

3. OPTIMISING THE DELIVERY OF HEALTH CARE TO EUROPEAN CITIZENS

This activity aims at developing new research methods and generating the necessary scientific basis to underpin informed policy decisions on health systems and more effective and efficient evidence-based strategies of health promotion, disease prevention, diagnosis and therapy. It is recognised that the health systems of the EU are a central part of Europe's high levels of social protection and contribute to social cohesion and social justice as well as to sustainable development. The health systems of the EU reflect the overarching values of universality, access to good health care, equity and solidarity, aiming to make provision that is patient-centred and responsive to individual need. The principal target users of new knowledge within the Commission include the Directorate-General for Health and Consumer protection and the Directorate-General for Employment, Social Affairs and Equal Opportunities and also the Directorate-General for Development and the Directorate-General for EuropeAid. In particular the research undertaken will generate the scientific evidence to meet the objectives of the proposed new Programme of Community Action in the field of Health (2007-2013).

The principal targeted users outside the Commission include the Member States (Health Ministries and Public Health Institutes), the World Health Organization (WHO) (both Headquarters and the Regional Office for Europe), the Organization for Economic Cooperation & Development (OECD) as well as clinicians, service providers, patients and other stakeholders.

Important notice: This activity is complemented by work in the Themes Information & Communication Technologies and Food, Agriculture and fisheries, Biotechnology of the Cooperation Programme. Therefore it excludes support for proposals where the predominant activity is the development or application of new information, communication technologies or proposals where the predominant activity is food or nutrition related research.

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

In contrast to Activity 2, the 'translation of research' in Area 3.1 is understood to take a general approach across diseases and not be disease-specific. Topics under this area will address issues that are fundamental for the improvement of quality of health services as such. However, it will be possible for proposals to focus on a particular disease if the findings are expected to have an impact on service provision for other diseases or conditions as well. Research will primarily focus on improving the use of interventions and products that are already evidence-based and not on the development and validation of such interventions or products.

Special attention will be given to patient safety, including adverse effects of medication: to identify the best clinical practice; to understand decision making in clinical settings in primary and specialised care; and to foster applications of evidence-based medicine and patient empowerment. Focus will be on the scientific benchmarking of strategies; investigating outcomes of different interventions including medicines, scientifically tested complementary and alternative medicines, and new health therapies and technologies taking into consideration prescription strategies, some aspects of pharmacovigilance evidence, specificities of the patient (e.g. genetic susceptibility, age, gender and adherence) and cost benefits.

Expected impact: Projects should advance the application of evidence-based medicine in Europe.

The improved use of clinical research findings in clinical diagnosis and treatment as well as patient self-management of disease should be demonstrated and the cooperation between researchers in Europe and other geographic regions enhanced to promote integration and excellence of European research in the area. Findings should be scientifically validated in different settings and be applicable beyond the national level. Scientific methodologies that allow tools for benchmarking and comparative analysis at the European level will be considered an asset.

Topics for single-stage submission and evaluation; deadline 3 December 2008:

- **HEALTH-2009-3.1-2: Improve quality and safety of hospital care. FP7-HEALTH-2009-single-stage.** Study the relationship of organisational quality management and culture, professionals' involvement, and patient empowerment with the quality of hospital care, including clinical effectiveness, patient safety and patient involvement. Identify organisational and cultural characteristics of hospitals and professional- and patient-related tools that are associated with better quality of care. This research should serve to guide hospitals to develop their own effective safety and quality improvement programmes and provide the basis for assessing hospital quality of care by purchasers and national and local governments.

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