

FORESIGHT Call for Public-Private Partnership in 2026

Call for proposals for PPP Innovation Grant

1. Summary

Health~Holland stimulates innovative research and development by (financially) supporting public-private partnerships (PPPs) in the Life Sciences & Health (LSH) sector. With this call for proposals, companies and research organisations are encouraged to jointly invest in research & development (R&D) with the aim of developing sustainable innovative products and services within the Dutch LSH sector for the benefit of economic growth and economic resilience in the Netherlands. Health~Holland can financially support a collaborative project by awarding a PPP subsidy.

In 2026, FORESIGHT is making €3 million PPP grant available with the aim of conducting development projects on the use of molecular imaging for informed drug development and choice in oncological, autoimmune, cardiovascular and neurodegenerative diseases, using one or more modules for tracer production, imaging and data analysis/AI.

Submitting a PPP grant application within the 2026 FORESIGHT Calls consists of the following steps:

Spring Call 2026

- Step 1: Submission of a pre-proposal – deadline 1 May 2026 17:00 CET
- Step 2: Submission of a full proposal – deadline 1 October 17:00 CET

Autumn Call 2026

- Step 1: Submission of a pre-proposal – deadline 1 October 17:00 CET
- Step 2: Submission of a full proposal – deadline 1 February 17:00 CET

PPP applications can be submitted by e-mail to foresight@umcg.nl .

Core conditions

- The consortium consists of at least one for-profit company (company) and one research organisation.
- The main applicant is a for-profit company (company) or research organisation established in the Netherlands.
- The project will last a maximum of 4 years and will start between 1 January 2026 and 1 October 2027.
- Dutch research organisations and Dutch SMEs are eligible to apply for PPP funding.
- The project includes applied research, including industrial research and/or experimental development and no or only a small part of basic research (up to 20% of the total project cost) in support of the applied research.
- The PPP grant applied for is a maximum of €750,000.
- There is a real collaboration; The project is carried out at joint expense and risk and all consortium partners contribute to the content of the project.
- The project makes a concrete contribution to the (further) development of one or more of the ten priority key technologies from the [National Technology Strategy](#) and is thus in line with the Dutch Growth Markets.
- The research fits within the central mission and one of the five specific missions as described in the [Knowledge and Innovation Agenda \(KIA\) 2024-2027](#) for the Societal Theme Health & Care.

FORESIGHT specific criteria/advises

- A link with a member of the FORESIGHT core module or disease area teams and at least a private and a public partner.
- Collaboration with companies in the Netherlands or internationally, SMEs, and public partners, such as healthcare providers, patients, and insurers.
- The project should be carried out within the FORESIGHT Innovation and Service Center.
- Contribution to FORESIGHT objectives and appropriate output. We aim to have most of awarded project proposals with TRL ≥4. Technology readiness level: The Development phase (TRL 4, 5, 6), The Demonstration phase (TRL 7 & 8)
- •An innovative public-private R&D project in drug development or choice with molecular imaging in one of the four disease areas, using one or more modules.
- Duration preferably 3 to a maximum of 4 years.
- Dissemination to the scientific community and the wider public.
- Social impact well substantiated.
- Economic impact well substantiated.
- Good quality, partly in view of feasibility and mitigation plan.
- Maximum project budget of ~€1,500,000, of which €750,000 is a subsidy, 50% contribution by public-private parties, of which cash contribution is at least 10% for large companies.
- Collaborations with Dutch SMEs are encouraged.

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2. Background information

2.1 Background Health~Holland

Health~Holland is the branding name of the Top Consortium Knowledge and Innovation Foundation (TKI) - LSH. Health~Holland stimulates and facilitates Health~Holland public-private partnerships.

Health~Holland strengthens the Dutch Life Sciences & Health (LSH) ecosystem together with partners. In this dynamic ecosystem, Health~Holland brings together science, entrepreneurship, policy and society to translate scientific insights into innovative technologies and therapies that contribute to a healthier and more resilient society.

Health~Holland invests in a future-proof ecosystem by deploying smart financing instruments, sharing knowledge and experience and using a strong (inter)national network. Obstacles to innovation are identified in a timely manner and, where possible, actively addressed, so that promising innovations find their way into practice faster, more effectively and with more impact.

Health~Holland can financially support a programme by awarding a PPP subsidy. Within these programmes, PPP projects are selected and implemented with the necessary partners. The goal: to develop sustainable innovative products and services within the LSH sector that contribute to the economic growth of the Netherlands.

2.2 Relevance of Health~Holland & relevant policy documents

PPP Innovation Scheme

Health~Holland is one of the 12 TKIs that implements the PPP Innovation Scheme for the LSH sector on behalf of the Ministry of Economic Affairs (EZ). The aim of the PPP Innovation Scheme is twofold:

- 1) Stimulating public-private partnerships in the field of R&D that are socially and economically relevant in the medium to long term, and;
- 2) Strengthening research that focuses on the Knowledge and Innovation Agendas (KIAs) and thus contributing to the economically and socially relevant goals of the [Mission-Driven Innovation Policy](#).

The following laws and regulations apply to the PPP Innovation Scheme, which can be downloaded under section 5.2:

- Regulation on National EZK and LNV Subsidies – BWBR0035474 – Chapter 3.2 PPP Innovation;
- Framework Decision on National EZK and LNV Subsidies – BWBR0024796;
- Framework for State aid measures for research and development and innovation (2022/C 414/01);
- General Block Exemption Regulation (GBER): Commission Regulation (EU) No 651/2014 of 17 June 2014.

To make the Netherlands more resilient to economic and social challenges, the government is working on a targeted industrial policy with focus. The focus is on three goals: strengthening the Dutch earning capacity, increasing the resilience of the Dutch economy and creating social impact.

The focus of this industrial policy is on six markets that are already gaining traction in the Netherlands and of which analyses, including the [growth markets analysis](#), show that they contribute significantly to the Dutch earning capacity, economic resilience and social missions. Within this focused industrial policy, the National Technology Strategy (NTS) provides direction for public and private deployment in research and development, in order to create a strong technological basis for the growth of these six markets.

By financing PPP projects that contribute to the Health and Care missions of the Mission-Driven Innovation Policy and the ten priority key technologies of the NTS, economic and social value is created in the short and long term, and income is generated that contributes to the prosperity of current and future generations. In this way, Health~Holland contributes to the Dutch economic potential, economic resilience and earning capacity.

National Technology Strategy

In the [National Technology Strategy](#) (Ministry of Economic Affairs, 2024), ten priority key technologies have been defined as building blocks for a strategic technology policy. These technologies offer opportunities for the Dutch knowledge field and business community to make a positive impact worldwide and are essential for future innovation. For almost all these key technologies, the application, further development and marketing in the medical world play an important role. The most striking examples for the LSH sector are the key technologies: 'Biomolecular and cell technologies', 'Imaging technologies' and 'Artificial Intelligence and Data Science'. But the seven other key technologies are also of value to the LSH sector. Each submitted project must therefore actively contribute to the further development of at least one of the ten priority key enabling technologies from the NTS. These are as follows:

- Optical systems and integrated photonics
- Quantum technologies
- Process technology, including process intensification
- Biomolecular and cell technologies
- Imaging technologies
- Mechatronics and optomechatronics
- Artificial intelligence and data science
- Energy materials
- Semiconductor technologies
- Cybersecurity technologies

Social theme 'Health and Care'

The Health and Care missions have been drawn up by the Ministry of Health, Welfare and Sport (VWS). The central mission focuses on living five years longer in good health, reducing the health differences between people with a high and low socioeconomic position by 30%. The five specific missions contribute to this central mission through changes to the living environment, offering more care in the right place, better perspectives for people with chronic diseases, dementia, and better protection against socially disruptive health threats. Given the current challenges surrounding the workload in healthcare, labour-saving innovation is a theme that deserves cross-domain attention in addition to reducing health inequalities. The missions have a time horizon up to 2040. The [Knowledge and Innovation Agenda \(KIA\) 2024-2027](#) describes how technological innovation through public-private partnerships can contribute to the realisation of the central mission and the five specific missions of the societal theme of Health & Care.

2.3 Types of organisations within a PPP grant application

A PPP subsidy application distinguishes between different types of organisations. Correctly categorising your organisation is important, among other things, to check whether the consortium composition meets the conditions of the call and whether your organisation is eligible to use PPP grants. Within the PPS-I scheme, the following types of organisations are mentioned:

Research organisation¹

A research organisation is an entity that is primarily engaged in independent fundamental research, industrial research or experimental development, and/or in the broad dissemination of knowledge through education, publications or transfer. The legal form and method of financing (public or private) are not decisive in this respect. If the organisation also carries out economic activities, the financing and proceeds thereof must be kept in separate accounts. Companies that can exercise a decisive influence (e.g. as a member or shareholder) should not have privileged access to research results obtained. Examples of research organisations in the Netherlands are universities, UMCs, universities of applied sciences, TO2 and KNAW institutes.

Company

According to the settled case law of the European Court of Justice, an undertaking is any entity that carries out an economic activity, regardless of its legal form and method of financing. These economic activities generate turnover and income, for example through the provision of goods or services for more than a symbolic fee. The financing of the unit may not consist entirely of grants or gifts. No profit motive is required to qualify as a company, competition on the market (economic activities) is sufficient.

For-profit company

A for-profit company carries out economic activities with the aim of generating profits that may be distributed to shareholders, owners and/or participants.

 Please note: In PPP calls for grants, the term '*company*' always refers to a for-profit company.

Non-profit company

A non-profit company meets the same general definition of a company as a for-profit company, where economic activities take place from which turnover and income are generated. However, the profit streams are not distributed to shareholders, owners and/or participants, but are fully used for the objectives of the organisation, such as research and development, social goals and/or cultural initiatives.

 Please note: A foundation cannot be categorized as a for-profit enterprise, only as a non-profit enterprise, other party or research organization (provided it meets the criteria set for this).

¹ Definition of research organisation according to [the Framework for State aid for research, development and innovation](#) (Chapter 1.3, Article 16.ff). More information: <https://www.rvo.nl/onderwerpen/subsidiespelregels/ezk/onderzoeksorganisatie>

Both for-profit and non-profit companies are also distinguished on the basis of their size (FTE) and annual turnover or balance sheet total.

Small and medium-sized enterprises (SMEs)

According to the European Commission's Recommendation 2003/361/EC, an enterprise is a small and medium-sized enterprise (SME) if it has fewer than 250 full-time equivalents (FTEs) and whose annual turnover does not exceed EUR 50 million, or whose annual balance sheet total does not exceed EUR 43 million. Within SMEs, a distinction is made between micro-enterprises, small enterprises and medium-sized enterprises. More information about the (type of) SME can be found via the [User Guide](#) and [SME Wizard](#) of the European Commission.

Large companies

A company is considered to be a large company if it employs 250 FTEs or more, and/or has an annual turnover of more than 50 million euros and a balance sheet total of 43 million euros.

Other organisations

Organisations that do not meet the definition of research organisation or enterprise are categorised as other organisations. In general, this includes: health funds, top clinical hospitals, general hospitals, ROMs, and organizations with an ANBI status.

2.4 Evaluation of health and care innovations

This option applies if the innovation is covered by the MDR/IVDR and it is likely that the innovator/consortium will apply for CE marking for the innovation in the future or already has CE marking.

Explanation of the collaboration Health Innovation Netherlands

Health~Holland believes it is essential to analyse the actual impact and possibilities for implementation of MedTech innovations during the R&D phase. However, making such an analysis is complex and involves many stakeholders. That is why there is a close collaboration with [Health Innovation Netherlands](#) (HI-NL). HI-NL is a multidisciplinary infrastructure initiated by image-defining parties such as the National Health Care Institute, the NFU, Health~Holland and VWS. HI-NL facilitates an early tailor-made dialogue ([Animation](#)) between innovators and all relevant stakeholders in healthcare, and thus guides and directs the development, evaluation, implementation, upscaling and reimbursement of safe, effective and efficient (health) care innovations for patients and citizens.

Understanding the innovation development journey

The HI-NL innovation trajectory offers innovators/entrepreneurs insight into their entire innovation development process, through expert support and multistakeholder advice on the development of their specific innovation, tailored to innovation type and development stage. The aim is to give innovators/entrepreneurs an overall picture as early as possible of how their innovation will fit into the healthcare or prevention landscape and what concrete follow-up steps are required for this. The HI-NL innovation process consists of four successive phases:

- **The Intake**, in which the fit, scope, direction and timing of the HI-NL innovation process is discussed. For scope and direction, for example, think of (non-exhaustive): intended claims, target population, strength of current evidence and required evidence, comparison with the current standard in healthcare, application and integration in the current healthcare context, CE, reimbursement, implementation and upscaling.
- Extensive **scoping & synthesis** of the innovation and the intended context by a team of healthcare innovation experts (a so-called case team) in collaboration with the innovator. This phase requires commitment from the innovator/entrepreneur with about four meetings over an eight-week period, which may require some preparation.
- A **Round Table session** with all relevant stakeholders (including patient, medical specialist, health insurer, HTA expert, CE expert, entrepreneurs, policy makers). In this phase, all relevant stakeholders in the health field who play a role in the specific innovation are brought together at the same time to provide the innovator/entrepreneur with consensus advice on their innovation and necessary next steps.
- **The Innovation Guide:** The knowledge gathered from the scoping & synthesis phase is then combined with the multistakeholder consensus advice and delivered in the form of an extensive Innovation Guide with concrete tools for the next steps in the development process. The Innovation Guide is discussed through a close-out call and is a confidential document and property of the innovator.

What steps should the consortium take?

If the consortium wants to know more about the HI-NL innovation process and is considering making this part of the application, the consortium can contact [HI-NL](#) no later than three weeks [before the deadline of this call for proposals](#). An intake interview is then scheduled, in which HI-NL explains the innovation process in more detail and what this can mean for the project/innovation (process). Before the intake, you as an applicant are requested [to fill in the intake form](#), so that HI-NL gets a good idea of the current status of the innovation and the development process (also in the context of the PPP subsidy application), the context and

questions that arise. If, after contact with HI-NL, it appears that a Round Table process is of added value, this can be indicated in the relevant question on the application form. In addition, an earmarked budget of €33,275 (incl. VAT), which covers the costs of the entire HI-NL innovation process, may be included on the budget form by the IP-holding party as part of the total PPP subsidy requested. This amount can be included under the heading 'costs of third parties' under the heading 'HI-NL Innovation Trajectory'.

The evaluation committee will independently assess whether the HI-NL innovation process is of added value for the success of the application. Only after the application for a PPP subsidy has been conditionally honoured, will it be asked whether the consortium can elaborate on the plans with regard to the HI-NL innovation process in the application. The details of this will be included in the award letter.

Contact person HI-NL

HI-NL can be reached via the following e-mail address: info@healthinnovation.nl. More information about HI-NL can be found at www.healthinnovation.nl.

2.5 Participation of the target group and end user

To increase the chances of successful implementation and acceptance of an innovative product or service, it is essential that the consortium is aware at an early stage of who will be affected by the innovation. This is divided into a group that is directly affected by implementation, the end user, and a group that indirectly experiences the effects of implementation, the target group. To improve future acceptance, it is important that the right groups are well identified and involved in the development of an innovative product or service. In some cases, it is possible that the end user and the target group are the same group.

End user

The end-user is defined as the person(s) or organization(s) who will work with the innovation or whose work will be affected as a result of the implementation of the innovation. End users interact directly with the innovation, and can provide valuable input from their experience for development, improvement and implementation.

Target group

The target group is defined as the person(s) or organization(s) that will indirectly benefit from the successful implementation of the innovation. The social relevance is often characterized by this group, who will experience the (positive) effects, without having to experience any change.

For example: A consortium is developing a new immunotherapy for people with metastatic lung cancer. The target group consists of patients with metastatic lung cancer, for whom the therapy is actually intended. The end users are the people who will actually work with the therapy, such as the doctors and nurses.

To increase the success of innovations, equal cooperation is stimulated with the target group and end users, such as citizens in their role as patients, end users, clients and relatives. Where appropriate, researchers should be able to apply participatory methods to establish equal and safe collaboration and co-creation. It is allowed to hire an external expertise center for this purpose. These costs are eligible for subsidy within the duration of the project and can be financed with a PPP subsidy.

2.6 Impact on health inequalities

Despite the collective efforts in the field of Health and Care by government, business and knowledge institutions, people with a low income and a low education (primary education + VMBO) live 15 years less in good health than people with a college or university education and a high income. The difference in life expectancy is also seven years. The central mission of the social theme Health and Care is therefore that "by 2040, all people in the Netherlands will live at least five years longer in good health and the health differences between the lowest and highest socio-economic groups will have decreased by 30%".

It is important to focus efforts on research and innovations on what makes innovations effective for people in vulnerable situations and people with a health disadvantage. It is essential to involve the experiences and/or knowledge of people with a lower socio-economic position in the projects from the start. The ROCKET principles have been drawn up to promote active interaction with people in a low socio-economic position. This is just one example of the solid scientific and practical basis available on what is needed for a successful strategy to tackle health inequalities. It is therefore allowed to hire an external center with expertise in the field of reducing health inequalities. These costs are eligible for subsidy within the duration of the project and can be financed with a PPP subsidy.

2.7 ARRIVE Guidelines

When laboratory animals are used in the study, it is very important that the ARRIVE guidelines (*Animal Research: Reporting of In Vivo Experiments*) are followed. These internationally developed guidelines provide a clear framework for the careful and

complete reporting of animal experimental research. By using ARRIVE, the quality of research reports is increased, which contributes to the reproducibility of results, the prevention of unnecessary repetition of experiments and a careful ethical justification of animal use.

Following the guidelines also ensures that the research results are optimally aligned with international standards and publication requirements of leading scientific journals and funders. In this way, not only is the scientific value of the research enhanced, but it is also ensured that the use of laboratory animals contributes to maximum social and scientific returns. More information about the ARRIVE guidelines can [be found](#) here.

3. Purpose & Preconditions

3.1 Purpose of the call for proposals

FORESIGHT: A public-private partnership for drug development

The FORESIGHT Service and Innovation Center and the Program bring together the expertise and infrastructure of UMCG, AUMC, NKI/AVL and TU/e, in collaboration with (inter)national partners. By combining forces in tracer development, bioengineering, imaging, and AI-driven data analytics, FORESIGHT aims to transform drug development and precision medicine. This will lead to a strengthening of the cooperation and the future realization of a FORESIGHT Service and Innovation Center.

The urgent need for innovation in healthcare

Chronic and serious diseases are an increasing burden on society. The number of patients is expected to rise sharply, overwhelming healthcare systems and pushing costs to unsustainable levels. Despite the urgent need for new treatments, drug development remains highly inefficient—taking an average of 10 years and costing at least €1 billion per drug, with a high failure rate. Even under approved medications, 90% do not work for all patients. In addition, diagnostic imaging—which can help predict drug effectiveness and personalize treatments—is rarely used in development or clinical practice.

Transforming drug development with advanced imaging

FORESIGHT addresses these challenges by applying molecular nuclear and optical imaging to develop imaging biomarkers—providing tools from cellular tissue mapping to real-time drug tracking in the body.

Improve early (preclinical) testing, reducing the failure rate.

This is achieved by identifying the right patients for specific treatments and increasing drug effectiveness, optimizing clinical trial design, and making development faster and more cost-effective. By integrating these technologies, FORESIGHT improves precision medicine so that patients receive the most effective treatments.

The aim of the FORESIGHT-PPS program is to carry out development projects on the use of molecular imaging for informed drug development and choice in oncological, autoimmune, cardiovascular, and neurodegenerative diseases, using one or more modules for tracer production, imaging, and data analysis/AI. This is intended to demonstrate the added value of the FORESIGHT proposal for those disease areas in projects with future customers. The FORESIGHT PPP program makes it possible to create these showcases with (inter)national partners and with strong participation from Dutch SMEs/start-ups.

Results and impact

The FORESIGHT PPP program will deliver:

- Advanced imaging solutions for drug evaluation and patient selection.
- Collaborative R&D projects with industrial partners.
- Preclinical and clinical imaging studies for major diseases.
- AI-driven data analytics to improve healthcare decision-making.

To facilitate the conduct of development projects on the use of molecular imaging for informed drug development and choice in oncological, autoimmune, cardiovascular, and neurodegenerative diseases, using one or more modules for tracer production, imaging, and data analytics/AI, the 2026 FORESIGHT Calls have been created.

3.2 Preconditions for the collaborative project

The application must meet a number of conditions. Below are the conditions for the collaborative project, specific to this FORESIGHT call for proposals:

- The consortium consists of at least one for-profit company (company) and one research organisation.
- The main applicant is a research organisation or company established in the Netherlands.

- The project includes applied research, including industrial research and/or experimental development, and no or a small part of fundamental research (maximum 20% of the total project cost). A description of the three types of research is described in Appendix A.
- The project will start between 1 January 2026 and 1 October 2027 and will last a maximum of 4 years.
- The versions of the application form, budget form and consortium agreement specific to the 2026 FORESIGHT Call were used. Outdated or other versions of these documents will not be accepted.

FORESIGHT specific criteria/advises

- A link with a member of the FORESIGHT core module or disease area teams and at least a private and a public partner.
- Collaboration with companies in the Netherlands or internationally, SMEs, and public partners, such as healthcare providers, patients, and insurers.
- The project should be carried out within the FORESIGHT Innovation and Service Center.
- Contribution to FORESIGHT objectives and appropriate output. We aim to have most of awarded project proposals with TRL ≥ 4 . Technology readiness level: The Development phase (TRL 4, 5, 6), The Demonstration phase (TRL 7 & 8)
- An innovative public-private R&D project in drug development or choice with molecular imaging in one of the four disease areas, using one or more modules.
- Duration preferably 3 to a maximum of 4 years.
- Dissemination to the scientific community and the wider public.
- Social impact well substantiated.
- Economic impact well substantiated.
- Good quality, partly in view of feasibility and mitigation plan.
- Maximum project budget of $\sim \text{€}1,500,000$, of which $\text{€}750,000$ is a subsidy, 50% contribution by public-private parties, of which cash contribution is at least 10% for large companies.
- Collaborations with Dutch SMEs are encouraged.

In addition, the following general preconditions apply to the PPP project:

Financial

- Dutch research organisations and Dutch SMEs are eligible to apply for PPP funding under the financial conditions described in section 3.5.
- There is a real collaboration²; The project is carried out at joint expense and risk and all consortium partners contribute to the content of the project.
- All consortium partners contribute *in kind*. This means o.a. dat all consortium partners will in any case incur wage costs, which are visible in the budget form.
- In addition to the *in-kind* contribution, it is also possible to *contribute in cash*. A *cash* contribution from one party must be used within the project to cover costs of another consortium partner.
- The use of a PPP subsidy and the provision of a *cash* contribution by the same party is not permitted.
- Consortium partners are not allowed to hire or compensate each other for services or products within the project, as consortium partners are not allowed to send each other invoices. Third parties may be hired for services, but they are not consortium partners.
- If the consortium has or will receive other public grants for the submitted project, for example from NWO, ZonMw, SIA or Health~Holland, the regulations on the accumulation of different grants apply³.

Relevance

- The project has as deliverables innovative products and services that are of social and economic added value.
- The project makes a concrete contribution to the (further) development of one or more of the ten priority key technologies of the [NTS](#) and is thus in line with the [Dutch Growth Markets](#) (see section 2.2).
- The research contributes to the central mission and one of the five specific missions as described in the [Knowledge and Innovation Agenda \(KIA\) 2024-2027](#) for the Societal Theme Health & Care.
- If the table under question A.4 of the application form shows that there is a potential conflict of interest, this should be addressed in a separate document.
- The consortium is encouraged to (re)use existing data where possible. Data generated during the project must be managed and made available according to the FAIR principles.

² Definition of effective cooperation according to [the framework for State aid for research and development and innovation](#): (Chapter 1.3, Article 16.h). More information: <https://www.rvo.nl/subsidies-financiering/pps-innovatie/definities>

³ The cumulation provisions are set out in paragraph 2, Article 6, of the [Framework Decision on National EZK and LNV Subsidies](#). The support limits with regard to the use of PPP subsidies are set out in Article 3.2 of the [Regulation on National EZK and LNV Subsidies](#).

3.3 Composition of the consortium

The PPP grant applicants put together a consortium in which research organisations, companies, and preferably also relevant public organisations, while retaining their own identity and responsibility, jointly realise a project on the basis of a clear and optimal division of tasks and risks. The consortium consists of at least one research organisation and one company. In addition, more companies, research organisations and additional (public or private) parties can join the consortium. Participation of foreign parties is encouraged, provided that the results of the project benefit the Dutch knowledge infrastructure and economy. All consortium partners must contribute equally to the project financially and substantively.

The consortium will appoint a party as the main applicant for the project. The main applicant is the project coordinator/coordinator and acts as the contact person for FORESIGHT throughout the procedure. Every other party within the consortium is a co-applicant.

3.4 Consortium agreement & intellectual property policy

Before the start of the project, all consortium partners must sign a consortium agreement. This cooperation agreement sets out the mutual agreements, responsibilities, rights and obligations of all parties involved. The agreement provides a legal framework for the implementation of the project, including provisions on decision-making and conflict handling, the entry or exit of consortium partners, and the division and use of intellectual property rights (IP). The model consortium agreement for the 2026 FORESIGHT Call is available on the website, in both a standard version and a version for clinical trials.

⚠️ Using the model consortium agreement made available for the 2026 FORESIGHT Call is mandatory. Any modifications to the model must be immediately recognizable to Health~Holland.

Agreements on IP follow the [Framework for State aid for research, development and innovation](#) (specifically Article 2.2.2.) and the PPP Innovation Scheme ([Government Gazette 20 October 2023, 28651](#)).

IP rights

The starting point is that the party that develops a result independently is also the owner of it (*ownership follows inventorship*). However, there are three exceptions when the IP generated by the research organization can become the property of the industrial partner. These three exceptions can be applied separately or in combination and are included together in the template.

Option A: Full financing (art. 8.2.1) – 'Who pays, decides'

If a research organisation develops a result, but the industrial partner bears the associated costs in full, the industrial partner becomes the owner of that result. This will hardly happen in practice, because PPP projects involve actual cooperation with shared commitment and financing. This option is included in the template for completeness.

Option B: Adequate reflection of the contributions (art. 8.2.2 & 8.10 – OPTIONAL)

If applicable, the parties can explicitly stipulate in advance that certain Foreground that is (partly) developed by a research organisation will nevertheless become the property of the industrial partner. This is possible when it adequately reflects the significant contribution of the industrial partner to the achievement of those results. This option is optional and requires a concrete description and justification in Article 8.10 of both the intended *Foreground* and the contributions that justify the deviating allocation of ownership.

⚠️ Adequate reflection of the contributions (Articles 8.2.2 and 8.10) is optional. The consortium may also remove clauses 8.2.2 and 8.10 from the consortium agreement where it does not apply.

Option C: Option right (art. 8.2.3 & 8.5-8.8)

Industrial partners who contribute substantially to the project budget (at least 10% *in cash* and/or *in kind*) can receive an option right on *Foreground* from the research organisation for:

- Obtaining a license on *Foreground* held by the research organization;
- To obtain ownership of *Foreground* in the possession of the research organization.

When the option right is exercised, the parties make agreements about license or transfer in good consultation. These agreements contain at least:

- Market-based remuneration, with settlement of the company's project contribution.
- *Anti-shelving*: the company is committed to *actually using* the *Foreground*.
- *Grant-back*: The research organization holds a royalty-free, non-exclusive license for research and teaching.
- *Indemnification*: Protection of the research organization against claims through use by the company.

- Access rights remain intact: *Access Rights* of other consortium members are not affected.

Parallel agreement (art. 8.11 – OPTIONAL)

If two or more parties already have (or want to conclude) a separate agreement, it can be used within a PPP subsidy project, provided that it fits within the framework regulation and has been submitted to Stichting LSH-TKI in good time and confirmed in writing that it is not in conflict with the consortium agreement. In the event of a conflict, the consortium agreement always takes precedence. If no parallel agreement is or is not envisaged, Section 8.11 may be removed.

Results that are not subject to intellectual property rights must be widely disseminated.

3.5 What amount can be requested?

Within this call for proposals, funding (PPP grant) can be applied for by Dutch research organisations and Dutch SMEs. Other parties are welcome to participate in consortia, but cannot finance their costs through PPP grants. A maximum of €750,000 PPP subsidy must be applied for per project. The conditions for the use of a PPP subsidy are set out below for each type of organisation.

Dutch research organisations

Dutch research organisations may finance a maximum of 70% of their own costs for fundamental research and industrial research with PPP grants. For experimental development, they may finance a maximum of 60% of their own costs with PPP subsidy.

Dutch SMEs

Dutch SMEs (both for-profit and non-profit) may finance a maximum of 60% of their own costs for fundamental research and industrial research with PPP subsidies. For experimental development, they may finance a maximum of 40% of their own costs with PPP subsidies.

Conditions for the use of subsidies by Dutch SMEs

To substantiate the SME status, every SME must provide a completed '[SME check](#)'. In addition, for all constitutional subsidies, including the PPP scheme, an SME can only receive a PPP subsidy if it is not classified as a *company in difficulty (OIM)* according to the definition. It is therefore mandatory that all SMEs that use PPP subsidy submit a 'Declaration of no company in difficulty' supplemented with the completed decision scheme. The definition OIM, statement and decision scheme can [be found](#) here.

Please note: Health~Holland will randomly request additional information to verify the submitted statement and decision schedule. Additional documents may need to be submitted, including:

- Company and/or consolidated annual accounts of the company (group) used to complete the decision schedule (with a balance sheet date not older than 18 months).
- If applicable: an organisation chart of the related group, in which the mutual share ratios are clearly shown.

Table 1.A shows these maximums again. A project can consist of a combination of the three types of research. Consortia are encouraged to jointly organise the activities and budget within the project, with both research organisations and companies contributing equally to the project. In addition, Dutch SMEs will have an equal opportunity to apply for a PPP subsidy for their R&D activities.

Table 1.B shows the minimum percentage of the **total project costs** that must be contributed by the research organisation(s) and company(ies) in the project. These minimum contributions refer to the joint contribution of all organisations of the same type within the consortium. To illustrate: if a consortium consists of 2 research organisations and 2 companies, the research organisations must jointly contribute at least 10% of the total project costs *in-kind*. Depending on the type of research, companies must jointly contribute 15% or 30% of the total project costs *in-kind* (and *in-cash*).

Section 5.1 provides two calculation examples in which the funding conditions are applied to two different types of consortia.

Table 1.A: Funding by type of research*Partner level*

Max % PPP grant based on eligible costs partner	Basic and industrial research	Experimental development
Research organisations	70%	60%
Dutch SMEs	60%	40%
Large companies, foreign SMEs, Dutch and foreign other parties	0%	0%

The percentages mentioned in table 1.A are percentages taken from the total costs of the organization in question.

Table 1.B: Minimum contributions*Project level*

Minimum contribution based on total project costs	Basic and industrial research	Experimental development
Research organisation(s)	Min. 10%	Min. 10%
Profit-making and non-profit company(ies)	Min. 15%	Min. 30%

The percentages mentioned in table 1.B are percentages taken over the total project costs.

3.6 Calculating the project costs

Only costs directly related to the R&D activities within the project are considered eligible costs and can be entered on the budget form. The budget form distinguishes between five types of eligible costs. Please refer to the 'Explanation of cost types' tab on the budget form for additional information.

Wage costs

Each consortium partner must enter wage costs on the budget form. Examples of labour costs directly related to R&D are academic staff (PhD, Postdoc, PI), technicians and scientific support staff. When filling in the wage costs, one of the three cost systems given in the Framework Decision (Section 4) must be used. An organization may only use one of these methodologies.

Wage costs + 50% surcharge system

The direct wage costs (gross salary, holiday allowance, non-profit-dependent end-of-year bonus / 13th month, employer's costs, etc.) of project employees are entered and automatically increased by a 50% increase. This surcharge is intended to compensate for the indirect or overhead costs of the organization. You calculate the hourly rate by dividing the direct wage costs by the number of productive hours per year that is common in your organization. The wage costs + 50% surcharge system is mainly intended for staff who are in (permanent) employment.

⚠ For wage costs, a conclusive and complete time registration must be kept during the duration of the project.

Fixed hourly rate

The fixed hourly rate is a compensation for the wage costs/labor costs and the indirect or overhead costs of your organization. Within the PPS-I scheme, a fixed hourly rate of € 60 per hour is used. Parties that do not use a PPP subsidy may also charge their own hourly rate. This is subject to the condition that the calculation of the costs is based on a customary and verifiable method and is based on economic principles and standards that are considered acceptable in society and that are systematically applied by the participants in a collaborative project. On the budget form, these parties may adjust the standard hourly rate of €60.

Integral cost system

The IKS method is suitable for large organisations that regularly apply for subsidies from RVO, and must be approved in advance at the organisational level via RVO. When using the ICC, the organisation must therefore send proof of approval from RVO when submitting the application. **Please note: When you use the Integral Cost System (ICC), costs for materials, depreciation and travel and accommodation costs are often already included in the wage costs. In order to avoid double financing, it is not allowed to enter these costs separately in the budget form.**

Cost of materials and tools

Costs for materials and resources consist of costs for the consumption of materials from stock, as well as (specially) purchased for this project. You can enter the cost of consuming materials that were not purchased specifically for the project when you record the usage. When entering the costs for consumables, the historical cost price should be used. Materials include consumables such as raw materials, parts, chemicals, kits, etc.

Costs for use of machinery and equipment

Equipment costs consist of costs for the use of, or the purchase of new devices, machines and software licenses. The cost of use of existing equipment or equipment not purchased specifically for the project is calculated on the basis of an auditable record of the use of this equipment. This means that you demonstrably keep track of how much time or for how many actions the equipment has been used for the project. For this, you also calculate a cost per unit of time or action. For the purchase of equipment specifically for this project, the amount of the costs must be able to be demonstrated on the basis of an invoice, and must be entered on the basis of a straight-line depreciation system with a minimum depreciation period of five years.

Costs due to third parties

⚠ Where a company claims costs for a product, service or supply under this scheme, these costs must be based on the actual cost price. Charging profit surcharges, margins or other commercial rates is not allowed. Only directly attributable, real, market-based costs that have been demonstrably incurred for the implementation of the project may be included.

Third-party costs include the direct project costs for which you receive invoices from others. It must be ensured that the costs owed to third parties are in proportion to the rest of the budget. If this cost item is very high, this may affect the assessment of the evaluation committee. Examples of costs owed to third parties are costs for outsourcing animal testing, hiring a consultant, remuneration for volunteers, paying board members through a separate BV or secondment of staff.

Publication, travel and accommodation costs

Costs for Open Access publications, conferences, and travel and accommodation costs for international conference visits can be entered here. Domestic travel and commuting costs are not eligible.

Examples of ineligible costs

The following is an overview of examples of ineligible costs. These costs may therefore not be entered on the budget form.

- Patent applications and maintenance⁴
- Audit
- Benchfee
- Overhead
- Support staff not directly related to the substantive R&D activities, such as:
 - Project Controller
 - Business developer
 - Administrative assistant
- Costs related to implementation of the developed innovation
- Drawing up a business case
- Conducting Performance Assessment (*Health Technology Assessment*)
- Non-scientific dissemination
- Project management tasks⁵ not directly related to the substantive R&D activities, such as:
 - Escalation to a steering committee
 - Establishing a risk management model
 - Administrative accountability

Budget Form Instructions

Within the 2026 FORESIGHT Call, a specific budget form is used. This budget form uses multiple built-in features and referrals. It is therefore important to follow the instructions on the budget form (see the "Instructions" tab of the budget form). Changing the built-in features and redirects in the budget form is not allowed.

For an explanation of the (calculation of) eligible costs, see [Commission Regulation \(EU\) No 651/2014 of 17 June 2014, Article 25](#) and the [Framework Decision on National EZK and LNV Subsidies, Chapter4, Articles 10-14](#).

3.7 Data management

⁴ Costs for patents purchased at arm's length conditions from, or licensed by, external sources are eligible.

⁵ Project management tasks that are directly related to the substantive R&D activities (e.g. discussions with employees, the analysis of technical risks, the preparation of substantive reports, the preparation of specifications) are eligible.

Open access publications

Health~Holland believes that research results that are (partially) funded with PPP grants (public funds) should be freely accessible worldwide. All scientific publications of research funded by means of PPP grants should therefore be freely accessible worldwide (open access) from the moment of publication. You can check whether your organisation has agreements with traditional publishers on this via the Open Access website. This website offers an overview of more than 8,000 journals in which corresponding authors from Dutch universities and UMCs can publish open access for free or at a discount. Costs associated with *open access* publishing are included in the eligible project costs.

FAIR

Health~Holland encourages optimal use of research data and therefore wants this data to be stored according to the [FAIR principles](#): *findable, accessible, interoperable* and *reusable*. This means that the data generated in the projects can be found, understood and used by both humans and machines. The process of making data FAIR is explained by the GoFAIR foundation in the [three-point FAIRification framework](#). Health~Holland plans to expand its policy with regard to FAIR data management in the future and will increasingly monitor the FAIR-ness of data.

Data management plan

To increase awareness among researchers about the importance of responsible data management, applicants must draw up a data management plan based on the Health~Holland format of Health~Holland after an application has been definitively approved. Approval of the data management plan by Health~Holland is a condition for the provision of a PPP subsidy.

4. Procedure

4.1 Application procedure and timeline

Publication 2026 FORESIGHT Spring call	February 2, 2026
Deadline for submitting a pre-proposal	May 1, 2026
Checking for admissibility	Within 2 working days after receipt of the application
Assessment by the pre-proposal evaluation committee	±4 weeks after deadline (1 June 2026)
Deadline for submitting full application	October 1, 2026
Checking for admissibility	Within 2 working days after receipt of the application
Assessment by the pre-proposal evaluation committee	±4 weeks after deadline (1 November 2026)
Decision Completed Documents	February 1, 2027
Acceptance or rejection letter	±4 weeks after deadline
Submission of signed Consortium Agreement	February 1, 2027
Submission of signed final award letter	Within 4 weeks of receiving the final award letter

Please note that this schedule is subject to change.

Submitting a PPP grant application within the 2026 FORESIGHT Spring call consists of the following steps:

Spring Call 2026

- Step 1: Submission of a pre-proposal – deadline 1 May 2026 17:00 CET
- Step 2: Submission of a full proposal – deadline 1 October 2026 17:00 CET

Autumn Call 2026

- Step 1: Submission of a pre-proposal – deadline 1 October 2026 17:00 CET
- Step 2: Submission of a full proposal – deadline 1 February 2027 17:00 CET

PPP applications can be submitted by e-mail to foresight@umcg.nl .

4.2 Step 1 – Mandatory pre-application

4.2.1 Submission of pre-application

The deadline for submitting a pre-proposal is 1 May 2026 17:00 CET (Spring Call) or 1 October 2026 17:00 CET (Autumn Call). Pre-proposals must be submitted via foresight@umcg.nl. Submitting a pre-application is **mandatory** to be considered for a full application. Only pre-applications using the FORESIGHT template will be processed. The project coordinator must send the following attachments:

- Pre-application form
- Provisional budget
- Declaration without conflict of interest

FORESIGHT intends to have a total of 4-6 consortia submit a full proposal. Upon receipt of the pre-proposal, it will be checked for eligibility according to the preconditions for the consortium and budget as described in section 3.2. If the pre-proposal does not meet these preconditions, the consortium will have 24 hours to submit an improved version of the pre-proposal. An inadmissible pre-proposal definitely excludes the submission of a complete application.

4.2.2 Assessment of pre-application

If, after the admissibility check, it appears that more than 6 pre-proposals are admissible, a ranking and selection will be made of the applications that may be fully developed. This selection is made on the basis of the following assessment criteria:

- Administrative and registration information is complete.
- The planning of the project is realistic.
- The research is well described and the objectives of the project are clear.
- The intended methods with regard to feasibility have been correctly chosen and substantiated.
- The consortium has the right expertise, network, manpower, facilities and resources to ensure a successful outcome of the project. The different roles of the consortium partners are complementary and well-defined, and effective collaboration takes place.
- The project is innovative and offers new scientific insights.
- The projects align with the objectives and objectives of the FORESIGHT program and contribute to one or more of the expected FORESIGHT results.

- The project meets social needs and the social importance is well substantiated.
- The economic impact and importance of the project are well described, and this impact is valuable for the (northern) Netherlands.
- The economic added value of the project for each consortium partner is well substantiated.
- If applicable, the number of test subjects and/or laboratory animals is realistic and sufficient.
- Budget aspects are realistically feasible.

Please note: Only applications that meet the eligibility criteria and are assessed as the most promising on the basis of the above criteria via ranking will be invited to submit a full proposal. If your pre-proposal is rejected on the basis of the admissibility check or selection, the applicant will receive a message explaining why the project has not been invited to submit a full proposal.

FORESIGHT aims to inform the applicant about the results within 4 weeks after the closing deadline for the pre-proposal.

⚠ The scope of the entire application and the composition of the consortium must remain essentially the same. In the event of significant changes between the pre-proposal and the full proposal, the consortium should contact the FORESIGHT Program Group foresight@umcg.nl.

4.3 Step 2 – Complete Application

4.3.1 Submission of full application

- The deadline for submitting the full application is deadline 1 October 2026 17:00 CET (Spring Call) and 1 February 2027 17:00 CET (Autumn Call)

and must be submitted via foresight@umcg.nl. All necessary documents can be found on the website [The FORESIGHT PPP Program](#). The complete application consists of the following documents:

- A fully completed application using the FORESIGHT template
- Budget form
- *Letters of Commitment* (*Letters of Intent* are not accepted) in which the commitment of the co-financing and the amount of the contribution in kind and/or in cash is confirmed for each participant, signed by an authorized person. The main applicant does not have to provide a Letter of Commitment.
- An unsigned draft version of the Consortium Agreement (an empty format is not sufficient). The consortium is obliged to make use of the template consortium agreement made available⁶. The draft version may contain only non-essential changes that do not conflict with the framework. If there is any doubt about changes, the consortium should call in an expert, such as a technology transfer office of the research organisation or a lawyer.
- A signed [statement no company in difficulty](#) for all Dutch SMEs that want to use PPP subsidy within the project.
- An [SME check](#) for all Dutch SMEs that want to use PPP subsidy within the project.

Instructions for writing the application:

- The application form may be completed in English.
- Avoid repetition from previous answers: each answer must have a clear added value compared to the other answers.
- Additional attachments or additional documents other than those mentioned above are not allowed and will not be processed.
- The word limit per question in the application form may not be exceeded.
- Avoid copying AI-generated text verbatim without editing; Make sure that the application is in line with the consortium's own vision, context and expertise. It is the responsibility of the consortium to check and correctly substantiate claims and facts.
- Adding images to the application is allowed and can visually support the application. However, it is not allowed to add text tables as images and/or to use images with a lot of text to circumvent the word limit. Images with a limited, supporting text are allowed; The words in these images don't count toward the word limit.
- Claims and figures must be substantiated by sources that are mentioned in the reference list at the end of the application form (section D. References).
- The application form must be signed by a formally mandated director of the entity in question who acts as the main applicant.

4.3.2 Admissibility of the application

After receiving the application, it will be checked for admissibility within two working days. This admissibility check will check the completeness of the application and whether the application is in line with the preconditions described in section 3.2. If the application is not complete, the consortium will be given one working day to make the necessary adjustments and provide the requested information. If the application is inadmissible, this will be communicated to the applicants within two working days.

⁶ If there is an existing consortium agreement, contact FORESIGHT Program Group.

4.3.3 Assessment of PPP grant applications

Admissible applications will be assessed against all the conditions of this call, including the type of research and alignment with strategic policy documents such as the NTS. Proposals are also assessed by an expert and independent evaluation committee. The final composition of the evaluation committee will be published on our website no later than the deadline for submitting a full proposal. External referees can also be engaged for the assessment of an application. Both these referees and the evaluation committee members must first sign a confidentiality agreement before they can assess a PPP grant application.

The evaluation committee assesses the applications against the substantive criteria as set out in section 4.3.4. A ranking of all applications is drawn up. During the evaluation committee meeting, all complete applications are discussed individually and provided with a recommendation for (conditional) funding or rejection. Depending on the number of grant recommendations and the available budget, ranking is drawn up as advice to the FORESIGHT Program Group. The FORESIGHT Program Group ultimately decides whether or not to grant the application and the amount of the PPP subsidy for the collaborative project in question.

4.3.4. Substantive criteria

The evaluation committee assesses the project applications on the basis of the following substantive criteria. The substantive criteria are divided into criteria based on scientific quality, impact and relevance and feasibility.

1. Scientific quality

- a) The research is clearly described and the goals of the project are clear.
- b) The project is innovative and builds on the current state of knowledge and technology in the field (*state of the art*), providing new (scientific) insights and developing innovative applications.
- c) The plan of action and the associated methods are appropriate to the research and worked out in sufficient detail, including time schedule, milestones, deliverables and, if relevant, realistic estimates of the number of test subjects, laboratory animals and/or samples. The work packages are clearly interconnected and well coordinated.
- d) It is clear when the project can be labelled as 'successful' and what criteria are used.

2. Feasibility

- a) The consortium has the right expertise, network, manpower, facilities and resources to make the project a good result.
- b) The different roles of the consortium partners are complementary and clearly described, and there is equal cooperation. If there is a potential conflict of interest, it is adequately addressed in a separate document.
- c) The project's timeline is realistic and takes into account possible iterations and adjustments based on interim findings;
- d) The risks of the project have been properly assessed and adequate thought has been given to how these risks will be dealt with.
- e) The budget of the project is realistic (including number of man-hours per organization, realistic costs of materials and equipment and realistic "costs owed to third parties").

3. Economic value

- a) The value creation of the project for each individual partner is clearly described and realistic.
- b) The market of the intended innovation is correctly addressed in terms of size, access, cost-effectiveness, and risks.
- c) The planned activities to further develop the results of the project towards market introduction (TRL9) are well thought out and described for each partner.
- d) The competitive analysis identifies the relevant competitors and convincingly describes the distinctiveness.
- e) The economic value for the Netherlands is clearly described and it is explained why this specific project is necessary to achieve this value.

4. Social value

- a) The project outlines a clear definition of the problem with a clear social relevance for the Netherlands. The project makes a convincing and substantiated contribution to solving this.
- b) The end user of the innovation is described in concrete terms and this end user is sufficiently involved in the design and progress of the project.
- c) The target group of the innovation is described in concrete terms and this target group is sufficiently involved in the progress of the project.
- d) The planned activities to disseminate and implement the results from the proposed research are well thought out and described for each partner.
- e) The project fits in well with the Knowledge and Innovation Agenda 2024-2027 Health and Care by contributing to the achievement of the central mission and one of the five specific missions of the Societal Theme Health and Care.

4.4 Award procedure, monitoring and payments

4.4.1 After a PPP grant application has been awarded funding

No later than four weeks after receipt of the award letter, the project coordinator must submit an unsigned final consortium agreement agreed upon by all partners to FORESIGHT for verification. After approval of the consortium agreement, the consortium will have two weeks to have it signed by all partners.

When the consortium agreement has been fully signed and approved, FORESIGHT will draw up an implementation agreement, which must be signed by all partners within four weeks of receipt. The implementation agreement is a document in which, among other things, the rights/obligations and contributions of the various consortium partners are laid down.

Health~Holland publishes information about all awarded projects on the projects page of its website (<http://www.health-holland.com/project>) by means of a project profile completed by the consortium. The consortium must also provide a data management plan (see section 3.7). Templates for this are provided by Health~Holland and must be submitted together with the signed version of the PPP Subsidy Agreement.

When the signed implementation agreement, the data management plan and the project profile have been received and approved, the first advance PPP subsidy will be paid. The remaining payments will be made annually after receipt and approval of a progress report and ultimately the final report. The payments are made to the institution where the project coordinator works; The project coordinator is responsible for any financial breakdown among the other consortium partners and collective accountability for the use of the funds.

4.4.2 During the life of a project

During the duration of the project, the following obligations apply:

- Communications about the PPP projects must at all times identify and propagate the public-private character of the project; this includes the naming of the various public and private partners. The full communication guidelines can be found in the [Health~Holland Brandbook](#).
- During the project period, a time administration must be kept for each employee.
- It is expected that RVO will request progress information on all current PPP subsidy projects every calendar year. To this end, the project coordinator/coordinator will be asked at the beginning of each calendar year to provide information regarding the consortium, the progress and changes in the project in the past calendar year. The primary purpose of this request is to inform the House of Representatives and a wide public annually about the progress of the PPP innovation scheme.
- Each project is assigned an account manager, who will act as the primary contact person from FORESIGHT throughout the project. This person is also responsible for joining the steering committee meetings and assessing the progress and final reports.
- Within six weeks after each project year, the project coordinator/coordinator must submit a progress report. The format for this will be provided by FORESIGHT.
- The consortium is obliged to hold a steering committee meeting every year. The secretary is obliged to inform FORESIGHT of this, so that the account manager or another delegate can attend the meeting. If deemed necessary, a member of the evaluation committee may also remain involved in the monitoring of the project.

4.4.3 After the end date of a project

Within eight weeks of the end date of the project, the project coordinator/coordinator must submit the following documents to FORESIGHT:

- A final report (the format for this will be provided by FORESIGHT).
- Board statements for each consortium partner that has used no or less than €125,000 in PPP funding in relation to the total project costs of that consortium partner. This management statement must be accompanied by proof of the authority to sign, for example a Chamber of Commerce extract or mandate.
- An auditor's report for each consortium partner that has used €125,000 or more PPP grant in respect of the total project costs of that consortium partner. It is also possible to jointly issue an audit report for several parties.
- An updated project profile including the results of the completed project.

The final PPP grant payment will be made when the above documents⁷ have been received and approved by FORESIGHT.

⁷ Please note: the documents required for the final report may be subject to change, depending on any new requirements from RVO.

5. More information

5.1 Calculation examples

Calculation example 1 – Research organisation and Dutch SMEs

The calculation example is based on a project that consists entirely of industrial research.

Parties	Costs
Research organisation X	€ 600.000
Dutch SME Y	€ 400.000
Total	€ 1.000.000

Parties	Max. % PPP grant*	Max. € PPP subsidy
Research organisation X	70%	€ 420.000
SME Y	60%	€ 240.000
Total	66%	€ 660.000

*Percentage of PPP subsidy is calculated on the total costs of the partner in question.

Minimum contributions required	% of total costs*	Minimum contribution (€)
Research organisation(s)	10%	€ 100.000
Enterprises (for-profit and non-profit)	15%	€ 150.000
<i>Open amount freely financed on the basis of costs and minimum required contribution</i>	<i>= €1,000,000 (costs) - €660,000 (max. PPP grant) - €250,000 (min. contributions)</i>	<i>€ 90.000</i>

*Percentages for the minimum required contributions are calculated on the total cost of the project.

Financing per partner

Parties	Total costs	In child	In cash	PPP subsidy
Research organisation X	€ 600.000	€180.000	€ 0	€ 420.000
SME Y	€ 400.000	€160.000	€ 0	€ 240.000
Total	€ 1.000.000	€340.000	€ 0	€ 660.000

In this calculation example, the amount of €90,000 to be financed openly is divided between the research organisation and the SMEs, with both parties using the maximum permitted amount of PPP subsidy.

Calculation example 2 – Consortium consisting of four parties

The calculation example is based on a project that consists entirely of industrial research.

Parties	Costs
Research organisation X	€ 500.000
Dutch SME Y	€150.000
Large Company Z	€ 250.000
Hospital A	€ 100.000
Total	€ 1.000.000

Parties	Max. % PPP grant*	Max. € PPP subsidy
Research organisation X	70%	€ 350.000
SME Y	60%	€ 90.000
Large Company Z	0%	€ 0
Hospital A	0%	€ 0
Total	44%	€ 440.000

*Percentage of PPP subsidy is on the total costs of the partner in question.

Minimum contributions required	% of total costs	Minimum contribution (€)
Research organisation(s)	10%	€ 100.000
Enterprises (for-profit and non-profit)	15%	€150,000

Open amount freely financed on the basis of costs and minimum required contribution	=€1,000,000 (costs) - €440,000 (max. PPP grant) - €250,000 (min. contributions)	€ 310.000
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*Percentages for the minimum required contributions are on the total cost of the project.

Financing per partner

Parties	Total costs	In child	In cash	PPP subsidy
Research organisation X	€ 500.000	€ 125.000	(€ 25,000)*	€ 350.000
SME Y	€150,000	€ 60.000	€ 0	€ 90.000
Large Company Z	€ 250.000	€ 250.000	€50,000	€ 0
Hospital A	€ 100,000	€ 75.000	(€ 25,000)*	€ 0
Total	€ 1.000.000	€ 510.000	€50,000	€ 440.000

*The numbers in brackets mean that these partners receive the private cash and use it to cover part of their costs. In this case, the cash contribution from Large Company Z will be divided between Research Organization X and Hospital A.

5.2 Downloads

Documents to be consulted

- [Mission document 2024-2027](#)
- [Knowledge and Innovation Agenda 2024-2027](#)
- [Knowledge and Innovation Covenant 2024-2027](#)
- [National Technology Strategy](#)

Laws and regulations

- [Regulation on national EZK and LNV subsidies](#)
- [Framework decision on national EZK and LNV subsidies](#)
- [The framework for State aid for research and development and innovation](#)
- [Commission Regulation \(EU\) No 651/2014 of 17 June 2014](#)
- [Definitions of Research & Development from the EU Framework](#)
- [PPP Innovation Scheme Government Gazette 20 October 2023](#)

5.3 Questions

For questions about the 2026 FORESIGHT Calls, please email foresight@umcg.nl

5.4 Submission

The application can be submitted by email at foresight@umcg.nl