**Annex 7**

to the Regulations for the Open Call for Project Applications of the National Research Programme "Public Health”

**Methodology for carrying out the expert assessment**

(**for the project application, the project mid-term/final scientific report)**

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# Introduction

"Methodology for carrying out the expert assessment" (hereinafter referred to as - the Methodology) has been developed in accordance with the Cabinet of Ministers Regulation No. 560 of 4 August 2018 “Procedures for the Implementation of National Research Programme Projects” (hereinafter referred to as - Cabinet Regulation) and having regard to the Cabinet of Ministers Order No. 629 of 26 September 2023 “On the National Research Programme “Public Health”” (hereinafter referred to as - the Cabinet Order) and the Regulations (hereinafter referred to as - the Regulations) for the open call for project applications of the State Research Programme “Public Health” (hereinafter referred to as - the Call for Proposals), approved by the Implementation and Monitoring Commission of the National Research Programme “Public Health” (hereinafter referred to as - the Commission) on 19 October 2023.

The methodology has been developed for the international experts who carry out the scientific assessment of the project applications and the mid-term and final scientific reports.

According to Section 35(1) of the Law on Scientific Activity, a National research programme is a state commission to carry out scientific research in a specific economic, educational, cultural or other sector of national priority, with the aim of promoting the development of that sector.

As a government order, the National Research Programme “Public Health” (hereinafter referred to as - the Programme) is a policy implementation mechanism that identifies and researches issues of importance for Latvia’s sustainability and development, which need to be the focus of the work of Latvian scientific institutions, and identifies relevant scientific research tasks to address them. In light of the above, the Programme creates favourable conditions for achieving Latvia’s sustainable development goals.

Involvement of the best groups of scientists within which scientists representing the public health sector will cooperate for the achievement of the project is provided for the implementation of the programme.

The programme was created by the Ministry of Health, but it is funded by the Ministry of Education and Science (hereinafter referred to as - the Ministry). State budget funds in the total amount of EUR 3,750,000 have been assigned for the implementation of the programme, including 262,500 euro earmarked for administrative costs. Duration for the implementation of the programme: 2023 to 2025.

1. The call for proposals is planned for financing six projects with the following maximum project funding per task set out in Paragraph 6 of the Cabinet Order is determined:

* For the task under Sub-paragraph 6.1 of the Cabinet Order – 300,000 *euro*;
* For the task under Sub-paragraph 6.2 of the Cabinet Order – 600,000 *euro*;
* For the task under Clause 6.3 of the Cabinet Order – 1,000,000 *euro;*
* For the task under Sub-paragraph 6.4 of the Cabinet Order – 500,000 *euro*;
* For the task under Sub-paragraph 6.5 of the Cabinet Order – 687,500 *euro*;
* For the task under Sub-paragraph 6.6 of the Cabinet Order – 400,000 *euro*.

In accordance with the Cabinet Order:

1. The overarching objective of the Programme is to improve the health of the residents of Latvia extending healthy life expectancy, preventing premature mortality and reducing health inequalities, as well as improving the quality and accessibility of health services;
2. The objective of the Programme is to generate new knowledge and solutions to improve the quality and accessibility of disease prevention and healthcare and to strengthen the efficiency and resilience of the healthcare system;
3. Programme tasks:

* To develop new knowledge, approaches and methods to improve health literacy of residents;
* To develop new knowledge, approaches and methods for the development and effective use of human capital for healthcare;
* To develop new knowledge, approaches and methods to reduce preventable and medically avoidable mortality from non-infectious diseases;
* To gain knowledge for the development of a human biomonitoring programme, assessing the prevalence of pesticides, heavy metals and certain organic pollutants in samples taken from the Latvian population, as well as identifying whether residues of banned pesticides originate from environmental contamination, food or household products;
* To develop new knowledge, approaches and methods for the assessment and containment of the risks of antimicrobial resistance, as well as provide knowledge on new approaches and methods to improve HIV containment policies and new cost-effective approaches to expand public vaccination coverage;
* To develop new knowledge, approaches and methods to measure, monitor and improve health outcomes of children.

The applicant shall submit a project application covering only one task stipulated in

Sub-paragraphs 6.1, 6.2, 6.3, 6.4, 6.5 or 6.6 of the Cabinet Order. The project applicant may submit more than one project application for each of the tasks set out in Sub-paragraphs 6.1, 6.2, 6.3, 6.4, 6.5 or 6.6 of the Cabinet Order.

In order to achieve the objectives of the Programme, the following tasks and sub-tasks are set out in Paragraph 10 of the Regulations:

1. Task: to develop new knowledge, approaches and methods to improve health literacy of residents:

If this task is selected, the applicant shall include in the application all the sub-tasks of this task listed below:

1.1 To conduct a population-based study on the level of health literacy among the residents of Latvia in different groups of age, gender, income level, statistical regions, occupation, patients with certain chronic diseases and other groups;

1.2 To identify the most important factors influencing/connected to health literacy (including limiting factors and confounders) and identifying risk groups;

1.3 To conduct a study on public attitude towards topical patient rights issues with a view to improving patient rights;

Task 2 - To develop new knowledge, approaches and methods for the development and effective use of human capital of healthcare.

If this task is selected, the applicant shall include in the application at least two sub-tasks of this task listed below:

2.1 To assess the relevance of health education to the needs of public and health care, including the usefulness of investments in the education, development and protection of human resources for health, and identify opportunities for optimisation of resources;

2.2 To identify mechanisms for more effective attraction and retention of human resources, identify working conditions that promote a healthy work-life balance and strengthen the mental health of staff and reduce the risks of occupational diseases; and to approbate the tool for analysis of the experiences of medical practitioners;

2.3 To evaluate the digital competences of medical practitioners and develop a competency framework for digital competences of medical practitioners;

2.4 To identify the conditions and ways for the development and involvement of the leadership capacity of medical practitioners in strategic decision-making and participation in the improvement of treatment and care;

2.5 To approbate, pilot and improve the human resources planning model[[1]](#footnote-1), developed within the framework of the European Commission's DG Structural Reform Support project No. REFORM/SC2021/09 "On Health Workforce Strategy in Latvia"[[2]](#footnote-2) to enable better collection, analysis and planning of human resources data;

Task 3 - To develop new knowledge, approaches and methods to reduce preventable and medically avoidable mortality from non-infectious diseases.

If this task is selected, the applicant shall include in the application at least three sub-tasks of this task listed below:

3.1 To identify opportunities for medically preventable mortality reduction in patients suffering from cardiovascular diseases;

3.2 To conduct benchmark measurement of the quality of in-patient healthcare services in medical institutions in the priority areas (cardiovascular, oncology, mother-child), taking into account the volume of services provided and the work of specialists and other criteria;

3.3 To determine the effectiveness and quality of publicly funded cancer screening and other health care programmes in oncology (Green Corridor, Yellow Corridor), including post-screening examinations;

3.4 To evaluate the use of artificial intelligence in mammography;

3.5 To develop and validate an assessment tool to assess risk factors for postnatal depression;

3.6 To identify trends (type, intensity) of health services received by persons who have committed suicide or attempted suicide;.

Task 4 - To gain knowledge for the development of a human biomonitoring programme to assess the prevalence of pesticides, heavy metals and certain organic pollutants in samples taken from the residents of Latvia and to determine whether residues of banned pesticides originate from environmental contamination, food or household products.

Task 5 - To develop new knowledge, approaches and methods for assessment and containment of the risks of prevalence of antimicrobial resistance, as well as to provide knowledge on new approaches and methods for improvement of HIV containment policies and new cost-effective approaches for expanding public vaccination coverage.

If this task is selected, the applicant shall include in the application all the sub-tasks of this task listed below:

5.1  To identify the prevalence of HIV in the community, including by modelling the number of undiagnosed HIV cases, evaluating the effectiveness of HIV control policies, including by identifying the degree of adherence of HIV-positive patients, the influencing factors, as well as evaluating the measures implemented so far to promote adherence of HIV-positive patients;

5.2 To implement a point prevalence study on antibiotic consumption and healthcare-associated infections in healthcare facilities providing healthcare services to patients with acute health conditions; implement a study on screening practices and options for patients at risk, taking into account the increase in multi-drug resistant bacteria, including due to forced displacement and specific war injuries caused by the hostilities in Ukraine;

5.3 To conduct evaluation of cost-effectiveness of vaccination, identifying the economic benefits and return on investment of the vaccination policy implemented to date (including using cost of illness and statistical lifetime value approaches; combining the calculation with the cost of the immunisation programme);

Task 6 - To develop new knowledge, approaches and methods to measure, monitor and improve child health outcomes.

If this task is selected, the applicant shall include in the application at least one sub-task of this task listed below:

6.1 To assess the timeliness of diagnosis of chronic diseases (obesity and other chronic diseases prevalent in the child population) and the factors influencing it in the child population;

6.2 To assess changes in schoolchildren's health as a result of the COVID-pandemic and LONG-COVID;

6.3 To identify adverse childhood experiences of violence among young people in Latvia and their relationship to health status and self-rated health.

When implementing the project, only one of the tasks set out in Paragraph 6 of the Cabinet Order must be performed, as well as execution of all the horizontal tasks listed in Paragraph 8 of the Cabinet Order must be ensured, and achievement of the results listed in Paragraph 7 of the Cabinet Order that can be attributed to the area of the selected task and sub-tasks.

When submitting a project application:

1. For the task set out in Sub-paragraph 6.1 of the Cabinet Order, the applicant must achieve the results set out in Sub-paragraphs 7.1, 7.2, 7.3 and 7.5 of the Cabinet Order during the project implementation;
2. For the task set out in Sub-paragraph 6.2 of the Cabinet Order, the applicant must achieve the results set out in Sub-paragraphs 7.2 and 7.5 of the Cabinet Order during the project implementation;
3. For the task set out in Sub-paragraph 6.3 of the Cabinet Order, the applicant must achieve all the results set out in Paragraph 7 of the Cabinet Order during the project implementation;
4. For the task set out in Sub-paragraph 6.4 of the Cabinet Order, the applicant must achieve the results set out in Sub-paragraphs 7.2 and 7.5 of the Cabinet Order during the project implementation;
5. For the task set out in Sub-paragraph 6.5 of the Cabinet Order, the applicant must achieve all the results set out in Paragraph 7 of the Cabinet Order during the project implementation;
6. For the task set out in Sub-paragraph 6.6 of the Cabinet Order, the applicant must achieve all the results set out in Paragraph 7 of the Cabinet Order during the project implementation.

# 1 Used terms

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| **No.** | **Term** | **Explanation** |
| **1** | **Scientific Group** | Scientific staff and scientific technical staff (persons who have the necessary technical knowledge and experience in one or more fields and who, under the supervision of scientists, participate in scientific activities by carrying out technical tasks. Scientific technical staff (engineers, technicians, laboratory technicians, technologists, operators) involved in the implementation of the project. The scientific group shall be composed of the project manager, the project PIs (if required) and the project implementers |
| **2** | **Scientific Staff** | Leading researchers, researchers, scientific assistants, academic staff[[3]](#footnote-3) and students. |
| **3** | **Project applicant** | A project applicant is a scientific institution registered in the Register of Scientific Institutions of the Republic of Latvia (body governed by public or private law) or an institution of higher education, as well as meeting the definition of a research organisation[[4]](#footnote-4). The applicant is responsible for the implementation of the project and the achievement of the overall project results |
| **4** | **Project Partner - Scientific Institution** | A scientific institution registered in the Register of Scientific Institutions of the Republic of Latvia (body governed by public or private law) or an institution of higher education, as well as meeting the definition of a research organisation, participating in the project with its own staff or research infrastructure. |
| **5** | **Project Partner - Public Institution** | A public body which is required to carry out scientific activities by an external legal enactment, its regulations or its articles of association, and is engaged in the implementation of the project with property, intellectual property, funding or human resources in its possession or ownership |
| **6** | **Project manager** | A scientist who manages the project and ensures its implementation. The project manager plans and supervises the execution of the project tasks, is responsible for the activities of his/her own and those of other persons involved in the project in accordance with the tasks set out in the project, scientific ethical norms, timely preparation and submission of documentation describing the scientific progress of the project in accordance with the procedure provided for in the Cabinet Regulation.  The project manager is registered in the National Scientific Activity Information System (hereinafter - information system). |
| **7** | **Key Project Implementers** | The scientists implementing the project or sub-project and responsible for the implementation of its parts. |
| **8** | **Project Implementers** | Members of the scientific group who carry out individual scientific tasks in the implementation of the project and are responsible for carrying out relevant parts of it. |
| **9** | **Students of the Institution of Higher Education** | A student involved in the project scientific group is a bachelor student, a professional student, a master student, a medical resident and a PhD student.[[5]](#footnote-5) Students of the institution of higher education must be involved in the project according to the provisions of Paragraphs 21–24 of the Regulations. |
| **10** | **Project Contact Person** | A natural person who is registered in the information system, fills in information on the project application, uploads its annexes, as well as, where necessary, maintains contact with the staff of the Latvian Council of Science (the project contact person may also be the Project Manager) and the staff of the Ministry of Education and Science during the project submission and implementation. The project applicant shall indicate the project contact person in Chapter 1 ’General information’ of Part A of the project application. If the project has collaborating partners, their contact persons shall also be indicated. The contact person and the Project Manager can be the same person. |

# 2 Scientific Expert Assessment of the Project Application

1 The scientific evaluation process of all the project applications submitted under the tender is organised by the Council.

2 If the project application fulfils the criteria for administrative evaluation, the Council shall, on the basis of Paragraph 35 of the Regulations, call upon two or more suitably qualified experts to carry out the scientific examination of the project application.

3 Before accessing the project application in the information system, the expert:

3.1 Shall declare that he/she has no conflict of interest and undertakes to respect the requirements of confidentiality by signing and sending to the Council, by electronic mail, Annex 5 to the regulations, "Declaration of absence of conflict of interest and respect of confidentiality" (hereinafter referred to as - the "Declaration of the Expert");

3.2 Shall enter into a contract with the Council - Annex 6 to the Regulations, "Contract for Carrying Out the Expert Assessment" (hereinafter referred to as - Expert Assessment Contract).

4 The Council shall, upon receipt of the expert’s certificate and the conclusion of the expert assessment contract, give the expert access to the project application and to all the necessary information in the information system to carry out an appropriate assessment of the project application.

5 The expert shall assess the project application by applying his/her professional qualifications and experience in the relevant scientific field and by justifying his/her rating with scientific evidence.

6 The expert shall cooperate with the Council during the examination and comply with the instructions given by the Council pertaining to the performance of the examination in accordance with the regulations and the examination contract.

7 According to point 43 of the Rules, the expert is only allowed to assess a project application of 15 pages, with up to three additional pages if there are supporting documents from the social partners, letters of recommendation on cooperation, etc.

**2.1 Individual evaluation of the project application**

8 The individual evaluation of the project application (hereinafter - the individual evaluation), prepared in accordance with Annex 8 "Individual/Consolidated Evaluation Form for the Examination of the Project Application" to the Rules, shall be completed and approved by the expert in the information system within two calendar weeks from the date of conclusion of the examination agreement and receipt of access to the project application and all necessary information, unless a different deadline is specified in the expert agreement.

9 In the individual assessment, the expert shall evaluate each criterion and provide a score taking into account the considerations set out in Clause 13 of the methodology.

10 The expert evaluates the criteria and assigns a score from 1 to 5 for each criterion, where:

10.1 Outstanding - 5 points (excellent project proposal, meets or exceeds the highest standards in the relevant scientific field, any shortcomings in the project proposal are minor);

10.2 Good - 4 points (good project proposal, fulfils the requirements of the criterion in the relevant scientific field, but there are some shortcomings);

10.3 Satisfactory - 3 points (satisfactory project application, generally fulfils the requirements of the criterion in the relevant scientific field, with some shortcomings that will make it difficult to implement the project and achieve high performance);

10.4 Weak - 2 points (weak project proposal, partial or only general compliance with the requirements of the criterion in the relevant scientific field, identifiable shortcomings that make it difficult to successfully implement the project and achieve its objectives);

10.5 Unsatisfactory - 1 point (unsatisfactory project application, does not meet the requirements of the relevant scientific field for the criterion, and the information provided is insufficient for the assessment in the criterion, and there are significant shortcomings that make the implementation of the project and the achievement of the objectives questionable);

10.6 If the project application’s score in a given criterion exceeds the requirements of the previous lowest score but does not fully meet the requirements of the next highest score, the score may also be supplemented by a half point, i.e. 0.5.

11 The expert shall provide a reasoned justification for the scoring of each scientific criterion. The expert shall explain in the justification the score awarded, using his/her professional qualifications and experience in the relevant scientific field.

12 Within three calendar days from the date of receipt of the individual assessment, the Council shall assess the compliance of the individual assessment with the considerations referred to in Paragraphs 27, 28 and 29 of the Cabinet Regulation, as well as with the Methodology, where necessary, returning the individual assessment to the expert for specification/revision/improvement, justifying the reasons for the return. In the event of such a return, the expert shall update, revise and validate the individual evaluation in the information system within three calendar days of the date of receipt of the notification by the Council, sent by e-mail, of the return of the individual evaluation of the expert.

13 The expert shall complete the individual evaluation in the information system (see Annex 8 "Individual/consolidated evaluation form for the examination of the project application" to the regulations) according to the following criteria and considerations:

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| **Individual/consolidated assessment of the project application** | | | |
| Project title:  Expert(s): | | | |
| **1** | **Criterion: Scientific quality of the project** | | Maximum 5 points |
| **1.1** | Consideration: Contribution to the overarching aim and objective of the Programme and to the implementation of the thematic objectives | *The expert shall justify the score given by taking into account the fulfilment of the criterion as a whole and of each criterion consideration.*  *1 Specific information for the criterion is given in Chapter 1 ’Scientific excellence’ of the project application, as well as in subsections 2.4 ’Scientific results of the project and ensuring their availability’ and 3.1 ’Proposer and scientific team’, but it is the project application as a whole that should be taken into account when assessing the criterion.*  *2 The scientific excellence of the project, including the chosen research strategy and methodological solutions, the ability to generate new knowledge or technological insights, as well as the ability to build and develop an interdisciplinary and inclusive team of internationally competitive scientists using research methods and technologies that are recognised among scientists worldwide, shall be assessed according to the specificities of the relevant scientific field or fields and the project, as well as the specificities of the institutions of the applicant and the project’s collaborating partners (if any).*  *3 The assessment shall take into account the thematic overarching objective and objective of the programme (in accordance with Paragraphs 4 and 5 of the Cabinet Order), all the thematic tasks (in accordance with Paragraph 6 of the Cabinet Order) and the horizontal objectives of the programme, the results (in accordance with Paragraphs 8 and 7 of the Cabinet Order) and their feasibility, and assess whether the project application is adequate to achieve the overarching objective and objectives of the programme in accordance with the thematic area of the project and the envisaged time frame for implementation.*  *4 Assess the overall potential of the project to develop the knowledge base in the field of public health to develop national knowledge research and innovation systems that address societal challenges.* | |
| **1.2** | Consideration: scientific quality, reliability and novelty of the study |
| **1.3** | Consideration: scientific quality of the chosen research strategy and methodological approaches, and relevance to the objectives |
| **1.4** | Consideration: capacity of the project to generate new knowledge or technological insights |
| **1.5** | Consideration: contribution of the collaborating partners (if any), their scientific capacity, planned quality of the collaboration |
| **2** | **Criterion: Impact of project results** | | Maximum 5 points |
| **2.1** | expected transfer of acquired knowledge and skills to further activities and scientific capacity development | *The expert justifies the score given by taking into account fulfilment of the criterion as a whole and of its sub-criteria. Criteria-specific information is given in Chapter 2 "Impact" of the project application, but the assessment of the criterion must take into account the project application as a whole.*  *The results and their expected impact, including the planned transfer of results into further activities and scientific capacity development, the possibilities for further development of research shall be assessed according to the specificities of the scientific field or fields concerned and of the project, as well as the specificities of the institution of the applicant and the specificities of the institutions of the project partners (if any).*  *The expert shall assess how effectively the project engages students and young scientists in relation to the overall workload of the scientific group, including a plan for engaging students and building the capacity of the scientific group within the framework of the project. Information on the workload of the project scientific group, including students, can be found in Chapter 3 "Project Budget" of Part A "General Information" of the project application.*  *Sustainability of the project results is assessed in relation to the expected scientific publications and the dissemination of the project results in scientific conferences. Information on the dissemination of the project results can be found in the project application description, subsection 2.5 "Scientific results of the project and making them accessible". Particular attention should be paid to ensuring the sustainability of results, following the principles of Open Access, Open Data, FAIR - findable, accessible, interoperable, reusable - as well as to the choice of the project applicant for data deposition.*  *The potential of the project to raise public awareness of the project results and to increase the socio-economic impact of the project results should be taken into account (Sub-chapters 2.2-2.5 of description of the project application). Assess whether the plans described in the project application for applying and transferring the results of the research to end-users are adequate and feasible. Assess the collaboration of the project applicant with other scientific institutions, as well as with public institutions, NGOs and hospitals.*  *The expert shall also assess the feasibility of the specific result of the project in accordance with Paragraph 10 of the Regulations, and the result is as follows: created new knowledge and solutions for the improvement of the quality and accessibility of disease prevention and healthcare and strengthening the efficiency and resilience of the healthcare system, including the achievement of one selected of the following tasks and sub-tasks:*   1. *Task - to develop new knowledge, approaches and methods to improve residents' health literacy:*   *If this task is selected, the expert shall assess whether the following sub-tasks have been achieved:*  *1.1 To conduct a population-based study on the level of health literacy among the residents of Latvia in different groups of age, gender, income level, statistical regions, occupation, patients with certain chronic diseases and other groups;*  *1.2 To identify the most important factors influencing/connected to health literacy (including limiting factors and confounders) and identifying risk groups;*  *1.3 To conduct a study on public attitude towards topical patient rights issues with a view to improving patient rights;*  *Task 2 - To develop new knowledge, approaches and methods for the development and effective use of human capital of healthcare.*  *If this task is selected, the expert shall assess whether at least two of the sub-tasks selected for this task have been achieved:*  *2.1 To assess the relevance of health education to the needs of public and health care, including the usefulness of investments in the education, development and protection of human resources for health, and identify opportunities for optimisation of resources;*  *2.2 To identify mechanisms for more effective attraction and retention of human resources, identify working conditions that promote a healthy work-life balance and strengthen the mental health of staff and reduce the risks of occupational diseases; and to approbate the tool for analysis of the experiences of medical practitioners;*  *2.3 To evaluate the digital competences of medical practitioners and develop a competency framework for digital competences of medical practitioners;*  *2.4 To identify the conditions and ways for the development and involvement of the leadership capacity of medical practitioners in strategic decision-making and participation in the improvement of treatment and care;*  *2.5 To approbate, pilot and improve the human resources planning model[[6]](#footnote-6), developed within the framework of the European Commission's DG Structural Reform Support project No. REFORM/SC2021/09 "On Health Workforce Strategy in Latvia"[[7]](#footnote-7) to enable better collection, analysis and planning of human resources data;*  *Task 3 - To develop new knowledge, approaches and methods to reduce preventable and medically avoidable mortality from non-infectious diseases.*  *If this task is selected, the expert shall assess whether at least three of the sub-tasks selected for this task have been achieved:*  *3.1 To identify opportunities for medically preventable mortality reduction in patients suffering from cardiovascular diseases;*  *3.2 To conduct benchmark measurement of the quality of in-patient healthcare services in medical institutions in the priority areas (cardiovascular, oncology, mother-child), taking into account the volume of services provided and the work of specialists and other criteria;*  *3.3 To determine the effectiveness and quality of publicly funded cancer screening and other health care programmes in oncology (Green Corridor, Yellow Corridor), including post-screening examinations;*  *3.4 To evaluate the use of artificial intelligence in mammography;*  *3.5 To develop and validate an assessment tool to assess risk factors for postnatal depression;*  *3.6 To identify trends (type, intensity) of healthcare services received by persons who have committed suicide or attempted suicide;*  *Task 4 - To gain knowledge for the development of a human biomonitoring programme to assess the prevalence of pesticides, heavy metals and certain organic pollutants in samples taken from the Latvian population and to determine whether residues of banned pesticides originate from environmental contamination, food or household products;*  *Task 5 - To develop new knowledge, approaches and methods for assessment and containment of the risks of prevalence of antimicrobial resistance, as well as to provide knowledge on new approaches and methods for improvement of HIV containment policies and new cost-effective approaches for expanding public vaccination coverage.*  *If this task is selected, the expert shall assess whether the following sub-tasks have been achieved:*  *5.1  To identify the prevalence of HIV in the community, including by modelling the number of undiagnosed HIV cases, evaluating the effectiveness of HIV control policies, including by identifying the degree of adherence of HIV-positive patients, the influencing factors, as well as evaluating the measures implemented so far to promote adherence of HIV-positive patients;*  *5.2 To implement a point prevalence study on antibiotic consumption and healthcare-associated infections in healthcare facilities providing healthcare services to patients with acute health conditions; implement a study on screening practices and options for patients at risk, taking into account the increase in multi-drug resistant bacteria, including due to forced displacement and specific war injuries caused by the hostilities in Ukraine;*  *5.3 To conduct evaluation of cost-effectiveness of vaccination, identifying the economic benefits and return on investment of the vaccination policy implemented to date (including using cost of illness and statistical lifetime value approaches; combining the calculation with the cost of the immunisation programme);*  *Task 6 - To develop new knowledge, approaches and methods to measure, monitor and improve child health outcomes.*  *If this task is selected, the expert shall assess whether at least one of the selected sub-tasks of this task has been achieved:*  *6.1 To assess the timeliness of diagnosis of chronic diseases (obesity and other chronic diseases prevalent in the child population) and the factors influencing it in the child population;*  *6.2 To assess changes in schoolchildren's health as a result of the COVID-pandemic and LONG-COVID;*  *6.3 To identify adverse childhood experiences of violence among young people in Latvia and their relationship to health status and self-rated health.* | |
| **2.2** | opportunities for research development, including contributions to the preparation of new projects for submission to competitions under the European Union’s Framework Programmes for Research and Innovation and other research and innovation support programmes and technology initiatives |
| **2.3** | the research will lead to knowledge important to the relevant sector, and development of the national economy and society |
| **2.4** | sustainability of the knowledge generated and a qualitative dissemination plan, including scientific publications and public outreach |
| **2.5** | implementation of the research contributes to strengthening the scientific capacities of the research staff, including students |
| **3** | **Criterion: Project feasibility and provision** | | Maximum 5 points |
| **3.1** | quality of the research activity plan and its relevance to the objective. The resources provided are adequate and sufficient to achieve the objective. The research aims to ensure efficient use of resources. The planned work steps and tasks are clearly defined, relevant and reliable | *The expert justifies the score given by taking into account fulfilment of the criterion as a whole and of its sub-criteria. Specific information for the criterion is given in Chapter 3 ’Implementation’ of the project application and in Part C ’Curriculum Vitae’ of the project application, but the assessment of the criterion must take into account the project application as a whole.*  *Feasibility of the project, including the research work plan prepared, the envisaged management and quality control of the research, information provided on the data management plan, the resources envisaged, available infrastructure, shall be assessed according to the specificities of the sector or sectors of the science concerned and of the project, as well as the specificities of the applicant and the collaborating partners (if any).*  *The expert shall assess the relevance of the scientific qualifications and experience of the project manager and the principal investigators to the achievement of the project objectives and the performance of the tasks envisaged on the basis of the curriculum vitae submitted in Part C ’Curriculum Vitae’ of the project application.*  *The planned implementation of the project is assessed in relation to the completed project application in Part A "General information", Section 3 "Project budget", which foresees the costs of the project team's salary, material and technical support, travel and publication costs.* | |
| **3.2** | scientific qualifications of the Project Manager and of the key project implementers, based on the curriculum vitae submitted |
| **3.3** | appropriate research management, including quality management is provided for. The management organisation allows to follow the progress of the research. Potential risks have been assessed and a plan developed to avoid or mitigate them |
| **3.4** | the research infrastructure required for the research, including access to collaborating partners’ equipment (if applicable) |
| **3.5** | the institution carrying out the research and the collaborating partners (if applicable) have the necessary knowledge and expertise |

## 2.2 Consolidated evaluation of the project application

14 Once the experts have completed and validated their individual assessment in the information system, the Council shall give each expert access to the individual assessment completed by the other expert and disclose the identity of the other experts to each expert.

15 One of the experts shall complete the consolidated evaluation in accordance with Annex 8 to the regulations, “Individual/consolidated evaluation form for the examination of the project application”, in the information system, under the conditions set out in Clauses 6 to 13 of the Methodology. All expert (unless the exception referred to in Paragraph 43 of the Regulations applies), shall validate the consolidated evaluation in the information system within two weeks after the validation of the last individual evaluation in the information system.

16 The consolidated assessment is the agreement between all experts (unless the exception specified in Paragraph 43 applies), on the final assessment of the project application, so that the expert preparing the consolidated assessment consults other experts on:

16.1 Score of each criterion;

16.2 Justification for the scores of each criterion, compiled from the justifications provided by all the experts in their individual assessments.

17 The Council shall examine the consolidated assessment referred to in Clause 15 of the Methodology once it has been confirmed in the information system. If the Council finds that any inconsistencies with the methodology or the regulations of the competition, it has the right to return the consolidated assessment to the experts for revision and confirmation.

18 In the event of a return of the consolidated assessment, the experts shall be obliged to revise and agree on the consolidated assessment within three calendar days, validating it in the information system in accordance with Clauses 15 to 16 of this Methodology.

# 3 Scientific mid-term and final expert assessment of scientific report of the project

19 Before accessing a mid-term or final scientific report in the information system, the expert shall declare that he/she has no conflict of interest and undertake to respect the confidentiality requirements by signing and sending to the Council the expert declaration and by concluding a contract with the Council.

20 The Council shall, upon receipt of the expert’s declaration, give the expert access to the mid-term or final scientific report of the project and to all the information necessary for its evaluation.

21 The Council shall provide each expert with access to the mid-term or final scientific report and to the application for the same project. Where a final report of the project is being assessed, the Council shall additionally provide the expert with access to the mid-term report of the same project.

22 The expert evaluates the mid-term or final scientific report of the project using his/her knowledge of the relevant scientific field and arguing his/her opinion with scientific reasons.

## 3.1 Individual evaluation of the mid-term and final scientific report

23 Within two weeks from the date of conclusion of the contract with the Council, the expert shall carry out an individual evaluation of the mid-term or the final scientific report by completing Annex 10 to the regulations, “Individual/consolidated evaluation form for the mid-term/final scientific report" in the information system and confirming it therein.

24 The expert gives one of two evaluations to the project’s mid-term scientific report:

24.1 proceed with the project;

24.2 do not proceed with the project.

25 The expert gives the final scientific report one of two scores:

25.1 the project has achieved its objective;

25.2 the project has not achieved its objective.

26 The expert assesses the project’s final scientific report against the following criteria:

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| **Project mid-term/individual/consolidated assessment of the final scientific report** | | | |
| Project title:  Expert(s): | | | |
| **1** | **Criterion: Scientific quality of the project** | | |
| *The expert assesses how the project’s scientific group has achieved the objectives of the project application by the moment of delivery of the mid-term/final report. Basically, Chapter 1 "Scientific excellence” of the mid-term/final scientific report is taken into account, while linking it to the mid-term/final scientific report as a whole and to the project application. Here, the expert provides comments and suggestions to fully achieve the project’s objective and perform the tasks to the highest scientific quality, or on research opportunities after the end of the project in order to achieve scientific excellence. The comments shall take into account the programme’s specific tasks and results, as well as assess whether the project is progressing towards the achievement of the programme’s overarching objective and the objectives.*  *The expert assesses whether the performance of the project’s scientific team over the relevant period of time demonstrates its high research capacity and whether the results described are appropriate for the supplementing of the knowledge base of the sector(s) of the science* | | |
| **2** | **Criterion: Impact of project results** | | |
| *The expert assesses how the project’s scientific group has achieved the objectives of the project application by the moment of delivery of the mid-term/final report. Basically, Chapter 2 "Impact” of the mid-term/final scientific report is taken into account, while linking it to the mid-term/final scientific report as a whole and to the project application. In this box, the expert provides comments and suggestions to better achieve the intended impact and ensure dissemination of the knowledge gained to the scientific community and communication to the general public, or for post-project activities.*  *The expert shall assess whether the project has resulted in a more internationally competitive field of public health and the scientific community and whether its capacity has been increased.*  *The expert shall assess how the project implementer has selected the project’s target groups, whether their opinions have been sought in a quality way and whether the activities have been effective for information of the public. The expert shall also assess cooperation with public authorities, other organisations, NGOs, and hospitals (e.g., making recommendations, participating in policy planning, etc.).*  *The expert assesses and comments on the implementation of the plan to make the project results and scientific knowledge available both in Latvia and internationally (including by publishing results in open access journals and depositing newly generated research data in research data repositories according to the principles of "as open as possible" and FAIR - findable, accessible, interoperable, reusable.*  *The expert also assesses the project implementer’s capacity building activities for students and the scientific group, as well as the progress of the student involvement plan.*  *The expert shall assess progress towards the programme's specific outcome of generating new knowledge and solutions to improve the quality and access to disease prevention and healthcare and to strengthen the efficiency and resilience of the healthcare system, including by achieving one of the following selected tasks and selected sub-tasks:*   1. *Task: to develop new knowledge, approaches and methods to improve health literacy of residents:*   *If this task is selected, the expert shall also assess progress in the following sub-tasks:*  *1.1 To conduct a population-based study on the level of health literacy among the residents of Latvia in different groups of age, gender, income level, statistical regions, occupation, patients with certain chronic diseases and other groups;*  *1.2 To identify the most important factors influencing/connected to health literacy (including limiting factors and confounders) and identifying risk groups;*  *1.3 To conduct a study on public attitude towards topical patient rights issues with a view to improving patient rights;*  *Task 2 - To develop new knowledge, approaches and methods for the development and effective use of human capital of healthcare.*  *If this task is selected, the expert shall assess the progress of the two selected sub-tasks of this task:*  *2.1 To assess the relevance of health education to the needs of public and health care, including the usefulness of investments in the education, development and protection of human resources for health, and identify opportunities for optimisation of resources;*  *2.2 To identify mechanisms for more effective attraction and retention of human resources, identify working conditions that promote a healthy work-life balance and strengthen the mental health of staff and reduce the risks of occupational diseases; and to approbate the tool for analysis of the experiences of medical practitioners;*  *2.3 To evaluate the digital competences of medical practitioners and develop a competency framework for digital competences of medical practitioners;*  *2.4 To identify the conditions and ways for the development and involvement of the leadership capacity of medical practitioners in strategic decision-making and participation in the improvement of treatment and care;*  *2.5 To approbate, pilot and improve the human resources planning model[[8]](#footnote-8), developed within the framework of the European Commission's DG Structural Reform Support project No. REFORM/SC2021/09 "On Health Workforce Strategy in Latvia"[[9]](#footnote-9) to enable better collection, analysis and planning of human resources data;*  *Task 3 - To develop new knowledge, approaches and methods to reduce preventable and medically avoidable mortality from non-infectious diseases.*  *If this task is selected, the expert shall assess progress on the three sub-tasks selected for this task:*  *3.1 To identify opportunities for medically preventable mortality reduction in patients suffering from cardiovascular diseases;*  *3.2 To conduct benchmark measurement of the quality of in-patient healthcare services in medical institutions in the priority areas (cardiovascular, oncology, mother-child), taking into account the volume of services provided and the work of specialists and other criteria;*  *3.3 To determine the effectiveness and quality of publicly funded cancer screening and other health care programmes in oncology (Green Corridor, Yellow Corridor), including post-screening examinations;*  *3.4 To evaluate the use of artificial intelligence in mammography;*  *3.5 To develop and validate an assessment tool to assess risk factors for postnatal depression;*  *3.6 To identify trends (type, intensity) of healthcare services received by persons who have committed suicide or attempted suicide;*  *Task 4 - To gain knowledge for the development of a human biomonitoring programme to assess the prevalence of pesticides, heavy metals and certain organic pollutants in samples taken from the Latvian population and to determine whether residues of banned pesticides originate from environmental contamination, food or household products;*  *Task 5 - To develop new knowledge, approaches and methods for assessment and containment of the risks of prevalence of antimicrobial resistance, as well as to provide knowledge on new approaches and methods for improvement of HIV containment policies and new cost-effective approaches for expanding public vaccination coverage.*  *If this task is selected, the expert shall also assess progress in the following sub-tasks:*  *5.1  To identify the prevalence of HIV in the community, including by modelling the number of undiagnosed HIV cases, evaluating the effectiveness of HIV control policies, including by identifying the degree of adherence of HIV-positive patients, the influencing factors, as well as evaluating the measures implemented so far to promote adherence of HIV-positive patients;*  *5.2 To implement a point prevalence study on antibiotic consumption and healthcare-associated infections in healthcare facilities providing healthcare services to patients with acute health conditions; implement a study on screening practices and options for patients at risk, taking into account the increase in multi-drug resistant bacteria, including due to forced displacement and specific war injuries caused by the hostilities in Ukraine;*  *5.3 To conduct evaluation of cost-effectiveness of vaccination, identifying the economic benefits and return on investment of the vaccination policy implemented to date (including using cost of illness and statistical lifetime value approaches; combining the calculation with the cost of the immunisation programme);*  *Task 6 - To develop new knowledge, approaches and methods to measure, monitor and improve child health outcomes.*  *If this task is selected, the expert shall assess progress in one selected sub-task of this task:*  *6.1 To assess the timeliness of diagnosis of chronic diseases (obesity and other chronic diseases prevalent in the child population) and the factors influencing it in the child population;*  *6.2 To assess changes in schoolchildren's health as a result of the COVID-pandemic and LONG-COVID;*  *6.3 To identify adverse childhood experiences of violence among young people in Latvia and their relationship to health status and self-rated health.* | | |
| **3** | **Criterion: Project feasibility and provision** | | |
| *The expert assesses how the project’s scientific team has achieved the objectives of the project application by the time of delivery of the project mid-term/final report. Basically, Chapter 3 "Implementation” of the mid-term/final report is taken into account, while linking it to the mid-term/final scientific report as a whole and to the project application as a whole. In this box, the expert provides comments and suggestions for adjustments to the work plan or research opportunities after the end of the relevant project.*  *The expert assesses whether the management of the project has been effective, including taking into account the overall progress of the project. The expert assesses the information provided by the project implementer on the development and maintenance of data management plans. Whether the risk plan stated in the Project Description, sub-chapter 3.3 "Project Management and Risk Plan", has been implemented in cases where the risks materialised, and whether the solutions are credible.*  *In addition, the expert shall assess and indicate whether the project has sufficiently involved students and PhD candidates by the specified stage. Students must be involved with a total workload of at least 2,0 PLE* *on average during the implementation of the project.* | | |
| ***Mid-project evaluation*** | | | |
| **Proceed with the project/**  **Do not proceed with the project** | | *If the expert’s assessment of the project’s mid-term scientific report is "Proceed with the project", the expert may skip any final conclusions.*  *If the expert’s assessment of the project’s mid-term scientific report is "Do not proceed with the project",* *the expert shall provide final conclusions with an explanation and additional reasons on the progress of the project and the risks identified to the achievement of the project objective.* | |
| ***Project assessment at the end*** | | | |
| The **project objective has been achieved** in accordance with Clauses 26 and 30 of the Methodology.  *Project objective has been achieved – overall score as a percentage is 85–100% and more.*  **Project objective has not been achieved,**  **percentage** **rating of the target** in accordance with Clauses 26 and 30 of the methodology.  *Project objective has not been achieved, it does not correspond partially - overall rating as a percentage is 25%-84%*  *Project objective has not been achieved, it does not correspond at all - overall rating as a percentage is 0%-24%* | | *The expert shall provide a target rating as a percentage in the overall rating of the final scientific report of the project according to the rating scale set out in Clause 30 of the Methodology.* |

**3.2** **Consolidated rating of the project mid-term and final scientific report**

27 Once the experts have completed and validated their Individual Rating mid-term or final scientific report in the information system, the Council shall provide experts with access to the Individual Rating to be completed by the other experts, as well as disclose the identity of the other experts to each expert.

28 One of the experts shall complete the consolidated evaluation in accordance with Annex 10 to the regulations "Individual/consolidated rating form for the mid-term/final scientific report", under the conditions set out in Clauses 24 to 26 of the Methodology, in the information system and all the experts shall confirm it in the information system within one week.

29 In the consolidated rating, the experts agree on a single score for the mid-term or final scientific report and summarise the comments made in the individual evaluations.

**3.3 Assessment of the objective of the final scientific report**

30 In the consolidated valuation in the Final Report, the two experts agree on a consolidated percentage valuation, which has the following meaning:

Project objective has been achieved – overall score as a percentage is 85% – 100% and more. The award is given if the project has been carried out with good or excellent scientific quality and has met or exceeded the expected objectives and scientific results. Where there is non-performance or other minor shortcomings, but the existing scientific results are of good scientific quality, e.g. the scientific articles are published in high quality journals, so that these shortcomings have not affected the achievement of the objective. If the mid-term scientific quality assessment of the project makes recommendations for further implementation, these are taken into account or a reasoned justification is given for disregarding them.

Project objective has not been achieved, does not correspond partially - overall score as a percentage is 25% - 84%. The mark is awarded if the project has been carried out with sufficient scientific merit, the planned results of the project have been partially achieved, which has affected the overall achievement of the project objectives. Where the mid-term scientific quality assessment of the project makes recommendations for the further implementation of the project, these have been taken into account partially or not at all, and the reasons for not taking them into account are not sufficiently substantiated.

Project objective has not been achieved, does not correspond fully - overall percentage score 0% - 24%. A score is awarded if the project has been carried out with insufficient scientific quality, the planned results have been entirely or almost entirely not achieved, and the overall objective of the project has therefore not been achieved, or has been achieved to an insufficient extent. If the mid-term scientific quality assessment makes recommendations for further implementation of the project, these are not taken into account, and no reasoned justification is given.

31 Taking into account Clause 21 of the Methodology, the Council shall calculate the refundable part of the funding as follows:

31.1 if the percentage of the Experts' objective rating referred to in Sub-clause 2.20 of the Contract is 60% to 65%, a flat rate of 5% shall apply;

31.2 if the percentage of the Experts' objective rating referred to in Sub-clause 2.20 of the Contract is between 50% and 59%, a flat rate of 10% shall apply;

31.3 if the percentage of the Experts' objective rating referred to in Sub-clause 2.20 of the Contract is below 50%, a flat rate of 25% shall apply.

1. To be available from 30.10.2023. [↑](#footnote-ref-1)
2. Information about the project is available [at https://www.vm.gov.lv/lv/veselibas-darbaspeka-strategija-latvija](https://www.vm.gov.lv/lv/veselibas-darbaspeka-strategija-latvija) [↑](#footnote-ref-2)
3. Higher Education Law, Section 27(1) [↑](#footnote-ref-3)
4. Article 2(83) of European Commission Regulation (EU) No [651/2014](http://eur-lex.europa.eu/eli/reg/2014/651/oj/?locale=LV) of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty (Official Journal of the European Union, 26 June 2014, No L 187/1) )<https://eur-lex.europa.eu/eli/reg/2014/651/oj/?locale=LV>) [↑](#footnote-ref-4)
5. Higher Education Law, Section 44(1) [↑](#footnote-ref-5)
6. To be available from 30.10.2023. [↑](#footnote-ref-6)
7. Information about the project is available [at https://www.vm.gov.lv/lv/veselibas-darbaspeka-strategija-latvija](https://www.vm.gov.lv/lv/veselibas-darbaspeka-strategija-latvija) [↑](#footnote-ref-7)
8. To be available from 30.10.2023. [↑](#footnote-ref-8)
9. Information about the project is available [at https://www.vm.gov.lv/lv/veselibas-darbaspeka-strategija-latvija](https://www.vm.gov.lv/lv/veselibas-darbaspeka-strategija-latvija) [↑](#footnote-ref-9)