# PIONEERS IN HEALTHCARE INNOVATION FUND 2024 – RESEARCH PROPOSAL

* *Please see the* [*PIHC website*](https://www.utwente.nl/en/techmed/innovation/funds-vouchers/pioneers-in-healthcare/vouchers-submission/) *(‘Vouchers and timeline’) for the “Fondsvoorwaarden” and more information.*
* *Language – Dutch in Dutch format, or English in English format (title, keywords and summary in both English and Dutch).*
* *Layout – Word file (do not submit as pdf), max. 1,5+3,5 A4, font Arial, font size 10, include max. 1 figure and 1 table.*
* *Remove explanation or examples in italic, including this text.*
* *To add a cross to the check boxes: double click, or place cursor in front of the box and press space bar.*
* *Name your document: PIHC2024-TECH\_[last name main applicant].doc or PIHC2024-APPL\_[last name main applicant].doc.*
* *Deadline Monday afternoon 21 October 2024, 12.00h. Submit your proposal and budget* [*online*](https://www.utwente.nl/en/business/research-education/innovation-programmes/pioneers-in-healthcare/submit-proposal/#who-can-apply)*.*

**GENERAL INFORMATION (MAX 1,5 A4)**

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| **Voucher type** | [ ]  Technological pioneering in healthcare | [ ]  Applying technology in healthcare |
| **Titel**  |
| *Kort en bondig, max 1 regel* |
| **Trefwoorden** |  |  |  |  |
| **Title**  |
| *Concise, max 1 line* |
| **Keywords** |  |  |  |  |

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| **Main applicant**  |
| *Title, first and last name, position, department, organisation, e-mail address, phone number e.g. Dr. ir. Jan Jansen, associate professor, group ABC, UT, j.jansen@utwente.nl, 053-489000* |
| **Co-applicants**  |
| *Title, first and last name, position, department, organisation e.g. Dr. Jane Smith, cardiologist, cardiology, MST*  |

*NB: The role of each applicant will be described under plan of action*

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| **Publieke samenvatting voor publicatie op website en persberichten**  |
| *Max 100 woorden* |
| **Public summary to be published online and in press releases** |
| *Max 100 words* |

**CURRENT PIHC INVOLVEMENT**

*Researchers or clinicians, who have previously been granted a PIHC voucher, can only apply for a new voucher when they start a new collaboration, use a new technology or explore a new application (so not a continuation of the previous PIHC voucher), and when the previous project has been or is being carried out successfully.*

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| **Applicants previously granted a PIHC voucher**  |
| *Name applicant, proposal plus year, status of project, e.g. Susan Peterson: PIHC2018 voucher ‘Improving xxx by yyy’, end report submitted, research continued with zzz grant* |
| **Resubmission of previously non-awarded proposal**  | [ ]  yes | [ ]  no |
| **New technology, similar application (e.g. disease)** | [ ]  yes | [ ]  no |
| **Similar technology, new application** | [ ]  yes | [ ]  no |

# PIHC2024 – research Proposal (MAX 3,5 A4)

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| **Clinical and societal relevance** |
| *Describe your research question, the urgency of the problem, the current standard approach (and its ineffectiveness), why you propose your solution over other alternatives (that are being developed), who shall use the technology (clinician, nurse, general practitioner, patient, other) and who will benefit from this solution (patient, health care provider, other)* |
| **Challenge** |
| *Explain your choice of voucher type: why does your proposal fit either ‘Technological pioneering in healthcare’ or ‘Applying technology in healthcare’.* *Describe the challenges and indicate what is new and pioneering. Especially for an already existing collaboration or research line, or with already existing technology (e.g. VR) or in a field in which a lot of new technology is being developed (e.g. AI), it must be clear why seed funding is required for the project:** *For voucher ‘Technological pioneering in healthcare’: describe what new technology will be developed and what the technological-scientific challenge is*
* *For voucher ‘Applying technology in healthcare’: describe how existing technology will be (adjusted and) used for a new application described under clinical and societal relevance.*
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| **Synergy between technological an clinical partners (1+1=3)** |
| *Contact relevant groups at all other PIHC partners. Explain why other PIHC partners aren’t involved in this project (yet). Especially for existing collaborations, we strongly advise you to include new PIHC partners (for example expand existing UT-MST collaboration to UT-Saxion-MST or UT-MST-DZ).**Describe the contribution of each partner and argument that the role of each partner is essential within this collaboration, in order for this project to run successfully.* |
| **Plan of action (incl. study design, timeframe and budget)** |
| *Describe the study design, sample size, outcome measures, statistical analyses, the role/tasks of each applicant and (new) project members within the project, timeline (what is realistic in a year, e.g. consider the time and effort it takes for getting METC approval, especially for multicentre studies) and budget (what’s needed regarding personnel, materials, tests etc.),*  |
| **Expected (short term) milestones, results and output of the project (within 1-1½ years)** |
| *Milestone and results to be achieved within the project: development stage of new technology, adjustments of existing technology, prototype, patient study.**Output: presentation/poster at a conference, papers, student projects, patent application, workshop, media coverage (e.g. in magazine, newspaper).*  |
| **Long term collaboration of consortium, continuation of project** |
| *Describe how to continue after the seed funding. What are the next steps?* * *The collaboration is a logical fit of expertise and research lines (and therefore will be successful and sustainable). The collaboration will be expanded during or after the project for successful further development or implementation.*
* *Expected submission for additional funding to continue project, research will become part of larger research program, results will be applied in other hospitals etc.*
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| **Impact on healthcare and long-term outcome** |
| *Describe expected impact upon further development of technology or implementation of technology in healthcare e.g. health gain, cost savings, more efficient processes and quality improvement (Value Based Health Care), size of the patient population or importance for a specific disease, incorporation in clinical guidelines, and when impact can be expected.* |
| **(Potential for) valorisation or implementation** |
| *Which stakeholders and what steps are required for valorisation or implementation and are they already included in this or the next phase of your project?* *Valorisation: What is the (expected) TRL level at the start and the end of the project, can the developed technology protected by patent, will a business plan be written, is SME/industry included in consortium, or can the consortium be extended with partners relevant for valorisation.**Implementation: Describe the steps to investigate/validate if your solution has added value over current treatment and how to overcome potential implementation barriers, e.g. clinical studies and associated regulatory requirements, time and cost reduction and efficiency, acceptance by health insurers, healthcare providers and/or patients.*  |

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| **References (max. 5)** |
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| **Budget plan**  | [ ]  Fill out the format and upload separately |
| *For an explanation, see the “Fondsvoorwaarden” or the excel file for the budget.**In this document, explain “noteworthy” budgeting, for example when the majority of the budget goes to 1 partner.* |