducing the risks from harmful exposure to second-hand smoke and aerosols in indoor and certain outdoor spaces by supporting increasing SAFE uptake and compliance across EU MS.

Work package WP6 – Preventing Alcohol-Related Harm in Europe

Work Package Number	WP6	Lead Beneficiary	13 - THL
Work Package Name	Preventing Alcohol-Related Harm in Europe		
Start Month	1	End Month	48

Objectives
- Objective 6.A – To assess and mitigate exposure and access to alcohol especially in online settings, as well as map the possible solutions and good examples from different countries to develop innovative approaches to reduce the harms caused by alcohol; - Objective 6.B – To enhance communication about risks related to alcohol, also to vulnerable populations; - Objective 6.C – To identify, scale up and enhance best and promising practices and develop innovative approaches (including on early identification and brief intervention) to reduce alcohol related harm.

Description
The overall objective of WP6 of JA-SAFE is to support the implementation of Europe's Beating Cancer Plan with respect to reducing harmful alcohol consumption, also in vulnerable populations, and reducing the exposure of young people to advertising and marketing of alcoholic beverages.

Work package WP7 – Scaling up Interventions for Tobacco Control and SAFE in Healthcare Settings

Work Package Number	WP7	Lead Beneficiary	11 - RZ
Work Package Name	Scaling up Interventions for Tobacco Control and SAFE in Healthcare Settings		
Start Month	1	End Month	48

Objectives
- Objective 7.A -To perform a Tobacco and Aerosol Control Assessment and Planning in Healthcare settings; - Objective 7.B – To develop and implement communication and Education Strategies for Tobacco Control in Healthcare settings; - Objective 7.C – To develop and enhance networking, resource sharing and health promotion activities across Healthcare settings; - Objective 7.D – To promote the use of evidence-based guidelines for smoking cessation treatment and train healthcare professionals and healthcare students to apply these guidelines via e-learning and networking between health services across EU.

Description
Within this WP, we will focus on the development and scaling up of best and promising practices for tobacco control and SAFE in Healthcare settings, ensuring appropriate communication strategies and long-term networking planning in parallel.

Work package WP8 – Accelerating the Path to a Tobacco-Free Generation in Europe

Work Package Number	WP8	Lead Beneficiary	1 - UOA
Work Package Name	Accelerating the Path to a Tobacco-Free Generation in Europe		
Start Month	1	End Month	48

Objectives
- Objective 8.A – To map and promote forward-looking tobacco control measures across EU MS; - Objective 8.B – To support the Tobacco-Free Generation goal (<5% by 2040) of Europe's Beating Cancer Plan; - Objective 8.C - To identify the prevalence and factors associated with tobacco products among EU adolescents; - Objective 8.D – To support the expansion of school, higher education and community-based interventions that minimise nicotine product use and reduce exposure to SHS and aerosols among youth.

Description
The overall objective of this WP is to support the implementation of Europe's Beating Cancer Plan, in particular in terms of achieving a tobacco-free Europe through actions to help create a 'Tobacco-Free Generation' where less than 5% of the population uses tobacco by 2024 compared to around 25% today.

Work package WP9 – Strengthening Disease Prevention and Health Promotion in Europe

Work Package Number	WP9	**Lead Beneficiary**	18.4 - IRFMN
Work Package Name	Strengthening Disease Prevention and Health Promotion in Europe		
Start Month	1	**End Month**	48

Objectives
- Objective 9.A - To support tobacco control within the context of the Tobacco Products Directive (TPD), the Tobacco Advertising Directive (TAD) and the Framework Convention on Tobacco Control (FCTC) across EU MS; - Objective 9.B - To support the work at the EU level on the surveillance of cancer risk factors and their health impact at the EU MS level; - Objective 9.C – To facilitate the integration of health promotion and disease prevention within community settings across Europe.

Description
The general objective of this WP is to support the implementation of the planned Council Recommendation on SAFE, related legislative frameworks on tobacco control, the attributable risk factors for NCDs and supporting overall NCD preventative actions.

STAFF EFFORT

Staff effort per participant

Grant Preparation (Work packages - Effort screen) — Enter the info.

Participant	WP1	WP2	WP3	WP4	WP5	WP6	WP7	WP8	WP9	Total Person-Months
1 - UOA	112.00	81.40	12.00	9.00	14.00		26.00	123.50	68.00	445.90
2 - SCIENSANO	2.00					21.50		19.00	22.00	64.50
6 - NAAC					2.00		2.00			4.00
6.1 - UCY					2.00		2.00			4.00
7 - SZU	1.71	2.24		1.68				11.67		17.30
8 - CIPH	1.00	3.95		3.95				3.95	3.95	16.80
9 - AAKS	3.00	2.00		2.00	3.00			8.50	6.00	24.50
10 - UHSD							20.67		20.67	41.34
11 - RZ	3.00		1.94				76.83			81.77
11.1 - MFK					10.27					10.27
11.2 - ODSHERRED	1.06	1.06						10.32		12.44
11.3 - VALLENSBAEK								125.00		125.00
12 - TAI		2.00			2.00	2.00	2.00			8.00
13 - THL	0.69	14.95	9.87	14.55		40.74	7.69	12.00	13.59	114.08
13.1 - CSF					0.55		0.55			1.10
13.2 - FILHA	0.55	1.45		0.42	6.07		11.40			19.89
14 - MoH FR				2.79	3.46	2.23	3.46	3.46		15.40
15 - TFRI					4.00					4.00
16 - NPHO	15.50	4.00			31.00		29.00	26.00	27.00	132.50

Staff effort per participant

Grant Preparation (Work packages - Effort screen) — Enter the info.

Participant	WP1	WP2	WP3	WP4	WP5	WP6	WP7	WP8	WP9	Total Person-Months
17 - NKIP	1.00	1.00		1.00			19.00	13.00		35.00
17.1 - NNGYK	2.63	14.44		8.01		17.68		7.74	7.74	58.24
17.2 - ÉBSZJCK	2.73								5.73	8.46
17.3 - OKFŐ	0.92	0.94	0.94	0.92			4.44	4.44		12.60
17.4 - GOKVI		122.64			11.85		11.07	44.43		189.99
18 - ISS	0.86	2.08		20.94	3.01	30.32		8.17	5.33	70.71
18.1 - FPG	3.50			3.50			30.00			37.00
18.2 - LIGURIA								14.37	14.37	28.74
18.3 - LOMBARDIA	7.15	7.15		6.27	7.37		6.47	6.47		40.88
18.4 - IRFMN	13.39	13.39		5.39	29.39	16.61	5.39	29.39	38.00	150.95
18.5 - ULSS 6	4.91	1.07						7.48		13.46
19 - RSU	10.00		70.00	5.12	35.00	30.00	20.00			170.12
19.1 - SPKC						8.67				8.67
19.2 - MoH LV						1.00		2.00	1.00	4.00
19.3 - PSCUH							11.10			11.10
20 - LSMU	2.00	2.70			18.00	21.30		6.50	8.75	59.25
21 - SAM LT	10.04	9.40	10.04	10.04	2.82	2.23	5.80	5.18	6.44	61.99
22 - NVI							16.94			16.94
23 - VU	2.00	2.00	2.00	2.00	2.00	5.00		6.00		21.00
24 - RIVM						4.25		2.00		6.25
25 - DGS							7.00	2.00		9.00

Staff effort per participant

Grant Preparation (Work packages - Effort screen) — Enter the info.

Participant	WP1	WP2	WP3	WP4	WP5	WP6	WP7	WP8	WP9	Total Person-Months
26 - ICAD						14.00				14.00
27 - IPMN	3.30							40.00	40.00	83.30
27.1 - INSP								3.00		3.00
28 - CDU							15.19	15.19	15.19	45.57
29 - NIJZ	14.61	13.79	1.43	13.79	7.51	7.69	1.42	7.51	7.51	75.26
30 - ICO	6.93	5.76	1.59	13.91	26.42	19.75	21.37	13.87	15.57	125.17
30.1 - GENCAT						7.33				7.33
30.2 - IDIBAPS-CERCA						29.56				29.56
31 - IDIS	14.00	8.70			2.00	2.00		2.00	2.00	30.70
31.1 - USC	6.00	3.91			11.00	16.02		18.65	26.02	81.60
32 - IDIVAL	5.00	3.00		1.00	7.00		15.00		10.00	41.00
32.1 - SCS					1.00		4.00		1.60	6.60
33 - ASPB					13.09				8.34	21.43
33.1 - IRSANTPAU CERCA					18.00				18.00	36.00
34 - LUND							72.00			72.00
35 - PHC					13.06	13.06		13.06		39.18
Total Person-Months	251.48	325.02	109.81	126.28	286.87	312.94	447.79	615.85	392.80	2868.84

LIST OF DELIVERABLES

Deliverables

Grant Preparation (Deliverables screen) — Enter the info.

The labels used mean:

Public — fully open (⚠ automatically posted online)
Sensitive — limited under the conditions of the Grant Agreement
EU classified —RESTREINT-UE/EU-RESTRICTED, CONFIDENTIEL-UE/EU-CONFIDENTIAL, SECRET-UE/EU-SECRET under Decision 2015/444

Deliverable No	Deliverable Name	Work Package No	Lead Beneficiary	Type	Dissemination Level	Due Date (month)
D1.1	First periodical technical and financial report	WP1	1 - UOA	R — Document, report	SEN - Sensitive	24
D1.2	Final JA-SAFE Report	WP1	1 - UOA	R — Document, report	SEN - Sensitive	48
D1.3	Overview of planned activities to develop synergies with the action grant RELIEF	WP1	1 - UOA	R — Document, report	SEN - Sensitive	10
D1.4	Report on the first period of activities to build and strengthen synergies with the action grant RELIEF	WP1	1 - UOA	R — Document, report	SEN - Sensitive	24
D1.5	Final report on synergies/sustainability with the action grant RELIEF	WP1	1 - UOA	R — Document, report	SEN - Sensitive	48
D1.6	Report 1 on cumulative expenditure	WP1	1 - UOA	R — Document, report	SEN - Sensitive	12
D1.7	Report 2 on cumulative expenditure	WP1	1 - UOA	R — Document, report	SEN - Sensitive	24
D1.8	Report 3 on cumulative expenditure	WP1	1 - UOA	R — Document, report	SEN - Sensitive	36
D1.9	Report 4 on cumulative expenditure	WP1	1 - UOA	R — Document, report	SEN - Sensitive	48
D2.1	Final dissemination report	WP2	17.4 - GOKVI	R — Document, report	PU - Public	48
D2.2	Layman version of the final report	WP2	17.4 - GOKVI	R — Document, report	PU - Public	48
D2.3	Project Leaflet	WP2	17.4 - GOKVI	R — Document, report	PU - Public	3

Deliverables

Grant Preparation (Deliverables screen) — Enter the info.

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Deliverable No	Deliverable Name	Work Package No	Lead Beneficiary	Type	Dissemination Level	Due Date (month)
D2.4	Project Website	WP2	17.4 - GOKVI	R — Document, report	PU - Public	3
D3.1	Final Evaluation Report	WP3	19 - RSU	R — Document, report	SEN - Sensitive	48
D4.1	Sustainability Plan report	WP4	18 - ISS	R — Document, report	SEN - Sensitive	44
D5.1	Report on best practices for SAFE in EU MS	WP5	30 - ICO	R — Document, report	PU - Public	30
D5.2	Report on practices related to SAFE in EU MS	WP5	33 - ASPB	R — Document, report	PU - Public	36
D5.3	Report on the JA SAFE actions at the EU MS level	WP5	30 - ICO	R — Document, report	PU - Public	44
D6.1	Summary of the results concerning Prevention of Alcohol-Related Harm in Europe (WP6)	WP6	13 - THL	R — Document, report	PU - Public	40
D6.2	Article draft on exposure to online marketing	WP6	2 - SCIENSANO	OTHER	PU - Public	26
D7.1	Final WP7 report	WP7	11 - RZ	R — Document, report	PU - Public	44
D8.1	Final report on the EU Youth prevalence and driving factors study	WP8	1 - UOA	R — Document, report	PU - Public	45
D8.2	Final WP8 report	WP8	1 - UOA	R — Document, report	SEN - Sensitive	46
D9.1	Report on the EU-CEG Task force activities	WP9	1 - UOA	R — Document, report	SEN - Sensitive	42
D9.2	Report on the sensory panel activities and ability to sustain EU MS requests.	WP9	1 - UOA	R — Document, report	SEN - Sensitive	44

Deliverables

Grant Preparation (Deliverables screen) — Enter the info.

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Deliverable No	Deliverable Name	Work Package No	Lead Beneficiary	Type	Dissemination Level	Due Date (month)
D9.3	Final WP9 report	WP9	18.4 - IRFMN	R — Document, report	SEN - Sensitive	46

Deliverable D1.1 – First periodical technical and financial report

Deliverable Number	D1.1	**Lead Beneficiary**	1 - UOA
Deliverable Name	First periodical technical and financial report		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	24	**Work Package No**	WP1

Description
This report describes the activities, milestones and results achieved in the first half of the project. WP1: These deliverables include strategic and internal reporting to the Commission and due to the sensitive nature of the topic (tobacco control), the descriptions and details should not be in public domain, as this refers to areas in which vested interests operate (the tobacco industry).

Deliverable D1.2 – Final JA-SAFE Report

Deliverable Number	D1.2	**Lead Beneficiary**	1 - UOA
Deliverable Name	Final JA-SAFE Report		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	48	**Work Package No**	WP1

Description
This report describes overall implementation and the results achieved. WP1: These deliverables include strategic and internal reporting to the Commission and due to the sensitive nature of the topic (tobacco control), the descriptions and details should not be in public domain, as this refers to areas in which vested interests operate (the tobacco industry).

Deliverable D1.3 – Overview of planned activities to develop synergies with the action grant RELIEF

Deliverable Number	D1.3	**Lead Beneficiary**	1 - UOA
Deliverable Name	Overview of planned activities to develop synergies with the action grant RELIEF		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	10	**Work Package No**	WP1

Description
This report describes an overview of planned activities to develop synergies with the RELIEF project. WP1: These deliverables include strategic and internal reporting to the Commission and due to the sensitive nature of the topic (tobacco control), the descriptions and details should not be in public domain, as this refers to areas in which vested interests operate (the tobacco industry).

Deliverable D1.4 – Report on the first period of activities to build and strengthen synergies with the action grant RELIEF

Deliverable Number	D1.4	**Lead Beneficiary**	1 - UOA

Deliverable Name	Report on the first period of activities to build and strengthen synergies with the action grant RELIEF		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	24	**Work Package No**	WP1

Description
This report describes the activities to build and strengthen synergies with RELIEF in the first half of the project. WP1: These deliverables include strategic and internal reporting to the Commission and due to the sensitive nature of the topic (tobacco control), the descriptions and details should not be in public domain, as this refers to areas in which vested interests operate (the tobacco industry).

Deliverable D1.5 – Final report on synergies/sustainability with the action grant RELIEF

Deliverable Number	D1.5	**Lead Beneficiary**	1 - UOA
Deliverable Name	Final report on synergies/sustainability with the action grant RELIEF		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	48	**Work Package No**	WP1

Description
This report describes the results of the activities to build and strengthen synergies with RELIEF during the whole project. WP1: These deliverables include strategic and internal reporting to the Commission and due to the sensitive nature of the topic (tobacco control), the descriptions and details should not be in public domain, as this refers to areas in which vested interests operate (the tobacco industry).

Deliverable D1.6 – Report 1 on cumulative expenditure

Deliverable Number	D1.6	**Lead Beneficiary**	1 - UOA
Deliverable Name	Report 1 on cumulative expenditure		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	12	**Work Package No**	WP1

Description
For grants of more than EUR 5 million, with prefinancing and reporting periods of more than 18 months a “Report on cumulative expenditure” is submitted as sensitive deliverable at the end of each calendar year using the dedicated template.

Deliverable D1.7 – Report 2 on cumulative expenditure

Deliverable Number	D1.7	**Lead Beneficiary**	1 - UOA
Deliverable Name	Report 2 on cumulative expenditure		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	24	**Work Package No**	WP1

Description

For grants of more than EUR 5 million, with prefinancing and reporting periods of more than 18 months a “Report on cumulative expenditure” is submitted as sensitive deliverable at the end of each calendar year using the dedicated template.

Deliverable D1.8 – Report 3 on cumulative expenditure

Deliverable Number	D1.8	**Lead Beneficiary**	1 - UOA
Deliverable Name	Report 3 on cumulative expenditure		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	36	**Work Package No**	WP1

Description
For grants of more than EUR 5 million, with prefinancing and reporting periods of more than 18 months a “Report on cumulative expenditure” is submitted as sensitive deliverable at the end of each calendar year using the dedicated template.

Deliverable D1.9 – Report 4 on cumulative expenditure

Deliverable Number	D1.9	**Lead Beneficiary**	1 - UOA
Deliverable Name	Report 4 on cumulative expenditure		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	48	**Work Package No**	WP1

Description
For grants of more than EUR 5 million, with prefinancing and reporting periods of more than 18 months a “Report on cumulative expenditure” is submitted as sensitive deliverable at the end of each calendar year using the dedicated template.

Deliverable D2.1 – Final dissemination report

Deliverable Number	D2.1	**Lead Beneficiary**	17.4 - GOKVI
Deliverable Name	Final dissemination report		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	48	**Work Package No**	WP2

Description
At the end of the project, a dissemination report will be developed that indicates the extent of dissemination activities including qualitative and quantitative indicators and ensuring the visibility of EU co-financing.

Deliverable D2.2 – Layman version of the final report

Deliverable Number	D2.2	**Lead Beneficiary**	17.4 - GOKVI
Deliverable Name	Layman version of the final report		

Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	48	**Work Package No**	WP2

Description
This is a short (e.g. 10 pages) version of the final report, written for the interested public as a target group.

Deliverable D2.3 – Project Leaflet

Deliverable Number	D2.3	**Lead Beneficiary**	17.4 - GOKVI
Deliverable Name	Project Leaflet		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	3	**Work Package No**	WP2

Description
A project leaflet that would provide the information on the aims, scope, partners and planned activities of JA-SAFE.

Deliverable D2.4 – Project Website

Deliverable Number	D2.4	**Lead Beneficiary**	17.4 - GOKVI
Deliverable Name	Project Website		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	3	**Work Package No**	WP2

Description
The project's website will provide the forum for hosting the information produced by JA-SAFE.

Deliverable D3.1 – Final Evaluation Report

Deliverable Number	D3.1	**Lead Beneficiary**	19 - RSU
Deliverable Name	Final Evaluation Report		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	48	**Work Package No**	WP3

Description
Final Evaluation Report, including internal and external benchmarking. WP3: On the same grounds as WP1 sensitive deliverables, as we will note our weaknesses which may be exploited and the next actions to ensure that tobacco control is integrated into national plans.

Deliverable D4.1 – Sustainability Plan report

Deliverable Number	D4.1	**Lead Beneficiary**	18 - ISS
Deliverable Name	Sustainability Plan report		

Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	44	**Work Package No**	WP4

Description
Final Sustainability Report. WP4: On the same grounds as WP1 and WP3 sensitive deliverables, as we will note our weaknesses which may be exploited and the next actions to ensure that tobacco control is integrated into national plans.

Deliverable D5.1 – Report on best practices for SAFE in EU MS

Deliverable Number	D5.1	**Lead Beneficiary**	30 - ICO
Deliverable Name	Report on best practices for SAFE in EU MS		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	30	**Work Package No**	WP5

Description
This report will describe the updates to the enhanced interactive repository and metrics such as collaboration, resource sharing, and networking among stakeholders involved in SAFE implementation.

Deliverable D5.2 – Report on practices related to SAFE in EU MS

Deliverable Number	D5.2	**Lead Beneficiary**	33 - ASPB
Deliverable Name	Report on practices related to SAFE in EU MS		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	36	**Work Package No**	WP5

Description
This report will include the results of T5.2, T5.3, T5.4, T5.5, and T5.6 for public dissemination.

Deliverable D5.3 – Report on the JA SAFE actions at the EU MS level

Deliverable Number	D5.3	**Lead Beneficiary**	30 - ICO
Deliverable Name	Report on the JA SAFE actions at the EU MS level		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	44	**Work Package No**	WP5

Description
This report will include a breakdown of the actions of WP5 at the EU MS level, including in annexes all EU MS specific documents.

Deliverable D6.1 – Summary of the results concerning Prevention of Alcohol-Related Harm in Europe (WP6)

Deliverable Number	D6.1	**Lead Beneficiary**	13 - THL
Deliverable Name	Summary of the results concerning Prevention of Alcohol-Related Harm in Europe (WP6)		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	40	**Work Package No**	WP6

Description
The results of the work on alcohol marketing among youth, reducing alcohol use among youth, e-commerce and home delivery, communication on lower-risk alcohol use and brief interventions will be summarized in a final report.

Deliverable D6.2 – Article draft on exposure to online marketing

Deliverable Number	D6.2	**Lead Beneficiary**	2 - SCIENSANO
Deliverable Name	Article draft on exposure to online marketing		
Type	OTHER	**Dissemination Level**	PU - Public
Due Date (month)	26	**Work Package No**	WP6

Description
Article draft on young people's exposure to online marketing of alcohol has been prepared.

Deliverable D7.1 – Final WP7 report

Deliverable Number	D7.1	**Lead Beneficiary**	11 - RZ
Deliverable Name	Final WP7 report		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	44	**Work Package No**	WP7

Description
Report containing final activities performed in WP7.

Deliverable D8.1 – Final report on the EU Youth prevalence and driving factors study

Deliverable Number	D8.1	**Lead Beneficiary**	1 - UOA
Deliverable Name	Final report on the EU Youth prevalence and driving factors study		
Type	R — Document, report	**Dissemination Level**	PU - Public
Due Date (month)	45	**Work Package No**	WP8

Description
A short layman report that will outline the main outputs of the study, in English.

Deliverable D8.2 – Final WP8 report

Deliverable Number	D8.2	**Lead Beneficiary**	1 - UOA
Deliverable Name	Final WP8 report		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	46	**Work Package No**	WP8

Description
This report compiles all actions and outputs of WP8 in English. WP8: The final WP8 report refers also extensively to Endgame measures to end the tobacco epidemic, the same basis as the other sensitive deliverables applies.

Deliverable D9.1 – Report on the EU-CEG Task force activities

Deliverable Number	D9.1	**Lead Beneficiary**	1 - UOA
Deliverable Name	Report on the EU-CEG Task force activities		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	42	**Work Package No**	WP9

Description
This report outlines the outcomes and overall utility for the EU-CEG Task force. WP9: D9.1 refers to EU-CEG data which are confidential data of the EU MS and this would apply to the formal reporting too.

Deliverable D9.2 – Report on the sensory panel activities and ability to sustain EU MS requests.

Deliverable Number	D9.2	**Lead Beneficiary**	1 - UOA
Deliverable Name	Report on the sensory panel activities and ability to sustain EU MS requests.		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	44	**Work Package No**	WP9

Description
This report outlines the training, reproducibility and overall utility for the EU Sensory Panel. D9.2 this refers to the actions of assessing flavors (a TPD legal requirement) and hence the release of information may put in risk the application of these findings into public health practice.

Deliverable D9.3 – Final WP9 report

Deliverable Number	D9.3	**Lead Beneficiary**	18.4 - IRFMN
Deliverable Name	Final WP9 report		
Type	R — Document, report	**Dissemination Level**	SEN - Sensitive
Due Date (month)	46	**Work Package No**	WP9

Description
This reports compiles all actions and outputs of WP9, in English. D9.3 includes extensive information on TPD and TAD implementation and next steps in Europe, information which should be available only to the EU MS and participating authorities.

LIST OF MILESTONES

Milestones

Grant Preparation (Milestones screen) — Enter the info.

Milestone No	Milestone Name	Work Package No	Lead Beneficiary	Means of Verification	Due Date (month)
1	Consortium Agreement	WP1	1 - UOA	Consortium agreement signed by all partners	4
2	Final project meeting	WP1	1 - UOA	Minutes of the Final Meeting	48
3	Stakeholder plan	WP2	17.4 - GOKVI	Stakeholder plan shared with partners via email.	3
4	Dissemination strategy and initial Action Plan	WP2	17.4 - GOKVI	Action plan shared with all partners via email.	5
5	Publication Policy	WP2	17.4 - GOKVI	Final Publication Policy guidance document shared to partners via email.	5
6	Evaluation Plan	WP3	19 - RSU	Plan shared with all partners via email.	4
7	Mid-term Evaluation Report	WP3	19 - RSU	Evaluation Report included in the Interim Report	24
8	Guidance questionnaire for sustainability	WP4	18 - ISS	Guidance document submitted to COO.	12
9	First Sustainability report	WP4	18 - ISS	Report submitted to COO.	24
10	Protocol to update the best and promising practices on SAFE	WP5	30 - ICO	Final protocol shared with the COO.	5
11	Report on the comprehensive methodological approach for all WP5 tasks	WP5	30 - ICO	Report shared with the Steering Committee members.	6
12	Initiation of fieldwork of measurements	WP5	33 - ASPB	First data collected and stored in the WP shared drive.	12
13	Initiation of data collection for the effectiveness of enforcement strategies	WP5	30 - ICO	First data collected and stored in the WP shared drive.	15
14	Initiation of first EU MS in-country visit to support implementation	WP5	30 - ICO	Press release of the first in country visit as shared with WP2.	20

Milestones

Grant Preparation (Milestones screen) — Enter the info.

Milestone No	Milestone Name	Work Package No	Lead Beneficiary	Means of Verification	Due Date (month)
15	Report on the comprehensive methodological approach for all WP6 tasks	WP6	13 - THL	Report shared with the Steering Committee members.	5
16	Summary of existing guidelines	WP6	13 - THL	New review drafted and submitted to the COO.	12
17	Study protocols and ethics approvals for pilots	WP6	30.2 - IDIBAPS-CERCA	Protocol in local language(s), submitted to local ethics board	16
18	Preparations of the planned WP6 pilots	WP6	19 - RSU	Preparations of the planned pilots have been done and submitted to the COO.	18
19	Summary of the results on survey	WP6	20 - LSMU	Summary drafted and submitted to the COO.	20
20	Report on the comprehensive methodological approach for all WP7 tasks	WP7	11 - RZ	Report shared with the Steering Committee members.	5
21	Healthcare Settings Assessment and Gaps Identification	WP7	11 - RZ	Report submitted to COO.	18
22	Development of Tailored Dissemination and Training Plans	WP7	11 - RZ	Training material forwarded to the COO.	30
23	Implementation of Communication and SAFE Enforcement Strategies	WP7	11 - RZ	Enforcement tools forwarded to the COO.	36
24	Scaling Up, Evaluation, and Network Integration	WP7	11 - RZ	Impact assessment report forwarded to the COO.	36
25	Report on the comprehensive methodological approach for all WP8 tasks	WP8	1 - UOA	Report shared with the Steering Committee members.	5
26	Selection of forward-looking measures and countries for the assessment	WP8	13 - THL	Protocol for the assessment developed.	12
27	Youth oriented best or promising practice identified for roll out	WP8	11.2 - ODSHERRED	First roll out meeting minutes.	14

Milestones

Grant Preparation (Milestones screen) — Enter the info.

Milestone No	Milestone Name	Work Package No	Lead Beneficiary	Means of Verification	Due Date (month)
28	Initiation of the youth survey	WP8	1 - UOA	First data collected	18
29	Webinar on forward-looking measures in the EU context	WP8	13 - THL	Number of webinar registrants and participants.	36
30	Report on the comprehensive methodological approach for all WP9 tasks	WP9	1 - UOA	Report shared with the Steering Committee members.	5
31	EU-CEG taskforce data	WP9	1 - UOA	Taskforce Synthesis sent to DG SANTE.	8
32	Preparations of the planned pilots for NCD prevention	WP9	10 - UHSD	Pilot initiation meeting minutes.	18
33	First Risk factor completed	WP9	31.1 - USC	Manuscript ready for peer review.	18
34	Operational Sensory Panel	WP9	1 - UOA	Sensory Panel synthesis and reproducibility forwarded to DG SANTE.	20
35	First meeting to build up synergies with the action grant RELIEF (online meeting)	WP1	1 - UOA	Minutes of the First Meeting	3
36	Mid-term meeting to build up synergies with the action grant RELIEF (online meeting)	WP1	1 - UOA	Minutes of the Mid-term Meeting	24
37	Final meeting to build up synergies with the action grant RELIEF (online meeting)	WP1	1 - UOA	Minutes of the Final Meeting	48

LIST OF CRITICAL RISKS

Critical risks & risk management strategy

Grant Preparation (Critical Risks screen) — Enter the info.

Risk number	Description	Work Package No(s)	Proposed Mitigation Measures
1	Change in partner or key personnel	WP5, WP2, WP6, WP3, WP4, WP8, WP9, WP1, WP7	- Each partner contributes with at least two personnel to allow for a back up to exist; - Discussions with other partners in that EU MS that would be able to cover the gap; - Allocation of additional person-time to that aspect of the project.
2	Partner abdicates or cannot achieve the tasks	WP5, WP2, WP6, WP3, WP4, WP8, WP9, WP1, WP7	- Reallocation of tasks among the remaining Members, on the basis of shared expertise - Close collaboration among task members to ensure continuity and peer support when needed.
3	Delay in reaching milestones and deliverables	WP5, WP2, WP6, WP3, WP4, WP8, WP9, WP1, WP7	- Early detection of possible delays/failures; - Regular monitoring of the progress ensured by the Project Manager and Project Coordinator. - Proposal of corrective actions.
4	Failure of activities to result in outcomes	WP5, WP2, WP6, WP3, WP4, WP8, WP9, WP1, WP7	- Additional consultation with the consortium; - Identification of external cross-pollination from the expert advisory board and beyond.
5	Mis-communication between partners	WP5, WP2, WP6, WP3, WP4, WP8, WP9, WP1, WP7	- Repeated communication avenues; - Involvement of the Steering Committee; - In depth discussions to diffuse the situations.
6	Insufficient budget to cover the requested tasks	WP5, WP2, WP6, WP3, WP4, WP8, WP9, WP1, WP7	- Communication with HaDEA/DG SANTE to re-prioritise as necessary based on the current requirements; - Reorganisation of the tasks and activities to partners with a lower person month cost.
7	Low impact/failure of Dissemination and Communication in delivering results to its end-users	WP2	- Periodic review of the impact of existing dissemination and communication activities, on the basis of already set KPIs; - Fostering of existing dissemination activities, in case the measured impact is low and may jeopardize the project's implementation success; - Pursuit of new dissemination/communication activities.
8	Low response rate to evaluation actions	WP3	- Personalized Communication to increase engagement. This could involve personalized

Critical risks & risk management strategy

Grant Preparation (Critical Risks screen) — Enter the info.

Risk number	Description	Work Package No(s)	Proposed Mitigation Measures
			communications, gentle reminders via email or phone calls to those who haven't yet responded or the use of multiple communication channels; - Streamlining the Evaluation Process. Making the evaluation process as easy and convenient as possible for participants; - Shortening questionnaires: Keeping the evaluation instruments concise and focused.
9	Difficulty implementing or harmonising data collection in WP5 for SAFE.	WP4	- Collaboration with local researchers or organizations in each EU MS which may possess in-depth knowledge of local contexts, and can assist with data collection logistics; - Standardized Protocols: Development of clear and standardized data collection protocols, including training materials, data collection tools, and quality control procedures that may ensure consistency across EU MS and improve data reliability; - Conducting pilot testing of data collection methods in a few EU MS before full-scale implementation. This allows for identification and resolution of any potential issues early on, enabling necessary adjustments to protocols and procedures.
10	Difficulty in scaling up and transferring best or promising practices between EU MS	WP5, WP6, WP8, WP9, WP7	- Adapting interventions to suit local needs and priorities in each EU MS, ensuring flexibility in implementation; - Fostering strong collaborations with local stakeholders and leveraging EU-level networks for implementation and knowledge sharing; - Provide comprehensive capacity building training and ongoing support to local implementers to ensure consistent and high-quality implementation; - Establishing a robust system for data collection, regular reviews, and cost-effectiveness analyses to inform and guide the scaling-up process.
11	Difficulty in obtaining ethical approval to visit schools and perform the survey	WP8	- Establish early contact with relevant IRBs in each target EU MS, to help to understand their specific requirements, address any potential concerns proactively, and build rapport with the review board members; - Collaboration with local researchers or organizations in each EU MS that can provide valuable insights into the local ethical review process, facilitate communication with IRBs, and potentially assist with obtaining necessary approvals.
12	Delay in access to the EU-CEG data from the EU MS	WP9	- Signing of confidentiality agreements with the EU MS with the support of DG SANTE; - Working closely with EU MS so as to obtain access to confidential data sets even for a limited number of EU MS.

Critical risks & risk management strategy

Grant Preparation (Critical Risks screen) — Enter the info.

Risk number	Description	Work Package No(s)	Proposed Mitigation Measures
13	Tobacco and alcohol industry interference	WP5, WP2, WP6, WP3, WP4, WP8, WP9, WP1, WP7	- Carry out all JA-SAFE activities in line with the WHO FCTC Article 5.3 (no collaboration with tobacco industry or entities with vested interests); - Establish procedures to prevent industry interference (e.g. require declaration of interests from partners, event participants etc.).

TECHNICAL DESCRIPTION (PART B)

COVER PAGE

Part B of the Application Form must be downloaded from the Portal Submission System, completed and then assembled and re-uploaded as PDF in the system. Page 1 with the grey IMPORTANT NOTICE box should be deleted before uploading.

***Note:** Please read carefully the conditions set out in the Call document (for open calls: published on the Portal). Pay particular attention to the award criteria; they explain how the application will be evaluated.*

PROJECT	
Project name:	[Joint Action on Health Promotion and Disease Prevention including Smoke and Aerosol Free Environments]
Project acronym:	[JA-SAFE]
Coordinator contact:	[Constantine VARDAVAS], [University of Athens-UOA]

TABLE OF CHANGES

GAP Comments - Changes	Justification	Section/Page
RC1: The justification for including the alcohol-related objective is not sufficiently detailed.	We have provided additional detail on the importance of including the alcohol objective, in light of the text of the call. We have added additional documentation in Sections 1.1, 2.1 and 3.1.	Sections 1.1, 2.1 and 3.1
RC2: The description of some of these indicators is either not detailed enough, e.g. for the repository, or for Objective 9.	We have now made it clear that we refer to the updating of the repository that was developed in JATC2. This was detailed in Task 5.1 but is now noted also in Objective 5. With regard to WP9, we have now edited indicators so that they are clearer to the reader	P.10
RC3: The importance of identifying good/best/ promising practices and their piloting/adoption and scale up is overall identified, but it is not clearly described how these would be achieved.	This has now been well defined.	Sections 3.1 and 3.3
RC4: Objectives and tasks of WP 6 lack clarity for the logical path of the project;	We have further updated the description of activities within WP6 to address the logical path.	Section 4.2 (P. 52)
RC5: The objectives for WP5-8 do not fully detail the specific area(s) they cover in relation to other technical WPs, and the details on how the activities among WP5-8 are linked to the activities of the horizontal WPs (1 to 4) are inadequately presented;	We have now described in detail how the Horizontal WPs and the Vertical WPs will interact with regards to their activities	Section 4.1

RC6: Some tasks lack details on execution, for example on the development of national approaches on how to best use EU financial mechanisms and the collaboration with UNICEF;	Due to the very limited page length of the proposal, we have outlined the actions that will be performed without going into the methodological steps for each of the actions. To address this, our solution has been to add a methodological report for each WP, which will be provided as a milestone.	Section 4.2
RC7: It is not fully clear how the policymakers' participation in the webinars and hands-on training will be assured, and if quantitative and qualitative focus group research at EU MS level will be used or not.	We have noted in detail how policymakers' participation in the webinars will be assured. The methodological approach for measuring stakeholder engagement is to be noted within the first milestone of each WP by month 6.	Section 3.2
RC8: Not all deliverables are specifically included within the description of the deliverables, e.g. the project website and the project leaflet	These are now noted as deliverables.	Section 4.2 (p. 43)
RC9: The number of deliverables is high, and several of them do not represent major outputs of the project (D5.1, D6.1, D7.1, D8.1 are internal milestones, D5.2 and D5.3 could be joined, the titles of D6.2 and D7.2 do not clearly reflect the content).	We have revised Deliverables and Milestones and reduced their number, where applicable.	Section 4.2
RC10: Management approaches that would assure alignment of work specific to WPs 5-8, as well as their cooperation and synergies with the horizontal WPs, are not detailed enough.	The management approach to how the WPs will feed into each other has now been defined in detail.	Section 4.1
RC11: The frequency of steering committee meetings is inadequate to timely recognise and address the potential misalignments.	We have now increased the number of steering committee meetings from 10 to 24.	Section 1.2
RC12: Regarding the subcontracting item N° 10, further clarification is needed about this cost in order to prevent double funding.	This cost refers only to the transfer of knowledge on the training and operational activities needed to sustain a sensory panel in the context of JA-SAFE. There will be no overlap with other activities of CARA within the context of its work as a member of the Flavours TG.	Section 4.2
RC13: Details on how the results of Work Package 6 will have a significant and long-term impact on the target populations are not clearly described.	We have included additional text on how this will impact target populations.	Section 4.2
RC14: Activities that would support the sustainability of the results after the end of the EU funding are generic, and they are not sufficiently detailed in justifying how they would lead to sustainability.	Detailed description of the actions that would fuel sustainability specifically for JA-SAFE have been now noted and explained in detail.	Section 3.3

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PROJECT SUMMARY

Project summary

The aim of this joint action is to reduce the burden of NCDs including cancer, and their risk factors, both at the individual and population level. Smoking and other forms of tobacco consumption are considered the single most important cause of preventable morbidity and premature mortality worldwide, with tobacco being the single major cause of premature deaths in the European Union (EU). The Joint Action on Health Promotion and Disease Prevention including Smoke and Aerosol Free Environments" (JA-SAFE) aims to significantly reduce tobacco use and exposure to second-hand smoke across Europe, contributing to the EU's goal of achieving a tobacco-free generation. The project encompasses nine work packages under five thematic areas, smoke free environments, alcohol prevention, cessation, steps towards a tobacco free generation and supporting health promotion and disease prevention in Europe.

#§PRJ-SUM-PS§# #@REL-EVA-RE@# #@PRJ-OBJ-PO@#

1. RELEVANCE

1.1 Background and General Objectives

Background and general objectives

Describe the background and rationale of the project.

How is the project relevant to the scope of the call? How does the project address the general objectives of the call? What is the project's contribution to the priorities of the call?

Smoking and other forms of tobacco consumption are considered the single most important cause of preventable morbidity and premature mortality worldwide, with tobacco being the single major cause of premature deaths in the European Union (EU). Efforts to prevent and reduce the devastation of tobacco-related deaths and illnesses in the EU consist of the Tobacco Products Directive (TPD) and the ongoing implementation of the WHO Framework Convention on Tobacco Control (FCTC). These two instruments provide the EU Member States (MS) with a framework of actions that, if appropriately implemented, would significantly reduce tobacco use initiation, monitor tobacco product evolution, and reduce demand for tobacco products.

According to the World Health Organization (WHO), exposure to second-hand tobacco smoke is a widespread source of mortality, morbidity and disability in the Union. Such exposure is associated with tobacco consumption, which remains the leading cause of preventable cancers, 27 % of all cancers being attributed to the use of tobacco. The detrimental impacts of tobacco use extend beyond individual health; they also impose significant economic costs on healthcare systems and society at large. For instance, In 2009, tobacco smoking already cost the EU EUR 544 billion, which is about 4.6 % of the EU27's combined GDP.

Recently, it was estimated that 54 % of current and past smokers in the EU had started regularly smoking before the age of 19, and 14 % before the age of 15, indicating the need to create a tobacco free generation in Europe as a major public health goal.

One of the critical components of the EU Beating Cancer Plan, the Tobacco-Free Generation initiative aims to significantly prevent and reduce tobacco consumption across the European Union. Launched in response to the pressing need for comprehensive tobacco control, this initiative sets ambitious targets for the future, focusing on creating a smoke-free environment that protects the health and well-being of all citizens. The Tobacco-Free Generation initiative emphasizes several key strategies, including "working in full transparency towards plain packaging and a full ban on flavours, using existing EU agencies to improve the assessment of ingredients, extending taxation to novel tobacco products, and tackling tobacco advertising, promotion and sponsorship on the internet and social media". JA-SAFE comes to complement these activities.

In addition to addressing direct tobacco use, it is also crucial to consider the dangers associated with exposure to second-hand smoke (SHS) and exposure to second hand aerosol (SHA). SHS contains more than 7,000 chemicals, many of which are toxic and has been causally linked to the development of NCDs. On the other hand, WHO has highlighted, among other issues related to emerging products, the negative health effects of exposure to second-hand aerosols. Moreover, in its 2021 opinion on electronic cigarettes, the Scientific Committee on Health, Environment and Emerging Risks (SCHEER) concluded that there is weak to moderate evidence of risks of respiratory, cardiovascular and carcinogenic damage due to second-hand exposure to aerosols from electronic cigarettes.

Recognizing these dangers, the EU has emphasized the importance of ensuring smoke and aerosol free environments and in line with the above, in December 2024 a new Council Recommendation on smoke- and aerosol-free environments was issued with the objective of better protecting people in the Union from second-hand smoke and aerosols.

The revised Council Recommendation ultimately aims to better protect people across the EU, in particular children and young people, from exposure to SHS and SHA. It, therefore, expands on two key points; the first focuses on including emerging products under the current legislation, while the second concerns broadening the coverage to outdoor spaces where children and young people in particular might be exposed to second-hand emissions. Specifically, the Council Recommendation suggests that EU MSs further consider expanding into other areas, such as public playgrounds, amusement parks and zoos, swimming pools and beaches, transport stops and stations, outdoor areas connected to healthcare and education premises, public buildings, and restaurant terraces. The Recommendation also notes that EU MSs should consider addressing SHS and SHA exposure in private cars where children or vulnerable people might be present. It finally advocates for effective protection from exposure to tobacco smoke and emissions from the emerging products in indoor, outdoor or semi open areas related to workplaces, public places and public transport.

With the above in mind the Council recommendation notes that EU MS should develop and/or strengthen smoke- and aerosol-free environments policies by:

- ✓ Developing national strategies and programmes to ensure effective protection from exposure to second-hand smoke and aerosols.
- ✓ Applying and/or developing prevention, smoking cessation and awareness-raising campaigns such as educational, outreach and information campaigns to ensure compliance with smoke and aerosol-free measures
- ✓ Ensuring that appropriate structures and mechanisms are in place to promote compliance and applying and/or developing best practices which can improve the implementation and enforcement of smoke- and aerosol-free environments measures.
- ✓ Working together on the exchange of best practices on developing new or strengthening existing smoke and aerosol-free policies, programmes and strategies to ensure they are comprehensive, and on the design and piloting of ambitious and efficient approaches to achieving smoke- and aerosol-free environments.

In addition to tobacco, alcohol consumption is a major modifiable risk factor contributing to disease burden in the EU. Alcohol use is the leading risk factor of global disability-adjusted life years in age group 25–49 years. Alcohol use is partly or fully related to 200 different adverse health events such as cancers, infections, cardiovascular diseases, alcohol use disorders and injuries, in addition to causing social harms. Overall, alcohol use is estimated to annually cause nearly 3 million deaths globally and 800'000 deaths in the European region.

Europe's Beating Cancer Plan acknowledges harmful alcohol use as one of the key health determinants in the population-level health promotion and disease prevention of NCDs and aim to help Member States to substantially reduce alcohol-related harm. Within the context of Europe's Beating Cancer Plan, the Commission noted to increase support for MS and stakeholders to implement best practices and capacity-building activities to reduce harmful alcohol consumption, in line with the targets of the UN Sustainable Development Goals, which includes the goal to strengthen the prevention and treatment of harmful use of alcohol. The aims of the Cancer Plan further include to reduce young people's exposure to online marketing and advertising of alcohol products, and to implement evidence-based brief interventions on alcohol in primary healthcare, the workplace and social services. A recent review of the Cancer Plan indicate that the Commission is preparing measures that address the accessibility of products, information

to consumers and the regulation of alcohol advertising. The Commission has also launched the Healthier Together – EU Non-Communicable Diseases Initiative (EU NCD Initiative) to support EU countries in reducing the human and financial burden of non-communicable diseases (NCDs). Harmful use of alcohol is one of the key health determinants for which the document calls for action, referring to the WHO Global Alcohol Action Plan 2022–2030. In the Action plan, the objective is to reduce alcohol consumption by 2030 especially by implementing high-impact strategies and interventions, but also – among other things – by raising awareness of the risks and harms associated with alcohol consumption and through capacity-building and by enhancing the prevention and treatment capacity of health and social care systems

With the above in mind, the general objective of this project is to support the policy objective of the EU NCD Initiative and the implementation of Europe's Beating Cancer Plan, including the creation of a Tobacco-Free Generation and the reduction of harmful alcohol consumption, through the following activities:

a) Supporting the implementation of the planned Council Recommendation on Smoke-free Environments through appropriate measures at the local, regional, and national levels that support the compliance to and enforcement of smoke and aerosol-free environments (SAFE), to reduce the risks from harmful exposure to second-hand smoke and aerosols in indoor and certain outdoor spaces
b) Supporting the implementation of Europe's Beating Cancer Plan with respect to reducing harmful alcohol consumption and reducing the exposure of young people to advertising and marketing of alcoholic beverages
c) Facilitating the reduction in the burden of NCDs, including cancer, and their risk factors, both at a community and societal level, promoting active and healthy aging and supporting MS in their efforts to meet the Sustainable Development Goals, in particular, Goal 3, Target 3.4, as well as the NCD targets of the (WHO)
d) Developing and scaling up best and promising practices for tobacco control and SAFE in healthcare settings, ensuring appropriate communication strategies and long-term networking planning in parallel
e) Supporting the implementation of Europe's Beating Cancer Plan, in particular in terms of achieving a Tobacco-Free Europe through actions to help create a 'Tobacco-Free Generation' where less than 5% of the population uses tobacco by 2040 compared to around 25% today
f) Supporting the implementation of the planned Council Recommendation on Smoke-free Environments, related legislative frameworks on tobacco control, alcohol prevention, and other cross-cutting modifiable health determinants and risk factors.

1.2 Needs analysis and specific objectives

Needs analysis and specific objectives

Describe how the objectives of the project are based on a sound needs analysis in line with the specific objectives of the call. What issue/challenge/gap does the project aim to address?

The objectives should be clear, measureable, realistic and achievable within the duration of the project. For each objective, define appropriate indicators for measuring achievement (including a unit of measurement, baseline value and target value).

Smoking is the leading behavioural risk factor for mortality worldwide, resulting in over 175 million deaths and nearly 4.30 billion years of life lost (YLLs) from 1990 to 2021. A recent Global Burden of Disease study estimates that more than 2 billion years of life lost will be attributable to smoking between 2022 and 2050. This underscores the vast impact of the tobacco epidemic and highlights the urgent need for health promotion and disease prevention initiatives aimed at reducing tobacco use in Europe.

Europe's Beating Cancer Plan has proposed actions to create a "Tobacco-Free Generation," aiming for less than 5% of the population to use tobacco by 2040, compared to around 25% today. The interim goal is to meet the WHO target of a 30% relative reduction in tobacco use by 2025 compared to 2010, which corresponds to a smoking prevalence of approximately 20% in the EU. The EU Beating Cancer Plan emphasizes the Commission's commitment to protecting young people from the harmful effects of tobacco and related products – an EU commitment that is strongly clear within the scope of our Joint Action.

Moreover, the recent Council Recommendation on Smoke-Free Environments also indicates the determination of the EU to reduce and prevent exposure to SHS and SHA through the recommendations to extend its coverage to emerging products such as e-cigarettes and heated tobacco products and the expansion of smoke-free environments to include outdoor spaces – a topic that is a primary focus of this Joint Action.

EU member states must collaborate to effectively tackle the risk factors for NCDs, as this allows for resource pooling, information sharing, and effort of scale. Cross EU MS collaboration – such as the one presented within this Joint Action enhances EU MSs capacity, cross EUMS cooperation and allows for the scaling up of best practices and policies to ensure the implementation of effective policies and actions to reduce the burden of major NCDs and improve citizens' health and well-being.

In light of the current Joint Action's background and overall objective we proudly present the below 9 specific objectives that will be addressed within the context of 9 Work Packages.

JA-SAFE has been designed to achieve the below overarching objectives, within 4 Horizontal support WPs and 5 thematic oriented WPs, each addressing these key areas.

Objective 1: To ensure appropriate coordination of implementation activities, addressed in WP1. This will allow for the smooth implementation of the tasks outlined in the horizontal and vertical WPs of the project.

Objective 2: To support the dissemination of information created through JA-SAFE, addressed in WP2, with respect to enhancing the visibility of the project, its actions and its impact to stakeholders and the public.

Objective 3: To evaluate the impact of the actions of the JA-SAFE, internally and externally, within WP3, so as to ensure quality control is implemented internally and that its stakeholders and project result end users are appropriately and effectively engaged.

Objective 4: To support the integration of JA-SAFE actions and endpoints into national policies and practices, addressed within WP4. Such actionable recommendations and policy briefs, drawing directly from the identified best practices and the outcomes of real-world studies will be tailored to facilitate the seamless embedding of JA-SAFE's evidence-based interventions into national health strategies and operational frameworks.

Objective 5: To contribute to reducing the risks from harmful exposure to second-hand smoke and aerosols in indoor and certain outdoor spaces by supporting increasing SAFE uptake and compliance across EU MS. (WP5)

Objective 6: To support the implementation of Europe's Beating Cancer Plan with respect to reducing harmful alcohol consumption, also in vulnerable populations, and reducing the exposure of young people to advertising and marketing of alcoholic beverages. (WP6)

Objective 7: To develop and scaling up of best and promising practices for tobacco control and the implementation of SAFE in Healthcare settings. This objective aims to enhance the role of tobacco cessation, tobacco education and health promotion for providers, personnel and patients. (WP7)

Objective 8: To support actions and policies that help create a Tobacco-Free generation where less than 5% of the population uses tobacco by 2040 compared to around 25% today (addressed within WP8)

Objective 9: The final thematic area (WP9) is to support the implementation of the planned Council Recommendation on SAFE, related legislative frameworks on tobacco control (such as the Tobacco Products Directive and the Tobacco Advertising Directive), the assessment of attributable risk factors for NCDs in Europe and supporting overall best and promising practices for NCD prevention in EU MS. (WP9)

The above specific objectives of this proposal are of direct relevance to the call and to the objectives that the European Commission aims to accomplish through the Joint Action on Health promotion and disease prevention including smoke- and aerosol- free environments.

The objectives have been formulated to be "SMART": Specific, Measurable, Acceptable for the target group, Realistic, and Time-bound as identifiable through the WP text noted in Section 4 and in light of the above we provide a list of process, output and outcome indicators per objective.

Specific Objective 1: To ensure appropriate coordination of implementation activities

Process Indicators	**Target Value**
Absence of Conflict of Interest (COI) and confidentiality forms	1
Meetings of the consortium (entire JA)	5
Meetings of the Steering Committee	24
Creation of the Expert Advisory Group	1
Creation of the Youth Advisory Group	1
Output indicators	**Target Value**
Signed Consortium Agreement signed by all partners	1
COI forms signed by all partners	At least 66 (1 per included partner)
Consortium meeting minutes	5
Steering Committee minutes	24
Outcome indicator	**Target Value**
Effective coordination as noted by the submission of all deliverables	100% of deliverables uploaded to ECAS

Objective 2: To support the dissemination of information created through JA-SAFE, addressed in WP2.

Process Indicators	**Target Value**
Website for project launch	1
Project final conference	1
Leaflet of the project developed	1
Completion of the dissemination plan	1
Participation in external events and conferences	10
Publication strategy document	1
Output indicators	**Target Value**
Visits to the project website	2000
Participation in the final conference (people)	150
Interaction on social media accounts	2000
Number of unique dissemination outcomes (i.e. reports, manuscripts)	20
Number of events organised to share experiences and for networking	8
Number of awareness raising activities developed per vulnerable group of the population;	3
Outcome indicator	**Target Value**
Number of EU MS that adopt the project outputs	10
Number of new practices influenced by project results	5

Objective 3: To evaluate the impact of the actions of the JA-SAFE, internally and externally, within WP3.

Process Indicators	**Target Value**
Evaluation plan	1

Key performance indicators for evaluation	20
Evaluation questionnaires (internal)	8
Evaluation questionnaires (external)	2
Output indicators	**Target Value**
Evaluation feedback response of participating institutions	>90%
Evaluation of feedback response of participants (internal)	>50%
Evaluation feedback by (external) stakeholders	15
Outcome indicators	**Target Value**
Improved Project Performance as noted by the continuous evaluation (on a 1-5 scale)	Score >4/5 in all WPs
Overall Project Performance as noted by evaluation	Score >4.5/5 overall

Objective 4: To support the integration of JA-SAFE actions and endpoints into national policies and practices, addressed within WP4.

Process Indicators	**Target Value**
Detailed sustainability plan	1
Number of "how-to" guides created	5
Number of webinars for sustainability	2
Number of guidelines and other documents developed for the EU MS	15
Output indicators	**Target Value**
Number of meetings/workshops held with relevant policymakers and government agencies	10
Number of partnerships established with national institutions (e.g., research institutes, government departments, NGOs)	10
Number of policy briefs/position papers submitted to relevant government bodies	10
Number of patient organisations/non-government organisations, national policy makers, educational institutions involved	20
Number of EU MS visits for sustainability actions	5
Outcome indicators	**Target Value**
Number of new or revised policies/legislation that incorporate project findings or recommendations	5
Adoption of project-developed tools or methodologies by government agencies	5
Continued use and application of project outputs (e.g., tools, methodologies, data) by government agencies after project completion	3

Objective 5: To contribute to reducing the risks from harmful exposure to second-hand smoke and aerosols in indoor and certain outdoor spaces by supporting increasing SAFE uptake and compliance across EU MS. (WP5)

Process Indicators	**Target Value**
Updating of the web-based repository that was developed in JATC2	1

Creation of the updated knowledge sharing archive	1
Outline and analysis of best practices for smoke-free environments across Europe	1
Number of countries for which SAFE measurements are performed	15
Number of guidelines and national reports created	15
Output indicators	**Target Value**
Number of EU MS that have information on SAFE in the repository	>10
Number of countries with SHS-SHA exposure information	15
Number of countries provided with a national report	15
Number of countries that are informed on best practices for SAFE	15
Outcome indicators	**Target Value**
Number of countries that take action based on the reports	5
Number of countries that import the results into their national plan	5

Objective 6: To support the implementation of Europe's Beating Cancer Plan with respect to reducing harmful alcohol consumption, also in vulnerable populations, and reducing the exposure of young people to advertising and marketing of alcoholic beverages. (WP6)

Process Indicators	**Target Value**
A suitable method for measuring youth exposure to online alcohol marketing has been identified	1
Promising practices for scaling up youth alcohol prevention activities have been identified and selected	1
Number of countries participating in the review of lower-risk recommendations in Europe and key other countries	25
Number of task-level meetings discussing behavioural interventions (BI) in specific vulnerable population groups.	6
Output indicators	**Target Value**
Number of EU MS in which the mapping of youth exposure to marketing is performed	5
Number of pilot projects for youth alcohol prevention carried out	3
Recommendations for lower-risk alcohol consumption have been formulated	1
Number of BI training programmes developed in specific settings serving vulnerable groups.	8
Dissemination of key findings to relevant stakeholders through webinars or presentations	5
Outcome indicators	**Target Value**
Policymakers or relevant national stakeholders citing the findings of the youth exposure mapping in their communications (e.g., reports, policy discussions, presentations)	10
Initiation of national discussions related to communicating information on lower-risk alcohol use	5
Improved capacity in conducting behavioural interventions among vulnerable groups among stakeholders working in pilot sites	~30% increase in pre-post assessment scores on average.

Objective 7: To develop and scaling up of best and promising practices for tobacco control and the implementation of SAFE in Healthcare settings. This objective aims to enhance the role of tobacco cessation, tobacco education and health promotion for providers, personnel and patients. (WP7)

Process Indicators	**Target Value**
Number of healthcare settings surveyed/assessed across EU Member State for Assessment and Mapping	15
Involvement of key stakeholders (healthcare professionals, patients, policymakers) in plan development.	10
Number of training sessions conducted.	5
Number of healthcare students trained in tobacco control	400
Number of healthcare staff trained in tobacco control interventions.	300
Output indicators	**Target Value**
Development of a database of healthcare settings and their tobacco control practices.	1
Number of institutions and policymakers and healthcare professionals of the gaps in tobacco control within healthcare settings	15
Development and dissemination of training materials for healthcare students in EU languages	12
Development and dissemination of guidelines or toolkits for enforcing smoke-free outdoor areas in EU languages	12
Outcome indicators	**Target Value**
Improved communication skills among healthcare students regarding tobacco control issues	>30% increase in pre-post assessment scores
Improved communication skills among healthcare professionals regarding tobacco control issues	>30% increase in pre-post assessment scores
Improved access to information about tobacco control implemented by healthcare settings	>5 EU MS

Objective 8: The fourth thematic area will support the implementation of Europe's Beating Cancer Plan, in particular in terms of achieving a tobacco-free Europe through actions to help create a 'Tobacco-Free Generation' where less than 5% of the population uses tobacco by 2040 compared to around 25% today, (addressed within WP8)

Process Indicators	**Target Value**
Number of EU Member States participating in the mapping and assessment exercise	5
Collection and analysis of data on industry tactics across EU Member States	10
Selection of EU Member States for the cross-sectional study	10
Number of best and promising practices identified for wider implementation and piloting;	5
Number of innovative approaches identified for piloting and testing;	5
Output indicators	**Target Value**
Development and dissemination of policy briefs and recommendations to policymakers in EU MS	15 EU MS

Development of a comprehensive report on industry tactics used in the EU.	1 report
National report on the findings of the youth tobacco study	10 EU MS
Development and implementation of pilot projects for youth tobacco prevention in selected EU Member States.	>3 EU MS
Outcome indicators	**Target Value**
Initiation of discussions on forward-looking tobacco control measures in EU MS	5
Inclusion of the youth tobacco use patterns and trends in national discussions	10 EU MS
EU MS with increased implementation of effective tobacco control interventions among youth	8

Objective 9: The final thematic area (WP9) is to support the implementation of the planned Council Recommendation on SAFE, related legislative frameworks on tobacco control (such as the Tobacco Products Directive and the Tobacco Advertising Directive), the assessment of attributable risk factors for NCDs in Europe and supporting overall best and promising practices for NCD prevention in EU MS. (WP9)

Process Indicators	**Target Value**
Access to the EU-CEG dataset for at least 1 EU MS	1
Number of tobacco product submissions reviewed and assessed	100
Establishment and operation of a sensory panel for tobacco product flavour assessment	1
Identification and selection of relevant risk factors for NCD development.	4
Number of best practices for NCD prevention identified	4
Output indicators	**Target Value**
Development of reports on product constituents and design parameters.	20
Dissemination of reports on suspect tobacco products on the EU market to EU MS and other stakeholders	30
Publication of reports summarizing the available evidence on NCD risk factors in the EU	4
Number of Member States piloting promising practices;	4
Number of Member States implementing best practices	4
Outcome indicators	**Target Value**
EU MS that take into account the results of the sensory panel on the regulation of flavoured tobacco products.	5
Improved health outcomes related to NCD risk factors in the assessment groups	n/a

#@COM-PLE-CP@#

1.3 Complementarity with other actions and innovation — European added value

Complementarity with other actions and innovation

Explain how the project builds on the results of past activities carried out in the field and describe its innovative aspects. Explain how the activities are complementary to other activities carried out by other organisations.

Illustrate the European dimension of the activities: trans-national dimension of the project; impact/interest for a number of EU countries; possibility to use the results in other countries, potential to develop mutual trust/cross-border cooperation among EU countries, etc.

Which countries will benefit from the project (directly and indirectly)? Where will the activities take place?

The EU NCD Initiative and Europe's Beating Cancer Plan provide support to MS in identifying and implementing effective policies/actions to reduce the burden of major NCDs, putting forward actions to create a Tobacco-Free Generation and increasing support for MS and stakeholders to implement best practices and capacity building activities in line with the targets of the UN SDGs. Our project, JA-SAFE has significant added value as it addresses the issue of exposure to tobacco, including second-hand smoke and aerosols in indoor and certain outdoor spaces, alcohol consumption, and NCDs **at an EU wide level –an activity that would be impossible to be done by one, or a few, EU MS by themselves**. This is an unprecedented opportunity as coordinating the work at European level is greater than the sum of the impacts of national activities.

EU added value will be achieved in the following areas as outlined in the following table:

Path to EU added value	***How this is addressed in this JA***
Implementing EU legislation	The entire scope of this JA is to support the policy objective of the EU NCD Initiative and the implementation of Europe's Beating Cancer Plan. As a unique public policy support project, this JA will directly guide EU MS in their implementation of these EU framework policies.
Achieving economies of scale	Substantial value for money at a European level will be obtained through this JA, as the activities performed within this project would support EU MS regulatory activities for which substantial scientific and technical expertise and extensive collaborative effort would be needed. This scale expertise can be provided only through a JA.
Promoting best practice	With access to a large pool of interventions, this JA will enhance the development and scaling-up of best and promising practices for tobacco control, alcohol prevention, NCD prevention and ensuring SAFE in different settings.
Bench making for decision making	The JA will play a key role in the formulation of the "next steps" of health promotion and disease prevention activities across the EU, the results of which would be used to fuel public health policy decision making with regards to tobacco control, alcohol prevention and NCDs.
Tackling cross-border threats	Tobacco is the largest threat to European Public Health, responsible for more than 700,000 deaths in the EU annually. This JA will tackle primarily this public health epidemic, as well as its subsequent secondhand smoke and aerosol emissions, as well as alcohol prevention actions, all aiming in reducing the burden of NCDs.
Networking	The JA as a true collaborative, grassroots and European wide project has been developed with a "bottom up" approach to enhance networking between EU MS. A direct result of this networking is increased collaborations between MS competent authorities and affiliated entities. As we have **55 partners from 20 countries with over 200 individual experts,** we are confident that the networking needs of JA-SAFE will be met and surpassed.

#§COM-PLE-CP§# #§PRJ-OBJ-PO§# #§REL-EVA-RE§# #@QUA-LIT-QL@# #@CON-MET-CM@#

2. QUALITY

2.1 Concept and Methodology

Concept and methodology

Outline the approach and methodology behind the project. Explain why they are the most suitable for achieving the project's objectives.

The project has been split into 5 thematic areas, covering the aspects outlined in the call. These five thematic areas correspond to the 5 horizontal WPs of the project. Hence, within this JA, we have followed a concept in which the thematic areas are addressed at the WP level, with this approach, each WP has specific objectives that are addressed within the context of tasks. This breakdown of actions, allows for a manageable and dependent implementation of different tasks, without the creation of dependent "bottleneck" tasks.

Each WP, due to its thematic topic and based on its specific objectives is divided into tasks, each with a specific focus. While the WPs are described in detail in Section 4, below is a short overview of the approaches that would be followed within each WP.

- ✓ The first thematic pillar (addressed in WP5), is exposure to SHS and SHA, in line with the very recent Council Recommendations on smoke free environments, which aims to better protect people, especially children, from second-hand smoke and aerosols. Here the WP includes a combination of desk research, reviews, stakeholder interviews and environmental measurements.
- ✓ The second thematic pillar (addressed in WP6), identifies and supports ways to reduce alcohol-related harm in Europe through rapid literature reviews, surveys, key informant interviews, social media scraping, focus groups, and interventions focusing on e.g. community-based models as well as brief intervention in new settings and in vulnerable groups.
- ✓ The third thematic pillar (WP7) covers addressing smoking and SAFE in health care settings, through mapping studies and health promotion and educational interventions.
- ✓ The fourth thematic pillar (WP8) has a key role in promoting a tobacco free generation and includes desk research, reviews, key informant interviews, social media assessments, a cross-sectional study and a series of interventions for tobacco prevention among youth.
- ✓ The fifth thematic pillar (WP9) encompasses actions that strengthen disease prevention and health promotion in Europe through the implementation of surveillance studies, sensory panel assessments, big data analysis, systematic reviews, and a series of interventions for NCD prevention.

It is essential to note that the first milestone for all thematic pillar Work packages (WP5, WP6, WP7, WP8, WP9) is a detailed methodological report, so that by M5 of JA-SAFE we will have a detailed and complete description of the specific methodological approaches for each WP and Task within the context of the project.

#§CON-MET-CM§# #@CON-SOR-CS@#

2.2 Consortium set-up

Consortium cooperation and division of roles (if applicable)

Describe the participants (Beneficiaries, Affiliated Entities and Associated Partners, if any) and explain how they will work together to implement the project. How will they bring together the necessary expertise? How will they complement each other?

In what way does each of the participants contribute to the project? Show that each has a valid role and adequate resources to fulfil that role.

***Note:** When building your consortium you should think of organisations that can help you reach objectives and solve problems.*

The individual partners of the consortium are described in the following Section 2.3 and in Annex 4. However, here we present an overview of the consortium setup, its strengths, how they bring together the necessary expertise, and how they complement each other to address the objectives of the call.

- The partners in the consortium, to a significant extent, have been collaborating in projects successfully in the past. The leading groups in tobacco control in Europe are included in the consortium, many of whom are already successfully collaborating together within the context of the two previous tobacco-related Joint Actions (JATC1 and JATC2). A substantial number of partners have also played a key role in Alcohol-related JAs (RARHA) and in the other concurrent JAs (JACARDI, JApreventNCD, etc); hence, they are well-positioned to work on this specific topic. Similarly, key players in NCD prevention also add additional collective expertise.
- The partners bring in a diversity of experiences and expertise that is needed to make this interdisciplinary project successful (including tobacco control, knowledge of SHS and SHA, expertise in alcohol prevention, and in implementing community/hospital-based interventions to tackle NCDs).
- The numerous team members from the partners involved in JA-SAFE have different and complementary theoretical backgrounds, and a broad scope of experiences and exposures, hence

allowing for a more integrated and multidisciplinary approach within JA-SAFE across the broad spectrum of EU countries involved in this Joint Action.

- The WP leads have significant expertise in the field of their respective WP, with the selected Task leads also providing unique knowledge to the project. Within each WP, there is a thematic autonomy allowing for the parallel implementation of activities -without the risk of "bottleneck" activities that may hinder the project's success.
- Within the WP level, all objectives were discussed and developed within the context of multiple preparatory meetings by thematic topic and strategic objective, taking into account the call of the proposal but also the specific expertise of the members of the consortium. Hence, each task is supported by partners with expertise and experience on the topic which create a nurturing environment for close cooperations.
- The coordinating team and the project coordinator have significant experience in coordinating and handling large European commission funded projects, across hundreds of and ensure smooth implementation. Through this preparatory phase there has always been a democratic approach where the brainstorming of ideas and tasks reflect the collective intellectual effort of all partners, hence guaranteeing partner dedication to the specific aims and objectives within each WP and within the consortium as a whole.

2.3 Project teams, staff and experts

Project teams and staff

Describe the project teams and how they will work together to implement the project.

List the staff included in the project budget (budget category A) by function/profile (e.g. project manager, senior expert/, junior expert, trainers/teachers, technical personnel, administrative personnel etc. — use the same profiles as in the detailed budget table, if any (n/a for prefixed Lump Sum Grants)) and describe briefly their tasks. Provide CVs of all key actors (if required).

Name and function	Organisation	Role/tasks/professional profile and expertise
A successful JA will have to deliver in term of: a) Accurate planning of each work package (WP) as requested in the text of the call b) Smooth execution of planned activities and tasks in each WP c) High quality outputs, deliverables and reporting d) Effective and efficient use of resources. The coordination of this JA will be done by UOA, while internal project management will be coordinated through a project Secretariat, a Steering Committee and the General Assembly. Complete details of the coordination actions are presented in Section 2.4. The proposed consortium partners possess the staff capacity and are able to meet and exceed the expectations of this JA. Due to constraints in the length of the application, below we mention only the primary contact per institution as noted within the ECAS system. The extensive and essential team members are noted in detail in Annex 4, with short CVs in Annex 2, while the list of researchers will be included and updated on the project website. **The detailed collaborative actions and how each of the teams will cooperate with each other is outlined in the description of the WPs in Section 4.**		
Constantine Vardavas	UOA (EL)	Principal Investigator. MD, MPH, PhD; Assistant Professor of Epidemiology and Preventive Medicine, Medical School, University of Athens, Greece & Lecturer in Oral Health Policy and Epidemiology, Harvard School of Dental Medicine; Prof Vardavas is an experienced and collaborative coordinator of European Commission Funded projects with a previous budget of over 17 million Euros (HADEA, CHAFEA, ECDC, DG SANTE, Horizon2020). He has unique expertise in European tobacco control and has led multiple reports that have led to European Commission Implementing Decisions within the context of the TPD.
Vanessa Gorasso	SCIENSANO (BE)	Health indicators unit; Senior health economist, expertise in burden of disease estimation, health impact assessment.

Suručić Relja	UNIBL (BA)	Expert at the University of Banja Luka
Marcinko Vedran	FMZ (BA)	Expert at the Federal Ministry of Health
Slunjski Dragana	PSRS (BA)	Expert at the Pharmaceutical Society of Republika Srpska
Elena Demostheno us	NAAC (CY)	Expert at the Cyprus National Addictions Authority
Maria Karekla	UCY (CY)	Expert at the University of Cyprus
Markéta Paulová	SZU (CZ)	Senior researcher, public health and health promotion.
Marinko Artuković	CIPH (HR)	MD, PhD, Head of Division for strategic planning, innovations and project coordination.
Sonja Hansen	AAKS (DK)	European Project Officer at the Municipality of Aarhus. BA in languages and a Diploma in Public Administration and Economics as well as a certified project manager education. Has worked with project development, coordination and fundraising since 2007, and has been engaged in several EU-networks and EU-projects. Experience in collaborating international, in both Triple and Quadruplo Helix cooperation and member of both national and international networks and close cooperation with the EU-system and Danish EU-office (CDEU) in Brussels and their networks as ERRIN – European Regions regional international network and CORAL-network (Community of regions for assisted living).
Trine Ungermann Fredskild	HUSD(DK)	Nearly 20 years in healthcare education, led programs and served as an external lecturer at Aarhus University. Since 2017, Chief Consultant, focusing on innovation and project development. Currently, works at the Clinical Research Department supporting leadership and fundraising. Research includes leading national and international projects on healthcare technology, with publications on technology implementation and change management.
Merete Labriola	RZ(DK)	Professor in Public Health and Head of Centre for Health Research at Nykoebing F Hospital; Senior Expert; highly experienced leader of multidisciplinary, cross-national networks, collaborations, teams and projects. Has a clinical background, and many years of work experience at hospitals and teaching experience in a health care setting.
Kit Borup	MFK (DK)	Manager of health and social services
Birgitte Echwald	ODSHERRED (DK)	Chief consultant, project development and project manager with many years' experience in project management within EU, national and regional funding within projects in different areas, including health (welfare technology, community development & vulnerable people) qualifying relevant stakeholder engagement and real-life changes.
Helle Stuart	VAL (DK)	Leader of partnership Stronger Together for a Nicotine-free Generation. MSc in Public Health. Expert in Tobacco Prevention and Implementation of Strategies and Interventions at the local level.
Hanna Ollila	THL (FI)	Senior specialist; Senior specialist of prevention of tobacco-related harms at THL; Tobacco theme coordinator in the Joint Action Prevent Non-Communicable Diseases (JA PreventNCD) -project, and Joint Action on REspiratory Diseases (JARED).
Heidi Löflund-Kuusela	CSF	Manager in health promotion working as team leader in health promotion unit of Cancer Society of Finland, project management,

		intervention planning and implementing, communication and advocacy in health promotion and cancer prevention.
Tuula Vasankari	FILHA	Senior Medical Advisor, pulmonologist. Secretary General at FILHA.
Juliette Legendre	MoH (FR)	JA project manager. EU4Health project manager, Office of European and International Affairs / Ministry of health. Expertise in project management and public health.
Luke Clancy	TFRI (IE)	Expert at the TobaccoFree Research Institute Ireland
Angeliki Lamprou	NPHO (EL)	Senior Scientific Officer. Senior epidemiologist, RN, MPH, Doctor of Science in Epidemiology and Environmental Health. JA-SAFE main contact person and senior researcher. More than 20 years of public health working and teaching/training experience. Currently the Head of Directorate of Epidemiology and Prevention of Non-Communicable Diseases and Injuries in NPHO. Led WP2 in JATC2 and currently involved as main contact person and/or researcher in Joint Actions and HORIZON projects (PREVENT, UPRISE, EU-WISH).
Zsuzsa Cselko	NKIP (HU)	Preventive Medicine and Public Health specialist and the Head of the Department of Methodology at NKIP. Responsible for training, writing, and editing guidelines on smoking cessation, as well as developing and managing cessation programs and projects; Coordinated the Hungarian activities in the Eastern Europe Center of Excellence for Tobacco Control international project and JATC-2; Participates as an expert in JARED and EUCanScreen projects.
Péter Csizmadia	NNGYK (HU)	Project manager; expert in the field of the health promotion. Accountable for the entire project scope, the Hungarian project team and resources.
Agnes Devecsery	ÉBSZJCK (HU)	Senior expert; Psychologist; Clinical psychologist trainee in the Hospital's Health Promotion Office. Responsible for implementation of project activities. Related JA experience: senior expert in JADE Health.
Gábor Kovacs	OKFO (HU)	National Directorate General for Hospitals
Peter Kirsch	GOKVI (HU)	Senior expert of Semmelweis University in WP2: extensive experience in corporate and public health sectors. Currently Senior Communication Expert in the JACARDI project, leading communication efforts in Work Package 6 (Health Literacy), focusing on stakeholder engagement, content creation, and SEO optimisation. Proven track record in branding, integrated communication campaigns and strategy development, as well as digitalisation projects
Renata Solimini	ISS (IT)	Senior researcher, member of the ISS scientific committee for the implementation of the activities on tobacco and nicotine control; participated in the Joint Action on Tobacco Control 1 and 2 (2017-2024).
Roberto Pola	FPG (IT)	MD PhD is Medical Doctor, Professor of Internal Medicine at Università Cattolica del Sacro Cuore and Chief of the Thrombosis Unit the Fondazione Policlinico Universitario A. Gemelli IRCCS, Rome, Italy. Expert in prevention, diagnosis, and treatment of cardiovascular and thromboembolic diseases.
Francesco D'Agostini	LIGURIA (IT)	Doctor of Medicine, specialized in Hygiene and Preventive Medicine. Associate Professor of Hygiene at the University of Genova. Research activity focused on epidemiology and prevention of cancer and other chronic-degenerative diseases.
Danilo Cereda	LOMBARDIA (IT)	Medical doctor; Manager (director) of the Unit "Infectious Diseases, Vaccinations and Prevention Performances.
Silvano Gallus	IRFMN (IT)	PhD, Senior researcher, Laboratory Head, knowledge of epidemiological methods for research on cancer and other chronic diseases, design of epidemiologic investigations, drafting of study

		protocols, preparing the questionnaires for data collection, and analyzing the data collected.
Luca Gino Sbrogiò	ULSS 6 (IT)	Director Department of Prevention. Graduate in Medicine and Surgery from the University of Padua, with a specialization in Hygiene and Preventive Medicine. Has over 30 years of experience in public health and healthcare management. Has served as Medical Director at ULSS 14 Chioggia and led various services of hygiene, nutrition, and prevention across Veneto and Friuli Venezia Giulia regions.
Ivars Vanadzins	RSU (LV)	Scientific supervisor of RSU team, with background in occupational and environmental medicine and huge experience in similar projects. Leader or leading researcher in many large-scale projects related to environment, work environment and health promotion.
Ilze Straume	SPKC (LV)	Senior expert; More than 20 years of professional experience in health promotion and disease prevention, leading the development and implementation of public health policy. Experience in working groups and projects of various levels, incl., international, implementing and coordinating the implementation of different activities. Participated in and led the process of preparation and implementation of public awareness raising campaigns, educational events, informative and methodological materials on various public health issues (vaccination promotion, HIV prevention, cancer screening, healthy lifestyle, etc.).
Sanita Lazdina	MOH LV (LV)	Deputy Head in the Mental Health, Addiction Prevention and Integrated Care Division. Expertise in drafting policy planning documents, legislation in the field of addiction prevention (alcohol, tobacco and nicotine products). Expertise in planning, content development of addiction prevention programmes and activities, both public education activities and specific selective/indicated prevention programmes for target groups.
Jolanta Spura	PSCUH (LV)	Project manager of Development and strategic planning Department. Ensures continuity for effective project delivery. Prepares and reviews reports, organizes work of all parties involved.
Gintarė Kučinskienė	LSMU (LT)	PhD, Development Department Project Manager: ensures sustainable institutional project implementation while coordinating deliverables, reporting processes, and facilitating both inter-institutional and international stakeholder engagement.
Audrone Astrauskiene	SAM (LT)	Project leader, responsible for coordination of project, professional field - health promotion and disease prevention.
Rūta Everatt	NVI (LT)	PhD, Senior research fellow, Laboratory of Cancer Epidemiology; Project leader, the main contact for the organisation. Cancer epidemiologist at the National Cancer Institute, Lithuania. Knowledge of epidemiological methods for research on cancer, expertise in design of epidemiological investigations for the role of behavioural, infectious, occupational, biological and other risk factors in the aetiology of cancer and other chronic diseases, preparing the questionnaires for data collection, collecting and analysing the data.
Rokas Arlauskas	VU (LT)	Project leader, contact point, responsible for coordination of project, professional field - health promotion and disease prevention.
Pedro Marques	DISA (LU)	Coordination Plan national de Lutte contre le Tabagisme (national anti-Tobacco plan) ; Public health expert, prevention, Tobacco
Anne Havermans	RIVM (NL)	PhD in addiction neuroscience. Project leader and scientific advisor in tobacco regulatory science (and mental health) with expertise in addictiveness and attractiveness of (novel) tobacco products and e-cigarettes. WP leader in JATC I and II.

Daniela Ferreira	DGS (PT)	Expert at the General Directorate of Health
Manuel Cardoso	ICAD (PT)	Member of the Executive Board of the Institute on Addictive Behaviours and Dependencies, P.I.; Medical doctor and public health consultant, with a post-graduation in Occupational Medicine and Health Management.
Beatrice Mahler	IPMN (RO) CDU (RO)	Assoc. Prof., MD, PhD, Senior Pneumologist Specialist; Somnology; Bronchoscopy; Tobacco control; Sanitary Management.
Simona Parvu	INSP (RO)	Lecturer, MD, PhD; Senior Hygiene Specialist; public health; Tobacco Control; Sanitary Management
Helena Koprivnikar	NIJZ (SI)	Senior public health specialist; MD, Specialist in Public Health, works in the area of tobacco prevention and tobacco control. Previously, a member of the working group for drafting the new Restriction on the Use of Tobacco and Related Products Act, adopted in Slovenia in February 2017 and Restriction on the Use of Tobacco Products Act, adopted in Slovenia in 2007; Currently, coordinates a group of relevant stakeholders in tobacco prevention and tobacco control.
Christina Martínez Martínez	ICO (ES)	Head of the Cancer Prevention Program and Tobacco Control Unit at the Catalan Institute of Oncology, a WHO Collaborating Center for Tobacco Control since 2014. Holds academic positions at the University of Barcelona and the University of California, San Francisco. Research focuses on applying implementation science to tobacco control, with a particular emphasis on smoke-free environments and smoking cessation interventions. Has developed innovative programs such as "Smoke-Free Hospital" and "Smoke-Free Homes," integrating evidence-based practices into both clinical and community settings. Has pioneered cutting-edge training initiatives, including INSTrUCT, an Erasmus+ project that combines online training, interactive materials, videos, and virtual simulation. Leads international projects like PIECES and PEACHD (funded by the EU Horizon and Action Grant) and national initiatives in Spain addressing tobacco use alongside alcohol and cannabis addiction.
Joan Colom	GENCAT (ES)	Responsible for the Sub-directorate General for Addictions, HIV, STIs, and Viral Hepatitis (SGAVIH) at the Public Health Secretariat of the Department of Health, which coordinates the planning, implementation, and monitoring of all addiction prevention and care policies in Catalonia. Leading various initiatives across the territory, especially in primary care, sexual and reproductive health, emergency services, and occupational health, to prevent morbidity and mortality associated with alcohol consumption and ensure referral and access to specialized treatment for people with alcohol-related issues.
Silvia Matrai	IDIBAPS CERCA (ES)	Project manager Trained as a clinical psychologist, MSc in Cognitive-Behavioural Therapy, MSc in Psychopathology, MSc in Healthcare Management, doctoral fellow of the Faculty of Medicine of the University of Barcelona on digital approaches to lifestyle modification. Her areas of expertise include management of large-scale research projects; public health research; co-creation approaches; foresight methodology; digital health; psychosocial support and training in humanitarian action workers.
Mónica Pérez Ríos	IDIS/USC (ES)	Expert at the University of Santiago de Compostela
Carmen Durán Parrondo	CSG (ES)	Expert at the Directorate General of Public Health, Ministry of Health
Mónica del Amo Santiago	IDIVAL/SCS (ES)	Community Nurse; Works as responsible for the Quality Area of the Primary Care Management in the Cantabrian Health Service.

Maria Jose Lopez Medina	ASPB/IRSANTPAU CERCA (ES)	Head of Department. Expertise: Evaluation of public health programs and policies, measurement of second-hand smoke exposure in previous Horizon2020 projects (i.e. TACK, SHS)
Kristina Sundquist	LUND (SE)	Professor, Specialist in Family Medicine, Principal investigator/leader of the project Targeted Health Dialogues in primary health care.
Nataliia Hryb	PHC (UA)	Specialist in the prevention of NCDs.
Footnote: The list of the complete team members of all partners is noted in detail in **Annex 4**.		

Outside resources (subcontracting, seconded staff, etc)

If you do not have all skills/resources in-house, describe how you intend to get them (contributions of members, partner organisations, subcontracting, etc.).

If there is subcontracting, please also complete the table in section 4.

Subcontracting: All core activities of the project will be performed in-house, with subcontracting included to enhance the the output or impact of the activities or to ensure the transfer of essential knowledge, amplification of dissemination. Detailed aspects and justification of subcontracting are noted in Section 4.

Associated partners: Associated partners have the possibility to add additional expertise or impact to the project. Examples of associated partners that can be added are University Institutions (i.e. Trimbos Institute, University of Crete etc), NGOs (i.e. CTFK, ASH US, etc), Scientific Societies (i.e. European Respiratory Society, European Midwives Association) and organisations from neighbouring countries which have expressed interest (i.e. Ministry of Health of Moldova) and also other European Competent Authorities who were not able to join the proposal at the time of its submission (i.e. Bulgaria, Poland, Germany etc).

The associated partners will be noted on the website and have the ability to engage, or provide input into JA-SAFE, based on their areas of expertise.

Experts (if applicable)

*Explain if **national** and/or **international experts** will be nominated by national authorities to support the project implementation. Describe the specific professional and technical expertise and experience of each proposed expert and their contribution to the project implementation. Provide CVs (if required).*

Minimum requirements:

- *Qualification: A level of education which corresponds to a Bachelor's degree.*
- *Professional experience: At least 4 years of proven experience as set out in the Call document*
- *Other skills: ability to work in English (minimum B2 level)*

National and international experts will not be nominated by national authorities to support project implementation, as the extensive list of CA/AEE within the consortium have a wealth and breadth of expertise which is sufficient to successfully implement the project. However, from a high-level perspective, strategic scientific expertise will be provided by the JA-SAFE Expert Advisory Group.

The **Expert Advisory Group** will be appointed to both contribute to the overall strategic oversight and report on a specific strategic matter regarding the scope of the project activities, and to focus on public health relevance, innovation and dissemination of the project outcomes. Members of the External Advisory Group will be independent experts or significant stakeholders in this field, to be complemented by one more member directly from DG SANTE to ensure direct EU policy relevance.

In addition to the above expert group, a **Youth Advisory Group** will be appointed**.** This group will provide a platform for young individuals to actively engage in discussions, share their perspectives, and contribute to the relevance of outputs relate to youth. By incorporating their insights, we aim to ensure that our initiatives resonate with the youth community and address their specific needs and concerns. This collaboration will enrich our project, ultimately leading to more impactful outcomes.

2.4 Consortium management and decision-making

Consortium management and decision-making (if applicable)

Explain the management structures and decision-making mechanisms within the consortium. Describe how decisions will be taken and how regular and effective communication will be ensured. Describe methods to ensure planning and control.

***Note:** The concept (including organisational structure and decision-making mechanisms) must be adapted to the complexity and scale of the project.*

Management Structures and decision-making mechanisms

Project coordination and overall management, which constitute a separate WP, will be provided by UoA (by the Project Coordinator and by the Project Secretariat described below) and complemented, as appropriate, by the Steering Committee and General Assembly within the project's organizational structure:

1) **Project Coordination:** Project Coordination will be performed by the Coordinator and the Project Secretariat team, which are responsible for the day to day running of the project.
2) **Steering Committee:** The Steering Committee consists of the Coordinator, the Project Secretariat team and the WP leaders. The Steering Committee acts as the governing body of the project. It will meet at least twice a year, at least once virtually and once at the annual meeting. The WP leaders will provide written reports on activities when requested and will collate deliverables and other information. These documents will be forwarded to the coordinator who will bring together coherent, integrated reports, providing feedback for changes/ improvements. The Policy Officer of the EC would be invited to participate either in person or via videoconference
3) **General Assembly:** The General Assembly consists of the participants' representatives and participants. Formal exchange of information will largely take place as part of the General Assembly Annual meeting within the annual networking meeting. The ultimate responsibility for the content of these meetings is assumed by the Project Secretariat. The General Assembly will facilitate exchange of information that will enable the steering committee to make important decisions regarding the direction of work. In the case where technical input is needed into WP design, emphasis will be placed on the individual WP meetings and discussions.

Evaluation of the structure: The Coordination and decision-making structures in JA-SAFE adequately address the needs that will arise through day-to-day project activities and are appropriate to its complexity and scale. A similar methodological approach is applied within the context of the coordinator's previous projects funded by the EU (JATC1, JATC2, EUREST-PLUS, EUREST-RISE) and within current projects in which the consortium members participate (i.e. JA Prevent, JACARDI, EUREST, etc.).

Day to day management and co-ordination is undertaken at two levels:

- ✓ At the overall project level, by project Coordinator / Project Secretariat with regards to day-to day management, and by the Project Steering Committee with regards to overall strategic leadership;
- ✓ At the Work Package level, through the WP Leader, Task Leads and PIs of all contributing partners. It is important to note that all WPs and Tasks have one lead partner to ensure a clear leadership strategy.

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2.5 Project management, quality assurance and monitoring and evaluation strategy

Project management, quality assurance and monitoring and evaluation strategy

Describe the measures planned to ensure that the project implementation is of high quality and completed in time.

Describe the methods to ensure good quality, monitoring, planning and control.

Describe the evaluation methods and indicators (quantitative and qualitative) to monitor and verify the outreach and coverage of the activities and results (including unit of measurement, baseline and target values). The indicators proposed to measure progress should be relevant, realistic and measurable.

Project Management and Quality Assurance

Our consortium has put in place a streamlined management team and an experienced and well qualified pool of scientific expertise. To manage this system efficiently, attention needs to be paid to internal communication and monitoring of activities. We will maintain clear channels of communication with the experts, making full use of online collaboration tools such as calendars, shared document repositories and telephone/video conferencing facilities and maintain frequent communication to ensure that all members of the extended team are aware of the proposed workflow for each task and the timeframe for delivery and to avoid letting any potential risks develop.

The day-to-day management, including the financial administration, is entrusted to the Project Manager. This professional staff will be appointed in the secretariat and will assist the Steering committee and the Coordinator. The coordinating team will meticulously follow the timetable of the project, and record when planned milestones are reached and whether deliverables are produced in time. Any significant deviation will be addressed and discussed with the HADEA Project Officer.

Specific Objectives for the overall project management include: a) Day to day project management to manage and coordinate all financial, administrative, scientific and communication activities in the project and timely achievements b) Establishment and management of the internal communication flow c) Ensuring a strong interaction among the project's elements and partners d) Monitoring an effective implementation of each WP and Task e) Ensuring that each WP deliverables are met in an integrated and timely fashion within the agreed budget and of high quality f) Assuring positive results throughout the implementation of the project in terms of achievement of the tasks and quality of the products, of financial restrains, of time schedule and compliance with the rules g) Development of decision-making communication with and reporting to EU officers h) Resolving any possible conflict and managing any possible risk in a timely manner.

Project Management activities will be supported by all beneficiaries, with the details of this arrangement being noted in the consortium agreement that will be signed by the members of the Consortium and will describe the consortium management and cooperation, and will cover relations between partners, including legal aspects, supervision, scientific responsibilities, etc.

Consortium agreement: The above-mentioned procedures and systems will be elaborated in the consortium agreement. This manual will present the processes for defining and monitoring procedures, milestones and deliverables. This approach aims to implement quality assurance at all levels in the project organisational structure and in all decision-making mechanisms

Risks and contingency plan: Below in section 2.7 we outline our key risks and their potential mitigation strategies – which are an additional quality control mechanism.

Evaluation methods and indicators (quantitative and qualitative)

Regular reporting activities will include data on specific action-level indicators that will be agreed upon at the KoM. While evaluation and internal benchmarking is detailed in a dedicated WP (WP4), and a very detail list of process, output and outcome indicators have been already noted in Section 1.2, additional examples of specific action level indicators include:

- Number of EU MS participating in the measurement of SHS-SHA exposure
- Number of settings assessed against SHS and SHA exposure
- Number of guidelines, evidence-based recommendations, press releases, media briefings and other document developed
- Number of in-country visits to be performed to support individual EU MS in implementing or expanding SAFE
- Number of best and promising practices related to the youth alcohol use prevention and brief intervention
- Number of good practices for managing e-commerce and home delivery
- Number of good practices in communicating information on lower-risk alcohol use to the general population, as well as vulnerable groups
- Number of best and promising practices identified for scaling up evidence-based interventions that support a tobacco free generation and youth tobacco prevention activities
- Number of best and promising practices identified for the prevention of NCDs in community and health care settings
- Number of MS participating in the assessment and mapping of healthcare settings against existing tobacco control measures
- Number of students participating in the Enhancing Counselling Skills training for effectively communicating with smoker patients in a sample of healthcare settings
- Number of persons from healthcare staff participating in the training for educating patients about the risks of tobacco use and the benefits of cessation
- Number of tools/interventions to implement and support the enforcement of comprehensive SAFE in healthcare settings
- Number of best and promising practices identified for supporting healthcare staff in quitting tobacco
- Number of EU MS participating in the assessment of forward-looking tobacco control measures across a broad spectrum of different consumer/product/retail/market-oriented measures
- Number of forward-looking tobacco control measures identified as feasible in the EU legislative tobacco control framework.
- Number of EU MS participating in the study of the determinants for a tobacco free generation
- Number of events organised to share experiences and for networking.

- Number of patient organisations/non-government organisations, national policy makers, educational institutions involved.

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2.6 Cost effectiveness and financial management

Cost effectiveness and financial management

Describe the measures adopted to ensure that the proposed results and objectives will be achieved in the most cost-effective way.

Indicate the arrangements adopted for the financial management of the project and, in particular, how the financial resources will be allocated and managed within the consortium.

⚠ *Do NOT compare and justify the costs of each work package, but summarize briefly why your budget is cost effective.*

Cost effectiveness: The project budget is related directly to the activities described in WPs and depends on specific identified costs related to the described activities. The budget is designed to provide an appropriate level of resources for the successful achievement of its objectives. The budget is designed to provide an appropriate level of resources for the successful achievement of its objectives. The major expenditure in the budget is staff cost, on the basis of the PMs allocated to each WP for project implementation and the total number of WPs for the execution of all activities.

Financial Management: Financial management is to be carried out by the Project Secretariat. This includes the preparation of statements, the periodic reporting that summarizes the participants financial activity, the preparation and review of financial documents, the establishment and maintenance of financial records. The main aim of financial management is to minimize risks of financial difficulties for the project and reassure smooth and efficient operation. The first step that has to be considered in the planning and construction of a well- organized timetable, which will include the conditions under which all payments will be made, an estimated date of payment and further information about the payment method and process. Every six months, the consortium partners will compile a detailed report including, among others, the progress and project expenditures achieved within this timeframe; deviations from the plan, causes of such deviations and corrective actions; detailed planning for the next 6-month period.

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2.7 Risk management

Critical risks and risk management strategy

Describe critical risks, uncertainties or difficulties related to the implementation of your project, and your measures/strategy for addressing them.

Indicate for each risk (in the description) the impact and the likelihood that the risk will materialise (high, medium, low), even after taking into account the mitigating measures.

***Note:** Uncertainties and unexpected events occur in all organisations, even if very well-run. The risk analysis will help you to predict issues that could delay or hinder project activities. A good risk management strategy is essential for good project management.*

Risk No	Description	WP No	Proposed risk-mitigation measures
R1	Change in partner or key personnel	All	✓ Each partner contributes with at least two personnel to allow for a back up to exist; ✓ Discussions with other partners in that EU MS that would be able to cover the gap; ✓ Allocation of additional person-time to that aspect of the project.
R2	Partner abdicates or cannot achieve the tasks	All	✓ Reallocation of tasks among the remaining Members, on the basis of shared expertise ✓ Close collaboration among task members to ensure continuity and peer support when needed.

R3	Delay in reaching milestones and deliverables	All	✓ Early detection of possible delays/failures; ✓ Regular monitoring of the progress ensured by the Project Manager and Project Coordinator. ✓ Proposal of corrective actions.
R4	Failure of activities to result in outcomes	All	✓ Additional consultation with the consortium; ✓ Identification of external cross-pollination from the expert Advisory Group and beyond.
R5	Mis-communication between partners	All	✓ Repeated communication avenues; ✓ Involvement of the Steering Committee; ✓ In depth discussions to diffuse the situations.
R6	Insufficient budget to cover the requested tasks	All	✓ Communication with HaDEA/DG SANTE to re-prioritise as necessary based on the current requirements; ✓ Reorganisation of the tasks and activities to partners with a lower person month cost.
R7	Low impact/failure of Dissemination and Communication in delivering results to its end-users	2	✓ Periodic review of the impact of existing dissemination and communication activities, on the basis of already set KPIs; ✓ Fostering of existing dissemination activities, in case the measured impact is low and may jeopardize the project's implementation success; ✓ Pursuit of new dissemination/communication activities.
R8	Low response rate to evaluation actions	3	✓ Personalized Communication to increase engagement. This could involve personalized communications, gentle reminders via email or phone calls to those who haven't yet responded or the use of multiple communication channels; ✓ Streamlining the Evaluation Process. Making the evaluation process as easy and convenient as possible for participants; ✓ Shortening questionnaires: Keeping the evaluation instruments concise and focused.
R9	Difficulty implementing or harmonising data collection in WP5 for SAFE.	4	✓ Collaboration with local researchers or organizations in each EU MS which may possess in-depth knowledge of local contexts, and can assist with data collection logistics ✓ Standardized Protocols: Development of clear and standardized data collection protocols, including training materials, data collection tools, and quality control procedures that may ensure consistency across EU MS and improve data reliability. ✓ Conducting pilot testing of data collection methods in a few EU MS before full-scale implementation. This allows for identification and resolution of any potential issues early on, enabling necessary adjustments to protocols and procedures.
R10	Difficulty in scaling up and transferring best or promising practices between EU MS	5,6,7,8, 9	✓ Adapting interventions to suit local needs and priorities in each EU MS, ensuring flexibility in implementation. ✓ Fostering strong collaborations with local stakeholders and leveraging EU-level networks for implementation and knowledge sharing. ✓ Provide comprehensive capacity building training and ongoing support to local implementers to ensure consistent and high-quality implementation. ✓ Establishing a robust system for data collection, regular reviews, and cost-effectiveness analyses to inform and guide the scaling-up process.

R11	Difficulty in obtaining ethical approval to visit schools and perform the survey	8	✓ Establish early contact with relevant IRBs in each target EU MS, to help to understand their specific requirements, address any potential concerns proactively, and build rapport with the review board members ✓ Collaboration with local researchers or organizations in each EU MS that can provide valuable insights into the local ethical review process, facilitate communication with IRBs, and potentially assist with obtaining necessary approvals
R12	Delay in access to the EU-CEG data from the EU MS	9	✓ Signing of confidentiality agreements with the EU MS with the support of DG SANTE. ✓ Working closely with EU MS so as to obtain access to confidential data sets even for a limited number of EU MS;
R13	Tobacco and alcohol industry interference	All	✓ Carry out all JA-SAFE activities in line with the WHO FCTC Article 5.3 (no collaboration with tobacco industry or entities with vested interests); ✓ Establish procedures to prevent industry interference (e.g. require declaration of interests from partners, event participants etc.);

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3. IMPACT

3.1 Impact and ambition

Impact and ambition — Progress beyond the state-of-the-art

Define the short, medium and long-term effects of the project.

Who are the target groups? How will the target groups benefit concretely from the project and what would change for them?

Does the project aim to trigger change/innovation? If so, describe them and the degree of ambition (progress beyond the status quo/state-of-the-art).

Impact and Ambition

The implementation of the policy objective of the EU NCD Initiative and Europe's Beating Cancer Plan will protect European Public Health through the reduction of the burden of NCDs including cancer, and their risk factors, both at individual and population level. Through JA-SAFE and the implementation of best and promising practices, real world studies and evidence-based interventions our overarching ambition is to reduce the burden of major NCDs and improve citizens' health and well-being – through reducing the impact of major risk factors for NCDs. The expected results of this joint action include:

a) identifying and rolling-out best and promising practices for piloting or implementation of those practices through population-level interventions; Such practices may be identified through the EU best practice portal as also through a request for applications through stakeholders, public health experts, policymakers, and project partners. The assessment of these practices will be done at the steering committee level, with input from the scientific Advisory Group as necessary. Such practices will be assessed for their transferability and adaptability to different national and regional contexts within the EU. This may involve evaluating factors such as cultural relevance, resource requirements, policy alignment, and potential barriers to implementation.

b) designing and piloting of promising policies and supporting the replication of these best and promising practices;

c) supporting the design and piloting of new ambitious implementation of best and promising practices and innovative approaches;

d) developing guidelines and evidence-based recommendations for prevention and control of NCDs and their risk factors, including nutrition, physical activity, use of tobacco products and alcohol consumption;

e) Developing ways to prevent youth exposure to alcohol marketing and recommended ways to communicate about risks related to alcohol use.

f) developing guidelines and evidence-based recommendations to support Member States and stakeholders in reducing the risk and exposure associated with second-hand smoke and aerosols;

g) supporting the design and piloting of new ambitious approaches and existing best practices towards achieving smoke and aerosol-free environments leading to the collaboration among Member States and reducing existing inequalities;

h) supporting the implementation of the planned revised Council Recommendation on Smoke-free Environments through appropriate measures at national level that support the compliance with and enforcement of smoke and aerosol-free measures.

This joint action is expected to contribute to reducing the risks from harmful exposure to second-hand smoke and aerosols in certain outdoor spaces. It is expected to reduce the burden of NCDs, including cancer, in Member States.

Target Groups

The proposed project seeks to reach a variety of primary target groups:

- EU Regulators are the primary target group of JA-SAFE, due to their direct relevance with the topics covered by this JA. These are the main beneficiaries that would benefit most from this JA, as the actions and tasks that will be performed address aspects that have to be addressed by EU regulators within the context of EU policy implementation at a national level to protect public health. In order to ensure wider use of any research evidence and its translation into public health policy and subsequent public health gain, it is important to engage EU regulators in all aspects of the project development and dissemination, and as early as possible. It is important to note that the participating partners in the current JA project, are by majority either EU MS regulators/relevant competent authorities and hence their engagement would be both feasible, beneficial and likely impactful.
- General public: Tobacco use is the largest preventable cause of death and disability within Europe and alcohol use is the leading risk factor of disability-adjusted life years in age group 25–49 years. Hence the general European public will benefit from the implementation of this JA, as it will support the successful implementation of EU legislative frameworks across the EU to ensure a high level of public health through the implementation of forward-looking tobacco control measures that may assist toward a tobacco free generation in Europe, and as it will contribute to reducing harmful alcohol consumption by supporting the implementation of high-impact strategies and interventions, capacity-building and the communication of evidence-based information to consumers and by addressing timely aspects of accessibility of alcohol and alcohol advertising. Particular attention will be paid to specific and vulnerable groups of the population (youth, elderly, etc.). JA-SAFE is expected to contribute to reducing the risks from harmful exposure to second-hand smoke and aerosols in certain indoor/outdoor spaces and to support in the long term the reduction in the burden of NCDs in EU MS through the prevention of alcohol related risk and other NCD risk factors.
- Researchers would also benefit greatly both from the use of knowledge that will be produced as outcomes of this JA, but also due to data that may be released. The engagement of additional researchers would increase the potential utility of the findings for the production of scientific evidence. Researchers will be also targeted under WP2, so as to enhance their awareness of such data.
- Stakeholders, patient organizations/non-government organizations are other groups that would benefit significantly from the outcomes of the JA-SAFE. These stakeholders will benefit from the amount of information that would be released throughout project implementation that would support their grassroots and action-oriented activities, which are usually at the local, regional or EU MS level. These groups will be reached through interactions at both the dissemination level (WP2) and the sustainability level (WP4) as also through specific tasks of the vertical WPs.

The expected outcomes of this project that Progress beyond the state of the art are related to the above main target groups include, but are not limited to, the following:

- Increased EU MS implementation of the EU NCD Initiative and Europe's Beating Cancer Plan through the provision of support and technical/scientific capacity to EU MS;
- Increased data sharing and collaborations between EU MS on new ambitious approaches and existing best practices towards achieving SAFE environments;
- Enhanced collaborations between EU MS on promising or best practices for tobacco control and SAFE in healthcare settings, ensuring appropriate communication strategies and long-term networking planning;
- Enhanced collaborations between EU MS on promising or best practices for alcohol prevention, on preventing youth exposure to alcohol marketing and on risk communication related to alcohol use.
- Increased EU MS understanding of tobacco product ingredients and flavours across EU MS which would be able to fuel policy actions.

3.2 Communication, dissemination and visibility

Communication, dissemination and visibility of funding

Describe the communication and dissemination activities which are planned in order to promote the activities/results and maximise the impact (to whom, which format, how many, etc.). Clarify how you will reach the target groups, relevant stakeholders, policymakers and the general public and explain the choice of the dissemination channels.

Describe how the visibility of EU funding will be ensured.

In line with Art.17.1 of the General Model Grant Agreement and the EU's Open Science Policy, the beneficiaries will promote JA-SAFE and its results by providing targeted information to multiple audiences (including the media and the public). The project will include, via a dedicated WP (WP2), a concrete dissemination strategy and communication tools, spanning the whole project duration and with activities to be implemented both collectively- by the entire consortium- and individually by beneficiaries/affiliated entities, at national and international level. Dissemination and communication activities will take place via different means, depending on the expected impact on various target audiences and the different dissemination/communication goals to be achieved.

Communication and Dissemination avenues include:

a) Scientific publications: Papers will be submitted to peer-reviewed scientific journals upon delivery of the project's first results. The publication of JA-SAFE studies in open access journals will allow distribution of the research results to a much broader audience. In addition to this, specific open access supplements in scientific journals will be sought during the whole project process and in close collaboration with all partners.

b) External events: Scientific workshops in conferences: Events provide a valuable opportunity to increase project visibility, potential impact and dissemination of results, with a view to reaching a wider audience. JA-SAFE work will be presented in scientific conferences, including the European Conference on Tobacco or Health, the World Conference on Tobacco Control, the ENSP Europe Conference, TID conferences, ERS conferences, the European Public Health Conference, the WFPHA conference etc. Conferences targeted to specific sub populations may also be included.

c) External events: Policy panels, hearings and briefing sessions between the consortium and policymakers constitute another core channel for the dissemination of scientific information and project findings. The JA-SAFE consortium will put specific emphasis on round table discussion meetings that will be organized mainly in the premises of EU institutions, with a focus on engaging MS experts. EC policy officers will also be invited to participate in all JA-SAFE meetings.

d) Final Project meeting: the final workshop of the project will be an informative session with the aim to present a coherent summary of the project's main findings and an assessment of their policy implications. The final workshop will take place at the European Parliament (EP) and will feature input not only from Consortium members but also from stakeholders. Interaction with the EP and its Members (MEPs) is vital in applying a successful dissemination strategy and in translating research findings into public health actions for ultimately improving health across the EU. For this purpose, one-day round table discussions will be held at the EP during which an exhibition will provide information to both MEPs and other EP personnel on the project's findings. The proposed round table discussions will be an excellent opportunity to raise awareness among key stakeholders and opinion leaders - Patient Groups, MEPs, Health Community, EU Officials - on the results of the project and to bridge the Research-to-Policy Gap by providing information that can ensure policymakers feel confident taking action.

e) Final publishable Project Report: The final report of JA-SAFE will be a comprehensive summary of the project's results and conclusions, analysing their socio-economic impact and wider societal implications. It will be formatted as a stand-alone document to be made available on the Community Research and Development Information Service of the EC (CORDIS) and other official EU dissemination channels. Information material (a report together with an executive summary) will be distributed, making concrete reference to the implications of the project's research findings for future policies and regulations.

f) Website - Social Media: The project's website will provide the forum for hosting the information produced by the JA-SAFE consortium, including news on scientific collaborations, areas of interest for new and open collaborations, updates and topic relevant to EU MS policy initiatives. Similarly, social media (with a focus on LinkedIn) will be also used to present publications and news of the JA-SAFE consortium.

g) Webinars. Webinars are noted as a key communication avenue as they facilitate both the implementation of the project tasks as also support integration of project results into national policies. In principle policymaker participation in webinars and hands-on training sessions will be assured through proactive, direct engagement with key national and regional policy-making bodies and ministries of health from the outset of the project. This will involve formal invitations, highlighting the direct relevance of the

guidance material to their current policy agendas and priorities in NCD prevention, and emphasizing the evidence-based nature of project. We will leverage established networks from previous joint actions and engage WP4's expertise and key stakeholder expertise in policy dialogue to tailor communication and directly liaise with relevant officials, ensuring the material directly addresses their operational needs and legislative frameworks.

Communication tools

In order to successfully communicate the project's key messages and content, JA-SAFE will utilise the below tools to support communication actions at international, national, regional and local levels, engaging into a two-way interaction between the consortium and the project stakeholders:

a) Graphical identity, visual language and infographics: a specially designed logo will be the basis of the project's graphical identity. The visual image will be used as a template in project presentations, flyers, brochures, the project's website and other communication activities. The broad usage of infographics – visual presentation of information - is also envisaged to enhance comprehension, by the general public.

b) JA-SAFE website: the creation of the project's website will be a priority of the communication strategy, aiming to facilitate interaction regarding the project's activities and results. It will also provide information on the consortium and the researchers participating in JA-SAFE. The website will be the central point for providing a wide range of functionalities, including document download, links for cross-referencing to other relevant projects, contact information. It will also provide links to the project's social media accounts.

c) Information material: this includes project presentations, flyers, brochures, posters and factsheets to be distributed among different stakeholders; all material will be translated in the national languages of partners to present project objectives, methods and expected results. This material will be mainly used to increase project visibility, especially at external events.

d) Press releases/Non-scientific Articles: regular press releases will be produced and disseminated to the public media, both at national (EU MS) and international level (cross-EU), to provide information on the progress and major achievements of JA-SAFE. This activity will also include "information bites" that are easy to digest and include pieces of information tailor-fitted to non-specialists in the field (public and policymakers). Press releases will be produced in both English and the national language of other members of the consortium, offering also the possibility to provide translations into other EU languages if needed.

e) E-Newsletter: A newsletter will be issued to keep the media, and all stakeholders regularly updated on the project's developments. The newsletter will be disseminated electronically via mailing lists, the stakeholder list and uploaded on the JA-SAFE website as well as via social media platforms. The e-newsletter will also contribute to the online visibility of the project

f) External events: non-scientific conferences/workshops: As the project progresses, updates on the developments and achievements of the project will be provided and maintained through the organization and participation in non-scientific events/workshops to spread the outcomes of research and raise awareness of JA-SAFE activities, especially at the EU MS level where NGO/Policy initiatives take place.

g) Social media posting: social media posting with information, videos and updates will take place on a regular basis within WP2 (with a focus on LinkedIn), to disseminate but also encourage open dialogue with the broad public and the media. Social media posting will be, also, addressed to other target audiences and languages, given that several of the project's key stakeholder groups are active on social media, e.g. EU institutions, the scientific and research community, interest organizations, other EU-funded projects, etc.

Communication Matrix

Multiple audiences require different communication activities, with different key messages to be conveyed, in order to successfully convey the message. Each target audience will be reached via different communication means and through a list of communication channels in order to communicate news, processes and relevant moments throughout the lifetime of the project. Target groups with the corresponding communication means and channels are presented in the matrix below:

Target audience	Communication tool	Communication Channel	Key message to be conveyed
Policymakers and health organizations	- Website - Press releases - Articles - Conferences and workshops	- Mailing lists - Networks - Events - Social media accounts	Project developments/results and their potential translation into policy (evidence-based policymaking)

	- Social media posts - Webinars	- Face-to-face meetings	
Patients and EU patient associations	- Website - Information material - Articles - Newsletter - Conferences and workshops - Social media posts - Webinars	- Mailing lists - Networks - Events - Social media accounts - Face-to-face meetings	Project innovations to give the opportunity to patients to influence research and shape guidelines at EU level.
Current and potential stakeholders	- Website - Information material - Articles - Newsletter - Conferences and workshops - Social media posts - Webinars	- Mailing lists - Networks - Events - Social media accounts - Face-to-face meetings	Project developments/results for providing knowledge-sharing, feedback and subsequent contribution to evidence-based policymaking.
General public	- Website - Information material - Press releases - Articles - Social media posts	- Broadcast media channels - Events - Social media accounts	Project aims, results and impact on the general public's daily life, and its interaction with aspects which could assist changing norms.
Press and the media	- Website - Information material - Articles - Press releases - Newsletter - Conferences and workshops - Social media posts	- Mailing lists - Broadcast media channels - Events - Social media accounts	Project aims, developments and results; project's impact on the general public's daily life; level of results' transposition to policy. Aspects related to EU MS actions towards implementation.
Other relevant projects and initiatives	- Website - Press releases - Social media posts	- Mailing lists - Networks - Social media accounts	Project aims, development and results to create synergies among similar projects/initiatives.

Visibility of EU funding: In line with Art.17.2 of the General Model Grant Agreement, all communication and dissemination activities related to the action, as well as any infrastructure or equipment funded by the grant will acknowledge EU support and will display the European flag (emblem) and funding statement (translated into local languages, where appropriate).

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3.3 Sustainability and Continuation

Sustainability, long-term impact and continuation

Describe the follow-up of the project after the EU funding ends. How will the project impact be ensured and sustained? What will need to be done? Which parts of the project should be continued or maintained? How will this be achieved? Which resources will be necessary to continue the project? How will the results be used?

Are there any possible synergies/complementarities with other (EU funded) activities that can build on the project results?

Sustainability is addressed within a specific WP (W4), and is intertwined in all aspects of project implementation and across all WPs. As a fundamental principle embedded in all EU projects, sustainability refers to the ability of the project to continue its existence and ensure long-lasting results beyond its completion and after the end of EU funding. The sustainability strategy envisions a long-term perspective for the project outputs, by providing the means to maintain current results and by investing on the infrastructure necessary to use/exploit the key project outputs in the future and to ensure the long-term impact on the different target groups. The main components for ensuring an effective sustainability of JA-SAFE are the following:

i. Development of effective findings as a result of research within the project: the developed findings during the course of the project research will guarantee the initial stages of project viability. During the whole project lifecycle, and more importantly after its end, JA-SAFE will reinforce the promotion and raising of awareness with regard to the project contents and developments, as well as the provision of information on the quality and effectiveness of results. This will be mainly achieved through the creation of toolkits within an electronic data repository that will provide a simplified version of the project results, so as to ensure their easy interpretation by the already identified stakeholders and to enhance the curiosity of potential new stakeholders;
ii. Establishment of solid partnerships and networking between JA-SAFE and all the relevant stakeholders or networks that could play a vital role in the maintenance and expansion of project outputs after the end of EU funding: this encompasses the successful transfer of the results to appropriate decision-makers at local, regional and national level to ensure the policy linkage between JA-SAFE and decision-makers. The project will set up a plan that demonstrates the potential of the results for integration into policies, supports national plan development and aims to ensure the sustainability of JA-SAFE activities. Specific actions include the organization of roundtables and meetings with policy-makers and the identification of key contacts at national focal points for JA-SAFE advocacy, as well as the building of strong links between JA-SAFE and the academia to promote project results among academic institutions and academic stakeholders;
iii. Maintenance of strong commitment among all partners to ensure a long-lasting and legacy of the project and its findings: this will build upon the already established internal communication strategy of the project, so as guarantee constant interaction within the Consortium for the implementation of the project results in other countries and regions, adapted to their own needs.

The sustainability strategy of the project is based on the project's dissemination strategy, consisting of the following main components to be exploited after the end of the funding period: i) Project results/deliverables ii) Project partnership iii) Benefits for the target groups and relevant stakeholders. The ambitious aim of the sustainability phase is to convince individual end-users to adopt and/or apply the results, also after the end of the project.

Overall, the sustainability of JA-SAFE's results beyond EU funding will be ensured through a multi-pronged strategy. Firstly, **institutionalization of best practices and guidance materials** will be a key focus. WP4 will actively work with Member States and relevant EU bodies to support potential integration of the identified best and promising practices, along with the developed guidance documents and how-to guides, into national health policies or strategies. This includes pursuing official endorsements and formal adoption processes, ensuring the material becomes part of the permanent public health infrastructure. Secondly, **capacity building and knowledge transfer**, as supported through the webinars and via WP2, will support national stakeholders to continue implementing and adapting the project's methodologies post the project's conclusion. Thirdly, **fostering strategic partnerships and networks** will extend the reach and impact of JA-SAFE. Beyond the project consortium, we will actively cultivate collaborations with other relevant EU initiatives, international organizations (e.g., WHO, UNICEF etc), research institutions, and civil society organizations. This will create a broader ecosystem of support for NCD prevention and control, allowing for shared resources, joint advocacy, and sustained momentum after the project's completion. Finally, tools, methodologies or digital platforms created during JA-SAFE are to be made openly accessible, where appropriate, and their maintenance and future development are integrated into existing public health information systems at the project partner or EU MS level, thereby maximizing their long-term utility and impact.

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4. WORKPLAN, WORK PACKAGES, ACTIVITIES, RESOURCES AND TIMING

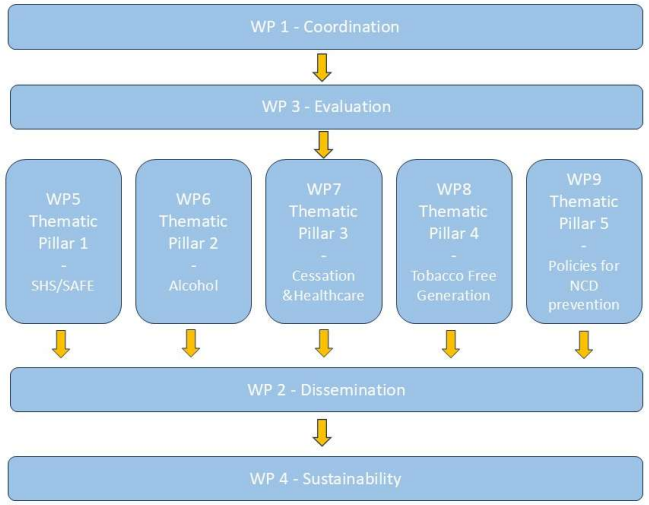
4.1 Work plan

Work plan

Provide a brief description of the overall structure of the work plan (list of work packages or graphical presentation (Pert chart or similar)).

JA-SAFE, aims and objectives will be addressed through four (4) horizontal support WPs and five (5) vertical action-based WPs:

WP1: Project Coordination
WP2: Communication and Dissemination Activities of JA-SAFE
WP3: Project Evaluation and benchmarking.
WP4: Sustainability Actions
WP5: Promoting a Smoke and Aerosol Free (SAFE) Europe
WP6: Preventing Alcohol-Related Harm in Europe
WP7: Scaling up Interventions for Tobacco Control and SAFE in Healthcare Settings
WP8: Accelerating the Path to a Tobacco-Free Generation in Europe
WP9: Strengthening European Public Health Policy across Disease Prevention and Health Promotion



Brief description of the overall structure of the work plan

With regard to the horizontal WPs, WP1 includes the coordination of the overall management of the project and the support to the activities of individual WPs; WP2 aims to support and implement the communication and dissemination activities of JA-SAFE, building on communication methodologies, best practices, and established networks from previous successful joint actions and other Horizon 2020 projects; WP3 seeks to evaluate the progress of JA-SAFE; WP4 entails the performance of activities that will increase the awareness and knowledge of both central and EU MS policymakers on hot topics related to European Public Health Policy.

With regard to the vertical action-based WPs, WP5 aims to support the implementation of the planned revised Council Recommendation on Smoke-free Environments through appropriate measures at the local, regional, and national levels that support the compliance to and enforcement of smoke and aerosol-free environments (SAFE), as noted in the text of the call "support on the implementation of the planned revised Council Recommendation on Smoke-free Environments and related guidelines, designing and transferring best practices and innovative approaches with the overall goal of protecting people in the Union from exposure to second-hand smoke and aerosols, and the strengthening of coordination activities at Union level". Also according to the text call, "the activities will include support for the identification and piloting of best and promising practices, innovative approaches and evidence-based brief interventions that contribute to reducing alcohol consumption and related harm especially among young people and vulnerable groups, including the elderly", issue that we address in WP6 that seeks to support the implementation of Europe's Beating Cancer Plan with respect to reducing harmful alcohol consumption and reducing the exposure of young people to advertising and marketing of alcoholic beverages. WP7 will focus on the development and scaling up of best and promising practices for tobacco control and SAFE in Healthcare settings, ensuring appropriate communication strategies and long-term networking planning in

parallel, in line with the text call that includes "development of integrated and coherent policy approaches to key NCD prevention and promotion challenges, such as those that affect particularly vulnerable groups, including children and young people, as well as the elderly". WP8 aims to support the implementation of Europe's Beating Cancer Plan, in terms of achieving a tobacco-free Europe through actions to help create a 'Tobacco-Free Generation' and WP9 seeks to support the implementation of the planned Council Recommendation on SAFE, related legislative frameworks on tobacco control and other cross-cutting modifiable health determinants and risk factors. Thus, all activities envisaged in the text of the call are covered in this JA.

To align and integrate WPs 5-8 with the horizontal WPs (WPs 1-4), JA-SAFE will implement an integrated governance structure led by WP1, ensuring constant communication and oversight through regular steering committee meetings and dedicated cross-WP liaisons. We will also employ harmonized methodologies and tools across all WPs, coordinated by WP1, to standardize data collection and analysis, facilitating seamless aggregation of results. WP2 will craft joint dissemination strategies, amplifying the findings from WPs 5-8 through shared publications and events, while WP4 will specifically leverage these outputs to identify opportunities for the activities and policies that are identified to be conveyed to EU and Member State policymakers. Finally, structured feedback and adaptation mechanisms will be in place, involving regular inter-WP reporting and continuous dialogue. This will enable WP4 to directly translate the technical insights and best practices from WPs 5-8 into actionable policy recommendations, supporting their potential uptake into national health policies and practices and supporting JA-SAFEs real-world impact.

The core management approach that would be used to ensure the integration of WPs 5-8 with the horizontal WPs (WPs 1-4) within JA-SAFE is **Integrated Project Management**. This approach focuses on coordinating all project elements and processes to achieve a unified goal. Key to this is a **centralized governance structure** led by WP1, which will actively oversee and align all work streams through regular, mandatory steering committee meetings and the establishment of dedicated cross-WP liaisons. This ensures continuous communication and early identification of interdependencies. Furthermore, a **harmonized methodological framework**, coordinated by WP1 will be applied across all WPs, ensuring consistency in data collection, analysis, and reporting, thereby facilitating the seamless aggregation and utilization of results. WP2's role in developing **joint dissemination strategies** and WP4's focus on **direct policy dialogue** will act as integration points, translating the technical outputs from WPs 5-8 into actionable insights for policymakers. Finally, **structured feedback loops and adaptation mechanisms**, including inter-WP reporting through the project secretariat and steering committee meetings, will allow for continuous monitoring and adjustment, ensuring that the project remains agile and responsive to emerging needs and challenges during project implementation.

4.2 Work packages, activities, resources and timing

WORK PACKAGES

Work packages

This section concerns a detailed description of the project activities.

*Group your activities into work packages. **A work package means a major sub-division of the project**. For each work package, enter an objective (expected outcome) and list the activities, milestones and deliverables that belong to it. The grouping should be logical and guided by identifiable outputs.*

Projects should normally have a minimum of 2 work packages. WP1 should cover the management and coordination activities (meetings, coordination, project monitoring and evaluation, financial management, progress reports, etc) and all the activities which are cross-cutting and therefore difficult to assign to another specific work package (do not try splitting these activities across different work packages). WP2 and further WPs should be used for the other project activities. You can create as many work packages as needed by copying WP1.

For very simple projects, it is possible to use a single work package for the entire project (WP1 with the project acronym as WP name).

Work packages covering financial support to third parties (⚠ only allowed if authorised in the Call document) must describe the conditions for implementing the support (for grants: max amounts per third party; criteria for calculating the exact amounts, types of activity that qualify (closed list), persons/categories of persons to be supported and criteria and procedures for giving support; for prizes: eligibility and award criteria, amount of the prize and payment arrangements).

⚠ *Enter each activity/milestone/output/outcome/deliverable only once (under one work package).*

⚠ *Ensure consistence with the detailed budget table/calculator (if applicable) (n/a for prefixed Lump Sum Grants).*

Objectives

List the specific objectives to which the work package is linked.

Activities and division of work (WP description)

Provide a concise overview of the work (planned tasks). Be specific and give a short name and number for each task.

*Show who is participating in each task: Coordinator (COO), Beneficiaries (BEN), Affiliated Entities (AE), Associated Partners (AP), indicating **in bold** the task leader.*

Add information on other participants' involvement in the project e.g. subcontractors, in-kind contributions.

Note:

In-kind contributions: In-kind contributions for free are cost-neutral, i.e. cannot be declared as cost. Please indicate the in-kind contributions that are provided in the context of the work package.

The Coordinator remains fully responsible for the coordination tasks, even if they are delegated to someone else. Coordinator tasks cannot be subcontracted.

If there is subcontracting, please also complete the table below.

Milestones and deliverables (outputs/outcomes)

***Milestones** are control points in the project that help to chart progress (e.g. completion of a key deliverable allowing the next phase of the work to begin). Use them only for major outputs in complex projects, otherwise leave the section empty. Please limit the number of milestones by work package.*

Means of verification are how you intend to prove that a milestone has been reached. If appropriate, you can also refer to indicators.

***Deliverables** are project outputs which are submitted to show project progress (any format). Refer only to major outputs. Do not include minor sub-items, internal working papers, meeting minutes, etc. Limit the number of deliverables to max 10-15 for the entire project. You may be asked to further reduce the number during grant preparation.*

For deliverables such as meetings, events, seminars, trainings, workshops, webinars, conferences, etc., enter each deliverable separately and provide the following in the 'Description' field: invitation, agenda, signed presence list, target group, number of estimated participants, duration of the event, report of the event, training material package, presentations, evaluation report, feedback questionnaire.

For deliverables such as manuals, toolkits, guides, reports, leaflets, brochures, training materials etc., add in the 'Description' field: format (electronic or printed), language(s), approximate number of pages and estimated number of copies of publications (if any).

For each deliverable you will have to indicate a due month by when you commit to upload it in the Portal. The due month of the deliverable cannot be outside the duration of the work package and must be in line with the timeline provided below. Month 1 marks the start of the project and all deadlines should be related to this starting date.

The labels used mean:

Public — fully open (⚠ automatically posted online on the Project Results platforms)

Sensitive — limited under the conditions of the Grant Agreement

EU classified — RESTREINT-UE/EU-RESTRICTED, CONFIDENTIEL-UE/EU-CONFIDENTIAL, SECRET-UE/EU-SECRET under Decision 2015/444. For items classified under other rules (e.g. national or international organisation), please select the equivalent EU classification level.

Work Package 1 – Project Coordination

Work Package 1: Project Coordination			
Duration:	M1 – M48	**Lead Beneficiary:**	1- UOA

Objectives

The general objective is to coordinate the overall management of the project and to coordinate and support the activities of individual work packages. Specific objectives include:

- Objective 1.A- To ensure the overall management of the project.
- Objective 1.B- To coordinate financial management and oversight of the project.
- Objective 1.C- To provide scientific support to the work in individual WPs.
- Objective 1.D- To communicate with the European Commission, its working groups, and other EU projects and initiatives.
- Objective 1.E- To ensure synergies with other EU-funded projects in the same field

Activities and division of work (WP description)

Task No	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	
T1.1	Develop and implement a Consortium Agreement.	[Objective 1.A] The Consortium agreement will describe the consortium management: a Steering Committee, comprised by the representatives of the WP leaders will be created. More general issues will be discussed with all partners as part of the consortium assembly. Voting procedures, terms and guidelines will be clearly presented in the Consortium Agreement.	Lead: UOA; Partners: All Consortium members	COO	No
T1.2	Monitor and guide the progress of individual WPs	[Objective 1.A] This task will monitor the progress of the activities throughout the project and for all parties involved. It will ensure a smooth implementation of the activities outlines in the grant agreement. This task will aim to stimulate the integrated progress	Lead: UOA;	COO	No

		of the work, by fostering collaboration between individual WPs, linking up with third parties and networks, and stimulating the use of additional data sources or innovative methodologies.	Partners: All Consortium members		
T1.3	Organize, chair and take minutes of meetings including the kick off meeting (Athens), Steering Committee meetings, Annual Consortium Meetings and the final project meeting (Brussels, European Parliament).	[Objective 1.A] The COO will host a kick-off meeting (M2 in Athens, with participants representing all partners) for project launch, as well annual consortium meetings (3). The purpose of the KoM meeting is to brainstorm, and ensure a common understanding of the approach, methodologies, and activities to be performed under the joint action. Within Task 1.3 we will also organize the final project conference (1 in Y4) where we will, share achievements, and discuss key project outcomes with stakeholders. In total 5 meetings are planned	Lead: UOA; Partners: All Consortium members	COO	Yes, Subcontracting for the logistics of the KoM (described in the subcontracting table)
T1.4	To communicate rules for financial administration and ensure financial management.	[Objective 1.B] Within this task we will outline and convey the rules for internal financial administration and management and support their implementation by all partners.	Lead: UOA; Partners: All Consortium members	COO	No
T1.5	To prepare interim and final financial reports for HADEA.	[Objective 1.B] Within this task we will work to facilitate reporting, request and acquire all information and documents needed for project monitoring and reporting. This task includes but is not limited to the collection of internal reports, timesheets and documentation from members of the consortium. Within this task we will also perform detailed financial oversight and adapt, if necessary, financial planning and actions based on the progress, the completion of milestones and deliverables, and partner engagement.	Lead: UOA; Partners: All Consortium members	COO	No
T1.6	To provide timely advice on the plans, progress and outcomes of each WP.	[Objective 1.C] Within this task we will facilitate inter and intra project collaboration on WP topics related to the either scientific or policy aspects to be implemented within the context of JA-SAFE.	Lead: UOA; Partners: All Consortium members	COO	No
T1.7	To undertake actions that may benefit or enhance the work in WPs with regards to emerging Public Health threats.	[Objective 1.C] Within this task, we will facilitate a response to potential emerging European public health threats, including organising special workshops or refocusing activities to ensure relevance with the tobacco and alcohol product landscape and other potential EU wide health challenges that may appear during the course of JA-SAFE.	Lead: UOA; Partners: All Consortium members	COO	No
T1.8	To ensure a coherent approach and complementarity between	[Objective 1.D] Within this task we will provide strategic oversight to ensure that the work performed within JA-SAFE builds on past and ongoing projects, such as joint actions (e.g. JAPreventNCD,	Lead: UOA;	COO	No

	other EU initiatives and projects including common activities, integration with the Advisory Group and EU Public Policy Activities.	JACARDI, JATC), projects with international organisations such as OECD, WHO and UNICEF, and work performed by international stakeholders. Integration with these initiatives will be facilitated through close communication with project contact points, EU expert groups (including but not limited to the Expert Groups and subgroups of DG SANTE etc). Furthermore, collaboration with UNICEF will specifically focus on integrating child and adolescent health perspectives into NCD prevention strategies, drawing on UNICEF's expertise in early life interventions and child well-being indicators to ensure a comprehensive, life-course approach to health promotion. Collaborations with OECD have also commenced.	Partners: All Consortium members		
T1.9	To ensure synergies with other EU-funded projects in the same field	[Objective 1.E] Within this task we will ensure synergies and facilitate collaboration with other EU-funded projects in the field of health promotion (JARED, JACARDI, RELIEF etc.)	Partners: All Consortium members	COO	No

Milestones and deliverables (outputs/outcomes)

Milestone No	Milestone Name	Work Package No	Lead Beneficiary	Description	Due Date	Means of Verification
M1.1	Consortium Agreement	1	UOA	The document outlines the rights, responsibilities, and contributions of the partners in the consortium. This manual presents also the processes for defining and monitoring procedures, milestones and deliverables and coordination.	M4	Consortium agreement signed by all partners
M1.2	Final project meeting	1	UOA	The Final Project Meeting is the climax event of JA-SAFE, where partners present their final results, share achievements, and discuss key project outcomes with stakeholders.	M48	Minutes of the Final Meeting
M1.3	First meeting to build up synergies with the action grant RELIEF (online meeting)	1	UOA	Three meetings will be organised for the implementation of activities to liaise with and develop synergies with the action grant RELIEF. These will be online meetings, coordinated by JA-SAFE. This is Meeting 1.	M3	Minutes of the First Meeting
M1.4	Mid-term meeting to build up synergies with the action grant	1	UOA	Three meetings will be organised for the implementation of activities to liaise with and develop synergies with the action grant RELIEF. These will	M24	Minutes of the Mid-term Meeting

	RELIEF (online meeting)			be online meetings, coordinated by JA-SAFE. This is the Mid-term Meeting.			
M1.5	Final meeting to build up synergies with the action grant RELIEF (online meeting)	1	UOA	Three meetings will be organised for the implementation of activities to liaise with and develop synergies with the action grant RELIEF. These will be online meetings, coordinated by JA-SAFE. This is Final Meeting.		M48	Minutes of the Final Meeting
Deliverable No	**Deliverable Name**	**Work Package No**	**Lead Beneficiary**	**Type**	**Dissemination Level**	**Due Date**	**Description**
D1.1	First periodical technical and financial report	1	UOA	[R — Document, report]	[SEN — Sensitive]	M24	This report describes the activities, milestones and results achieved in the first half of the project.
D1.2	Final JS-SAFE Report	1	UOA	[R — Document, report]	[SEN — Sensitive]	M48	This report describes overall implementation and the results achieved.
D1.3	Overview of planned activities to develop synergies with the action grant RELIEF	1	UOA	[R — Document, report]	[SEN — Sensitive]	M10	This report describes an overview of planned activities to develop synergies with the RELIEF project.
D1.4	Report on the first period of activities to build and strengthen synergies with the action grant RELIEF	1	UOA	[R — Document, report]	[SEN — Sensitive]	M24	This report describes the activities to build and strengthen synergies with RELIEF in the first half of the project.
D1.5	Final report on synergies/sustainability with the action grant RELIEF	1	UOA	[R — Document, report]	[SEN — Sensitive]	M48	This report describes the results of the activities to build and strengthen synergies with RELIEF during the whole project.

Estimated budget — Resources
See detailed budget table/calculator (annex 1 to Part B).

Work Package 2 - Communication and Dissemination Activities of JA-SAFE

Work Package 2: Communication and Dissemination Activities of JA-SAFE			
Duration:	M1 - M48	**Lead Beneficiary:**	20.4 - GOKVI

Objectives

The overall objective of WP2 is to support and implement the communication and dissemination activities of JA-SAFE building on communication methodologies, best practices, and established networks from previous and ongoing successful joint actions and Horizon2020 projects. This will be performed by applying established frameworks for identifying and engaging stakeholders, disseminating deliverables, and driving awareness across the health/public health sector through adapting methodologies from other JA projects and tailoring methodologies to the unique challenges and objectives of JA-SAFE. Specific objectives for this WP include:

- Objective 2.A - To identify stakeholder groups and formulate a dissemination strategy.
- Objective 2.B – To facilitate and enhance communication and dissemination efforts throughout the duration of the project.

Activities and division of work (WP description)

Task No	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	
T2.1	To update and expand the stakeholder mapping and analysis performed through other EU projects	[Objective 2.A] Within this task we will identify new stakeholder groups and involve existing stakeholder networks of other EU projects (i.e. JATC-1, JATC-2, BEST-REMAP, STOP, PEN, CHRODIS+, CO-CREATE, JACARDI, JAPreventNCD, etc), the network of WHO Europe and the networks of civil society stakeholders (i.e. ENSP, ERS, WFPHA etc).	Lead: GOKVI; Partners: All consortium partners	BEN	Yes, subcontracting (described in the subcontracting table)
T2.2	To develop a communication and dissemination strategy that is maintained as a "living"	[Objective 2.A] Through this task, we will formulate the JA-SAFE communication and dissemination strategy within the form of a "living" action plan building on tested methodology from other Joint Action projects that the consortium members have been engaged in.	Lead: GOKVI; Partners: All consortium partners	BEN	Yes, subcontracting (described in the subcontracting table)

	document throughout the duration of JA-SAFE.				
T2.3	To prepare communication resources and products throughout the duration of the project and in direct communication with the WP tasks and actions.	[Objective 2.B] This task includes ensuring the JA-SAFE visual identity, website, and other communication materials for different stakeholder groups (etc. leaflets, flyers, social media, manuscripts, policy briefs, and conference proceedings). The project website is to be conceived as 'dynamic' in the sense that continual updates will be made as the project work advances. The project website must include sufficient information for the general public, researchers and regulators to be informed of the impact and progress of the project. Dissemination will take place both through traditional but also social and electronic media so as to ensure a broader outreach and the reaching of appropriate target audiences.	Lead: GOKVI; Partners: All consortium partners	BEN	Yes, subcontracting (described in the subcontracting table)
T2.4	To implement the communication and dissemination strategies and support individual WPs in their dissemination activities	[Objective 2.B] This task is facilitated and closely integrated with the work of the vertical WPs of JA-SAFE (through designated WP communication leads) with the aim to promote the dissemination of JA-SAFE material to various stakeholder groups both widely and timely and through multiple channels including but not limited to newsletters, Social media (i.e. LinkedIn), Press releases, Webinars, National stakeholder events, etc.	Lead: GOKVI; Partners: All consortium partners	BEN	Yes, subcontracting (described in the subcontracting table)
T2.5	To develop a scientific publication strategy	[Objective 2.B] Within this task we will develop and implement a Publication Plan to support scientific dissemination of JA-SAFE activities, through the creation of a Publication Policy Board (PPB) to support and focus on the scientific dissemination activities, which in turn will develop a Publication Policy providing standardized rules and guidance for the publication of peer reviewed scientific material adhering to EU Open Access Policies.	Lead: GOKVI; Partners: All consortium partners	BEN	Yes, subcontracting (described in the subcontracting table)

Milestones and deliverables (outputs/outcomes)

Milestone Num.	Milestone Name	WP	Lead Beneficiary	Description	Due Date	Means of Verification
MS 2.1	Stakeholder plan	2	GOKVI	The stakeholder plan outlines how the project team will identify, analyse, and	M3	Stakeholder plan shared with partners via email.

				engage with individuals or groups who can impact or be impacted by the project.			
MS 2.2	Dissemination strategy and initial Action Plan	2	GOKVI	The Dissemination Strategy and Initial Action Plan outlines how the project will communicate its results and impact to target audiences, including researchers, policymakers, and the general public		M5	Action plan shared with all partners via email.
MS 2.3	Publication Policy	2	GOKVI	The publication policy outlines the rules and procedures for publishing outputs generated within JA-SAFE, ensuring compliance with open access requirements.		M5	Final Publication Policy guidance document shared to partners via email.
Deliverable Num.	Deliverable Name	WP	Lead Beneficiary	Type	Dissemination Level	Due Date (month number)	Description (including format and language)
D2.1	Project Leaflet	2	GOKVI	A project leaflet that would provide the information on the aims, scope, partners and planned activities of JA-SAFE	[PU — Public]	M3	Leaflet disseminated to partners
D2.2	Project Website	2	GOKVI	The project's website will provide the forum for hosting the information produced by JA-SAFE	[PU — Public]	M3	Website live and operational
D2.3	Final dissemination report	2	GOKVI	[R — Document, report]	[PU — Public]	M48	At the end of the project, a dissemination report will be developed that indicates the extent of dissemination activities including qualitative and quantitative indicators

							and ensuring the visibility of EU co-financing.
D2.4	Layman version of the final report	2	GOKVI	[R — Document, report]	[PU — Public]	M48	This is a short (e.g. 10 pages) version of the final report, written for the interested public as a target group.

Work Package 3 – Project Evaluation and Benchmarking

Work Package 3: Project Evaluation and benchmarking			
Duration:	M1 – M48	**Lead Beneficiary:**	22 - RSU

Objectives

The overall objective of WP3 is to evaluate the progress of JA-SAFE against its internal milestone and deliverable progress, internal communication and and to evaluate its benchmarking in supporting Health promotion and Disease prevention in Europe. Specific Objectives include:

- Objective 3.A: To create and implement an evaluation plan, that will describe the criteria, methods, activities and timeline for project evaluation, as well as the procedures and tools for project's quality assurance.
- Objective 3.B: To implement the evaluation plan throughout the duration of the project
- Objective 3.C: To assess the external impact of JA-SAFE with regards to its utility for Health Promotion and Disease Prevention in Europe

Activities and division of work (WP description)

Task No	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	
T3.1	To define the evaluation plan	[Objective 3.A] Within this task, we will define Key Performance Indicators (KPIs) with specific target values per activity/tool and also process, output, and outcome indicators in close cooperation with WP leaders and the steering group. Within this task, we will finalise the instruments for WP3 data collection.	Lead: RSU Partners: UoA, RZ, THL, SAM, VU	BEN	No

T3.2	To implement the evaluation plan throughout the duration of JA-SAFE.	[Objective 3.B] This task aims to implement the evaluation plan. In this task we will collect and analyse qualitative and quantitative WP3 evaluation data. Qualitative primary data is collected for outcome measurement and quality assurance. This task includes both Interim and final project evaluation.	Lead: RSU Partners: RZ, THL, SAM, VU	BEN	No
T3.3	To assess the external impact of JA-SAFE	[Objective 3.C] Within this task, we will assess the external impact of JA-SAFE actions and the external expectations in responding to current and future challenges in Europe related to the topic of this call. This is performed through a qualitative assessment performed at the beginning, interim and end of the project.	Lead: RSU Partners: RZ, THL, SAM, VU	BEN	No

Milestones and deliverables (outputs/outcomes)

Milestone No	Milestone Name	WP	Lead Beneficiary	Description	Due Date	Means of Verification
MS1	Evaluation Plan	3	RSU	A detailed plan with process, output and outcome indicators	M4	Plan shared with all partners via email.
MS2	Midterm Evaluation Report	3	RSU	An Interim Evaluation Report, including internal and external benchmarking of the progress of JA-SAFE	M24	Evaluation Report included in the Interim Report

Deliverable No	Deliverable Name	WP No	Lead Beneficiary	Type	Dissemination Level	Due Date	Description
D3.1	Final Evaluation Report	3	RSU	[R — Document, report]	[SEN — Sensitive]	M48	Final Evaluation Report, including internal and external benchmarking

Estimated budget — Resources

See detailed budget table/calculator (annex 1 to Part B).

Work Package 4 – Sustainability Actions of JA-SAFE

Work Package 4: Sustainability Actions of JA-SAFE			
Duration:	M1 – M48	**Lead Beneficiary:**	21- ISS

Objectives

The overall objective of this WP is to support the sustainability and continuation of the JA-SAFE activities both during and after the end of the project, in order to ensure a constant implantation of actions supporting policies across EU MS that promote EU public health. Such actionable recommendations and policy briefs, drawing directly from the identified best practices and the outcomes of real-world studies will be tailored to facilitate the seamless embedding of JA-SAFE's evidence-based interventions into national health strategies and operational frameworks. Specific Objectives include:

- Objective 4.A: To identify strategies and resources for the sustainability of activities and results of the WPs
- Objective 4.B: To facilitate the exchange of knowledge and the sharing of material developed through the vertical WPs to key stakeholders and policymakers at the EU MS level.

Activities and division of work (WP description)

Task No	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	
T4.1	To identify strategies and resources for the sustainability of activities and results of the WPs	[Objective 4.A] A guidance questionnaire will be developed and disseminated among the WP leaders, to identify the main resources, key elements and barriers for the implementation of the WP actions.	Lead: ISS Partners: THL, MoH FR, IRFMN, RSU, SAM, ICO, IDIVAL	BEN	No
T4.2	To facilitate knowledge exchange and the sharing of JA-SAFE policy implementation guidance material	[Objective 4.B] This is performed through the identification and the development of guidance documents, how-to-guides and other documentation that may assist EU MS in the sustained implementation. Within this task, the material generated through JA-SAFE will be used during the meetings of JA-SAFE partners with stakeholders, including policymakers. Within this task, the materials generated through JA-SAFE will be used as material for policymakers through both webinars and hands-on training sessions.	Lead: ISS Partners: All partners	BEN	No

Milestones and deliverables (outputs/outcomes)							
Milestone Num.	Milestone Name	WP	Lead Beneficiary	Description		Due Date	Means of Verification
MS 4.1	Guidance questionnaire for sustainability	4	ISS	A guidance for the WP leaders to identify resources, key elements and barriers to activities and actions of the WPs		M12	Guidance document submitted to COO
MS 4.2	First Sustainability report	4	ISS	This report will include all the proposals on sustainability indicated in the questionnaire [MS 4.1] by the WP leaders		M24	Report submitted to COO
Deliverable Num.	Deliverable Name	WP	Lead Beneficiary	Type	Dissemination Level	Due Date	Description
D4.1	Sustainability Plan report	4	ISS	[R — Document, report]	[SEN — Sensitive]	M44	Final sustainability Report
Estimated budget — Resources							
See detailed budget table/calculator (annex 1 to Part B).							

Work Package 5 – Promoting a Smoke and Aerosol Free (SAFE) Europe

Work Package 5: Promoting a Smoke and Aerosol Free (SAFE) Europe			
Duration:	M1 – M48	**Lead Beneficiary:**	33- ICO
Objectives			

The overall objective of this WP is to support the implementation of the planned revised Council Recommendation on Smoke-free Environments through appropriate measures at the local, regional, and national levels that support the compliance to and enforcement of smoke and aerosol-free environments (SAFE). Through the provision of a solid scientific evidence base, this WP also aims to contribute to reducing the risks from harmful exposure to second-hand smoke and aerosols in indoor and certain outdoor spaces by supporting increasing SAFE uptake and compliance across EU MS. Specific objectives for this WP include:

- Objective 5.A - To facilitate collaboration and exchange of best practices of SAFE in EU MS.
- Objective 5.B - To facilitate real-world data collection on the expansion of SAFE in EU MS.
- Objective 5.C - To support uptake and compliance with the adoption of SAFE in EU MS.

Activities and division of work (WP description)

Task Num.	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	
T5.1	To update and include new promising SAFE practices within a Web-based repository throughout the course of JA-SAFE.	[Objective 5.A] Within this task, we will update the content and further improve the functionality of the web-based repository, which was developed within JATC2 to identify promising and best practices for SAFE. This Web-based repository is a tool to gather ideas and show examples of promising and best SAFE practices implemented in EU countries, which can be broadened to other EU settings. In T5.1 this web-based repository will be expanded to increase the information available for SAFE and unregulated nicotine products in the EU MS. In M18, (4+ years from the first consultation to experts in JATC2), we will perform a consultation to experts (from research institutes, different levels of government -local, regional, national, NGOs) in order to have a broader view of reported promising practices at the EU MS level.	Lead: ICO; Partners: THL, SU, ISS, IRFMN, NIJZ	BEN	No
T5.2	To enhance and maintain the Knowledge Sharing Archive for SAFE in EU MS through updates and frequent webinars.	[Objective 5.A] Within this task we will enhance and maintain the knowledge sharing archive, (established during JACT2 and within CIRCABC) with knowledge sharing meetings and webinars. This hub, acts as a Central Repository for information, offering access to updated research and best practices, as also technical assistance and capacity-building resources for policymakers and advocates while in parallel facilitating the networking and collaboration among stakeholders at the EU level in close cooperation with WP2. Within this task, we will organize 6 knowledge hub meetings (one every 6 months starting from month 12 of the JA) addressing all the new issues related to SAFE.	Lead: SU; Partners: UoA, AAKS, THL, ICO, SAM, VU	BEN	No

T5.3	To quantify SHS-SHA exposure in playgrounds noted by the 2024 Council Recommendations on SAFE in EU MS.	[Objective 5.B] Within this task, we will measure airborne nicotine concentration (a specific SHS marker) through active sampling and conduct systematic observational methods to determine levels of SHS exposure in playgrounds, of 15 EU MS (300 measurements, 20 samples per country) representing different social, geographical, economic, and tobacco control contexts. Major cities of the countries will be selected, including playgrounds from more and less deprived neighbourhoods.	Lead: ASPB; Partners: UoA, NPHO, IRFMN, RSU, LSMU, NIJZ, USC, ICO	BEN	Yes, subcontracting (described in the subcontracting table)
T5.4	To quantify SHS-SHA exposure in school entrances noted by the 2024 Council Recommendations on SAFE	[Objective 5.B] Within this task, we will measure airborne nicotine concentration (specific SHS marker) through active sampling and conduct systematic observational methods to determine levels of SHS exposure in school entrances, of 15 EU MS (300 measurements, 20 samples per country) representing different social, geographical, economic, and tobacco control contexts. Major cities of the countries will be selected, including schools from more and less deprived neighbourhoods.	Lead: ASPB; Partners: UoA, NPHO, IRFMN, RSU, LSMU, NIJZ, USC, ICO	BEN	Yes, subcontracting (described in the subcontracting table)
T5.5	To quantify SHS-SHA exposure in hospitality terraces noted by the 2024 Council Recommendations on SAFE in EU MS.	[Objective 5.B] Within this task, we will measure airborne nicotine concentration (specific SHS marker) through active sampling and conduct systematic observational methods to determine levels of SHS exposure in terraces of hospitality venues of 15 EU MS (300 environmental samples, 20 samples per country) representing different social, geographical, economic, and tobacco control context. Major cities of the countries will be selected, including hospitality venues from more and less deprived neighbourhoods.	Lead: ASPB; Partners: UoA, NPHO, IRFMN, RSU, LSMU, NIJZ, USC, ICO	BEN	Yes, subcontracting (described in the subcontracting table)
T5.6	To quantify exposure to SHS an SHA in other indoor settings and general outdoor settings in selected EU MS.	[Objective 5.B] Assessment of SHS and SHA exposure through observational signs of consumption and exposure in indoor settings (i.e. bars, airports, healthcare services, multiunit housing) and other general outdoor settings (e.g. in healthcare services, public transport stops/platforms, sport areas) and recreational public places in selected EU MS.	Lead: ICO Partners: UoA, THL, NPHO, IRFMN, RSU, LSMU, NIJZ, ASPB	BEN	Yes, subcontracting (described in the subcontracting table)
T5.7	To evaluate the effectiveness of different enforcement strategies for the implementation of SAFE in EU MS	[Objective 5.C] Within this task, we will assess the effectiveness of different enforcement strategies for the implementation of SAFE in EU MS through intersectoral and Intereuropean collaborations between policymakers, civil society, and community stakeholders through specific	Lead: FILHA; Partners: UoA, ICO, NPHO, SU, IRFMN, LSMU, NIJZ, SAM	BEN	No

		consultations, an active data collection and desk research (systematic review). The different enforcement procedures (i.e. warning letters, fines, legal action and compliance-enhancing interventions) will be explored by review methods and knowledge exchange of experts as the last assessment was done by DG Sante UnitB2 in 2019.			
T5.8	To develop guidelines, evidence-based recommendations, press releases, media briefings, op-eds, and opinion pieces to reinforce public understanding of the scientific evidence to expand SAFE in Europe.	[Objective 5.C]. Within this task, we will compile the work of WP5 that distils the potentially complex scientific evidence collected through WP5 into easily digestible documents. These would feed into T5.9 and would also include the ability to develop "on-time updates" on how emerging nicotine products may impact SAFE in Europe. The target population of this task is policymakers of EU MS, region, municipality, or setting levels. Such documents include but are not limited to reports, press releases, and media briefings, which may reinforce understanding of the evidence to expand SAFE at the EU MS level.	Lead: ICO; Partners: CSF, FILHA, NPHO, SU, LOMBARDIA, IRFMN, RSU, SAM, VU, NIJZ, IDIVAL, SCS, ASPB, PHC	BEN	No
T5.9	To support individual EU MS in implementing SAFE	[Objective 5.C] Within this task, specific in-country visits will be performed in selected EU MS (M18-M42) to support individual EU MS in implementing or expanding SAFE with a specific focus on high-exposure settings and when potential legislative revisions are planned at the EU MS level. We will map all the organizations at regional, local and setting level that are candidates to be visited and involved in this task including policymakers, civil society, and community stakeholders. EU MS-specific reports will be created and disseminated during these in-country visits.	Lead: SU; Partners: UoA, ICO, LOMBARDIA, NIJZ	BEN	No

Milestones and deliverables (outputs/outcomes)

Milestone Num.	Milestone Name	WP	Lead Beneficiary	Description	Due Date	Means of Verification
MS 5.1	Protocol to update the best and promising practices on SAFE	5	ICO	The protocol will include a detailed methodological approach for the consultation, including but not limited to the stakeholders, the domains, the scope of practices, and the implementation timeframe.	M5	Final protocol shared with the COO

MS 5.2	Report on the comprehensive methodological approach for all WP5 tasks	5	ICO-ASPB	This report acts as an internal methodological checkpoint, as by M5, the comprehensive and detailed approach for each WP5 task will be approved by the COO.		M6	Report shared with the Steering Committee members
MS 5.3	Initiation of fieldwork of measurements	5	ASPB	Initiation of the fieldwork for measurements in EU MS		M12	First data collected and stored in the WP shared drive.
MS 5.4	Initiation of data collection for the effectiveness of enforcement strategies	5	ICO	Initiation of the data collection on the effectiveness of enforcement strategies across EU MS.		M15	First data collected and stored in the WP shared drive.
MS 5.5	Initiation of first EU MS in-country visit to support implementation	5	ICO	First country visit, to support an EU MS in implementing SAFE.		M20	Press release of the first in country visit as shared with WP2.
Deliverable Num.	Deliverable Name	WP	Lead Beneficiary	Type	Dissemination Level	Due Date	Description
D5.1	Report on best practices for SAFE in EU MS.	5	ICO	[R — Document, report]	[PU — Public]	M30	This report will describe the updates to the enhanced interactive repository and metrics such as collaboration, resource sharing, and networking among stakeholders involved in SAFE implementation.
D5.2	Report on practices related to SAFE in EU MS	5	ASPB	[R — Document, report]	[PU — Public]	M36	This report will include the results of T5.2, T5.3, T5.4, T5.5, and T5.6 for public dissemination.
D5.3	Report on the JA SAFE actions at the EU MS level	5	ICO	[R — Document, report]	[PU — Public]	M44	This report will include a breakdown of the actions of WP5 at the EU MS level, including in

							annexes all EU MS specific documents.

Estimated budget — Resources
See detailed budget table/calculator (annex 1 to Part B).

Work Package 6 - Preventing Alcohol-Related Harm in Europe

Work Package 6: Preventing Alcohol-Related Harm in Europe			
Duration:	M1 – M48	**Lead Beneficiary:**	16-THL

Objectives

The overall objective of WP6 of JA-SAFE is to support the implementation of Europe's Beating Cancer Plan and the EU NCD initiative with respect to reducing harmful alcohol consumption, also in vulnerable populations, and to reduce the exposure of young people to advertising and marketing of alcoholic beverages. The work package aims to do this by supporting the implementation of high-impact strategies and interventions, capacity-building and the communication of evidence-based information to consumers and by addressing certain timely aspects of accessibility of alcohol and alcohol advertising. Specific objectives for this WP include:

- Objective 6.A – To assess and mitigate youth exposure and access to alcohol especially in online settings, as well as map the possible solutions and good examples from different countries to develop innovative approaches to reduce the harms caused by alcohol among young people.
- Objective 6.B – To reduce alcohol-related harm in the adult population by enhancing communication about risks related to alcohol, also to vulnerable populations, and by addressing accessibility of alcohol through e-commerce and home delivery and their regulation.
- Objective 6.C – To identify, scale up and enhance best and promising practices and develop innovative approaches (including on early identification and brief intervention) to reduce alcohol related harm.

Activities and division of work (WP description)

Task Num.	Task Name	Description	Participants		In-kind Contributions and Subcontracting
			Name	Role	
T6.1	To perform a mapping and assessment of alcohol marketing among youth	[Objective 6.A] This task will focus on mapping and assessing of youth exposure to alcohol marketing (including No/Lo alcohol products) especially online as well as the mapping of regulation and enforcement of practices to protect the youth in selected European countries, as well as industry	Lead: Sciensano; Partners: ICO, THL, IRFMN, ISS, RIVM, SAM, LSMU, ICAD, NIJZ, PHC	BEN	No

		interference (e.g., a rapid literature review, survey, interviews). This task will also include a process to identify good examples and innovative approaches related to policies to protect the youth from harmful marketing of alcohol.			
T6.2	To identify and pilot innovative approaches and good examples related to reducing alcohol use and related harm in young people	[Objective 6.A] Within this task we will examine the ways adolescents acquire and are offered alcohol especially via new channels (e.g., social media platforms) in selected countries (e.g., through a survey), and provide information about the risks related to this phenomenon. Within this context in this task, we will also identify and collect (e.g., a rapid literature review, survey) examples of good practices related to prevention of youth alcohol use (e.g., community-based practices) in different European countries, giving special attention to vulnerable groups. Selected promising practices will also be piloted, results analysed and descriptions of the promising practices disseminated (e.g., in the EU Best Practices Portal).	Lead: RSU; Partners: Sciensano, THL, NNGYK, IRFMN, ISS, RIVM, SAM, ICAD, NIJZ, PHC	BEN	No
T6.3	To identify good examples and innovative approaches for managing e-commerce and home delivery	[Objective 6.B] This task will include case studies of experiences with e-commerce and home delivery regulations (or lack of them) and their enforcement. Within this task we will conduct a compact survey on e-commerce and home delivery, gathering opinion from supervisory authorities and policy-makers in different European countries (based on work done in JA-PreventNCD and lessons learned) so as to identify challenges and opportunities, and make recommendations.	Lead: LSMU; Partners: THL, ISS, MoH LV, NIJZ, PHC	BEN	No
T6.4	Identify good and innovative practices in communicating information on lower-risk alcohol use to the general population, as well as vulnerable groups	[Objective 6.B] Task 6.4 will identify good and innovative practices in communicating information on lower-risk alcohol use, including an updated review of lower-risk recommendations in Europe and other key countries. This task will go beyond the status quo by identifying the key elements of messages beyond gram limits (e.g., continuum instead of fixed limits) considering also vulnerable groups. These elements will subsequently be tested for their reception / understanding (e.g., via focus groups) in various target groups.	Lead: THL; Partners: Sciensano, USC, NNGYK, ISS, LSMU, SPKC, NIJZ, PHC	BEN	No
T6.5	To promote brief intervention practices to reduce alcohol consumption (and other co-occurring risks, such as smoking), focusing on	[Objective 6.C] This task will extend capacity in early identification tools and brief intervention methods in different settings where these practices are less implemented, and for vulnerable groups, in selected countries building on previous work (e.g., WHO's EVID-ACTION). Within this task we will	Co-Leads: IDIBAPS - ISS Partners: Sciensano, GENCAT, ICO, USC,	AE	No

	different settings serving selected vulnerable groups, and to identify and study promising practices via proof-of-concept piloting, for knowledge-sharing results.	carry out a rapid review for existing good practices related to brief interventions on alcohol (alongside smoking and other risk factors) in less established settings (e.g., social services, emergency care, low-threshold services / community care) serving specific vulnerable groups (e.g., at-risk youth and older people, refugees/forced migrants and others traumatised by conflict, people with neurodevelopmental divergence) in selected countries. Also, the possibilities of digital environments will be considered, and possibilities for further development identified. Based on this evidence, we will develop adaptable materials to implement brief intervention programmes and will conduct proof-of-concept pilots (e.g., assessing the feasibility of implementation) with the countries' selected populations/settings; and evaluate the results of the pilots. To further enhance capacity building and knowledge-sharing, and to increase impact and sustainability of the pilots, the results and findings of these pilots will be fed forward for communication.	THL, NNGYK, ISS, SAM, LSMU, RSU, MoH LV, ICAD, PHC, SPKC		

Milestones and deliverables (outputs/outcomes)

Milestone No	Milestone Name	WP No	Lead Beneficiary	Description	Due Date	Means of Verification
MS 6.1	Report on the comprehensive methodological approach for all WP6 tasks	6	THL	This report acts as an internal methodological checkpoint, as by M5 the comprehensive and detailed approach for each WP6 task will be approved by the COO.	M5	Report shared with the Steering Committee members
MS 6.2	Summary of existing guidelines	6	THL	Updated review of European lower-risk alcohol guidelines	M12	New review drafted and submitted to the COO
MS 6.3	Study protocols and ethics approvals for pilots	6	IDIBAPS	Study protocols for brief intervention pilots for submission for approval by ethics boards	M16	Protocol in local language(s), submitted to local ethics board
MS 6.4	Preparations of the planned WP6 pilots	6	RSU	Protocols for piloting the recognised good practices on the alcohol use prevention among young people	M18	Preparations of the planned pilots have been done and submitted to the COO

				and the preparations for the pilots are ready.			
MS 6.5	Summary of the results on survey	6	LSMU	The results on e-commerce and home delivery survey are summarized.		M20	Summary drafted and submitted to the COO
Deliverable No	Deliverable Name	WP No	Lead Beneficiary	Type	Dissemination Level	Due Date	Description
D6.1	Article draft on exposure to online marketing	6	Sciensano	Article draft on young people's exposure to online marketing of alcohol has been prepared.	[PU — Public]	M26	Article draft is ready for submission
D6.2	Summary of the results concerning Prevention of Alcohol-Related Harm in Europe (WP6)	6		[R — Document, report]	[PU — Public]	M40	The results of the work on alcohol marketing among youth, reducing alcohol use among youth, e-commerce and home delivery, communication on lower-risk alcohol use and brief interventions will be summarized in a final report.
Estimated budget — Resources							
See detailed budget table/calculator (annex 1 to Part B).							

Work Package 7 - Scaling up Interventions for Tobacco Control and SAFE in Healthcare Settings

Work Package 7: Scaling Up Interventions for Tobacco Control and Safe in Healthcare Settings			
Duration:	M1 – M48	**Lead Beneficiary:**	**14- RZ**

Objectives

Within this WP, we will focus on the development and scaling up of best and promising practices for tobacco control and SAFE in Healthcare settings, ensuring appropriate communication strategies and long-term networking planning in parallel. Specific objectives of this WP are:

- Objective 7.A -To perform a Tobacco and Aerosol Control Assessment and Planning in Healthcare settings.
- Objective 7.B – To develop and implement communication and Education Strategies for Tobacco Control in Healthcare settings.
- Objective 7.C – To develop and enhance networking, resource sharing and health promotion activities across Healthcare settings
- Objective 7.D – To promote the use of evidence-based guidelines for smoking cessation treatment and train healthcare professionals and healthcare students to apply these guidelines via e-learning and networking between health services across EU.
- Objective 7.E – To scale up existing practices for smoking cessation within Healthcare settings in Europe by testing methodological approaches that ensure implementation and achieve the best practice, giving special focus to vulnerable groups.

Activities and division of work (WP description)

Task No	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	
T7.1	Perform Healthcare Settings Tobacco Control Assessment and Mapping	[Objective 7.A] Within this task, we will assess and map healthcare settings across EU Member States against existing tobacco control measures to identify gaps in staff, infrastructure, accreditation, and patient care related to nicotine product use prevention and cessation. The mapping will consider the differences between the healthcare systems in the different European MS as well as the collaboration of existing National and EU networks, societies or bodies related to the topic of this task. This task will provide understanding of current gaps and areas for improvement at the EU MS level.	Lead: RZ Partners: ICO, UoA, UHSD, SAM, SU, THL, RSU, NVI, DGS	BEN	No
T7.2	Develop Tailored Information Dissemination for Healthcare Providers	[Objective 7.B] Within this task, through Implementation Criteria and Methodological Planning, we will develop tailored plans to address identified gaps in Healthcare settings identified in Task 8.1 while leveraging evidence-based	Lead: RZ Partners: ICO, UHSD, NKIP, SAM, FILHA, IRFMN,	BEN	No

		methodological approaches to identify and adopt best practices. Subsequently, we will adapt strategies to fit the unique needs of healthcare environments, ensuring maximum reach and understanding for Health Care providers.	NPHO, RSU, DGS, OKFO		
T7.3	Enhancing Counselling Skills to Healthcare Students to Support Smoker Patients	[Objective 7.B] Within this task, we will train students to effectively communicate with smoker patients in a sample of healthcare settings, emphasizing clear communication, empathy, and patient support. Explaining the reasons behind smoke-free policies (e.g., health, safety, and comfort of all patients and staff). Offering supportive strategies to patients struggling to comply, such as temporary coping mechanisms.	Lead: UHSD Partners: RZ, ICO, PSCUH, IRFMN, NPHO, RSU, NVI, DGS, SAM	BEN	No
T7.4	To implement and promote Healthcare Providers' training	[Objective 7.B] Within this task, we will implement comprehensive training for healthcare staff across Healthcare services to educate patients about the risks of tobacco use and the benefits of cessation. We will perform trainings to equip staff with skills to address nicotine product use among patients and visitors while promoting awareness of tobacco-free policies and cessation services. This will be implemented across selected EU MS.	Lead: UoA Partners: RZ, ICO, UHSD, NKIP, FILHA, NPHO, RSU, NVI, IDIVAL, FGP, DGS, OKFO, SAM	COO	No
T7.5	To identify or develop Tobacco and aerosol- free Communication Strategies for patients and visitors	[Objective 7.B] Within this task, we will identify, develop, and subsequently execute a robust communication plan to integrate clear, engaging messages about health settings, tobacco-free policies and cessation resources into digital tools for patients and staff in Healthcare settings.	Lead: RZ Partners: UHSD, NKIP, SAM, RSU, NVI, IDIVAL, FGP, DGS, OKFO	BEN	No
T7.6	To support the implementation of comprehensive SAFE in Healthcare settings in Europe	[Objective 7.B] Within this task, we will identify and develop tools/interventions to implement and support the enforcement of comprehensive SAFE in healthcare setting outdoor areas. Subsequently, the identified intervention/tool will be pilot-implemented in selected EU MS. This task will expand and scale up the existing enforcement tools policy to ensure their implementation.	Lead: THL Partners: RZ, UoA, UHSD, PSCUH, RSU, NVI, FGP, DGS	BEN	No
T7.7	To ensure continuous Improvement and Network Integration	[Objective 7.C] Within this task, we will perform a longer-term Impact Assessment, Long-Term Evaluation and Reporting of the outcomes of healthcare settings-based tobacco control initiatives through the establishment of monitoring and reporting systems with the aim to use the findings to inform future strategies and demonstrate the effectiveness of tobacco prevention measures in healthcare settings. Within	Lead: RZ Partners: UoA, UHSD, THL, RSU, FGP, DGS	BEN	No

		this task, we will also sustain hospital network Integration through collaboration with existing hospital networks (I.e. Health Promotion Hospitals etc) or the creation of new networking processes across healthcare systems.			
T7.8	Design and Implement Materials for Improving the Patient Journey in Tobacco/Nicotine Cessation in Health care Settings	[Objective 7.D] Within this task, we will implement and design or scale up existing interventions to enhance the tobacco/nicotine use intervention at every stage of the patient journey, from admission to discharge and follow-up, using evidence-based educational and delivery materials tailored to health settings namely hospital environments by using the Implementation Science adaptation models. (I.e. IM-Adapt) This task will include the developing a seamless Integration guideline that would identify points within the patient journey (e.g., admission, treatment, discharge, and follow-up) to integrate smoking cessation support and offer an integrated behavioural support approach and pharmacological treatment options according to preferences and circumstances.	Lead: ICO Partners: RZ, UHSD, NKIP, FILHA, NPHO, RSU, IDIVAL, FGP, CSF, DGS, OKFO	BEN	No
T7.9	Scaling up the integration of promising and best practices for smoking cessation within Healthcare settings	[Objectives 7.C-E] Within this task, we will scale up existing practices for smoking cessation within Healthcare settings in Europe to increase the success of quitting or referral rates to cessation centres. Separate tailored interventions may be developed for vulnerable groups.	Lead: RZ Partners: UoA, UHSD, RSU, REG LOMB, DGS, CSF	BEN	No

Milestones and deliverables (outputs/outcomes)

Milestone No (continuous numbering not linked to WP)	Milestone Name	Work Package No	Lead Beneficiary	Description	Due Date (month number)	Means of Verification
MS 7.1	Report on the comprehensive methodological approach for all WP7 tasks	7	RZ	This report acts as an internal methodological checkpoint, as by M6 the comprehensive and detailed approach for each WP7 task will be approved by the COO.	5	Report shared with the Steering Committee members
MS 7.2	Healthcare Settings Assessment and Gaps Identification	7	RZ	Conduct a comprehensive assessment and mapping of tobacco control measures in healthcare settings across EU MS. Develop a detailed report and a database of healthcare systems	18	Report submitted to COO

				categorized by tobacco control readiness.			
MS 7.3	Development of Tailored Dissemination and Training Plans	7	RZ	Develop and validate tailored information dissemination strategies and training materials for healthcare providers and students. Pilot training programs and Scalable training modules and guides for healthcare providers.		30	Training material forwarded to the COO
MS 7.4	Implementation of Communication and SAFE Enforcement Strategies	7	RZ	Implementation of Communication and Smoke and Aerosol-Free Environments (SAFE) Enforcement Strategies. Implement enforcement tools for SAFE. Pilot interventions/tools implemented and evaluated in selected EU Member States.		36	Enforcement tools forwarded to the COO
MS 7.5	Scaling Up, Evaluation, and Network Integration	7	RZ	Establish monitoring systems for long-term evaluation and network integration. An impact assessment report and recommendations for future strategies. Strengthened networks through collaboration with existing hospital promotion networks and newly established ones.		36	Impact assessment report forwarded to the COO
Deliverable No (continuous numbering linked to WP)	Deliverable Name	Work Package No	Lead Beneficiary	Type	Dissemination Level	Due Date (month number)	Description (including format and language)
D7.1	Final WP7 report	7	RZ	[R — Document, report]	[PU — Public]	M44	Report containing final activities performed in WP7.
Estimated budget — Resources							
See detailed budget table/calculator (annex 1 to Part B).							

Work Package 8 - Accelerating the Path to a Tobacco-Free Generation in Europe

Work Package 8: Accelerating the Path to a Tobacco-Free Generation in Europe			
Duration:	M1 – M48	**Lead Beneficiary:**	1-UOA

Objectives

The overall objective of this WP is to support the implementation of Europe's Beating Cancer Plan, in particular in terms of achieving a tobacco-free Europe through actions to help create a 'Tobacco-Free Generation' where less than 5% of the population uses tobacco by 2024 compared to around 25% today.
Specific Objectives of this WP include:

- Objective 8.A – To map and promote forward-looking tobacco control measures across EU MS.
- Objective 8.B – To support the Tobacco-Free Generation goal (<5% by 2040) of the Europe's Beating Cancer Plan.
- Objective 8.C - To identify the prevalence and factors associated with tobacco products among EU adolescents.
- Objective 8.D – To support the expansion of school, higher education and community-based interventions that minimise nicotine product use and reduce exposure to SHS and aerosols among youth.

Activities and division of work (WP description)

Task No	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	
T8.1	To perform an assessment of forward-looking tobacco control measures (WHO FCTC Article 2.1) in Europe	[[Objective 9.A] Within this task, partners will map forward-looking tobacco control measures utilizing the COP11 expert group report on WHO FCTC Article 2.1, identify relevant policy options, and assess their feasibility in their country with the Regulatory Impact Assessment (RIA) approach building on the work in the JATC-2. RIA involves a structured, detailed analysis of different policy options and their expected impacts (health, economic, social etc.), implementation and enforcement costs, and possible unintended consequences. RIA builds on existing data and evidence and often includes a consultation with stakeholders. Forward-looking tobacco control measures go beyond the WHO FCTC and expand or intensify approaches to tobacco control. Examples of these consumer-, product-, retail-, or	Lead: THL; Partners: UoA, Sciensano, IRFMN, MoH LV, SAM, DGS, NIJZ, ICO,	BEN	No

		market-oriented measures include raising the age of sales above 18 years, phase-out of cigarette sales, substantial reduction of density/number of retail sales points, and industry fees/levies to curb its profits.			
T8.2	To support EU MS in implementing forward looking tobacco control measures	[Objective 8.A] Within this task we will support EU MS in facilitating the adoption and implementation of forward-looking tobacco control measures. Forward-looking tobacco control measures can be implemented in two complementary ways, either as part of national tobacco endgame strategies, or as individual tobacco control measures regardless of the existence of a national strategy. Actions in this task include synthesizing existing evidence, conducting a modelling study on the potential impact of a group of selected forward-looking tobacco control measures at EU MS and/or EU level (depending on data availability) and the development of EU specific actions such as webinars or policy briefs with recommendations.	Lead: THL Partners: UoA, Sciensano, CIPH, NNGYK, LOMBARDIA, IRFMN, MoH LV, SAM, NIJZ, ICO	BEN	No
T8.3	To map the tactics used by the tobacco/nicotine industry to enhance product uptake by youth and counterattack the extension of smoke/aerosol-free environments	[Objective 8.B] Within this task we will perform an active data collection and map and analyse industry tactics across the EU MS (e.g. in social media, point-of-sale advertising). This task will focus on identifying the tactics specifically used by the industry or their front groups online and in social media, to influence public perceptions including among youth that impact the pathway to a tobacco free generation.	Lead: SU Partners: UoA, CIPH, NPHO, SU, LIGURIA, LOMBARDIA, IRFMN, SAM, RIVM, NIJZ, USC, ICO, PHC, SAM		No
T8.4	To develop an EU wide cross-sectional study among youth focusing on the prevalence and driving factors associated with nicotine product use	[Objective 9.C] Within this task, we will perform a cross-sectional study across a planned 10 EU MS to provide evidence on youth tobacco use (Youth prevalence and driving factors). The task will initially focus on the EU MS that do not have recent GYTS or relevant data from random national samples. This task may also facilitate quantitative and qualitative focus group research at the EU MS level.	Lead: UoA Partners: Sciensano, AAKS, NPHO, SU, ISS, LIGURIA, IRFMN, MoH LV, VU, DGS, IPMN, USC, ASPB	COO	Yes, subcontracting (described in the subcontracting table
T8.5	To support the scaling up of evidence-based interventions that support interventions that minimise nicotine product use and reduce	[Objective 8.D] Within this task, we will scale up promising and/or best practices in the EU that support minimizing nicotine product use and reducing exposure to SHS and aerosols among youth. Pilot projects will be performed across selected EU MS and in close collaboration with a JA-SAFE youth Advisory Group. Scaling up can involve development	Lead: ODSHERRED Partners: SZU, CIPH, AAKS, MFK, VAL, NPHO, NKIP, NNGYK, OKFO, LIGURIA,		No

	exposure to SHS and aerosols among youth.	of strategies for prevention models and pioneer group to support the youth	LOMBARDIA, ULSS6, RSU, LSMU, USC, SAM			

Milestones and deliverables (outputs/outcomes)

Milestone No (continuous numbering not linked to WP)	Milestone Name	Work Package No	Lead Beneficiary	Description	Due Date (month number)	Means of Verification
MS 8.1	Report on the comprehensive methodological approach for all WP8 tasks	8	UOA	This report acts as an internal methodological checkpoint, as by M5, the comprehensive and detailed approach for each WP8 task will be uploaded.	M5	Report shared with the Steering Committee members
MS 8.2	Selection of forward-looking measures and countries for the assessment	8	THL	Partners have mapped and identified relevant measures, building on the COP11 expert group report on Article 2.1 and JATC-2 and selected countries to participate in the assessment.	M12	Protocol for the assessment developed
MS 8.3	Youth oriented best or promising practice identified for roll out	8	Odsherred	Identification and planning of the best or promising practices for the prevention of tobacco and nicotine product use by youth	M14	First roll out meeting minutes
MS 8.4	Initiation of the youth survey	8	UOA	Commencement of data collection for the EU Youth Survey	M18	First data collected
MS 8.5	Webinar on forward-looking measures in the EU context	8	THL	Public webinar targeting key stakeholders organized	M36	Number of webinar registrants and participants

Deliverable No (continuous numbering linked to WP)	Deliverable Name	Work Package No	Lead Beneficiary	Type	Dissemination Level	Due Date (month number)	Description (including format and language)

D 8.1	Final report on the EU Youth prevalence and driving factors study	8	UOA	[R — Document, report]	[PU — Public]	M45	A short layman report that will outline the main outputs of the study, in English
D 8.2	Final WP8 report	8	UOA	[R — Document, report]	[SEN — Sensitive]	M46	This report compiles all actions and outputs of WP8 in English.

Estimated budget — Resources

See detailed budget table/calculator (annex 1 to Part B).

Work Package 9 - Strengthening Disease Prevention and Health Promotion in Europe

Work Package 9: Strengthening Disease Prevention and Health Promotion in Europe			
Duration:	M1 – M48	**Lead Beneficiary:**	21.4 IRFMN

Objectives

The general objective of this WP is to support the implementation of the planned Council Recommendation on SAFE, related legislative frameworks on tobacco control, the attributable risk factors for NCDs and supporting overall NCD preventative actions. This WP has the following specific objectives

- Objective 9.A - To support tobacco control within the context of the Tobacco Products Directive (TPD), the Tobacco Advertising Directive (TAD) and the Framework Convention on Tobacco Control (FCTC) across EU MS.
- Objective 9.B - To support the work at the EU level on the surveillance of cancer risk factors and their health impact at the EU MS level.
- Objective 9.C – To facilitate the integration of health promotion and disease prevention within community settings across Europe.

Activities and division of work (WP description)

Task No	Task Name	Description	Participants		In-kind Contributions and Subcontracting (Yes/No and which)
			Name	Role	

				(COO, BEN, AE, AP, OTHER)	
T9.1	To support EU MS in Tobacco Control through unlocking the potential of the EU-CEG dataset	[Objective 9.A] Within this task, we will support EU MS in their assessment of tobacco, HTP, and e-cigarette product constituents and design parameters as submitted via EU-CEG (big data analysis). This task builds upon the work performed in JATC-1 and JATC-2. A task force and core secretariat will implement this task and include supporting EU-CEG data analysis, responding to EU MS requests, additional surveillance and flagging of non-compliant products, and performing analyses that may address hot topics, including the assessment of additives and other constituents with regard to both forward-looking tobacco control strategies (i.e. flavours) and product exposures to users and bystanders within the context of SAFE. This task will also contribute to the identification and assessment/monitoring of product technical design and constituents (nicotine, flavours, nicotine analogs, etc.) that may impact product uptake and enhance abuse liability.	Lead: UoA Partners: MoH FR, IRFMN, USC, NPHO	COO	No
T9.2	Supporting regional EU MS capacity for the evaluation of tobacco product flavours	[Objective 9.A] Flavors and other additives are key determinants of adolescent experimentation with tobacco products. Within this task, we will support the development of a regional centre in Athens to continue to assess tobacco product flavours after the expiration of the TGs current mandate and based on the expertise of the European Commission's Technical Group of Sensory Assessors for tobacco flavours. This task will provide EU MS with updated surveillance information on novel products as they enter the EU market. This task will lead to the development of product reports which can be used as an initial evidence base by EU MS, in their actions to regulate youth oriented flavoured products.	Lead: UoA Partners: MoH FR, IRFMN, ICO	COO	Yes, subcontracting (described in the subcontracting table)
T9.3	Supporting decision-making towards tobacco control strategies by EU MS	[Objective 8.A] To create a broader evidence base of the impact and EU relevance of innovative measures that are used to reduce and prevent smoking and nicotine product use, its social acceptance and their impact on reducing the	Lead: IRFMN Partners: UoA, Sciensano, CIPH, UHSD, THL, MoH	AE	No

		prevalence of consumption that EU MS can use in tobacco control efforts as well as strengthened implementation of the WHO FCTC. This task is performed through a combination of desk research and systematic literature reviews.	FR, NPHO, NNGYK, MoH LV, SAM, IPMN, NIJZ, USC, ICO		
T9.4	To perform an assessment of the epidemiology and attributable mortality to NCD risk factors in the EU	[Objective 9.B] Systematic literature reviews will be performed to identify the available indicators in the European countries oriented to describe the epidemiology (mainly focused on prevalence) and attributable mortality/morbidity on at least four different risk factors for NCD development, including but not limited to tobacco, SHS/SHA, obesity and alcohol consumption. Should other "hot topic" exposures be identified (i.e. through a Delphi technique), these can be addressed. These reviews will collate the knowledge but also provide each EU MS with the necessary knowledge to describe the state of the art on the surveillance of cancer risk factors and their impact on mortality, social and economic burden.	Lead: USC Partners: UoA, Sciensano, UHSD, ISS, IRFMN, SAM, USC, ICO, ASPB, LSMU	BEN	No
T9.5	To establish a European framework to evaluate and monitor policy plans targeting tobacco consumption.	The proposed framework will be centred on the policy cycles of EU MS, which can be fuelled by active stakeholder engagement and evidence-based policy-making. The policy cycle encompasses the key stages of policy design, implementation and evaluation, ensuring that policies are effectively developed, executed, and refined. The relevant data collected in the JA-SAFE and beyond will be used to test the framework in different MS, by looking at possible future scenarios of policy implementation or by evaluating past policies. The final aim of this task is to provide MS with guidelines to incorporate quantitative evidence and stakeholder engagement in the policy cycle.	Lead: Sciensano; Partners: CIPH, UHSD, LIGURIA, USC, LSMU	BEN	
T9.6	To develop and scale up best and promising practices to improve NCD prevention through the mitigation of risk factors or implementation of novel Health Promotion and Disease Prevention Interventions at the EU MS level.	Within this task we will scale up promising and/or best practices in the EU that support the prevention of NCD risk factors. This task will lead to the further development of integrated and coherent policy approaches to key NCD prevention and promotion challenges. Pilot projects are foreseen to be implemented in selected EU MS.	Lead: UHSD Partners: AAKS, UHSD, THL, ÉBSZJCK, LIGURIA, USC, IDIVAL, LUND, SAM	BEN	

Milestones and deliverables (outputs/outcomes)

Milestone No (continuous numbering not linked to WP)	Milestone Name	Work Package No	Lead Beneficiary	Description	Due Date (month number)	Means of Verification
MS 9.1	Report on the comprehensive methodological approach for all WP9 tasks	9	UOA	This report acts as an internal methodological checkpoint, as by M5 the comprehensive and detailed approach for each WP9 task will be approved by the COO.	M5	Report shared with the Steering Committee members
MS 9.2	EU-CEG taskforce data	9	UOA	This milestone indicates the creation of the EU-CEG taskforce including the core secretariat and data analysts.	M8	Taskforce Synthesis sent to DG SANTE
MS 9.3	Preparations of the planned pilots for NCD prevention	9	UHSD	Protocols for piloting the recognised good practices	M18	Pilot initiation meeting minutes
MS 9.4	First Risk factor completed	9	USC	A complete review for the first risk factor identified and assessed.	M18	Manuscript ready for peer review.
MS 9.5	Operational Sensory Panel	9	UOA	A fully trained sensory panel as per the TG panel outlined in Commission Implementing Decision (EU) 2016/786	M20	Sensory Panel synthesis and reproducibility forwarded to DG SANTE

Deliverable Num.	Deliverable Name	WP	Lead Beneficiary	Type	Dissemination Level	Due Date	Description
D9.1	Report on the EU-CEG Task force activities	9	UOA	[R — Document, report]	[SEN — Sensitive]	M42	This report outlines the outcomes and overall utility for the EU-CEG Task force
D9.2	Report on the sensory panel activities and ability to sustain EU MS requests.	9	UOA	[R — Document, report]	[SEN — Sensitive]	M44	This report outlines the training, reproducibility and overall utility for the EU Sensory Panel

D9.3	Final WP9 report.	9	IRFMN	[R — Document, report]	[SEN — Sensitive]	M46	This report compiles all actions and outputs of WP9, in English.
Estimated budget — Resources							
See detailed budget table/calculator (annex 1 to Part B).							

Subcontracting (n/a for prefixed Lump Sum Grants)

Subcontracting

Give details on subcontracted project tasks (if any) and explain the reasons why (as opposed to direct implementation by the Beneficiaries/Affiliated Entities).

Subcontracting — Subcontracting means the implementation of 'action tasks', i.e. specific tasks which are part of the EU grant and are described in Annex 1 of the Grant Agreement.

***Note:** Subcontracting concerns the outsourcing of a part of the project to a party outside the consortium. It is not simply about purchasing goods or services. We normally expect that the participants have sufficient operational capacity to implement the project activities themselves. Subcontracting should therefore be exceptional.*

Include only subcontracts that comply with the rules (i.e. best value for money and no conflict of interest; no subcontracting of coordinator tasks).

Work Package No	Subcontract No (continuous numbering linked to WP)	Subcontract Name (subcontracted action tasks)	Description (including task number and BEN/AE to which it is linked)	Estimated Costs (EUR)	Justification (why is subcontracting necessary?)	Best-Value-for-Money (how do you intend to ensure it?)
1	S1.1	CCBS - Conference, Business & Travel Management Greece	Linked to Task 1.3 (COO- UOA). Organisation of the KoM, annual meeting. *"The naming of subcontractors in the Grant Agreement does not imply that the Agency approves them and the associated costs. Subcontracting*	200,000 EUR for 5 meetings for 120+ people estimated as follows: KoM: 40,000 EUR Year 1: 35,000 EUR Interim: 35,000 EUR Year 3: 35,000 EUR Final Y4 in Brussels: 55,000 EUR	Logistical capacity needed to organize multiple break out meeting rooms, local transport, lunch, coffee, snacks, catering, and dinners for the KoM, Year 1 meeting, Interim meeting, Year 3 meeting, and Final meeting for approximately 120+ people per meeting, for 4 years (5 meetings for approx.120+ people x 2-3 days)	n/a – proposed at the time of submission.

			will have to be in line with the provisions of Articles 6.2.B and 9.3 (subcontracting) of the Annotated Model Grant Agreement. Subcontract/s will have to be awarded ensuring the best value for money or, if appropriate, the lowest price, ensuring there is no conflict of interests and that all applicable internal and/or national procurement rules have been followed."			
2	S2.1	ENSP	Linked to Tasks 2.1 - 2.5 – (BEN - GOKVI). Supporting dissemination activities. *The naming of subcontractors in the Grant Agreement does not imply that the Agency approves them and the associated costs. Subcontracting will have to be in line with the provisions of Articles 6.2.B and 9.3 (subcontracting) of the Annotated Model*	150,000	The European Network on Smoking and Tobacco Prevention (ENSP) is the largest and broadest membership network of NGOs working on tobacco control in Europe at the grassroots level. Through this network, we will enhance dissemination activities at the EU MS level over 4 years. They were active and subcontracted in dissemination activities in the predecessors of JA-SAFE, which were JATC-1 and JATC-2	n/a – proposed at the time of submission.

			Grant Agreement. Subcontract/s will have to be awarded ensuring the best value for money or, if appropriate, the lowest price, ensuring there is no conflict of interests and that all applicable internal and/or national procurement rules have been followed.			
2	S2.2	WFPHA	Linked to Tasks 2.1 - 2.5 – (BEN - GOKVI). Supporting dissemination activities. *The naming of subcontractors in the Grant Agreement does not imply that the Agency approves them and the associated costs. Subcontracting will have to be in line with the provisions of Articles 6.2.B and 9.3 (subcontracting) of the Annotated Model Grant Agreement. Subcontract/s will have to be awarded ensuring the best value for money or, if appropriate, the lowest price, ensuring there is*	20,000	The World Federation of Public Health Associations (WFPHA) can support greater visibility and integration among stakeholders as it is it includes also the network of associations of public health in the EU MS but also globally. Created under a UN treaty, the WFPHA can strongly connect with UN activities and events over 4 years.	n/a – proposed at the time of submission.

			no conflict of interests and that all applicable internal and/or national procurement rules have been followed.			
2	S2.3	Lungs Europe	Linked to Tasks 2.1 - 2.5 – (BEN- GOKVI). Supporting dissemination activities and the final project meeting in Brussels. *The naming of subcontractors in the Grant Agreement does not imply that the Agency approves them and the associated costs. Subcontracting will have to be in line with the provisions of Articles 6.2.B and 9.3 (subcontracting) of the Annotated Model Grant Agreement. Subcontract/s will have to be awarded ensuring the best value for money or, if appropriate, the lowest price, ensuring there is no conflict of interests and that all applicable internal and/or national procurement rules have been followed.*	30,000	Lungs Europe and its sister organisation ERS has a large impact and broad membership across the EU and can enhance central EU level dissemination activities over 4 years as well as help facilitate the organisation of the final conference event at the European parliament. We have previously worked with Lungs Europe to organise key events in the European Parliament.	n/a – proposed at the time of submission.

5	S5.1	ENSP	Linked to Tasks 5.3 - 5.6 – (UOA-COO). Supporting CA/AEE in data collection. *The naming of subcontractors in the Grant Agreement does not imply that the Agency approves them and the associated costs. Subcontracting will have to be in line with the provisions of Articles 6.2.B and 9.3 (subcontracting) of the Annotated Model Grant Agreement. Subcontract/s will have to be awarded ensuring the best value for money or, if appropriate, the lowest price, ensuring there is no conflict of interests and that all applicable internal and/or national procurement rules have been followed.*	80,000 EURO	ENSP member organisations will be able to support data collection for the assessment of SAFE in the EU MS.	n/a – proposed at the time of submission.
7	S7.1	To be determined	Linked to tasks 7.1, 7.3 and 7.4 (NVI)	7,500 EUR	Implementation of training for healthcare providers and students (e.g. allowance for lecturers) and Implementation, transferring of best practices in healthcare settings, (e.g., communication strategies)	Best value for money based on institutional best practices.

8	S08.1	To be determined	Linked to Task 8.6. (UOA-COO). Supporting data collection	30,000 EUR	Supporting data collection for the youth survey across EU MS in which we have no current partners or where partners have difficulty initiating the youth survey.	Best value for money based on the likelihood of success in helping with data collection in selected EU MS. Entities will be invited through a call for proposals assessed by WP9.
9	S8.2	To be determined	Linked to Task 8.6. (UOA-COO). Supporting data collection – fieldwork in selected EU MS	200,000 EUR	Fieldwork of the Youth Survey for Task 8.5, similar to the Eurobarometer Approach	Best value for money and prior multinational experience in data collection in selected EU MS. Entities will be invited through a call for proposals assessed by WP9.
10	S8.3	ASH US	Linked to WP8 (UOA-COO). *The naming of subcontractors in the Grant Agreement does not imply that the Agency approves them and the associated costs. Subcontracting will have to be in line with the provisions of Articles 6.2.B and 9.3 (subcontracting) of the Annotated Model Grant Agreement. Subcontract/s will have to be awarded ensuring the best value for money or, if appropriate, the lowest price, ensuring there is*	20,000 EUR	ASH US is the leading global organisation in Engame and forward-looking measures. Having performed multiple trainings in the EU and the US they are best positioned to support JA-SAFE in designing and implementing and Endgame roadmap.	n/a – proposed at the time of submission.

			no conflict of interests and that all applicable internal and/or national procurement rules have been followed.			
11	S9.1	CARA Technology Ltd	Linked to Task 9.2 (UOA-COO). Training of the panel for sensory assessors that will be based in the EU. *The naming of subcontractors in the Grant Agreement does not imply that the Agency approves them and the associated costs. Subcontracting will have to be in line with the provisions of Articles 6.2.B and 9.3 (subcontracting) of the Annotated Model Grant Agreement. Subcontract/s will have to be awarded ensuring the best value for money or, if appropriate, the lowest price, ensuring there is no conflict of interests and that all applicable internal and/or national procurement rules have been followed.*	50,000 EUR	This subcontracting would allow for the transfer of the expertise/training from the current EU Commission Technical Group of Sensory and Assessors (based in the UK) to the JA-SAFE consortium (in an EU MS) to ensure sustainability.	n/a – proposed at the time of submission.

Other issues: If subcontracting for the project goes beyond 30% of the total eligible costs, give specific reasons.	Not applicable. Subcontracting has been maintained at 3.6% of the overall budget. However, this minor percentage would ensure the smooth implementation of meetings, enhance dissemination and outreach, support data collection in EU MS where we have no partners, and support knowledge transfer to EU MS.

Timetable

ACTIVITY	Year 1				Year 2				Year 3				Year 4			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Task 1.1 Develop and implement a Consortium Agreement.																
Task 1.2 Monitor and guide the progress of individual WPs																
Task 1.3 Organize, chair and take minutes of meetings including the kick off meeting (Athens), Steering Committee meetings, Annual Consortium Meetings and the final project meeting (Brussels, European Parliament).																
Task 1.4 To communicate rules for financial administration and ensure financial management.																
Task 1.5 To prepare interim and final financial reports for HADEA.																
Task 1.6 To provide timely advice on the plans, progress and outcomes of each WP.																
Task 1.7 To undertake actions that may benefit or enhance the work in WPs with regards to emerging Public Health threats.																
Task 1.8 To ensure a coherent approach and complementarity between other EU initiatives and projects including common activities, integration with the Advisory Group and EU Public Policy Activities.																
WP2																
Task 2.1 To update and expand the stakeholder mapping and analysis performed through other EU projects.																
Task 2.2 To develop a communication and dissemination strategy that is maintained as a "living" document throughout the duration of JA-SAFE.																
Task 2.3 To prepare communication resources and products throughout the duration of the project and in direct communication with the WP tasks and actions.																
Task 2.4 To implement the communication and dissemination strategies and support individual WPs in their dissemination activities.																
Task 2.5 To develop a scientific publication strategy.																
WP3																
Task 3.1 To define the evaluation plan.																

Task 3.2 To implement the evaluation plan throughout the duration of JA-SAFE.																	
Task 3.3 To assess the external impact of JA-SAFE.																	
WP4																	
Task 4.1 To identify strategies and resources for the sustainability of activities and results of the WPs.																	
Task 4.2 To facilitate knowledge exchange and the sharing of JA-SAFE policy implementation guidance material.																	
WP5																	
Task 5.1 To update and include new promising SAFE practices within a Web-based repository throughout the course of JA-SAFE.																	
Task 5.2 To enhance and maintain the Knowledge Sharing Archive for SAFE in EU MS through updates and frequent webinars.																	
Task 5.3 To quantify SHS-SHA exposure in playgrounds noted by the 2024 Council Recommendations on SAFE in EU MS.																	
Task 5.4 To quantify SHS-SHA exposure in school entrances noted by the 2024 Council Recommendations on SAFE.																	
Task 5.5 To quantify SHS-SHA exposure in hospitality terraces noted by the 2024 Council Recommendations on SAFE in EU MS.																	
Task 5.6 To quantify exposure to SHS an SHA in other indoor settings and general outdoor settings in selected EU MS.																	
Task 5.7 To evaluate the effectiveness of different enforcement strategies for the implementation of SAFE in EU MS.																	
Task 5.8 To develop guidelines, evidence-based recommendations, press releases, media briefings, op-eds, and opinion pieces to reinforce public understanding of the scientific evidence to expand SAFE in Europe.																	
Task 5.9 To support individual EU MS in implementing SAFE.																	
WP6																	
Task 6.1 To perform a mapping and assessment of alcohol marketing among the youth.																	
Task 6.2 To identify and pilot innovative approaches and good examples related to reducing alcohol use and related harm in young people.																	
Task 6.3 To identify good examples and innovative approaches for managing e-commerce and home delivery.																	

Task 6.4 Identify good and innovative practices in communicating information on lower-risk alcohol use to the general population, as well as vulnerable groups.																
Task 6.5 To promote brief intervention practices to reduce alcohol consumption focusing on different settings serving selected vulnerable groups, and to identify and study promising practices via proof-of-concept piloting for knowledge-sharing.																
WP7																
Task 7.1 Perform Healthcare Settings Tobacco Control Assessment and Mapping.																
Task 7.2 Develop Tailored Information Dissemination for Healthcare Providers.																
Task 7.3 Enhancing Counselling Skills to Healthcare Students to Support Smoker Patients.																
Task 7.4 To implement and promote Healthcare Providers' training.																
Task 7.5 To identify or develop Tobacco and aerosol- free Communication Strategies for patients and visitors.																
Task 7.6 To support the implementation of comprehensive SAFE in Healthcare settings in Europe.																
Task 7.7 To ensure continuous Improvement and Network Integration.																
Task 7.8 Design and Implement Materials for Improving the Patient Journey in Tobacco/Nicotine Cessation in Health care Settings.																
Task 7.9 Scaling up the integration of promising and best practices for smoking cessation within Healthcare settings.																
WP8																
Task 8.1 To perform an assessment of forward-looking tobacco control measures (WHO FCTC Article 2.1) in Europe.																
Task 8.2 To support EU MS in implementing forward looking tobacco control measures.																
Task 8.3 To map the tactics used by the tobacco/nicotine industry to enhance product uptake by youth and counterattack the extension of smoke/aerosol-free environments.																
Task 8.4 To develop an EU wide cross-sectional study among youth focusing on the prevalence and driving factors associated with nicotine product use.																

Task 8.5 To support the scaling up of evidence-based interventions that support interventions that minimise nicotine product use and reduce exposure to SHS and aerosols among youth.																
WP9																
Task 9.1 To support EU MS in Tobacco Control through unlocking the potential of the EU-CEG dataset.																
Task 9.2 Supporting regional EU MS capacity for the evaluation of tobacco product flavours.																
Task 9.3 Supporting decision-making towards tobacco control strategies by EU MS.																
Task 9.4 To perform an assessment of the epidemiology and attributable mortality to NCD risk factors in the EU.																
Task 9.5 To establish a European framework to evaluate and monitor policy plans targeting tobacco consumption.																
Task 9.6 To develop and scale up best and promising practices to improve NCD prevention through the mitigation of risk factors or implementation of novel Health Promotion and Disease Prevention Interventions at the EU MS level.																

#§WRK-PLA-WP§#

#@ETH-ICS-EI@#

5. OTHER

5.1 Ethics

Ethics

If the Call document contains a section on ethics, describe ethics issues that may arise during the project implementation and the measures you intend to take to solve/avoid them.

JA-SAFE partners confirm to all relevant EU legislation such as:
i) The Charter of Fundamental Rights of the EU, especially article 3;
ii) Directive 2001/20/EC of the European Parliament and of the Council on good clinical practice (April 4, 2001);
iii) Directive 95/46/EC of the European Parliament and of the Council on the protection of personal data (October 24, 1995).

JA-SAFE partners will respect the relevant international conventions and declarations, including:
i) Helsinki Declaration in its latest version;
ii) Convention of the Council of Europe on Human Rights and Biomedicine (April 4, 1997) and the Additional Protocol on the Prohibition of Cloning Human Beings (January 12, 1998);
iii) UN Convention on the Rights of the Child;
iv) Universal Declaration on the human genome and human rights adopted by UNESCO.

As with all EU activities, data protection and privacy is an issue of utmost importance. Overall, all applicable EU, national and local ethic legislation will be adhered to. More specifically, EU Directive 95/46/EC on the protection of individuals with regard to the processing of personal data and on the free movement of such data will be respected.
Background materials from any research, possible focus groups, meetings and working groups, will only be made public if the relevant permission has been given.
Should processing of personal data arise as a result of this project, informed consent declarations will be signed by all participants, along with confidentiality agreements by all researchers, in order to ensure all sensitive information will be handled with care and according to the legislative background as regards personal data protection.
Additionally, in order to ensure the transparency of the processes and activities included in this current project, a Conflict of Interest (COI) declaration will be signed by all Beneficiaries before the outset of the project and as many times as necessary. Prior to each Supervisory Board and consortium meeting, all parts should verbally declare respective disclosures. Also, changing in status requires immediate notification and a new COI disclosure.

Finally, COI declaration is required for any publication, conference presentation, or public statement based on, or related to, the current project activities and results.

Any engagement (current or previous <5 years) of any partner or expert with the tobacco industry or its front groups will lead to the exclusion of the expert from the consortium.

#§ETH-ICS-EI§# #@SEC-URI-SU@#

5.2 Security

Security

If the Call document contains a section on security, describe security issues that may arise during the project implementation and the measures you intend to take to solve/avoid them.

Indicate if there is need for EU classification of information (Decision 2015/444) or any other specific security measures.

Not applicable within the context of this call.

6. DECLARATIONS

Higher funding rate (if applicable)	YES/NO
Do you fulfil the conditions set out in the Call document for a higher funding rate? If YES, explain and provide details.	**YES**
We are kindly requesting the higher funding rate of 80% as we have met and surpassed both conditions of the higher funding rate: Condition 1: Actions where at least 30 % of the budget is allocated to EU countries whose GNI per inhabitant is less than 90% of the EU average – **SURPASSED** **OR** Condition 2: Actions with bodies from at least 14 EU countries and where at least four are from EU countries whose GNI per inhabitant is less than 90% of the EU average - **SURPASSED**	

Double funding	
Information concerning other EU grants for this project ⚠ *Please note that there is a strict prohibition of double funding from the EU budget (except under EU Synergies actions).*	YES/NO
We confirm that to our best knowledge neither the project as a whole nor any parts of it have benefitted from any other EU grant *(including EU funding managed by authorities in EU Member States or other funding bodies, e.g. EU Regional Funds, EU Agricultural Funds, etc)*. If NO, explain and provide details.	YES
We confirm that to our best knowledge neither the project as a whole nor any parts of it are (nor will be) submitted for any other EU grant *(including EU funding managed by authorities in EU Member States or other funding bodies, e.g. EU Regional Funds, EU Agricultural Funds, etc)*. If NO, explain and provide details.	YES

Financial support to third parties (if applicable)
If in your project the maximum amount per third party will be more than the threshold amount set in the Call document, justify and explain why the higher amount is necessary in order to fulfil your project's objectives.
Not applicable in our proposal.

Sovereignty Seal (if applicable)	
If provided in the Call document, all eligible proposals that exceed the evaluation thresholds will be awarded a Sovereignty Seal. The Sovereignty Seal is a quality label which aims at facilitating access to additional public and/or private funding.	
Do you agree that certain information about your proposal (i.e. acronym; title; abstract of the project; name, contact e-mail and address of the coordinator; requested EU contribution; and grant amount awarded, if any) will be published on the STEP online Portal (with open public access) to increase the visibility of your project?	*[YES]*
Do you agree that this information is shared with national managing authorities of EU funding that recognise and support Sovereignty Seal projects to facilitate funding for your project under other EU programmes and funds?	*[YES]*

#§DEC-LAR-DL§#

ANNEXES

LIST OF ANNEXES

Standard

Annex 1: Detailed budget table/Calculator (annex 1 to Part B) — *mandatory*
Annex 2: CVs (annex 2 to Part B) — *mandatory, if required in the Call document*
Annual activity reports (annex 3 to Part B) — *mandatory, if required in the Call document*
List of previous projects (annex 4 to Part B) — *mandatory, if required in the Call document*

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.				
Partner number *(same as on Submission System screens)*	1			
Short name	UOA			
PIC number	999643007			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Constantine Vardavas (Coordinator)	**5000,00**	48,00	240000,00
	Ioanna Lagou (Financial Manager)	**4000,00**	48,00	192000,00
	Angeliki Bakou (Project Manager)	**4000,00**	48,00	192000,00
	Georgia Saltagianni (Project Secretariat)	**3500,00**	48,00	168000,00
	Panagiotis Behrakis (Youth Intervention Expert)	**3000,00**	24,00	72000,00
	TBD (Sensory Panel lead)	**2800,00**	30,00	84000,00
	TBD - Dissemination expert	**2800,00**	23,40	65520,00
	Dimitris Nasios (graphic designer)	**2800,00**	36,00	100800,00
	TBD - biostatistician for EU-CEG	**3500,00**	24,00	84000,00
	TBD - medical epidemiologist	**3200,00**	18,00	57600,00
	TBD- Sustainability expert	**4500,00**	3,00	13500,00
	TBD - (data analyst/review)	**2500,00**	14,00	35000,00
	Alexander Osarogue (WP7 expert)	2600,00	12,00	31200,00
	Paraskevi Katsaounou (WP7 expert)	**4000,00**	14,00	56000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	sensory panelists (for WP8)	80,00	1000	80000,00
				0,00
Total costs (A)	**1.471.620,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
	200.000,00	Logistical capacity needed to organize multiple meeting rooms, local transport, lunch, catering, and dinners for the KoM, Year 1 meeting, Interim meeting, Year 3 meeting, and Final meeting for approximately 120 people per meeting, for 4 years (5 meetings for approx.120 people x 2-3 days)		
	30.000,00	Supporting data collection for the youth survey across EU MS		
	50.000,00	This subcontracting would allow for the transfer of the expertise/training from the current EU Commission Technical Group of Sensory and Assessors (based in the UK) to the JA-SAFE consortium (in an EU MS) to ensure sustainability.		
	200.000,00	Subcontracting supporting MS in data collection for the youth survey		
	20.000,00	Subcontracting to ASH US for endgame strategy development		
	80.000,00	Supporting data collection for the assessment of SAFE		
Total costs (B)	**580.000,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	100.000,00	Travel cost and daily allowance for meeting participants for experts (Expert Advisory Board, Youth Advisory Board) and travel for other invited organisations and projects and other invited speakers to the annual meetings and coordination team travel to EU MS (25 meetings x 4 persons x 1,000€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
	10.000,00	Sensory panel material		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	10.000,00	Audit services		
	40.100,00	Dissemination material (prints, flyers, leaflets, report printing, banners etc)		
	80.000,00 €	Analysis of SHS samples for WP5 tasks		
Total Costs (C)	**240.100,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	160420,40			
Total estimated eligible costs	**2.452.140,40**			

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**2**			
Short name	**SCIENSANO**			
PIC number	**906160809**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	NN (scientist) WP9	6700,00	20,00	134000,00
	NN (scientist) WP8	6700,00	10,00	67000,00
	Shona Cosgrove (WP6 expert)	7700,00	20,00	154000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Vanessa Gorasso (WP1 expert)	664,75	36	23820,21
	Lies Gremeux (WP6 expert)	664,75	27	17865,16
	Rana Charafeddine (WP8 expert)	664,75	18	11910,10
	Marie Vermote (WP8 expert)	538,33	143,50	77250,83
	Vanessa Gorasso (WP9 expert)	664,75	36	23820,21
Total costs (A)	**509666,51**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	1600,00	WP6 Travel cost and daily allowance for meeting participants (1 meeting x 2 persons x 800€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	4000,00	Task meeting organisation		
	2700,00	Webinar organisation on results of T6.1		
	14000,00	T6.1.1-Coding contract		
	5000,00	T6.1.1-Acquiring video feed		
	500,00	T6.2.1-Materials on risks of acquiring alcohol		
	1000,00	T6.2.1-Working costs for recruitment strategy (advertising online & social media)		
	4000,00	Audit Services		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**49200,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	39120,66			
Total estimated eligible costs	**597.987,17**			

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**3**			
Short name	**UNIBL**			
PIC number	**995591705**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Expert	2650,00	2,00	5300,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**5300,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	4000,00	Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1,000€/person)		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**4000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	651,00			
Total estimated eligible costs	**9951,00**			

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**4**			
Short name	**FMZ**			
PIC number	**916051608**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Expert	2650,00	2,00	5300,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**5300,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	4000,00	Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1,000€/person)		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**4000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	651,00			
Total estimated eligible costs	**9951,00**			

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**5**			
Short name	**PSRS**			
PIC number	**872196162**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Expert	2650,00	2,00	5300,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**5300,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	4000,00	Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1,000€/person)		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**4000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	651,00			
Total estimated eligible costs	**9951,00**			

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**6**			
Short name	**NAAC**			
PIC number	**893266502**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Expert	2500,00	2,00	5000,00
	TBD-Expert	2500,00	2,00	5000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**10000,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	4000,00	Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1,000€/person)		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**4000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	980,00			
Total estimated eligible costs	**14980,00**			

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**6.1**			
Short name	**UCY**			
PIC number	**999835843**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Expert	2500,00	2,00	5000,00
	TBD-Expert	2500,00	2,00	5000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**10000,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	4000,00	Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1,000€/person)		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**4000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	980,00			
Total estimated eligible costs	**14980,00**			

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	7			
Short name	SZU			
PIC number	999478689			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Markéta Paulová, coordinator, **WP1**	142,00	8	1136,00
	Markéta Paulová, coordinator, **WP2**	142,00	10	1420,00
	Markéta Paulová, coordinator, **WP4**	142,00	10	1420,00
	Markéta Paulová, coordinator, **WP8**	142,00	40	5680,00
	Eva Uličná, senior expert, **WP1**	150,00	7	1050,00
	Eva Uličná, senior expert, **WP2**	150,00	10	1500,00
	Eva Uličná, senior expert, **WP4**	150,00	10	1500,00
	Eva Uličná, senior expert, **WP8**	150,00	40	6000,00
	Miroslava Skývová, senior expert, **WP2**	158,00	5	790,00
	Miroslava Skývová, senior expert, **WP8**	158,00	40	6320,00
	Petra Kamaradová, senior expert, **WP1**	142,00	4	568,00
	Petra Kamaradová, senior expert, **WP2**	142,00	5	710,00
	Petra Kamaradová, senior expert, **WP4**	142,00	10	1420,00
	Petra Kamaradová, senior expert, **WP8**	142,00	30	4260,00
	Lenka Švábová, senior expert **WP2**	154,00	5	770,00
	Lenka Švábová, senior expert **WP8**	154,00	30	4620,00
	Kristina Pokorná, junior expert **WP2**	98,00	5	490,00
	Kristina Pokorná, junior expert **WP8**	98,00	30	2940,00
	Eva Niklová, administrative, **WP1**	158,00	6	948,00
	Srpová Darina, administrative/ financial, **WP1**	195,00	6	1170,00
Total costs (A)	**44712,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	35000,00	Creation of educational materials (videos,web, printed materials etc.) promotion and advertising, organizing educational events, teaching materials, rewards for participating schools*, translation etc.		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**51600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	6741,84			
Total estimated eligible costs	**103.053,84**			

**As part of our initiative to expand and evaluate the nicotine prevention program for children and youth in schools, participants will receive small promotional items—such as key chains, balls, or blocks—as incentives for completing program activities and engaging in the program. These items aim to encourage participation and reinforce positive behaviors related to nicotine prevention.*

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.				
Partner number *(same as on Submission System screens)*	**8**			
Short name	**CIPH**			
PIC number	**998128255**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Marinko Artuković, senior expert, WP2, WP4, WP8, WP9	369,69	38,00	14048,22
	Karla Paušek, junior expert, WP2, WP4, WP8, WP9	111,92	16,00	1790,72
	Maja Bračun Vukčević, senior expert, WP2, WP4, WP8, WP9	377,05	11,00	4147,55
	Željko Petković, senior expert, WP2, WP4, WP8, WP9	326,45	38,00	12405,10
	Josipa Lovorka Andreić, senior expert, WP2, WP4, WP8, WP9	264,91	31,00	8212,21
	Ema Rukelj Kušić, junior expert	124,93	18,00	2248,74
	Martina Bošnjak, junior expert, WP2, WP4, WP8, WP9	156,84	40,00	6273,60
	Smilja Golomejić, junior expert, WP2, WP4, WP8, WP9	179,38	40,00	7175,20
	Maja Valentić, junior expert, WP2, WP4, WP8, WP9	168,96	31,00	5237,76
	Bojana Gundić, project manager, WP1	268,29	6,00	1609,74
	Petra Perić, project manager, WP1	168,32	6,00	1009,92
	Vedran Odović, project manager, WP1	144,47	6,00	866,82
	Ema Matijašec, administrative personnel, WP2, WP4, WP8, WP9	158,41	12,00	1900,92
	Ognjen Vukčević, tehnical personnel, WP2, WP4, WP8, WP9	134,83	9,00	1213,47
Total costs (A)	**68139,97**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	50.000,00	organization of 3 workshops on WP8 (Tasks 8.2, 8.3 and 8.5)and WP9 (Task 9.5)		
	22.500,00	printing of educational materials and recommendations		
	3.710,03	Participation/Registration to Conferences		
Total Costs (C)	**90610,03**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	11112,50			
Total estimated eligible costs	**169.862,50**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**9**			
Short name	**AAKS**			
PIC number	**992597994**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	TBD-Project Manager	8400,00	13,50	113400,00
	TBD-Expeert	8700,00	7,00	60900,00
	TBD-Advice / Finances	8500,00	4,00	34000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**208300,00**	16		
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	20975,00	Participation/Registration to Conferences and WP actions		
Total Costs (C)	**35375,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	17057,25			
Total estimated eligible costs	**260732,25**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**10**			
Short name	**UHSD**			
PIC number	**999602073**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	Trine Ungermann Fredskild (chief consultant, PhD)-WP7 and WP9	9300,00	12,00	111600,00
	Sabine Paasch Olsen (project leader)-WP7 and WP9	8000,00	21,00	168000,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Donna Lykke Wolff-WP7 and WP9 expert	480,00	50	24000,00
	Aabenraa Municipality (project member)-WP7 and WP9	400,00	60	24000,00
	Aabenraa Municipality (HCP)-WP7 and WP9	275,00	60	16500,00
Total costs (A)	**344100,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2000,00	Participation/Registration to Conferences		
	5000,00	Additional costs for translations		
	5000,00	Audit services		
	12400,00	Catering for training sessions at other hospital		
Total Costs (C)	**34000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	26467,00			
Total estimated eligible costs	**404.567,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member).
Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	**11**
Short name	**Region Zealand (RZ)**
PIC number	**998373665**

Persons working exclusively on the action

Staff member (name and role)	Monthly rate (€)	Estimated number of months	Total costs per person (€)

Other persons

Staff member (name and role)	Daily rate (€)	Estimated number of days[1]	Total costs per person (€)
Ida Munch (WP7) Senior expert	€ 662,78	36	€ 23.860,00
Mette Bierbum Bacher, Senior Expert (WP7)	€ 662,78	180	€ 119.300,00
Anne Nistrup Skovsbøll, Senior expert (WP3)	€ 566,00	35	€ 19.810,00
TBD Finance Manager	€ 662,78	54	€ 35.790,12
Maria Schmidt, MPH and Project Manager (WP7)	€ 478,50	261	€ 124.888,50
Maria Del Pilar Fernandez Montejo, Medical Doctor and PhD student, WP7	€ 662,78	180	€ 119.300,00
Thomas Lund, Public Health Epidemiologist, WP7	€ 662,78	180	€ 119.300,00
Merete Labriola, WP7 Lead, Competent Authority for JASAFE,	€ 662,78	249	€ 165.031,67
TBC Project Support Officer, WP7	€ 478,50	117	€ 55.984,50
Uffe Bødtger, Assisting Head of Respiratory Section, WP7	€ 662,78	18	€ 11.930,00
Sidsel Skogstad, MPH and Data Manager, WP7	€ 566,00	54	€ 30.564,00
Tanja Roehmer Wriedt, Medical Doctor, WP7	€ 566,00	108	€ 61.128,00

(A) Personnel costs (please insert a new line for each staff member)

Total costs (A)	**€ 886.886,79**

(B) Subcontracting costs (please repeat line for each subcontract foreseen)	Costs (€)	Task(s)/Justification
Total costs (B)	**0,00**	

(C) Purchase costs

(C.1) Travel	Costs (€)	Justification
	9600,00	Travel, accommodation and subsistence for 1200€/person, 4 meetings x 2 persons for WP1
	**In line with Commission Decision C (2024) 5405 on unit costs*	

(C.2) Equipment	Costs (€)	Justification
	1000,00	Communication materials such as print material etc.

(C.3) Other goods, works and services	Costs (€)	Justification
	6000,00	Participation to conferences within WP7
	8000,00	Audit services (x2)
	3400,00	Participation to conferences within WP2
Total Costs (C)	**28000,00**	

(E) Indirect Costs (7% on A, B and C)	Total costs (€)
	€ 64.042,08
Total estimated eligible costs	**€ 978.928,87**

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**11.1**			
Short name	**MFK**			
PIC number	**888849219**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Anne Puk Sandager, PM, WP8 expert	432,00	92	39744,00
	Louise Skovhus, PM, WP8 expert	432,00	92	39744,00
Total costs (A)	**79488,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	7200,00	Participation/Registration to Conferences		
Total Costs (C)	**21600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	7076,16			
Total estimated eligible costs	**108164,16**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.				
Partner number *(same as on Submission System screens)*	**11.2**			
Short name	**ODSHERRED**			
PIC number	**877136760**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Birgitte Echwald, chiefconsultant/fundraiser, WP 1, WP2, WP8	519,00	57	29583,00
	Sara Knabe Sørensen, project management Steno Partnership including smoke prevention for children and youngsters, WP8	481,00	166	79846,00
Total costs (A)	**109429,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	8822,03			
Total estimated eligible costs	**134.851,03**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**11.3**			
Short name	**VALLENSBAEK MUNICIPALITY**			
PIC number	**870788692**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	Helle Stuart, project managerm Field Expert in Tobacco Prevention and Implementation of Strategies and Interventions-WP 8	509,50	125,00	63687,50
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
				0,00
Total costs (A)	**63687,50**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	1200,00	Participation/Registration to Conferences		
Total Costs (C)	**15600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	5550,13			
Total estimated eligible costs	**84.837,63**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**12**			
Short name	**TAI**			
PIC number	**997543539**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	TBD-Expert	2000,00	8,00	16000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
				0,00
Total costs (A)	**16000,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	2600,00	Travel cost and daily allowance for meeting participants (2 meetings x 1 person x 1300€/person)		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**2600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	1302,00			
Total estimated eligible costs	**19902,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member).
Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	**13**
Short name	**THL**
PIC number	**996697893**

(A) Personnel costs
(please insert a new line for each staff member)

Persons working exclusively on the action

Staff member (name and role)	Monthly rate (€)	Estimated number of months	Total costs per person (€)
Hanna Ollila (senior expert, WP2,4,8 & 9)	7805,68	14	111963,05
Otto Ruokolainen (senior expert, WP8 & 9)	7778,20	7	51336,09
Tuija Ylitörmänen (senior expert, WP2,3,4,5,& 7)	7480,96	30,75	230028,32
Pia Mäkelä (research professor, WP2,3,4&6)	11688,82	8,72	101926,49
Jaana Markkula (senior expert, WP6)	9888,45	4,10	40542,64
Kirsimarja Raitasalo (senior expert, WP6)	8784,58	4,40	38652,17
Katariina Warpenius (senior expert, WP6)	7744,73	3,65	28268,28
Teija Strand (senior expert, WP6)	8795,91	7,00	61571,36
TBD-Mid-level expert (WP6)	7458,59	18,06	134682,70
TBD-Intern (WP6)	2809,08	1,00	2809,08
Pia Hakamäki (senior expert, WP9)	8705,77	2,50	21764,43
Tanja Tasala (senior expert, WP9)	7466,29	1,28	9557,60
Marika Kylänen (senior expert, WP2&9)	7678,53	2,25	17276,70
Anne Karvonen (senior expert, WP9)	8584,42	1,50	12876,63
Tytti Pasanen (senior expert, WP9)	6995,71	2,50	17489,28
Mikaela Grotenfelt-Enegren (senior expert, WP4&9)	9416,73	2,35	22129,33
Technical personnel (senior statistician, WP8)	8992,32	1,50	13488,48
Technical personnel (graphic designer, WP2)	8118,24	0,10	811,82
Technical personnel (communications specialist, WP2&6)	7761,04	0,70	5432,73
Administrative personnel (project assistant, WP1)	6809,28	0,69	4673,21

Other persons

Staff member (name and role)	Daily rate (€)	Estimated number of days[1]	Total costs per person (€)

Total costs (A)	**927.280,39**

(B) Subcontracting costs
(please repeat line for each subcontract foreseen)

Costs (€)	Task(s)/Justification

Total costs (B)	**0,00**

(C) Purchase costs

(C.1) Travel

Costs (€)	Justification
14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)
4400,00	WP6 Travel cost and daily allowance for task-meetings (2 meetings x 2 persons x 1,600€/person + 1 meeting x 1 persons x 1200€/person)
**In line with Commission Decision C (2024) 5405 on unit costs*	

(C.2) Equipment

Costs (€)	Justification

(C.3) Other goods, works and services

Costs (€)	Justification
4000,00	Participation/Registration to Conferences
13800,00	WP6 Webinar costs, face-to-face meeting catering costs, pilot and focus group costs, material costs
1000,00	WP8 material/publication/webinar costs
8000,00	Auditing costs (x2)

Total Costs (C)	**45600,00**

(E) Indirect Costs
(7% on A, B and C)

Total costs (€)
68101,63

Total estimated eligible costs	**1.040.982,02**

[1] Rounded up or down to the nearest half-day.

1,13

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member).
Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	**13.1**			
Short name	**CSF**			
PIC number	**999483636**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Manager (Heidi Löflund Kuusela), WP5, WP7	7000,00	0,50	3500,00
	Senior specialist (Taija Puranen), WP5, WP7	6500,00	8	52000,00
	Specialist (Katri Saarela), WP5, WP7	5700,00	3,6	20520,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**76020,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	6483,40			
Total estimated eligible costs	**99103,40**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**13.2**			
Short name	**FILHA**			
PIC number	**899377502**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	WP1, Mid-level (Project Manager)	8500,00	0,55	4672,90
	WP2, Mid-level (Project Manager	8500,00	0,78	6663,55
	WP2, High-level expert (Tuula Vasankari)	11000,00	0,67	7355,14
	WP4, High-level expert (Tuula Vasankari)	11000,00	0,42	4672,90
	TBD-WP5, Mid-level (Project Manager)	8500,00	4,14	35148,95
	TBD-WP5, Junior expert	6000,00	1,93	11580,02
	TBD-WP7, Mid-level (Project Manager)	8500,00	7,77	66080,02
	TBD-WP7, Junior expert	6000,00	3,63	21770,44
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
				0,00
Total costs (A)	**157.943,93**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	12218,08			
Total estimated eligible costs	**186.762,01**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**14**			
Short name	**MoH FR**			
PIC number	**99887377**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Anne sophie Gernez, WP4 expert	430,90	40	17236,00
	Jeanne Berenguier (WP4,5,7,8 expert)	206,98	40	8279,20
	Maria Alejandra Cardenas (WP5, WP7, WP8 expert)	430,90	156	67220,40
	Juliette Legendre (WP6 expert)	227,69	40	9107,60
Total costs (A)	**101.843,20**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**11600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	7941,02			
Total estimated eligible costs	**121.384,22**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**15**			
Short name	**TFRI**			
PIC number	**997995947**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Luke Clancy (WP5 expert)	7900,00	4,00	31600,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**31600,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**16400,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	3360,00			
Total estimated eligible costs	**51.360,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	**16**
Short name	**NPHO**
PIC number	**896563726**

(A) Personnel costs
(please insert a new line for each staff member)

Persons working exclusively on the action

Staff member (name and role)	Monthly rate (€)	Estimated number of months	Total costs per person (€)
financial officer (Vasiliki Profitou) WP1	2800	5,00	14000,00
senior scientific officer (Angeliki Lambrou)	2800	22,00	61600,00
senior scientific officer (Maria Stamou)	2800,00	8,00	22400,00
senior scientific officer (TBC)	3000,00	36,00	108000,00
junior scientific officer (Sotiria Schoretsaniti)	2600,00	30,00	78000,00
junior scientific officer (Lamprini Pappa)	2400,00	5,00	12000,00
junior scientific officer (Efstathios Papachristou)	1900,00	21,00	39900,00
administrative personnel (TBC)	2000,00	1,50	3000,00
administrative personnel (TBC)	1900,00	1,00	1900,00
administrative personnel (TBC)	2000,00	1,00	2000,00
administrative personnel (TBC)	2000,00	1,00	2000,00
administrative personnel (TBC)	2200,00	1,00	2200,00

132,50

Other persons

Staff member (name and role)	Daily rate (€)	Estimated number of days[1]	Total costs per person (€)
			0,00

Total costs (A)	**347000,00**

(B) Subcontracting costs
(please repeat line for each subcontract foreseen)

Costs (€)	Task(s)/Justification

Total costs (B)	**0,00**

(C) Purchase costs

(C.1) Travel

Costs (€)	Justification
21000,00	Travel cost and daily allowance for meeting participants (5 meetings x 3 persons x 1400€/person)
**In line with Commission Decision C (2024) 5405 on unit costs*	

(C.2) Equipment

Costs (€)	Justification

(C.3) Other goods, works and services

Costs (€)	Justification
6000,00	Audit services

Total Costs (C)	**27000,00**

(E) Indirect Costs
(7% on A, B and C)

Total costs (€)
26180,00

Total estimated eligible costs	**400.180,00**

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	**17**			
Short name	**NKIP**			
PIC number	**999554543**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Senior expert, WP1	5000,00	1,00	5000,00
	TBD-Mid expert, WP2	4000,00	1,00	4000,00
	TBD-Senior expert, WP4	4000,00	1,00	4000,00
	TBD-Senior expert, WP7	5000,00	4,00	20000,00
	TBD-Senior expert, WP7	5000,00	4,00	20000,00
	TBD-Mid expert, WP7	4000,00	3,00	12000,00
	TBD-Junior expert, WP7	3200,00	4,00	12800,00
	TBD-Junior expert, WP7	3200,00	4,00	12800,00
	TBD-Senior expert, WP8	5000,00	2,00	10000,00
	TBD-Senior expert, WP8	5000,00	2,00	10000,00
	TBD-Mid Expert, WP8	4000,00	2,50	10000,00
	TBD-Mid expert, WP8	4000,00	2,50	10000,00
	TBD-Junior expert, WP8	3200,00	2,00	6400,00
	TBD-Junior expert, WP8	3200,00	2,00	6400,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**143400,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	428,60	WP8 Catering for 2 F2F training (10 participant/ training + trainers)		
	1220,00	WP8:Development of a web interface to host training materials linked to the existing website		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**18048,60**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	11301,40			
Total estimated eligible costs	**172.750,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**17.1**			
Short name	**NNGYK**			
PIC number	**998706957**			
	Persons working exclusively on the action			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days**[1]	**Total costs per person (€)**
(A) Personnel costs (please insert a new line for each staff member)	Péter Csizmadia, project manager, WP 1,6,8,9	182,00	81	14651,00
	Rita Dr. Schifferné Dr. Simich, senior expert, WP 6	200,00	179	35800,00
	Dr. György Surján, senior expert, WP 4	240,00	144	34440,00
	Balázs Majzik, senior expert, WP 6,8,9	190,00	179	34010,00
	Zsófia Kimmel, senior expert, WP 6,8,9	176,00	179	31504,00
	Fanni Mészáros, junior expert, WP 2	112,00	135	15064,00
	Noémi Borbély, junior expert, WP2	112,00	126	14056,00
	Kinga Csáky-Illés, administrative, WP1	207,00	27	5589,00
Total costs (A)	**185114,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	2800,00	WP6 Travel cost and daily allowance for meeting participants (2 meeting x 2 persons x 700€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	11500,00	Publication fees, printing costs, catering costs of intersectoral and other stakeholder meetings, conferences/seminars/workshops/trainings and events of the project		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**30900,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	15120,98			
Total estimated eligible costs	**231.134,98**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**17.2**			
Short name	**EBSZJCK**			
PIC number	**889719212**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Agnes Devecsery/ senior expert, WP1; WP9	6000,00	3,00	18000,00
	Borbala Balogh/ junior expert, WP9	4000,00	3,00	12000,00
	Vilmos Keszthelyi/ administrative personnel, WP1; WP9	4000,00	2,45	9801,87
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**39801,87**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	3948,13			
Total estimated eligible costs	**60.350,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**17.3**			
Short name	**OKFO**			
PIC number	**891516331**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	TBD-senior project manager (WP1, WP4)	302,75	33	9990,75
	TBD-communication and coordination expert WP2, WP3	290,23	34	9867,82
	TBD-senior expert, to be hired (WP7, WP8)	290,23	80	23218,40
	TBD-junior expert, to be hired (WP7, WP8)	223,26	80	17860,80
Total costs (A)	**60937,77**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	5427,64			
Total estimated eligible costs	**82.965,41**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**17.4**			
Short name	**GOKVI**			
PIC number	**968000443**			
	Persons working exclusively on the action			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days**	**Total costs per person (€)**
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
(A) Personnel costs (please insert a new line for each staff member)	Albert Aszalos - WP2 Leader Project manager	421,90	330	139227,66
	Ágnes Makai - Senior expert, WP2	281,87	180	50735,70
	Melinda Szögi - Senior expert, WP2	281,87	180	50735,70
	Nora Strommer - Senior Expert, WP2	281,87	180	50735,70
	Peter Kirsch - Senior expert, WP2	281,87	330	93015,45
	Judit Kolcza - Administrative personnel, WP2	172,02	90	15481,44
	Viktoria Varju - Administrative personnel, WP2	172,02	90	15481,44
	Szabolcs Gulyas - Administrative personnel, WP2	172,02	74	12744,23
	Eva Udvardi - Administrative personnel, WP2	172,02	90	15481,44
	Adrienn Horvath - Administrative personnel, WP2	172,02	90	15481,44
	Miklós Szócska - Project Supervisor, WP5	335,00	33	10887,50
	Réka Kovács - Project Manager, WP2	335,00	323	108037,50
	Péter Pollner - Lead Senior Expert, WP8	235,00	230	54050,00
	Melinda Pénzes - Senior Expert, (WP2, WP5, WP7, WP8)	235,00	603	141705,00
	Tamás Joó - Senior Expert, WP8	235,00	162	37952,50
	Róbert Urbán - Senior Expert, (WP2, WP8)	235,00	200	47000,00
	Bogdán Asztalos - Junior Expert, WP8	123,00	80	9840,00
	Jóni Dániel - Junior Expert, WP5, WP8	123,00	60	7380,00
	Kosztadin Tenevszki - Financial Manager, WP7, WP8	156,00	95	14820,00
Total costs (A)	**890.792,70**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
	150000,00	Dissemination activities ENSP		
	20000,00	Dissemination activities WFPHA		
	30000,00	Dissemination activities LUNGS EUROPE		
Total costs (B)	**200.000,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	24000,00	Travel cost and daily allowance for meeting participants (5 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	90.000,00	Open Access fees for peer-reviewed publication or supplements within the context of dissemination activities (30 articles x 3,000 Euro Article processing Charge = 90,000 Euro)		
	10.000,00	Audit services (x2)		
	8.000,00	Participation/Registration to Conferences		
Total Costs (C)	**132000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	85595,49			
Total estimated eligible costs	**1.308.388,18**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member).
Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	18
Short name	ISS
PIC number	999978821

(A) Personnel costs
(please insert a new line for each staff member)

Persons working exclusively on the action

Staff member (name and role)	Monthly rate (€)	Estimated number of months	Total costs per person (€)
Junior Researcher (to be recruited), WP6, all tasks	4583,33	14,00	64166,67

Other persons

Staff member (name and role)	Daily rate (€)	Estimated number of days[1]	Total costs per person (€)
Renata Solimini, Senior Researcher, WP1, all tasks	332,00	8	2656,00
Valentina Minardi, Senior Researcher, WP1, all tasks	311,00	8	2332,50
Renata Solimini, Senior Researcher, WP2, all tasks	322,00	9	2898,00
Chiara Cattaneo, Senior Researcher, WP2, all tasks	311,00	6	1866,00
Valentina Minardi, Senior Researcher, WP2, all tasks	311,00	4	1244,00
Federica Asta, Junior Researcher, WP2, all tasks	231,00	4	808,50
Emanuele Scafato, Senior Researcher, WP2, all tasks	531,00	9	4779,00
Silvia Ghirini, Senior Researcher, WP2, all tasks	315,00	2	630,00
Sara Antigani, Senior Researcher, WP2, all tasks	304,00	4	1216,00
Renata Solimini, Senior Researcher, WP4, WP Leader and Task 4.1 Leader	322,00	252	81144,00
Chiara Cattaneo, Senior Researcher, WP4, Task 4.2 Leader	311,00	125	38875,00
Valentina Minardi, Senior Researcher, WP8, Task 8.5 contributor	311,00	74	22858,50
Federica Asta, Junior Researcher, WP8, Task 8.5 contributor	231,00	74	16978,50
Valentina Minardi, Senior Researcher, WP9, Task 9.4 contributor	311,00	37	11351,50
Federica Asta, Junior Researcher, WP9, Task 9.4 contributor	231,00	37	8431,50
Chiara Cattaneo, Senior Researcher, WP5, Task 5.1 contributor	311,00	36	11196,00
Renata Solimini, Senior Researcher, WP5, Task 5.1 contributor	322,00	18	5796,00
Sara Antigani, Senior Researcher, WP9	304,00	23	6992,00
Emanuele Scafato, Senior Researcher, WP6, all tasks	531,00	79	41860,50
Claudia Gandin, Senior Researcher, WP6, all tasks	332,40	152	50621,33
Silvia Ghirini, Senior Researcher, WP6, all tasks	315,00	63	19753,13

Total costs (A)	**398.454,62**

(B) Subcontracting costs
(please repeat line for each subcontract foreseen)

Costs (€)	Task(s)/Justification

Total costs (B)	**0,00**

(C) Purchase costs

(C.1) Travel

Costs (€)	Justification
9600,00	Travel and subsistence costs for meetings in WP1 (4 meetings x 2 people at 1,200€/person - destinations not yet known)
8000,00	Travel and subsistence costs for participation to EU and International Conferences in WP2 (4 meetings x 2 people at 1000€/person-destinations not yet known)
4400,00	Travel and subsistence costs for meetings in WP6 (2 meetings x 2 people at 1100€/person-destinations not yet known)

**In line with Commission Decision C (2024) 5405 on unit costs*

(C.2) Equipment

Costs (€)	Justification

(C.3) Other goods, works and services

Costs (€)	Justification
5000,00	Costs for CFS (audit)
4523,38	Costs for documents translation - WP6

Total Costs (C)	**31523,38**

(E) Indirect Costs
(7% on A, B and C)

Total costs (€)
30098,46

Total estimated eligible costs	**460.076,46**

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**18.1**			
Short name	**FPG**			
PIC number	**918081430**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Junior Researcher (To be recruited)	**1520,00**	30,00	45600,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Roberto Pola, Senior Researcher	488,00	42	20496,00
	Roberta Pastorino, Senior Researcher	285,00	84	23940,00
Total costs (A)	**90.036,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	5000,00	open access costs (2 articles x 2,500 Euro APC)		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	7464,52			
Total estimated eligible costs	**114.100,52**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	18.2			
Short name	LIGURIA			
PIC number	996097851			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	LAURA MURAGLIA, WP8, WP9 EXPERT	11390,40	1,00	11390,40
	LORENZO BERTORELLO, WP8, WP9 EXPERT	3938,72	1,16	4568,92
	STEFANO CATELANI, WP8, WP9 EXPERT	4931,01	1,58	7791,00
	SERENA ALVINO, WP8, WP9 EXPERT	7804,33	11	85847,63
	FRANCESCO D'AGOSTINI, WP8, WP9 EXPERT	7804,33	5	39021,65
	ROBERTO CAROZZINO, WP8, WP9 EXPERT	12954,47	1	6477,24
	RACHELE DONINI, WP8, WP9 EXPERT	7804,33	5	39021,65
	MAURIZIO PANZA, WP8, WP9 EXPERT	5298,76	4	18545,66
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**212.664,14**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	16048,49			
Total estimated eligible costs	**245.312,63**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	18.3			
Short name	LOMBARDIA			
PIC number	999654065			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**0,00**	0,00	0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days**[1]	**Total costs per person (€)**
	Caterina Ferrario - Administrative personnel, WP1, WP2	164,07	15,00	2461,00
	Chiara Diletta Russo - Administrative personnel, WP1, WP2	263,25	9,50	2500,88
	Danilo Cereda - Senior experts/advisors/researchers, WP5	400,12	16,00	6401,87
	Corrado Celata - Senior experts/advisors/researchers, WP1, WP2, WP4, WP5, WP7, WP8	517,95	16,00	8287,18
	Giuseppina Gelmi - Senior experts/advisors/researchers, WP1, WP2, WP4, WP5, WP7, WP8	363,72	160,00	58195,67
	Carla Guendalina Maria Locatelli - Senior experts/advisors/researchers, WP1, WP2, WP4, WP5, WP7, WP8	179,49	149,00	26743,59
	Federica Vairelli - Junior experts/advisors/researchers, WP1, WP2, WP4, WP5, WP7, WP8	153,85	149,00	22923,08
	Nadia Vimercati - Senior experts/advisors/researchers, WP1, WP2, WP4, WP5, WP7, WP8	166,67	149,00	24833,33
	Arianna Mazzone - Senior experts/advisors/researchers, WP1, WP2, WP4, WP5, WP7, WP8	262,35	53,50	14035,8855
	Giovanni Ferrari - Senior experts/advisors/researchers, WP1, WP2, WP4, WP5, WP7, WP8	399,59	22,00	8791,062667
Total costs (A)	**175.173,55**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	30000,00	Development of a course to be delivered via e-learning platform		
	2026,45	Participation/Registration to Conferences		
Total Costs (C)	**46426,45**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	15512,00			
Total estimated eligible costs	**237.112,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**18.4**			
Short name	**IRFMN**			
PIC number	**999661146**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Chiara Stival (WP1, WP2, WP5, WP6, WP8, WP9 expert)	3000,00	48,00	144000,00
	Irene Possenti (WP5, WP8, WP9 expert)	1500,00	48,00	72000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Silvano Gallus (WP1, WP2, WP4, WP5, WP7, WP8, WP9 expert)	326,00	430	140180,00
	Alessandra Lugo (WP1, WP2, WP4, WP5, WP7, WP8, WP9 expert)	209,00	249	52041,00
	TBD (WP6, WP9 expert)	255,00	310	79050,00
Total costs (A)	**487.271,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	3000,00	WP6 Travel (1 meeting x 3 persons x 1000€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	21000,00	Publication fee for 7 Manuscripts (3000 Euro APC x 7 manuscripts)		
	6400,00	Audit services		
	14500,00	Participation/Registration to Conferences		
Total Costs (C)	**59300,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	38259,97			
Total estimated eligible costs	**584.830,97**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**18.5**			
Short name	**ULSS6**			
PIC number	**937042990**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Project Manager Senior	3900,00	3,00	11700,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Luca Gino Sbrogiò - Prevention Director	611,11	8	4888,88
	Mary Elizabeth Tamang - Prevention Doctor	550,00	10	5500,00
	Carlo Giordani - senior analyst	470,00	10	4700,00
	TBD-Health Assistant	225,00	160	36000,00
Total costs (A)	**62.788,88**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	5557,22			
Total estimated eligible costs	**84.946,10**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**19**			
Short name	**RSU**			
PIC number	**999843118**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Ivars Vanadzins, project scientific leader	**5000,00**	14,40	72000,00
	Zanna Martinsone (leading researcher)	**4500,00**	16,00	72000,00
	Ilona Pavlovska (leading researcher)	**4500,00**	20,00	90000,00
	Anita Seile (measurement expert and researcher)	**3600,00**	20,00	72000,00
	Diana Inga Paegle (researcher)	**3600,00**	20,00	72000,00
	Linda Libere (junior researcher)	**2550,00**	24,00	61200,00
	Kristiana Venzega (junior researcher)	**2550,00**	24,00	61200,00
	Kristīne Sproge (juniour resear5cher)	**2550,00**	12,00	30600,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Liene Maurite (administrative & quality manager)	240,00	192	46080,00
	Agnese Fisere-Dzerve (administrative)	140,00	163	22820,00
				0,00
Total costs (A)	**599.900,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	2800,00	WP6 Travel (1 meeting x 2 persons x 1,400€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	6500,00	Piloting activities on young persons/alcohol use – involvment of schools, materials, coffee etc.		
	5000,00	Audit services		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**25900,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	43806,00			
Total estimated eligible costs	**669.606,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	19.1			
Short name	SKPC			
PIC number	952714019			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Ilze Straume (senior project manager)	6029,00	3,00	18087,00
	Maija Kalpiša (senior project manager)	6029,00	2,00	12058,00
	Agnese Freimane (junior project manager)	2881,00	3,00	8643,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Ilona Laganovska (administrative personnel)	67,00	12	804,00
Total costs (A)	**39592,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	1200,00	WP6 Travel (1 meeting x 1 person x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	4000,00	Two focus groups, each group – 10 persons, recruitment of groups, moderating focus groups, preparing conclusions and proposals. Transaltion and printing of materials.		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**21800,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	4297,44			
Total estimated eligible costs	**65.689,44**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	19.2			
Short name	MoH LV			
PIC number	887695695			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	Sanita Lazdiņa Senior expert (smoking, tobacco control)	5500,00	4,00	22000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
				0,00
Total costs (A)	**22000,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	2702,00			
Total estimated eligible costs	**41302,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**19.3**			
Short name	**PSCUH**			
PIC number	**953605449**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	TBD-Senior expert, WP7	390,00	45	17550,00
	TBD-Senior expert, WP7	390,00	30	11700,00
	TBD-Junior expert, WP7	240,00	90	21600,00
	TBD-Administrative personnel, WP7	221,00	34	7514,00
Total costs (A)	**58364,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	5247,48			
Total estimated eligible costs	**80211,48**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**20**			
Short name	**LSMU**			
PIC number	**972782446**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Senior experts/advisors/researchers	6500,00	26,50	172250,00
	TBD-Junior experts/advisors/researchers	5700,00	19,00	108300,00
	TBD-Project managers	5500,00	6,75	37125,00
	TBD-Administrative personnel	3400,00	4,00	13600,00
	TBD-Technical personnel	3400,00	3,00	10200,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**341.475,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	4400,00	WP6 Travel (2 meetings x 2 persons x 1,100€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	22000,00	Task 6.5 Pilot study costs		
	8540,00	External project audit		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**51540,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	27511,05			
Total estimated eligible costs	**420.526,05**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**21**			
Short name	**SAM LT**			
PIC number	**933838468**			
	Persons working exclusively on the action			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names			0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
(A) Personnel costs (please insert a new line for each staff member)	Audrone Astrauskiene, project main contact, senior expert, WP1, WP2, WP3, WP4, WP9	240,00	93	22320,00
	Renata Berzanskiene, senior expert, WP1, WP3, WP4, WP5, WP7	228,00	53	12084,00
	Oksana Kavaliauskiene, team member, WP1, WP2, WP3, WP4, WP9	152,00	95	14440,00
	Jolita Matuziene, senior expert, WP1, WP2, WP3, WP4, WP9	137,00	110	15070,00
	Jelena Talackiene, senior expert, WP1, WP2, WP3, WP4, WP5, WP6, WP7, WP8, WP9	208,00	360	74880,00
	Emilija Kvieskaite-Makovejeva, WP1, WP2, WP3, WP4, WP7, WP8 expert	130,00	320	41600,00
	Audrius Sceponavicius, senior expert, WP1, WP2, WP3, WP4, WP9	246,00	82	20172,00
	200.566,00			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	1600,00	WP6 Travel (1 meeting x 1 person x 800€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2000,00	Participation/Registration to Conferences		
	10000,00	International conference on tobacco/nicotine control and prevention		
	10000,00	National conference on SAFE		
	22800,00	Materials, guidelines, online trainings for target groups		
	10000,00	National conference on NCD prevention		
Total Costs (C)	**66000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	18659,62			
Total estimated eligible costs	**285.225,62**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**22**			
Short name	**NVI**			
PIC number	**912763114**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Ruta Petrauskaite Everatt Project manager (Work Package 7)	234,00	70	16380,00
	Jurgita Mendzinskiene Project coordinator, (Work Package 7)	130,00	85	11050,00
	Leva Motiejunaite Project expert, (Work Package 7)	130,00	85	11050,00
	Vaida Gedvilaite Project expert, (Work Package 7)	200,00	65	13000,00
Total costs (A)	**51.480,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
	5000,00	Implementation of training for healthcare providers and students (e.g. allowance for lecturers),.		
	2500,00	Implementation, transfering of best practices in healthcare settings, (e.g., communication strategies)		
Total costs (B)	**7500,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	3500,00	Costs for preparation of digital tools, posters, leaflets.		
	3000,00	Participation/Registration to Conferences		
Total Costs (C)	**16100,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	5255,60			
Total estimated eligible costs	**80.335,60**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**23**			
Short name	**VU**			
PIC number	**999893170**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD (WP1, WP2, WP3, WP4, WP5, WP6, WP8 experts)	5500,00	21,00	115500,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**115500,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	9247,00			
Total estimated eligible costs	**141.347,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	24			
Short name	RIVM			
PIC number	999991431			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	dr. Anne Havermans, WP8 expert	9480,35	3,00	28441,04
	dr. Charlotte Pauwels, WP6 expert	9480,35	2,25	21330,78
	dr. Reinskje Talhout, WP6 expert	12163,15	1,00	12163,15
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**61934,96**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	6000,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	1987,00	Participation to conferences		
Total Costs (C)	**7987,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	4894,54			
Total estimated eligible costs	**74.816,50**			

74817,09

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	25			
Short name	DGS			
PIC number	986364095			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Emília Nunes (WP7, WP8 expert)	303,31	81	24568,11
	Daniela Ferreira (WP7, WP8 expert)	66,57	81	5392,17
Total costs (A)	**29960,28**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	3259,22			
Total estimated eligible costs	**49.819,50**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	26			
Short name	ICAD			
PIC number	877389833			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	WP6 (expert, TBD)	5500,00	14,00	77000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**77000,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	6552,00			
Total estimated eligible costs	**100.152,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**27**			
Short name	**IPMN**			
PIC number	**997406575**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Dr. Ioana Munteanu - Lecture, M.D., Ph.D. Senior Pneumologist Specialist	40,00	200	8000,00
	Dr. Alexandru Stoichiță - Pneumologist	40,00	200	8000,00
	Daniela Voinea - trainer în BLS, trainer in hand hygiene	40,00	200	8000,00
	Petronela Radu - research department, project manager	40,00	150	6000,00
Total costs (A)	**41.600,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	28800,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	6.900,00	Participation/Registration to Conferences		
	32.000,00	Promotional kit (Phone gripper, Pen, Bottle for water) x 1000 children		
	5.000,00	2 Press conferences		
	2.500,00	Office supplies		
Total Costs (C)	**75.200,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	8176,00			
Total estimated eligible costs	**124.976,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	27.1			
Short name	INSP			
PIC number	985926237			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	TBD- WP8 Expert	5500,00	3,00	16500,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
Total costs (A)	**16500,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**16600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	2317,00			
Total estimated eligible costs	**35417,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**28**			
Short name	**CDU**			
PIC number	**999875613**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
			0,00	0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Dr. Beatrice Mahler - Assoc. Prof., MD, PhD, Senior Pneumologist Specialist	30,00	125	3750,00
	TBD - Project officer	28,00	125	3500,00
	TBD - PhD Candidate/Pneumologist specialist	28,00	125	3500,00
	TBD-Financial Consutant	28,00	35	980,00
Total costs (A)	**11730,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**11600,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	1633,10			
Total estimated eligible costs	**24.963,10**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**29**			
Short name	**NIJZ**			
PIC number	**948891346**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Helena Koprivnikar project coordinator, WP1-9	495,79	230	114.031,70
	Dunja Šulc junior researcher, WP 1, 2, 4, 5, 8, 9	159,72	658	105.015,90
	Gorazd Levičnik junior researcher, WP 1, 2, 4, 6	140,36	302	42.388,72
	Sandra Radoš Krnel senior researcher, WP 1, 2, 4, 6	461,03	150	69.154,50
	Sanja Voje administrative assistant, WP1	204,86	15	3.072,90
Total costs (A)	**333.663,72**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	3200,00	WP6 Travel cost and daily allowance for meeting participants (1 meeting x 2 persons x 1600€/person)		
	3200,00	WP8 Travel cost and daily allowance for meeting participants (1 meeting x 2 persons x 1600€/person)		
	1600,00	WP9 Travel cost and daily allowance for meeting participants (1 meeting x 1 person x 1600€/person)		
	4605,00	WP5 Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1151,25€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2000,00	Participation/Registration to Conferences		
	24500,00	Coding contract; Acquiring video feed; Materials on risks of acquiring alcohol; Working costs for recruitment strategy: advertising online – social media;Focus groups; Pilot costs		
	100,00	Purchase of any articles or other relevant literature required for the work (WP5)		
	100,00	Purchase of any articles or other relevant literature required for the work (WP8)		
	5000,00	audit services		
Total Costs (C)	**53905,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	27129,81			
Total estimated eligible costs	**414.698,53**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member).
Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	**30**			
Short name	**ICO**			
PIC number	**998420031**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Mid level professional (project manager), WP1, WP4, WP5, WP6, WP7, WP8, WP9	5166,70	45,00	232501,50
	Mid level professional (technical), WP5, WP6, WP7, WP8	6451,00	23,40	150953,40
	Mid level professional (technical), WP4, WP5, WP6, WP9	5166,70	23,50	121417,45
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Cristina Martínez (head of the unit and senior researcher)-WP1-9	402,89	81	32634,09
	Dolors Carnicer (senior researcher), WP2-, WP5, WP9	461,56	90	41540,40
	Montse Ballbè (senior researcher), WP5, WP7	317,67	90	28590,30
	Laura Antón (researcher), WP7	322,61	90	29034,90
	Marcela Fu (senior researcher), WP2, WP5	319,22	90	28729,80
	Olena Tigova (researcher), WP2-9	297,78	158	46900,35
Total costs (A)	**712.302,19**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14.400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	3.000,00	WP6 Travel cost and daily allowance for meeting participants (1 meeting x 2 persons x 1,500€/person)		
	14.400,00	WP7 Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,800€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	6.589,00	Participation/Registration to Conferences		
	20.000,00	1) Hiring a social listening firm for a comprehensive/automated way to collect data on alcohol imagery in social media 2) Hiring coders to analyze the data. After the firm delivers the recordings and conversations, these coders will transcribe the conversations and code the video and text to identify "alcohol occurrences". These occurrences are typically either commercial or programming. The coders' job is to distinguish between them and classify each by type.		
	5.000,00	Audit		
Total Costs (C)	**63389,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	54.298,38			
Total estimated eligible costs	**829.989,57**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**30.1**			
Short name	**GENCAT**			
	999826919			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Ana Ibar (manager), WP6	278,13	30,00	8343,89
	Carla Bruguera (senior), WP6	215,69	102	22000,29
Total costs (A)	**30.344,18**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	1200,00	WP6 Travel cost and daily allowance for meeting participants (1 meeting x 1 person x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**17800,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	3370,09			
Total estimated eligible costs	**51.514,27**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	30.2			
Short name	IDIBAPS CERCA			
PIC number	999477525			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Silvia Matrai, project manager, senior researcher, WP 6	330,00	160	52800,00
	Fleur Braddick, senior researcher, WP6	275,00	203	55825,00
	Jorge Palacio-Vieira, senior researcher, WP 6	215,00	169	36335,00
Total costs (A)	**144.960,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	9600,00	Travel cost and daily allowance for meeting participants (4 meetings x 2 persons x 1,200€/person)		
	1200,00	WP6 Travel cost and daily allowance for meeting participants (1 meeting x 1 person x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	8200,00	Expert fees for external peer-review of study protocols; expenses related to ethics approvals; desktop research and consensus softwares that are not standard institutional resources (Covidence, ATLAS.ti, e-Delphi), logistics expenses of task partners meeting and working events.		
	2000,00	Participation/Registration to Conferences		
Total Costs (C)	**21000,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	11617,20			
Total estimated eligible costs	**177.577,20**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**31**			
Short name	**IDIS**			
PIC number	**986488255**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD-Graduate-Reseracher WP5, WP6, WP8, WP9	2.791,67	24,00	67.000,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	TBD-Project Manager	186,05	120,00	22.325,58
Total costs (A)	**89.325,58**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	2.400,00	Travel cost and daily allowance for meeting participants (2 meetings x 1 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**2400,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	6420,79			
Total estimated eligible costs	**98146,37**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL

Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member).
Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.

Partner number *(same as on Submission System screens)*	**31.1**
Short name	**USC**
PIC number	**999829635**

(A) Personnel costs
(please insert a new line for each staff member)

Persons working exclusively on the action

Staff member (name and role)	Monthly rate (€)	Estimated number of months	Total costs per person (€)
TBD-PhD1-Reseracher WP5, WP6, WP8, WP9	3900,00	24,00	93600,00
TBD-Postdoc2-Reseracher WP5, WP6, WP8, WP9	2850,00	24,00	68400,00

Other persons

Staff member (name and role)	Daily rate (€)	Estimated number of days[1]	Total costs per person (€)
Mónica Pérez Ríos, Expert	285,00	112,00	31920,00
Alberto Ruano Raviña, Expert	350,00	70,00	24500,00
Leonor Varela Lema, Expert	245,00	108,00	26460,00
Agustín Montes Martínez, Expert	325,00	36,00	11700,00
Luis Valdés Cuadrado, Expert	350,00	36,00	12600,00
Julia Rey Brandariz, Expert	245,00	85,00	20825,00
Cristina Candal Pedreira, Expert	245,00	85,00	20825,00
Lucía Martín de Bernardo Gisbert, Expert	215,00	70,00	15050,00

Total costs (A)	**325.880,00**

(B) Subcontracting costs
(please repeat line for each subcontract foreseen)

Costs (€)	Task(s)/Justification

Total costs (B)	**0,00**

(C) Purchase costs

(C.1) Travel

Costs (€)	Justification
14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)
7000,00	WP6 Travel cost and daily allowance for meeting participants (5 meetings x 1 person x 1,400€/person)

**In line with Commission Decision C (2024) 5405 on unit costs*

(C.2) Equipment

Costs (€)	Justification

(C.3) Other goods, works and services

Costs (€)	Justification
2.200,00	Participation/Registration to Conferences
4.000,00	WP6: Focus groups
3.000,00	WP6: pilot costs
7.380,00	Bibliographic searches, publiation, analysis and focus gropus
5.000,00	Audit services

Total Costs (C)	**42.980,00**

(E) Indirect Costs
(7% on A, B and C)

Total costs (€)
25.820,20

Total estimated eligible costs	**394.680,20**

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**31.2**			
Short name	**CSG**			
PIC number	**952925770**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**0,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**0,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	0,00			
Total estimated eligible costs	**0,00**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**32**			
Short name	**IDIVAL**			
PIC number	**946556944**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	TBD - Technical staff	**3000,00**	36,00	108000,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Paloma Gonzalez - Project manager	217,00	90	19530,00
				0,00
Total costs (A)	**127530,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	19200,00	Travel cost and daily allowance for meeting participants (8 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	8200,00	Participation/Registration to Conferences		
Total Costs (C)	**27400,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	10845,10			
Total estimated eligible costs	**165.775,10**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**32.1**			
Short name	**SCS**			
PIC number	**991294023**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
				0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Monica del Amo - Principal investigator	295,00	90	26550,00
	Beatriz - senior researcher	320,00	28	8960,00
Total costs (A)	**35510,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
Total Costs (C)	**0,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	2485,70			
Total estimated eligible costs	**37.995,70**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.				
Partner number *(same as on Submission System screens)*	**33**			
Short name	**ASPB**			
PIC number	**983180264**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
	Mª Jose Lopez (Senior Public Health Technician and Head of Department), WP5, WP9	338,00	127	42.926,00
	Xavier Continente (Senior Public Health Technician), WP5, WP9	308,00	172	52.976,00
	Nuria Cortes (Senior Laboratory Technician), WP5	308,00	86	26.488,00
Total costs (A)	**122.390,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14.400,00 €	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	4.800,00 €	Meetings for fieldwork training (2 meetings x 2 people x 1.200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2.200,00 €	Participation/Registration to Conferences		
Total Costs (C)	**21400,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	10065,30			
Total estimated eligible costs	**153.855,30**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**33.1**			
Short name	**IRSANTPAU CERCA**			
PIC number	**998869432**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Senior technician TBD), WP5, WP9	4300,00	36,00	154.800,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
				0,00
				0,00
Total costs (A)	**154.800,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	5000,00	Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1,250€/person)		
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2000,00	Calibration of 6 air pumps and 1 Defender M510 (air flow calibrator)		
	4500,00	3 Sidekick air pumps (1500x3)		
	2250,00	1000 filters (€225 / box of 100 units)		
	1240,00	1000 Petri plates (€124 / box of 100 units)		
Total Costs (C)	**14990,00**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	11885,30			
Total estimated eligible costs	**181.675,30**	***Required own contribution to be assumed by CA (ASPB)***		

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.				
Partner number *(same as on Submission System screens)*	**34**			
Short name	**LUND**			
PIC number	**998165794**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number of months**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		
	Stenman Emelie , Co- investigator, WP7	2700,00	12	32400
	Daniela Bengtsson, Project assistant, WP7	6257,00	12	75084
	Lazer Victoria, Reaserch nurse, WP7	2855,00	12	34260
	Valesco Kathya, Datamanager, WP7	1329,00	12	15948
	Grundberg Anton, Statistician, WP7	1126,00	12	13512
	Rosenqvist Helene, Administrative support, WP7	360,00	12	4320
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number of days[1]**	**Total costs per person (€)**
Total costs (A)	**175.524,00**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	2200,00	Participation/Registration to Conferences		
	16065	Meeting costs (other than travel and accommodation), brochures, roll-up banners/posters, printed reports (including final report), publications intended to the public and smaller services, including translation and proofreading		
Total Costs (C)	**32665**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	14573,23			
Total estimated eligible costs	**222.762,23**			

[1] Rounded up or down to the nearest half-day.

DETAILED BUDGET TABLE EU4HEALTH — PROPOSAL				
Please complete the table below for each applicant (beneficiary/affiliated entity - separate budget table for coordinator and for each consortium member). *Please provide a detailed justification and explanation in the textboxes. The justification, among other parts of your application, will be used for the evaluation of the award criteria on budget.*				
Partner number *(same as on Submission System screens)*	**35**			
Short name	**PHC**			
PIC number	**906650465**			
(A) Personnel costs (please insert a new line for each staff member)	**Persons working exclusively on the action**			
	Staff member (name and role)	**Monthly rate (€)**	**Estimated number**	**Total costs per person (€)**
	Please fill in names	**Real cost (€)**		0,00
				0,00
	Other persons			
	Staff member (name and role)	**Daily rate (€)**	**Estimated number**	**Total costs per person (€)**
	TBD-Chief Specialist in Project Management and International Cooperation TBD	347,63	34	11819,49
	Chief Specialist on Economic Support TBD	347,63	33	11471,79
	Head of Department Zaporozhska Olena	385,18	185	71258,30
	General Hygiene Practitioner Chumak Yuliia	150,35	201	30220,35
	Chief Specialist on Non-Communicable Diseases Prevention TBD	178,50	152	27132,00
	TBD-external consultant	200,37	100	20037,00
Total costs (A)	**171.938,93**			
(B) Subcontracting costs (please repeat line for each subcontract foreseen)	**Costs (€)**	**Task(s)/Justification**		
Total costs (B)	**0,00**			
(C) Purchase costs				
(C.1) Travel	**Costs (€)**	**Justification**		
	14400,00	Travel cost and daily allowance for meeting participants (6 meetings x 2 persons x 1,200€/person)		
	4400,00	WP6 Travel cost and daily allowance for meeting participants (2 meetings x 2 persons x 1,100€/person)		
	**In line with Commission Decision C (2024) 5405 on unit costs*			
(C.2) Equipment	**Costs (€)**	**Justification**		
(C.3) Other goods, works and services	**Costs (€)**	**Justification**		
	11500,32	Costs for conducting research activities (e.g., focus groups, surveys, in-depth interviews), event for presentation of results to stakeholders, design, development, and printing of dissemination materials.		
	2200,00	Participation/Registration to Conferences		
Total Costs (C)	**32500,32**			
(E) Indirect Costs (7% on A, B and C)	**Total costs (€)**			
	14310,75			
Total estimated eligible costs	**218.750,00**			

[1] Rounded up or down to the nearest half-day.

ANNEX 2

ESTIMATED BUDGET FOR THE ACTION

	Estimated eligible[1] costs (per budget category)											Estimated EU contribution[2]			
	Direct costs									Indirect costs	Total costs	EU contribution to eligible costs			Maximum grant amount[6]
	A. Personnel costs		B. Subcontracting costs	C. Purchase costs					D. Other cost categories	E. Indirect costs[3]		Funding rate %[4]	Maximum EU contribution[5]	Requested EU contribution	
	A.1 Employees (or equivalent) A.2 Natural persons under direct contract A.3 Seconded persons	A.4 SME owners and natural person beneficiaries	B. Subcontracting	C.1 Travel and subsistence			C.2 Equipment	C.3 Other goods, works and services	D.1 Financial support to third parties	E. Indirect costs					
				Travel	Accommodation	Subsistence									
Forms of funding	Actual costs	Unit costs[7]	Actual costs	Unit[7] or actual costs	Unit[7] or actual costs	Unit[7] or actual costs	Actual costs	Actual costs	Actual costs	Flat-rate costs[8]					
	a1	a3	b	c1a	c1b	c1c	c2	c3	d1	e = flat-rate * (a1 + a3 + b + c1a + c1b + c1c + c2 + c3 + d1)	f = a + b + c + d + e	U	g = f * U%	h	m
1 - UOA	1 471 620.00	0.00	580 000.00	100 000.00	0.00	0.00	10 000.00	130 100.00	0.00	160 420.40	2 452 140.40	80	1 961 712.32	1 961 712.32	1 961 712.32
2 - SCIENSANO	509 666.51	0.00	0.00	16 000.00	0.00	0.00	0.00	33 200.00	0.00	39 120.66	597 987.17	80	478 389.74	478 389.74	478 389.74
3 - UNIBL	5 300.00	0.00	0.00	4 000.00	0.00	0.00	0.00	0.00	0.00	651.00	9 951.00	80	7 960.80	7 960.80	7 960.80
4 - FMZ	5 300.00	0.00	0.00	4 000.00	0.00	0.00	0.00	0.00	0.00	651.00	9 951.00	80	7 960.80	7 960.80	7 960.80
5 - PSRS	5 300.00	0.00	0.00	4 000.00	0.00	0.00	0.00	0.00	0.00	651.00	9 951.00	80	7 960.80	7 960.80	7 960.80
6 - NAAC	10 000.00	0.00	0.00	4 000.00	0.00	0.00	0.00	0.00	0.00	980.00	14 980.00	80	11 984.00	11 984.00	11 984.00
6.1 - UCY	10 000.00	0.00	0.00	4 000.00	0.00	0.00	0.00	0.00	0.00	980.00	14 980.00	80	11 984.00	11 984.00	11 984.00
7 - SZU	44 712.00	0.00	0.00	14 400.00	0.00	0.00	0.00	37 200.00	0.00	6 741.84	103 053.84	80	82 443.07	82 443.07	82 443.07
8 - CIPH	68 139.97	0.00	0.00	14 400.00	0.00	0.00	0.00	76 210.03	0.00	11 112.50	169 862.50	80	135 890.00	135 890.00	135 890.00
9 - AAKS	208 300.00	0.00	0.00	14 400.00	0.00	0.00	0.00	20 975.00	0.00	17 057.25	260 732.25	80	208 585.80	208 585.80	208 585.80
10 - UHSD	344 100.00	0.00	0.00	9 600.00	0.00	0.00	0.00	24 400.00	0.00	26 467.00	404 567.00	80	323 653.60	323 653.60	323 653.60
11 - RZ	886 886.79	0.00	0.00	9 600.00	0.00	0.00	1 000.00	17 400.00	0.00	64 042.08	978 928.87	80	783 143.10	783 143.10	783 143.10
11.1 - MFK	79 488.00	0.00	0.00	14 400.00	0.00	0.00	0.00	7 200.00	0.00	7 076.16	108 164.16	80	86 531.33	86 531.33	86 531.33
11.2 - ODSHERRED	109 429.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	8 822.03	134 851.03	80	107 880.82	107 880.82	107 880.82
11.3 - VALLENSBAEK	63 687.50	0.00	0.00	14 400.00	0.00	0.00	0.00	1 200.00	0.00	5 550.13	84 837.63	80	67 870.10	67 870.10	67 870.10
12 - TAI	16 000.00	0.00	0.00	2 600.00	0.00	0.00	0.00	0.00	0.00	1 302.00	19 902.00	80	15 921.60	15 921.60	15 921.60
13 - THL	927 280.39	0.00	0.00	18 800.00	0.00	0.00	0.00	26 800.00	0.00	68 101.63	1 040 982.02	80	832 785.62	832 785.62	832 785.62
13.1 - CSF	76 020.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	6 483.40	99 103.40	80	79 282.72	79 282.72	79 282.72
13.2 - FILHA	157 943.93	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	12 218.08	186 762.01	80	149 409.61	149 409.61	149 409.61
14 - MoH FR	101 843.20	0.00	0.00	9 600.00	0.00	0.00	0.00	2 000.00	0.00	7 941.02	121 384.22	80	97 107.38	97 107.38	97 107.38
15 - TFRI	31 600.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 000.00	0.00	3 360.00	51 360.00	80	41 088.00	41 088.00	41 088.00
16 - NPHO	347 000.00	0.00	0.00	21 000.00	0.00	0.00	0.00	6 000.00	0.00	26 180.00	400 180.00	80	320 144.00	320 144.00	320 144.00
17 - NKIP	143 400.00	0.00	0.00	14 400.00	0.00	0.00	0.00	3 648.60	0.00	11 301.40	172 750.00	80	138 200.00	138 200.00	138 200.00
17.1 - NNGYK	185 114.00	0.00	0.00	17 200.00	0.00	0.00	0.00	13 700.00	0.00	15 120.98	231 134.98	80	184 907.98	184 907.98	184 907.98
17.2 - ÉBSZJCK	39 801.87	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	3 948.13	60 350.00	80	48 280.00	48 280.00	48 280.00
17.3 - OKFŐ	60 937.77	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	5 427.64	82 965.41	80	66 372.33	66 372.33	66 372.33
17.4 - GOKVI	890 792.70	0.00	200 000.00	24 000.00	0.00	0.00	0.00	108 000.00	0.00	85 595.49	1 308 388.19	80	1 046 710.55	1 046 710.55	1 046 710.55
18 - ISS	398 454.62	0.00	0.00	22 000.00	0.00	0.00	0.00	9 523.38	0.00	30 098.46	460 076.46	80	368 061.17	368 061.17	368 061.17

	Estimated eligible[1] costs (per budget category)											Estimated EU contribution[2]			
	Direct costs									Indirect costs	Total costs	EU contribution to eligible costs			Maximum grant amount[6]
	A. Personnel costs		B. Subcontracting costs	C. Purchase costs					D. Other cost categories	E. Indirect costs[3]		Funding rate %[4]	Maximum EU contribution[5]	Requested EU contribution	
	A.1 Employees (or equivalent) A.2 Natural persons under direct contract A.3 Seconded persons	A.4 SME owners and natural person beneficiaries	B. Subcontracting	C.1 Travel and subsistence			C.2 Equipment	C.3 Other goods, works and services	D.1 Financial support to third parties	E. Indirect costs					
				Travel	Accommodation	Subsistence									
Forms of funding	Actual costs	Unit costs[7]	Actual costs	Unit[7] or actual costs	Unit[7] or actual costs	Unit[7] or actual costs	Actual costs	Actual costs	Actual costs	Flat-rate costs[8]					
	a1	a3	b	c1a	c1b	c1c	c2	c3	d1	e = flat-rate * (a1 + a3 + b + c1a + c1b + c1c + c2 + c3 + d1)	f = a + b + c + d + e	U	g = f * U%	h	m
18.1 - FPG	90 036.00	0.00	0.00	9 600.00	0.00	0.00	0.00	7 000.00	0.00	7 464.52	114 100.52	80	91 280.42	91 280.42	91 280.42
18.2 - LIGURIA	212 664.14	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	16 048.49	245 312.63	80	196 250.10	196 250.10	196 250.10
18.3 - LOMBARDIA	175 173.55	0.00	0.00	14 400.00	0.00	0.00	0.00	32 026.45	0.00	15 512.00	237 112.00	80	189 689.60	189 689.60	189 689.60
18.4 - IRFMN	487 271.00	0.00	0.00	17 400.00	0.00	0.00	0.00	41 900.00	0.00	38 259.97	584 830.97	80	467 864.78	467 864.78	467 864.78
18.5 - ULSS 6	62 788.88	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	5 557.22	84 946.10	80	67 956.88	67 956.88	67 956.88
19 - RSU	599 900.00	0.00	0.00	12 400.00	0.00	0.00	0.00	13 500.00	0.00	43 806.00	669 606.00	80	535 684.80	535 684.80	535 684.80
19.1 - SPKC	39 592.00	0.00	0.00	15 600.00	0.00	0.00	0.00	6 200.00	0.00	4 297.44	65 689.44	80	52 551.55	52 551.55	52 551.55
19.2 - MoH LV	22 000.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	2 702.00	41 302.00	80	33 041.60	33 041.60	33 041.60
19.3 - PSCUH	58 364.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	5 247.48	80 211.48	80	64 169.18	64 169.18	64 169.18
20 - LSMU	341 475.00	0.00	0.00	18 800.00	0.00	0.00	0.00	32 740.00	0.00	27 511.05	420 526.05	80	336 420.84	336 420.84	336 420.84
21 - SAM LT	200 566.00	0.00	0.00	11 200.00	0.00	0.00	0.00	54 800.00	0.00	18 659.62	285 225.62	80	228 180.50	228 180.50	228 180.50
22 - NVI	51 480.00	0.00	7 500.00	9 600.00	0.00	0.00	0.00	6 500.00	0.00	5 255.60	80 335.60	80	64 268.48	64 268.48	64 268.48
23 - VU	115 500.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	9 247.00	141 347.00	80	113 077.60	113 077.60	113 077.60
24 - RIVM	61 934.96	0.00	0.00	6 000.00	0.00	0.00	0.00	1 987.00	0.00	4 894.54	74 816.50	80	59 853.20	59 853.20	59 853.20
25 - DGS	29 960.28	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	3 259.22	49 819.50	80	39 855.60	39 855.60	39 855.60
26 - ICAD	77 000.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	6 552.00	100 152.00	80	80 121.60	80 121.60	80 121.60
27 - IPMN	41 600.00	0.00	0.00	28 800.00	0.00	0.00	0.00	46 400.00	0.00	8 176.00	124 976.00	80	99 980.80	99 980.80	99 980.80
27.1 - INSP	16 500.00	0.00	0.00	14 400.00	0.00	0.00	0.00	2 200.00	0.00	2 317.00	35 417.00	80	28 333.60	28 333.60	28 333.60
28 - CDU	11 730.00	0.00	0.00	9 600.00	0.00	0.00	0.00	2 000.00	0.00	1 633.10	24 963.10	80	19 970.48	19 970.48	19 970.48
29 - NIJZ	333 663.72	0.00	0.00	22 205.00	0.00	0.00	0.00	31 700.00	0.00	27 129.81	414 698.53	80	331 758.82	331 758.82	331 758.82
30 - ICO	712 302.19	0.00	0.00	31 800.00	0.00	0.00	0.00	31 589.00	0.00	54 298.38	829 989.57	80	663 991.66	663 991.66	663 991.66
30.1 - GENCAT	30 344.18	0.00	0.00	15 600.00	0.00	0.00	0.00	2 200.00	0.00	3 370.09	51 514.27	80	41 211.42	41 211.42	41 211.42
30.2 - IDIBAPS-CERCA	144 960.00	0.00	0.00	10 800.00	0.00	0.00	0.00	10 200.00	0.00	11 617.20	177 577.20	80	142 061.76	142 061.76	142 061.76
31 - IDIS	89 325.58	0.00	0.00	2 400.00	0.00	0.00	0.00	0.00	0.00	6 420.79	98 146.37	80	78 517.10	78 517.10	78 517.10
31.1 - USC	325 880.00	0.00	0.00	21 400.00	0.00	0.00	0.00	21 580.00	0.00	25 820.20	394 680.20	80	315 744.16	315 744.16	315 744.16
31.2 - CSG	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	80	0.00	0.00	0.00
32 - IDIVAL	127 530.00	0.00	0.00	19 200.00	0.00	0.00	0.00	8 200.00	0.00	10 845.10	165 775.10	80	132 620.08	132 620.08	132 620.08
32.1 - SCS	35 510.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2 485.70	37 995.70	80	30 396.56	30 396.56	30 396.56
33 - ASPB	122 390.00	0.00	0.00	19 200.00	0.00	0.00	0.00	2 200.00	0.00	10 065.30	153 855.30	80	123 084.24	123 084.24	123 084.24
33.1 - IRSANTPAU CERCA	154 800.00	0.00	0.00	5 000.00	0.00	0.00	0.00	9 990.00	0.00	11 885.30	181 675.30	80	145 340.24	145 340.24	145 340.24
34 - LUND	175 524.00	0.00	0.00	14 400.00	0.00	0.00	0.00	18 265.00	0.00	14 573.23	222 762.23	80	178 209.78	178 209.78	178 209.78
35 - PHC	171 938.93	0.00	0.00	18 800.00	0.00	0.00	0.00	13 700.32	0.00	14 310.75	218 750.00	80	175 000.00	175 000.00	175 000.00

	Estimated eligible[1] costs (per budget category)											Estimated EU contribution[2]			
	Direct costs									Indirect costs	Total costs	EU contribution to eligible costs			Maximum grant amount[6]
	A. Personnel costs		B. Subcontracting costs	C. Purchase costs					D. Other cost categories	E. Indirect costs[3]		Funding rate %[4]	Maximum EU contribution[5]	Requested EU contribution	
	A.1 Employees (or equivalent) A.2 Natural persons under direct contract A.3 Seconded persons	A.4 SME owners and natural person beneficiaries	B. Subcontracting	C.1 Travel and subsistence			C.2 Equipment	C.3 Other goods, works and services	D.1 Financial support to third parties	E. Indirect costs					
				Travel	Accommodation	Subsistence									
Forms of funding	Actual costs	Unit costs[7]	Actual costs	Unit[7] or actual costs	Unit[7] or actual costs	Unit[7] or actual costs	Actual costs	Actual costs	Actual costs	Flat-rate costs[8]					
	a1	a3	b	c1a	c1b	c1c	c2	c3	d1	e = flat-rate * (a1 + a3 + b + c1a + c1b + c1c + c2 + c3 + d1)	f = a + b + c + d + e	U	g = f * U%	h	m
36 - MoH LUX															
37 - SU															
Σ consortium	12 317 822.66	0.00	787 500.00	892 605.00	0.00	0.00	11 000.00	942 834.78	0.00	1 046 623.38	15 998 385.82		12 798 708.67	12 798 708.67	12 798 708.67

[1] See Article 6 for the eligibility conditions. All amounts must be expressed in EUR (see Article 21 for the conversion rules).
[2] The consortium remains free to decide on a different internal distribution of the EU funding (via the consortium agreement; see Article 7).
[3] Indirect costs already covered by an operating grant (received under any EU funding programme) are ineligible (see Article 6.3). Therefore, a beneficiary/affiliated entity that receives an operating grant during the action duration cannot declare indirect costs for the year(s)/reporting period(s) covered by the operating grant, unless they can demonstrate that the operating grant does not cover any costs of the action. This requires specific accounting tools. Please immediately contact us via the EU Funding & Tenders Portal for details.
[4] See Data Sheet for the funding rate(s).
[5] This is the theoretical amount of the EU contribution to costs, if the reimbursement rate is applied to all the budgeted costs. This theoretical amount is then capped by the 'maximum grant amount'.
[6] The 'maximum grant amount' is the maximum grant amount decided by the EU. It normally corresponds to the requested grant, but may be lower.
[7] See Annex 2a 'Additional information on the estimated budget' for the details (units, cost per unit).
[8] See Data Sheet for the flat-rate.

ANNEX 2a

ADDITIONAL INFORMATION ON UNIT COSTS AND CONTRIBUTIONS

SME owners/natural person beneficiaries without salary

See Additional information on unit costs and contributions (Annex 2a and 2b)

Travel and subsistence

See Additional information on unit costs and contributions (Annex 2a and 2b)

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

SCIENSANO (SCIENSANO), PIC 906160809, established in JULIETTE WYTSMANSTRAAT 14, ELSENE 1050, Belgium,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Christian Léonard with ECAS id n0033s99 signed in the Participant Portal on 23/10/2025 at 17:20:04 (transaction id SigId-17698-sQJxBetfuhi2zW97VEJ27L2NdKhQhHukVscBEzk3nax97PIIzpHJMig6d0F773cCr6D72VkwHYXbndtzWPVkgW8-R2zIpfT8xjMzjWupzYa7V4m-pHzReDIh29Mmmd8cjzSHyWzbDnyQUJ5v5mdqdnvElzZWzkqmLy0VP1X9x5W8O8Wju0RUTEbzLQrrqs68YeZySWj0). Timestamp by third party at 2025.10.23 17:20:08 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

UNIVERZITET U BANJOJ LUCI (UNIBL), PIC 995591705, established in BULEVAR VOJVODE PETRA BOJOVICA 1 A, BANJA LUKA 78000, Bosnia and Herzegovina,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

FEDERAL MINISTRY OF HEALTH (FMZ), PIC 916051608, established in TITOVA 9, SARAJEVO 71000, Bosnia and Herzegovina,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

FARMACEUTSKO DRUSTVO REPUBLIKE SRPSKE (PSRS), PIC 872196162, established in ALEJA SVETOG SAVE BB, BANJA LUKA 78000, Bosnia and Herzegovina,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Natasa Milanovic with ECAS id n00k777r signed in the Participant Portal on 23/10/2025 at 12:26:25 (transaction id SigId-13888-onuqAXC3GTiixIOHU1XqlNpzvNhSEla3Qqo9q3mMmJuy1QTJ8EF9W7UUHrsQp2zUEOM5gxJsTHyFnRCwYCWNlt-R2zIpfT8xjMzjWupzYa7V4m-LTBaMYbwnYbt4jgiC4hZbjs8u2h5qXnuTv0aDQKVK6Z46TNeoh8dREndkZ7BzwtcvETsfoelXOIRnblkRlF2zP). Timestamp by third party at 2025.10.23 12:26:30 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

CYPRUS NATIONAL ADDICTIONS AUTHORITY (NAAC), PIC 893266502, established in 35 IOSIF HADJIOSIF AND ANDREAS AVRAAMIDES 1ST FLOOR, STROVOLOS NICOSIA 2028, Cyprus,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Christos Mina with ECAS id n00598if signed in the Participant Portal on 23/10/2025 at 13:29:11 (transaction id SigId-14555-ozyk5KkW3TnSBpwROa3FDEouY8IZzpRvAf1J6cznZs4NH2Y1EzgPyxO7t4n4pL69JohYFb1pjxsf9zg3mpP0LGC-R2zIpfT8xjMzjWupzYa7V4m-P4ozn4zkKIw8VjP6zJM0LpuNREgV0zrzqeIVnC4jYyL56bal1uBinDnWoe8AmbbCvoolsiElKUo6pP4DFKSlO2D). Timestamp by third party at 2025.10.23 13:29:14 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

STATNI ZDRAVOTNI USTAV (SZU), PIC 999478689, established in Srobarova 48, PRAHA 10 10042, Czechia,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

HRVATSKI ZAVOD ZA JAVNO ZDRAVSTVO (CIPH), PIC 998128255, established in ROCKEFELLEROVA 7, ZAGREB 10000, Croatia,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

AARHUS KOMMUNE (AAKS), PIC 992597994, established in RADHUSPLADSEN 2, ARHUS C 8100, Denmark,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Sonja HANSEN with ECAS id nhanssnj signed in the Participant Portal on 23/10/2025 at 13:20:27 (transaction id SigId-14455-XPN0n65tTYmOiCiVIPQrP3zjYnKiraM9NcAFLHEnze52GgcoSD0zPkZSjJbumeoTUMAznl4IVFnk9SSckX4RhEK-R2zIpfT8xjMzjWupzYa7V4m-fL4DAR9FYq1o3OMyp8AtqVYZtKjx59tGS4vzMGAaE1sgH868RRRwO2NaGr0zXS8KjiVQl2su9J6SKkelEOi659). Timestamp by third party at 2025.10.23 13:20:30 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

REGION SYDDANMARK (UHSD), PIC 999602073, established in DAMHAVEN 12, VEJLE 7100, Denmark,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

REGION SJAELLAND (RZ), PIC 998373665, established in ALLEEN 15, SOROE 4180, Denmark,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

TERVISE ARENGU INSTITUUT (TAI), PIC 997543539, established in PALDISKI MNT 80, TALLINN 10617, Estonia,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

TERVEYDEN JA HYVINVOINNIN LAITOS (THL), PIC 996697893, established in MANNERHEIMINTIE 166, HELSINKI 00271, Finland,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Mika SALMINEN with ECAS id nsalmmka signed in the Participant Portal on 23/10/2025 at 16:10:35 (transaction id SigId-16802-KJffcO4D97coZ4McnMwfzQfptVduEDlNMv21v0zzaKDTghGi9VENtmJ0eW82lmGV1ZG6fRNVguyhqIAPA16183G-R2zIpfT8xjMzjWupzYa7V4m-eozhLmm4v0gKvN2sOVobMSLISYSGaLmqMvr6PgjxDbCUPfHZrUucCJpgXwlw6FW2e8APXp0wJilIWm1dodeMmy). Timestamp by third party at 2025.10.23 16:10:41 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

MINISTRE DE LA SANTE ET DE L'ACCES AUX SOINS (MoH FR), PIC 998887377, established in AVENUE DUQUESNE 14, PARIS CEDEX 75350, France,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

TobaccoFree Research Institute Ireland LBG (TFRI), PIC 997995947, established in 18 HUME STREET, DUBLIN 2 D02 WE19, Ireland,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Luke CLANCY with ECAS id nclanclu signed in the Participant Portal on 23/10/2025 at 18:00:34 (transaction id SigId-18012-WN1GQd2BzucnsENnIX2It5j8Uef5eIcr7UdWFLFgGWYIF4uzS1HcziyasS5R8rP870Y3XTYOeseIlyenE1ujOnG-R2zIpfT8xjMzjWupzYa7V4m-ddSlyWB7gibFzlek44xSjSyDw4GD7sXBBUYGgATfyTzxCRLfZ9GUtVizhfu6lcb05d1sjvZo4Z1rqVTcB75lBIW). Timestamp by third party at 2025.10.23 18:00:38 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

ETHNIKOS ORGANISMOS DIMOSIAS YGEIAS (NPHO), PIC 896563726, established in 3-5 AGRAFON ST., ATHENS 151 23, Greece,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

ORSZAGOS KORANYI PULMONOLOGIAI INTEZET (NKIP), PIC 999554543, established in KORANYI FRIGYES UT 1, BUDAPEST 1121, Hungary,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Krisztina BOGOS with ECAS id n0045xnj signed in the Participant Portal on 23/10/2025 at 19:24:49 (transaction id SigId-18460-so8kS2tDkdOK4ZHZLiyPptdDD41RpNW2duLyRYQnyCxmQcLHK3qFhfT1XlxE9B09vNTzXS7IWMJuDPPszcyZYE-R2zIpfT8xjMzjWupzYa7V4m-X3zenGBKKDduGra91x740XqFu6AKza2PswtDgWu1ItFHO4SzYY887pS3OLgm7JaBeNePWqtjjhAcgTbcckUqzna). Timestamp by third party at 2025.10.23 20:25:00 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

ISTITUTO SUPERIORE DI SANITA (ISS), PIC 999978821, established in Viale Regina Elena 299, ROMA 00161, Italy,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

RIGAS STRADINA UNIVERSITATE (RSU), PIC 999843118, established in Dzirciema street 16, RIGA 1007, Latvia,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

LIETUVOS SVEIKATOS MOKSLU UNIVERSITETAS (LSMU), PIC 972782446, established in A MICKEVICIAUS GATVE 9, KAUNAS 44307, Lithuania,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

LIETUVOS RESPUBLIKOS SVEIKATOS APSAUGOS MINISTERIJA (SAM LT), PIC 933839468, established in VILNIAUS G 33, VILNIUS LT 01506, Lithuania,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Audrone ASTRAUSKIENE with ECAS id nastraau signed in the Participant Portal on 23/10/2025 at 13:14:44 (transaction id SigId-14398-9bDqFzjXlqVPyJzzyoZzbPfQtn1k0XU9TcmcSWGwmiZf0FGZc0fEzNy6zzOyblMLQhc9LKIZ4TzaB99a8oD8dsZl-R2zIpfT8xjMzjWupzYa7V4m-ZBn87ui2K93mdgH2fuZzRH49RKdaVOIsUtCjbixqliZBSVSArVm5dfaEX6LX3B5OLHyOVdYzbpCkfzHGWkzuGxa). Timestamp by third party at 2025.10.23 13:14:47 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

NACIONALINIS VEZIO INSTITUTAS (NVI), PIC 912763114, established in SANTARISKIU STR. 1, VILNIUS 08660, Lithuania,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Valdas Peceliunas with ECAS id n00enexs signed in the Participant Portal on 24/10/2025 at 05:14:32 (transaction id SigId-18884-CZE3o4uSY87Zb5LS792QS4upYM52muGV3AE6fdxa3xZNSazpa79MJlk5V5LzagWg2SjZMg9xuXEIcYOjuIXdLF-R2zIpfT8xjMzjWupzYa7V4m-U2dD12eFthIdc3zqVDJ5lDZEoszOziErVoSkEj8LWk2m3BgWqx1RKKuX4VncbHs2XWA0u7JGufP4Bsdq5CJzpEm). Timestamp by third party at 2025.10.24 05:14:37 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

VILNIAUS UNIVERSITETAS (VU), PIC 999893170, established in UNIVERSITETO G. 3, VILNIUS 01513, Lithuania,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Vida LAPINSKAITE with ECAS id nlapinvi signed in the Participant Portal on 23/10/2025 at 12:37:23 (transaction id SigId-14028-HMOQNGHzKMnNznbru3fNkzfgoixzdgZY77sKxW9pCrcQUQH5rdLzxgrfkfJmkt7dJmktNdzw1C5QDiI91HZJLOxm-R2zIpfT8xjMzjWupzYa7V4m-ldsNvmiOT4zmyF3o9zi46dzTMdcsKuJRVXpXzuZ4umRg2ROAbyGRiPEgNIAxVmOS15jrST9pvMmczXzQmdOuduo0). Timestamp by third party at 2025.10.23 12:37:27 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

RIJKSINSTITUUT VOOR VOLKSGEZONDHEID EN MILIEU (RIVM), PIC 999991431, established in Antonie Van Leeuwenhoeklaan 9, BILTHOVEN 3721 MA, Netherlands,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

MINISTERIO DA SAUDE (DGS), PIC 986364095, established in Av. João Crisóstomo, 9, LISBOA 1049-062, Portugal,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

INSTITUTO PARA OS COMPORTAMENTOS ADITIVOS E AS DEPENDENCIAS, IP (ICAD), PIC 877389833, established in PARQUE DE SAUDE POLIDO VALENTE ALAMEDA DAS LINHAS DE TORRES N.117 ED. ICAD, LISBOA 1750-147, Portugal,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

INSTITUTUL DE PNEUMOFTIZIOLOGIE MARIUS NASTA (IPMN), PIC 997406575, established in SOSEAUA VIILOR 90 SECTOR 5, BUCURESTI 050159, Romania,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

UNIVERSITATEA DE MEDICINA SI FARMACIE CAROL DAVILA DIN BUCURESTI (CDU), PIC 999875613, established in DIONISIE LUPU 37, BUCURESTI 020021, Romania,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

NACIONALNI INSTITUT ZA JAVNO ZDRAVJE (NIJZ), PIC 948891346, established in TRUBARJEVA CESTA 2, LJUBLJANA 1000, Slovenia,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Branko GABROVEC with ECAS id ngabbran signed in the Participant Portal on 23/10/2025 at 12:58:02 (transaction id SigId-14235-JMzJ68sBB2zuKvmpQTIF7jcFovQe5izHaGdPwCOku13XUhzgsmdCQqMMRbaQbXjCUTsJSqLGFfbntOY60jKP0Si-R2zIpfT8xjMzjWupzYa7V4m-YVgTvomugVusPaJO4Un6UVfbC1Cj4ypcZ1yn8QtUujGiWxMcc72UykE0N18WzOzeVGJztWezNbTyx47wHTSL1Sa). Timestamp by third party at 2025.10.23 12:58:07 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

INSTITUT CATALA D'ONCOLOGIA (ICO), PIC 998420031, established in AV GRAN VIA DE L'HOSPITALET 199-203, L'HOSPITALET DEL LLOBREGAT 08908, Spain,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

FUNDACION PUBLICA GALEGA INSTITUTO DE INVESTIGACION SANITARIA DE SANTIAGO DE COMPOSTELA (IDIS), PIC 986488255, established in TRAVESA DA CHOUPANA, SANTIAGO DE COMPOSTELA 15706, Spain,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Isabel Lista García with ECAS id n002w7kn signed in the Participant Portal on 23/10/2025 at 14:10:29 (transaction id SigId-14969-Fzm756XP3Rlv1BaxUFKqynYDxFdHP1SFbAgfyGZ43d0ilQFSXsFWQmhvjqcqJ5eAvM68tH6JWgJnQgeepIl4Be-R2zIpfT8xjMzjWupzYa7V4m-zozhbmgzllhX84qy68qzubxOzl8zX4yYhAkGBfiO9BmQ3BAdLGRc7kSeab8e1Zphp581fgL4rHzS1YzRZ9phxnIK). Timestamp by third party at 2025.10.23 14:10:33 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

FUNDACION INSTITUTO DE INVESTIGACION MARQUES DE VALDECILLA (IDIVAL), PIC 946556944, established in AVENIDA CARDENAL HERRERA ORIA S N, SANTANDER 39011, Spain,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

Agencia de Salut Publica de Barcelona (ASPB), PIC 983180264, established in Plaça Lesseps 1, Barcelona 08023, Spain,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Joan Ramon Villalbí with ECAS id n00jz7qd signed in the Participant Portal on 23/10/2025 at 13:43:16 (transaction id SigId-14688-2LCSxO38Kac3JatY5ftJa8iI7EqKB9fTyVrYYkFbrhXeeRyd4zR72ebHvSszMA2MbZe7zXjI5H5s6tpUIZ8CUzW-R2zIpfT8xjMzjWupzYa7V4m-CNxmqrMr8wVmTqijpC4sCeil7RmtOe3KSPczHEGk4ZGsNOBG2WuY1KcBMuyFTDXvX0a9TEDaPJB5lLcDJVodx8). Timestamp by third party at 2025.10.23 13:43:22 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

REGION SKANE (LUND), PIC 998165794, established in REGION SKANE, KRISTIANSTAD 291 89, Sweden,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

Gavyn Edmunds with ECAS id n0038mm5 signed in the Participant Portal on 23/10/2025 at 12:53:54 (transaction id SigId-14189-CTInB QthmJdiSq2AritpDbzUqfdf87kzg0MmAlHyhoyp1cgDzTrzVP8Cb0ozG tVFTLQ8jp2WayGbXr9wJujKbCT-R2zIpfT8xjMzjWupzYa7V4m-VG4b5 XNigNMP800ag0vOJoOWYVMJX4U5PbixPqo3xanJ7iqbyLXnIQaDOFT MwcLc0W4zSDCmohluUsgCzuXjtw). Timestamp by third party at 2025.10.23 12:53:58 CEST

ANNEX 3

ACCESSION FORM FOR BENEFICIARIES

STATE INSTITUTION PUBLIC HEALTH CENTER OF THE MINISTRY OF HEALTH OF UKRAINE (PHC), PIC 906650465, established in 41 YAROSLAVSKA STR, KYIV 04071, Ukraine,

hereby agrees

to become beneficiary

in Agreement No 101233428 — JA-SAFE ('the Agreement')

between ETHNIKO KAI KAPODISTRIAKO PANEPISTIMIO ATHINON (UOA) **and** the **European Health and Digital Executive Agency (HADEA)** ('EU executive agency' or 'granting authority'), under the powers delegated by the European Commission ('European Commission'),

and mandates

the coordinator to submit and sign in its name and on its behalf any **amendments** to the Agreement, in accordance with Article 39.

By signing this accession form, the beneficiary accepts the grant and agrees to implement it in accordance with the Agreement, with all the obligations and terms and conditions it sets out.

SIGNATURE

For the beneficiary

FINANCIAL STATEMENT FOR [PARTICIPANT NAME] FOR REPORTING PERIOD [NUMBER]

	Eligible[1] costs (per budget category)											EU contribution[2]				Revenues
	Direct costs									Indirect costs	Total costs	EU contribution to eligible costs			Total requested EU contribution	Income generated by the action
	A. Personnel costs		B. Subcontracting costs	C. Purchase costs					D. Other cost categories	E. Indirect costs[2]		Funding rate %[3]	Maximum EU contribution[4]	Requested EU contribution		
	A.1 Employees (or equivalent) A.2 Natural persons under direct contract A.3 Seconded persons	A.4 SME owners and natural person beneficiaries	B. Subcontracting	C.1 Travel and subsistence			C.2 Equipment	C.3 Other goods, works and services	D.X Financial support to third parties	E. Indirect costs						
				Travel	Accommodation	Subsistence										
Forms of funding	Actual costs	Unit costs[5]	Actual costs	Unit[5] or actual costs	Unit[5] or actual costs	Unit[5] or actual costs	Actual costs	Actual costs	Actual costs	Flat-rate costs[6]						
	a1	a3	b	c1a	c1b	c1c	c2	c3	d1a	e = flat-rate * (a1 + a3 + b + c1a + c1b + c1c + c2 + c3 + d1a)	f = a+b+c+d+e	U	g = f*U%	h	m	n
XX – [short name beneficiary/affiliated entity]																

The beneficiary/affiliated entity hereby confirms that:

The information provided is complete, reliable and true.

The costs and contributions declared are eligible (see Article 6).

The costs and contributions can be substantiated by adequate records and supporting documentation that will be produced upon request or in the context of checks, reviews, audits and investigations (see Articles 19, 20 and 25).

For the last reporting period: that all the revenues have been declared (see Article 22).

ⓘ Please declare all eligible costs and contributions, even if they exceed the amounts indicated in the estimated budget (see Annex 2). Only amounts that were declared in your individual financial statements can be taken into account lateron, in order to replace costs/contributions that are found to be ineligible.

[1] See Article 6 for the eligibility conditions. All amounts must be expressed in EUR (see Article 21 for the conversion rules).

[2] If you have also received an EU operating grant during this reporting period, you cannot claim indirect costs - unless you can demonstrate that the operating grant does not cover any costs of the action. This requires specific accounting tools. Please contact us immediately via the Funding & Tenders Portal for details.

[3] See Data Sheet for the reimbursement rate(s).

[4] This is the *theoretical* amount of EU contribution to costs that the system calculates automatically (by multiplying the reimbursement rates by the costs declared). The amount you request (in the column 'requested EU contribution') may be less.

[5] See Annex 2a 'Additional information on the estimated budget' for the details (units, cost per unit).

[6] See Data Sheet for the flat-rate.

ANNEX 5

SPECIFIC RULES

ETHICS (— ARTICLE 14)

Ethics

Actions involving activities raising ethics issues must be carried out in compliance with:

- ethical principles

and

- applicable EU, international or national law, including Directive 2005/28[1] and Regulation 536/2014[2] .

The beneficiaries must pay particular attention to the principle of proportionality, the right to privacy, the right to the protection of personal data, the right to the physical and mental integrity of a person, the right to non-discrimination, the need to ensure protection of the environment and high levels of human health protection.

Before the beginning of an action task raising an ethical issue, the beneficiaries must have obtained all approvals or other mandatory documents needed for implementing the task, notably from any (national or local) ethics committee or other bodies such as data protection authorities.

The documents must be kept on file and be submitted upon request by the coordinator to the granting authority. If they are not in English, they must be submitted together with an English summary, which shows that the documents cover the action tasks in question and includes the conclusions of the committee or authority concerned (if any).

INTELLECTUAL PROPERTY RIGHTS (IPR) — BACKGROUND AND RESULTS — ACCESS RIGHTS AND RIGHTS OF USE (— ARTICLE 16)

List of background

The beneficiaries must, where industrial and intellectual property rights (including rights of third parties) exist prior to the Agreement, establish a list of these pre-existing industrial and intellectual property rights, specifying the rights owners.

The coordinator must — before starting the action — submit this list to the granting authority.

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[1] Commission Directive 2005/28/EC of 8 April 2005 laying down principles and detailed guidelines for good clinical practice as regards investigational medicinal products for human use, as well as the requirements for authorisation of the manufacturing or importation of such products (OJ L 91, 9.4.2005, p. 13).

[2] Regulation (EU) No 536/2014 of the European Parliament and of the Council of 16 April 2014 on clinical trials on medicinal products for human use, and repealing Directive 2001/20/EC (OJ L 158, 27.5.2014, p. 1).

Rights of use of the granting authority on results for information, communication, dissemination and publicity purposes

The granting authority also has the right to exploit non-sensitive results of the action for information, communication, dissemination and publicity purposes, using any of the following modes:

- **use for its own purposes** (in particular, making them available to persons working for the granting authority or any other EU service (including institutions, bodies, offices, agencies, etc.) or EU Member State institution or body; copying or reproducing them in whole or in part, in unlimited numbers; and communication through press information services)

- **distribution to the public** in hard copies, in electronic or digital format, on the internet including social networks, as a downloadable or non-downloadable file

- **editing** or **redrafting** (including shortening, summarising, changing, correcting, cutting, inserting elements (e.g. meta-data, legends or other graphic, visual, audio or text elements extracting parts (e.g. audio or video files), dividing into parts or use in a compilation

- **translation** (including inserting subtitles/dubbing) in all official languages of EU

- **storage** in paper, electronic or other form

- **archiving** in line with applicable document-management rules

- the right to authorise **third parties** to act on its behalf or sub-license to third parties, including if there is licensed background, any of the rights or modes of exploitation set out in this provision

- **processing**, analysing, aggregating the results and **producing derivative works**

- **disseminating** the results in widely accessible databases or indexes (such as through ‘open access’ or ‘open data’ portals or similar repositories, whether free of charge or not.

The beneficiaries must ensure these rights of use for the whole duration they are protected by industrial or intellectual property rights.

If results are subject to moral rights or third party rights (including intellectual property rights or rights of natural persons on their image and voice), the beneficiaries must ensure that they comply with their obligations under this Agreement (in particular, by obtaining the necessary licences and authorisations from the rights holders concerned).

Access rights for the granting authority, EU institutions, bodies, offices or agencies and national authorities to results for policy purposes

The beneficiaries must grant access to their results — on a royalty-free basis — to the granting authority, other EU institutions, bodies, offices or agencies, for developing, implementing and monitoring EU policies or programmes.

Such access rights are limited to non-commercial and non-competitive use.

The access rights also extend to national authorities of EU Member States or associated countries, for developing, implementing and monitoring their policies or programmes in this area. In this case, access is subject to a bilateral agreement to define specific conditions ensuring that:

- the access will be used only for the intended purpose and
- appropriate confidentiality obligations are in place.

Moreover, the requesting national authority or EU institution, body, office or agency (including the granting authority) must inform all other national authorities of such a request.

Access rights for third parties to ensure continuity and interoperability

Where the call conditions impose continuity or interoperability obligations, the beneficiaries must make the materials, documents and information and results produced in the framework of the action available to the public (freely accessible on the Internet under open licences or open source licences).

COMMUNICATION, DISSEMINATION AND VISIBILITY (— ARTICLE 17)

Communication and dissemination plan

The beneficiaries must provide a detailed communication and dissemination plan, setting out the objectives, key messaging, target audiences, communication channels, social media plan, planned budget and relevant indicators for monitoring and evaluation.

Additional communication and dissemination activities

The beneficiaries must engage in the following additional communication and dissemination activities:

- **present the project** (including project summary, coordinator contact details, list of participants, European flag and funding statement and project results) on the beneficiaries' **websites** or **social media accounts**
- for actions involving **publications**, mention the action and the European flag and funding statement on the cover or the first pages following the editor's mention
- for actions involving public **events**, display signs and posters mentioning the action and the European flag and funding statement
- upload the public **project results** to the EU4Health Project Results platform, available through the Funding & Tenders Portal .

SPECIFIC RULES FOR CARRYING OUT THE ACTION (— ARTICLE 18)

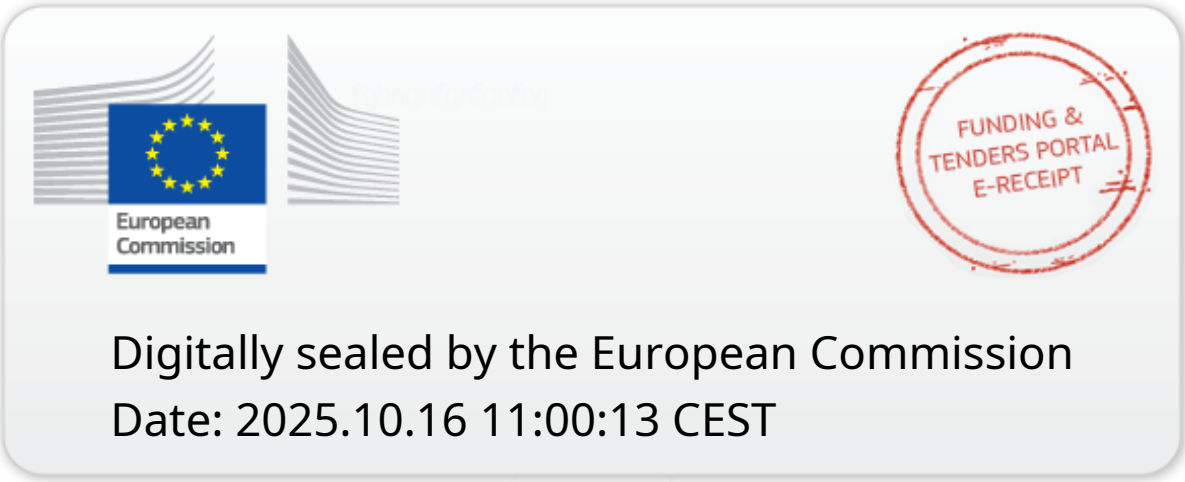
Durability

Unless exempted by the granting authority, the beneficiaries must commit to continue to use and maintain after the end of the action equipment bought and eligible at full cost, for activities pursuing the action's objectives. Such equipment must be used for these purposes — for at least five years after the end of the action (see Data Sheet, Point 1) or until the end of its economic lifespan (i.e. until it has been fully depreciated) — whichever is earlier.

Specific rules for blending operations

When implementing blending operations, the beneficiaries acknowledge and accept that:

- the grant depends on the approved financing from the Implementing Partner and/or public or private investors for the project
- they must inform the granting authority both about the approval for financing and the financial close — within 15 days
- the payment deadline for the first prefinancing is automatically suspended until the granting authority is informed about the approval for financing
- both actions will be managed and monitored in parallel and in close coordination with the Implementing Partner, in particular:
    - all information, data and documents (including the due diligence by the Implementing Partner and the signed agreement) may be exchanged and may be relied on for the management of the other action (if needed)
    - issues in one action may impact the other (e.g. suspension or termination in one action may lead to suspension also of the other action; termination of the grant will normally suspend and exit from further financing and vice versa, etc.)
- the granting authority may disclose confidential information also to the Implementing Partner.



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