**PARTNERSHIP FICHE: Innovative Health Initiative**

**MISSION AND VISION STATEMENT**

The Innovative Health Initiative (IHI) is a new joint undertaking under Horizon Europe. It will fund cross-sectoral collaboration in pre-competitive health research and innovation, involving patients, academia, healthcare professionals, healthcare delivery organisations, regulators, and pharmaceutical, medical technology and digital health companies.

The IHI intends to contribute to:

- help create an EU-wide health research and innovation ecosystem that facilitates translation of scientific knowledge into innovations;
- foster the development of safe, effective, people-centric and cost-effective innovations that respond to strategic unmet public health needs;
- drive cross-sectoral health innovation for a globally competitive European health industry.

IHI will cover the entire continuum of care, from prevention, diagnostics, to treatment and disease management.

* IHI general objectives, SBA, article 1.4.1 of the Framework of the proposal/initiative, p. 224

**KEY FACTS AND FIGURES**

**Horizon Europe Pillar and Cluster:** Pillar II – Cluster 1: Health

**Type of Partnership:** Institutionalised (Art 187 TFEU) – joint undertaking

**Name of coordinating entity:** The IHI industry partners are COCIR, EFPIA including Vaccines Europe, EuropaBio and MedTech Europe

**Total estimated budget:** EUR 2.4 bn

**EU commitments:** up to EUR 1.2 bn

**Partners’ commitments:** EUR 1.2 bn*

**Predecessor under Horizon 2020:** Innovative Medicine Initiative (IMI1 and IMI2)

* Out of which the members of the JU are expected to contribute at least EUR 1 bn and contributing partners EUR 200 m.

**FIND OUT MORE**

http://www.ihi.europa.eu/

https://www.linkedin.com/company/innovative-health-initiative/

https://twitter.com/IHIEurope

https://www.youtube.com/c/TheInnovativeHealthInitiative

infodesk@ihi.europa.eu
**IHI Vision:** Contribute to societal challenges through...

**UN SDG #3: Ensure healthy lives**
- Translate knowledge into innovations*

**UN SDG #9: Sustainable industry & innovation**
- Innovation addressing public health needs**

**WHO Health 2020: European policy for health and well-being**
- Competitive EU health industry***

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**General Level Impacts**
- Understand health determinants and disease areas
- Knowledge generation and sharing via joint publications
- Improved clinical guidelines

**Specific Level Outcomes**
- People-centred integrated health care solutions
- Health care data management, integration, AI

**Operational Level Resources & Actions**
- Multi-stakeholder involvement
- Cross-sector collaboration
- Engagement with regulators
- Agility of processes

*General Objective 1: Contribute to the creation of an EU-wide health research and innovation ecosystem that facilitates translation of scientific knowledge into innovations
**General Objective 2: Foster the development of safe, effective, people-centric and cost-effective innovations that respond to strategic unmet public health needs
***General Objective 3: Drive cross-sectoral health innovation for a globally competitive European health industry*
## PARTNERSHIP’S KEY PERFORMANCE INDICATORS

<table>
<thead>
<tr>
<th>KPI NAME</th>
<th>UNIT OF MEASUREMENT</th>
<th>BASELINE</th>
<th>TARGET 2023</th>
<th>TARGET 2025</th>
<th>TARGET 2027</th>
<th>AMBITION &gt;2027</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RESOURCES (INPUT), PROCESSES AND ACTIVITIES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health care stakeholder involvement</td>
<td>% projects involving &gt; 2 types of stakeholders</td>
<td>50 %</td>
<td>55 %</td>
<td>60 %</td>
<td>65 %</td>
<td>70 %</td>
</tr>
<tr>
<td>Cross-sectoriality</td>
<td>% projects with private members from min. 2 technology sectors</td>
<td>25 %</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD</td>
<td>TBD*</td>
</tr>
<tr>
<td>Regulator engagement</td>
<td># projects interacting with regulators¹</td>
<td>13</td>
<td>0</td>
<td>5</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td><strong>OUTCOMES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Multi-stakeholders’ collaboration</td>
<td>% publications</td>
<td>65 %</td>
<td>65 %</td>
<td>66 %</td>
<td>67 %</td>
<td>70 %</td>
</tr>
<tr>
<td>Public-private collaboration</td>
<td>% publications</td>
<td>65 %</td>
<td>65 %</td>
<td>66 %</td>
<td>67 %</td>
<td>70 %</td>
</tr>
<tr>
<td>Project outputs for use in clinical practice and health R&amp;D&amp;I</td>
<td># new tools, biomarkers, taxonomies</td>
<td>100</td>
<td>10</td>
<td>50</td>
<td>120</td>
<td>150</td>
</tr>
<tr>
<td>Integrated health care solutions</td>
<td># examples of people-centred, integrated project outputs</td>
<td>N/A</td>
<td>0</td>
<td>3</td>
<td>7</td>
<td>10</td>
</tr>
<tr>
<td>Value assessment of integrated solutions</td>
<td># methodologies submitted to health care authorities and organisations</td>
<td>N/A</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>New or improved clinical guidelines</td>
<td># contributing projects</td>
<td>13</td>
<td>0</td>
<td>5</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Health data management</td>
<td># common standards, protocols and frameworks</td>
<td>N/A</td>
<td>0</td>
<td>3</td>
<td>7</td>
<td>10</td>
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<tr>
<td>Data integration demonstration</td>
<td># pilots</td>
<td>N/A</td>
<td>0</td>
<td>5</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>AI feasibility in healthcare</td>
<td># pilots</td>
<td>N/A</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td><strong>IMPACTS</strong></td>
<td></td>
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<tr>
<td>Knowledge to innovation translation</td>
<td># sustainable networks, collaborations, infrastructures, biobanks, collaborative platforms</td>
<td>10</td>
<td>0</td>
<td>4</td>
<td>7</td>
<td>15</td>
</tr>
<tr>
<td>Strategies to address unmet public health needs (WHO list)</td>
<td>% projects developing new or improved methodologies across disciplines</td>
<td>N/A</td>
<td>90 %</td>
<td>90 %</td>
<td>90 %</td>
<td>90 %</td>
</tr>
<tr>
<td>Globally competitive EU health care industry</td>
<td># examples of cross-sector health innovation activities (e.g. spin-offs)</td>
<td>N/A</td>
<td>0</td>
<td>5</td>
<td>10</td>
<td>20</td>
</tr>
</tbody>
</table>
Baselines are derived (where possible) from the Innovative Medicines Initiative (IMI2) as predecessor to IHI.

2 Reporting methodology: cumulatively reporting from the beginning of IHI until 31/12/2030

3 In this document, the term ‘regulators’ refers to the different bodies involved in the processes regulating medical products (e.g., scientific assessment, production of scientific guidelines, scientific advice to manufacturers, granting/refusal/suspension of marketing authorisations, post-market surveillance, withdrawing/recalling of devices put on the market, authorisation and oversight of clinical trials). It includes the European Commission, National Competent Authorities (NCA), the Medical Device Coordination Group (MDCG), and the European Medicines Agency (EMA). Notified Bodies, while designated to perform a regulatory function (verification of medical device/in-vitro diagnostics conformity), cannot be considered as regulators in the strict sense of this definition. However, the potential input and expertise of Notified Bodies may still be relevant for the design and implementation of the activities of the proposed initiative.

There are difficulties in setting up baselines as some of the activities are relatively new or without a good reference (e.g. cross-sectoral collaborations). For the totally new activities, baselines are simply set to zero. As the first call will only be launched later in 2022, we expect that the targets for most indicators in 2023 will be zero.

The causal link between the activities of the partnership and the expected impact (e.g. competitiveness of industry) is difficult to establish; such impacts are very much multifactorial and an initiative like this one can only make a partial contribution, which is reflected in the monitoring framework. In addition, the development timelines for healthcare innovation are relatively long, especially due to regulatory requirements. That means most impacts will likely only become apparent after the end of the partnership. The proposed indicators are still under discussion and will be updated once the final agreement is reached.

*TBD – the decision will be taken by the Governing Board in March 2022

SYNERGIES WITH OTHER EUROPEAN AND NATIONAL INITIATIVES

TRIALS@HOME – DIGITAL HEALTH PROJECT

In 2020, the IMI2 Trials@Home consortium collaborated with ECSEL JU (predecessor to KDT JU) to help define an ECSEL call for technology developers who could develop/fine-tune their devices to meet the exact needs of the Trials@Home remote clinical trials. The collaboration included a public information campaign and a brokerage event.

The IMI2 conect4children (c4c) project and the European Joint Programme on Rare Diseases (EJP RD) have established a Joint Steering Committee in order to coordinate activities, promote synergies and avoid redundant work. With respect to the United States, c4c is working with iACT (the Institute for Advanced Clinical Trials for Children) on specific activities (a confidential disclosure agreement with iACT has been executed relating to collaboration in global interoperability and education). iACT is an independent non-profit organisation in the United States formed by the Critical Path Institute (C-Path).

IHI plans to explore future synergies with the planned European Partnership on Transforming Health and Care Systems (THCS) which will be of particular importance as it may provide input for identifying scientific priorities, notably regarding unmet public health needs. Solutions proposed in the context of IHI could enable organisational innovations developed in the THCS partnership.

OVERVIEW OF MEMBERS

Not available