



VR Health Champions Open Call 2026

Call text

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101161333.

Project acronym: VR Health Champions

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Project full title: We Are Health Champions - Disrupting the European Healthcare
Systems with Virtual Reality and Augmented Reality Applications

History of changes

Version	Publication date	Changes
1.0	01/08/2025	Initial version
2.0	08/10/2025	First amendment Correction of the estimated total available call budget from €800,000 to €640,000 due to a typographical error.

Any changes to this call are listed in the table above.

List of Acronyms

Abbreviation	Definition
I3	Interregional Innovation Investment
ERDF	European Research and Development Fund
TRL	Technology Readiness Level
SME	Small and Medium-sized Enterprise
VR	Virtual Reality
XR	Extended Reality
AR	Augmented Reality
FSA	Financial Support Agreement
FSTP	Financial Support to Third Parties
MGA	Model Grant Agreement
CA	Collaboration Agreement
EISMEA	European Innovation Council and SMEs Executive Agency

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1. Call summary

Main Features	
Why should you apply	Apply to the VR Health Champions Open Call 2026 to receive up to €60,000 lump sum funding while addressing a real-world challenge defined by the project's five Flagship SMEs. Collaborate directly with these leading XR healthcare innovators, gain visibility within a high-impact European ecosystem—including Medtronic, XR4Europe, and EIT Health—and contribute to building interregional value chains.
Who can apply	SMEs as defined by the European Commission - Legally established in: - A region covered by the VR Health Champions consortium - A less developed region in the EU - An outermost region of the EU Please see the full list of eligible regions in section 4.1.2.
Key dates	Call launch: 1 October 2025 Call close: 30 November 2025
Budget and maximum funding	The estimated available call budget is €640,000. The maximum funding available to applicants depends on the budget of the respective challenge, which can be up to €60,000.
Link to the submission portal	https://vrhealthchampions.eu/get-involved/
Documents to be submitted	Applications must be submitted electronically through the application form on the VR Health Champions website. Proposals must be complete and contain all parts and mandatory annexes and supporting documents as follows: - Budget table and workplan - Company registration certificate (required only if no validated PIC number is available).
List of documents to take into consideration	- VR Health Champions website application platform - The present call document and its Annexes
Evaluation criteria	Relevance and Experience (25%) Methodology and Work Plan (25%) Feasibility and Risk Management (25%) Impact and Value Creation (25%)
Contact details	cascadecall@vrhealthchampions.eu

Table 1: Call summary

2. Background

2.1. The Interregional Innovation Instrument (I3) Instrument

The Interregional Innovation Investments (I3) Instrument addresses the innovation divide in Europe by supporting interregional collaboration. As part of the European Regional and Development Fund (ERDF), it supports interregional innovation projects in their commercialisation and scale-up phases and brings them to the investment level. It uses smart specialisation as a coordination principle and empowers ecosystems in less-developed regions.

2.2. VR Health Champions project

VR Health Champions is a three-year project, co-funded by the I3 under the ERDF. The project aims to overcome market barriers for healthcare Virtual Reality (VR) and Augmented Reality (AR) applications in less-developed European regions. It addresses gaps in the value chains of five flagship SMEs and, by leveraging these experiences, customises innovation support services for other SMEs in the healthcare VR/AR sector.

The project focuses on five flagship SMEs—**Dotlumen**, **MedApp**, **MEEVA**, **Metaskills**, and **Virtuleap**—at the forefront of this transformation. The goal is to increase their Technology Readiness Level (TRL) from TRL 6 to TRL 9 for VR/AR innovations in medical navigation during surgery, therapeutic immersive games, cognitive evaluation, medical education, and VR headset customisation for medical applications. These innovations will be accelerated by closing gaps in their value chains and providing customised services for XR solutions, ultimately paving the way for future breakthroughs in the sector.

Specific objectives of the VR Health Champions project include:

1. **Investing in five flagship SMEs:** Addressing their technological development, content and skill development, testing and validation, and commercialisation needs and supporting them in achieving market readiness.
2. **Creating interregional innovation value chains:** Building seamless connections around the flagship SMEs by bringing together quadruple helix actors from less and more developed regions, combining specialised knowledge and services.
3. **Expanding the European healthcare XR ecosystem:** Identifying and engaging additional SMEs through cascade funding to contribute to flagship investment cases, fostering cross-sectoral knowledge and technology

transfer, and, in a second phase, scouting early-stage healthcare XR start-ups.

4. **Customising advisory services:** Tailoring support for healthcare XR investments to accelerate market uptake, aligning closely with the needs of patients, healthcare providers, payers, and regulatory requirements.
5. **Removing market barriers:** Adapting healthcare innovation services for SMEs to VR/AR, developing the skills of medical professionals and patients, and providing policy feedback to address remaining obstacles.

The project consortium consists of **19 partners** from **9 EU Member States**, embedded within **9 regional ecosystems**. A diverse network of healthcare units, research centres, universities, and industry leaders from **Italy, Latvia, Hungary, Poland, Portugal, Spain, Belgium, Romania** and **Germany** have joined forces to provide targeted support to the five flagship SMEs, driving innovation in medical diagnostics, therapies, surgeries, and training.



Figure 1: Consortium composition

2.3. I3 in the VR Health Champions project

VR Health Champions operates within the I3, aligning with its goal of fostering cross-regional collaboration and commercialisation of innovation. By leveraging interregional cooperation and targeted investment, the project strengthens innovation value chains in the healthcare XR sector, particularly in less-developed regions.

The initiative goes beyond supporting individual SMEs by creating a structured ecosystem for XR healthcare innovation, integrating technology developers, healthcare providers, researchers, and business support organisations. This approach ensures efficient knowledge transfer, regulatory alignment, and market integration, contributing to the broader objectives of I3 in reducing innovation gaps and promoting digital transformation in healthcare across Europe.

3. Scope

3.1. Objectives

Through the VR Health Champions Open Call 2026, selected external SMEs will be engaged:

- to address specific needs/challenges from Flagship SMEs and to build the interregional value chain around them and;
- to transfer sectoral knowledge/technology to the healthcare VR/AR sector from other industries, building additional interregional value and cross-industrial knowledge transfer channels.

3.2. The 5 Flagship SMEs' Innovations

MedApp

MedApp has developed CarnaLife Holo, an FDA and CE-marked augmented reality software for medical visualization to assist in pre-operative planning and intra-operative guidance during surgical procedures. Doctors can view 3D diagnostic images overlaid on the patient's body and interact with the visuals using hand gestures and voice commands. In this project, MedApp will advance CarnaLife to CarnaLife Holo MedNav, enabling real-time tracking of surgical instruments to provide true augmented reality surgical navigation without external trackers.

Dotlumen

.lumen is building Pedestrian Autonomous Driving AI (PAD AI), first showcased in the Glasses for the Blind, a system that empowers visually impaired individuals with safe and independent navigation in complex environments. Within the VR Health Champions project, .lumen is developing the second generation of this technology, the LightKIT — a multifunctional, wearable solution integrating cutting-edge computer vision, AI-based path planning, and haptic feedback. Designed for both the EU and global markets, LightKIT goes beyond accessibility, offering a versatile platform that combines mobility assistance, spatial awareness, and context-sensitive features.

MetaSkills

MetaSkills has developed a virtual reality training platform to build interpersonal and communication skills of healthcare professionals through immersive scenarios. Trainees interact with virtual patient avatars to practice skills like dealing with difficult situations, conveying diagnoses or following protocols. The project will enhance realism through improved animation, voice interactions and learning analytics while developing condition-specific training modules.

MEEVA

MEEVA's Zentastic is a VR application combining multiplayer serious games with biometric monitoring to provide therapeutic interventions for teenagers with neurodevelopmental disorders like autism. In the VR world, teens roleplaying through games and adventures to improve social skills, emotional regulation and executive functions. MEEVA will expand the game library, enhance the biometrics system and create a tablet version for gradual skill-building.

Virtuleap

Virtuleap is developing Cogniclear VR, an immersive virtual reality application for self-administered cognitive screening and assessment. It features a battery of gamified tests evaluating domains like memory, attention, reasoning and visuospatial abilities to detect cognitive impairment at an early stage. The project will validate the solution through clinical trials and optimize it for easy deployment across clinical and research settings.

3.3. Challenges to be addressed

Each Applicant SME must identify which specific Flagship SME's challenge their proposal aims to address from the list in Annex 1. A detailed description of the challenges is available in Annex 1. Please note that the deliverables included in the work plan of the application must fully correspond to those outlined in the selected challenge. Additionally, all deliverables must be submitted during the implementation period, with submission deadlines to be defined during the contracting.

3.3.1. Work to be performed by the selected SMEs (expected activities, output), activities to be funded

The awarded SMEs are expected to:

- Actively collaborate with the specified flagship SME and potentially participate in meetings of the consortium
- Provide the proposed specialized services/expertise to advance the flagship innovation
- Contribute to developing an interregional value chain in the VR/AR healthcare sector

The detailed list of eligible activities and deliverables for each challenge is provided in Annex 1.

3.3.2. Timeline

Milestone	Dates
Call opens	1 October 2025
Info session about the call	22 October 2025, 15:00 CET
Submission deadline	30 November 2025, 23:59 CET
Evaluation	1 December – 10 January 2026
Notification of Applicants on the outcome of the remote evaluation	12 January 2026
Hearings and Selection	12 January 2026 – 24 January 2026
Notification of Applicants on the outcome of the hearings	26 January 2026
Deadline for appeals	15 calendar days following the receipt of the letter of notification of the results
Kick-off meetings	16 - 28 February 2026
Activity closure, reporting	31 January 2027

Table 2: Timeline.

Step 1: Online applications

Eligible legal entities must apply online via VR Health Champions website application platform. Applicants must select one of the available challenges (MetaSkills, Dotlumen, MedApp, MEEVA, Virtuleap) and justify their selection. The application must include details on the organisation's relevant experience in similar projects, the team's qualifications and expertise, a proposed methodology and work plan, and an assessment of feasibility and risk management. Additionally, applicants must specify the resources allocated for implementation, including human resources, equipment, facilities, software tools, and datasets, while demonstrating how these will support the successful delivery of the challenge objectives.

In their application form, applicants describe their service and present the budget they need to implement the foreseen action in their proposal. The proposed budget will be reviewed during evaluation, and the selection process of SMEs will consider value for money.

Submitted documents will be treated as confidential. They will only be accessible to relevant VR Health Champions project staff and/or independent third parties bound by confidentiality provisions.

Step 2: Evaluation and selection

The proposals will be evaluated according to the following process:

1. Admissibility and Eligibility Check

All submitted proposals are initially screened to ensure they meet the admissibility and eligibility requirements specified in Section 4.1.

2. Quality Evaluation (Shortlisting, Hearings)

Proposals that pass the eligibility check undergo a thorough technical assessment, which includes:

- a. Shortlisting – Proposals are evaluated based on predefined selection criteria, assessing their quality, innovation, feasibility, and potential for collaboration.
- b. Hearings - Shortlisted Applicants will be invited for hearings to further discuss their proposals.

3. Contracting

Successful Applicants proceed to the contracting phase, where Financial Support Agreements (**FSA**) and Collaboration Agreements (**CA**) are formalised to initiate project implementation.

3.4. Duration

The projects selected through the open call are expected to have a duration of a **maximum of 12 months**. The specific duration of each challenge is defined in Annex 1 – Challenge Descriptions. This timeline allows SMEs to effectively solve the challenges, ensuring sufficient time for collaboration, validation, and scaling activities while aligning with the overall objectives and milestones of the VR Health Champions project.

3.5. Available budget, form of funding and payment schedule

The estimated available call budget is €640,000. If the evaluation process does not yield sufficiently high-quality proposals, the available funds may remain partially or fully unallocated, and no winners will be announced. Each successful Applicant SME may receive financial support up to the sum of €60,000.

A total of 14 SMEs, one per challenge, will be selected to receive Financial Support for Third Parties (FSTP) under this call for proposals. However, if a suitable SME is not identified for a particular challenge, we reserve the right not to announce a winner. In addition, in the event of any force majeure circumstances affecting the challenge owner Flagship SMEs — such as bankruptcy, acquisition, or withdrawal from the project — we reserve the right not to announce a winner for the affected challenge.

The financial support to SMEs will be calculated as a maximum of 100% of eligible costs, up to €60.000, but the applicants may request a lower grant rate/grant amount. The approved grant amount to selected SMEs will be provided as a lump sum contribution, subject to proper implementation of the action, and up to the maximum of the challenge budget specified in Annex 1 – Challenge Descriptions.

Selected Applicants are entitled to payments as follows:

Payment type	Maximum Amount	Payment schedule
Advance payment	50% of the grant	45 days after the signature of the Financial Support Agreement and Collaboration Agreement
Final payment (payment of balance)	50% of the grant	45 days after the approval of the final report.

Table 3: Payment schedule.

- Payments are conditional upon the achievement of the specified deliverables and deadlines. Failure to complete the mandatory deliverables and/or meet the defined deadlines may impact payments and could result in the application of the performance rate methodology to the balance payment, as well as potential payment recovery. In case of Applicants subjected to one of the exclusion situations that ban them from receiving European funding, the VR Health Champions consortium reserves the right to withdraw the funding at any step.
- Detailed payment schedule and payment conditions will be settled in the FSA.

4. Call conditions

4.1. Admissibility and Eligibility

In order to participate in the **VR Health Champions Open Call** process, applicants have to comply with the following requirements and key aspects:

4.1.1. Application Requirements (How to apply)

- **Submission:** Applications must be submitted electronically via the VR Health Champions website before the call deadline. Applicants are required to complete the official application form in full and upload all mandatory attachments through the online submission system.
- **Language:** All applications, presentations, and attachments must be in English, using the official templates. Please note that we do not require a certified English translation. A standard, accurate translation is fully acceptable.
- **Format:**
 - Complete all templates and submit them in PDF.
 - The Budget Table must be submitted in the provided Excel format. The official Budget Table must be used, and its accompanying instructions must be thoroughly examined before finalisation and resubmission.
- **Content:**
 - Incomplete, late, or wrongly submitted applications will not be accepted.
 - Page, document, and section limits apply as indicated in the templates and forms. Any excess content or extra documents will not be considered
 - Proposals must be complete, accessible and contain all parts, mandatory annexes and supporting documents as follows:
 - **Budget table and work plan**
 - **Proof of legal establishment: PIC number or Company registration certificate:** If the applicant does not have a validated PIC number in the Funding & Tenders Portal, a company registration certificate must be provided as a mandatory attachment.

Applicants are invited to submit their applications before the deadline:

30 November 2025, 23:59 CET

4.1.2. Eligibility of Applicants (Who can apply)

- SMEs as defined by the European Commission in **EU Recommendation 2003/361/EC**¹. Applicants must provide the relevant SME status confirmation template as part of their application.
- Applicants must be legally established in one of the following:
 - A region covered by the VR Health Champions consortium.

¹ https://single-market-economy.ec.europa.eu/smes/sme-fundamentals/sme-definition_en

- A less developed region within the European Union, as defined by the European Commission², where GDP per capita is below 75% of the EU average.
- An outermost region of the European Union, as recognized under Article 349 of the Treaty on the Functioning of the European Union (TFEU)³.
- Applicants (beneficiaries and affiliated entities may submit beneficiaries) cannot participate in more than one proposal under the call for proposals.

List of eligible regions

Country	Eligible Regions
Belgium	Brussels Capital region; Prov. Luxembourg (Less developed)
Bulgaria	Severozapaden (Less developed); Severen tsentralen (Less developed); Severoiztochen (Less developed); Yugoiztochen (Less developed); Yuzhen tsentralen (Less developed)
Croatia	Whole country (Less developed)
Czech Republic	Severozápad (Less developed); Severovýchod (Less developed); Střední Morava (Less developed); Moravskoslezsko (Less developed)
France (Outermost)	Guadeloupe; French Guiana; Martinique; Mayotte; Réunion; Saint Martin
Germany	Oberbayern region
Greece	Thessalia (Less developed); Ipeiros (Less developed); Dytiki Ellada (Less developed); Anatoliki Makedonia (Less developed); Thraki (Less developed); Voreio Aigaio (Less developed); Kriti (Less developed); Kentriki Makedonia (Less developed); Dytiki Makedonia (Less developed); Ionia Nisia (Less developed); Sterea Ellada (Less developed); Peloponnisos (Less developed)
Hungary	Budapest region; Pest (Less developed); Közép-Dunántúl (Less developed); Nyugat-Dunántúl (Less developed); Dél-Dunántúl (Less developed); Észak-Magyarország (Less developed); Észak-Alföld (Less developed); Dél-Alföld (Less developed)
Italy	Trento region; Molise (Less developed); Campania (Less developed); Puglia (Less developed); Basilicata (Less developed); Calabria (Less developed); Sicilia (Less developed); Sardegna (Less developed)
Latvia	Whole country (Less developed)
Lithuania	Vidurio ir vakarų Lietuvos regionas (Less developed)

² https://ec.europa.eu/regional_policy/policy/how/is-my-region-covered_en

³ <https://eur-lex.europa.eu/EN/legal-content/glossary/outermost-regions.html>

Poland	Małopolska region; Łódzkie region; Małopolskie (Less developed); Śląskie (Less developed); Zachodniopomorskie (Less developed); Lubuskie (Less developed); Opolskie (Less developed); Kujawsko-pomorskie (Less developed); Warmińsko-mazurskie (Less developed); Pomorskie (Less developed); Łódzkie (Less developed); Świętokrzyskie (Less developed); Lubelskie (Less developed); Podkarpackie (Less developed); Podlaskie (Less developed); Mazowiecki regionalny (Less developed)
Portugal	Grande Lisboa; Centro region; Norte (Less developed); Centro (Less developed); Alentejo (Less developed); Azores (Outermost); Madeira (Outermost)
Romania	Nord-Est; Nord-Vest; Centru (Less developed); Sud-Est (Less developed); Sud-Muntenia (Less developed); Sud-Vest Oltenia (Less developed); Vest (Less developed)
Slovakia	Západné Slovensko (Less developed); Stredné Slovensko (Less developed); Východné Slovensko (Less developed)
Slovenia	Vzhodna Slovenija (Less developed)
Spain	Madrid; Castilla-La Mancha (Less developed); Extremadura (Less developed); Andalucía (Less developed); Ciudad Autónoma de Ceuta (Less developed); Ciudad Autónoma de Melilla (Less developed); Canary Islands (Outermost)

Table 4: List of eligible regions

Failure to comply with any of the requirements above will automatically rule the proposal out of the evaluation process. Only the requested documents will be accepted; any other documents will not be considered for evaluation.

4.2. Eligible activities

Selected Applicants must spend the financial support on activities detailed in the challenge descriptions in Annex 1.

4.3. Eligible costs

Lump-sum

VR Health Champions provides lump sum funding under this call, in order to reduce administrative burden, risk of financial error, and complexity. As a result, there will not be thorough cost reporting at the end of the project; instead, a detailed cost estimate and work plan must be included in the proposal, and payments will be made upon the completion of activities.

For lump sum grant proposals, the estimated budget must be described in a detailed budget table. This will be used as a basis for justifying and/or fixing the lump sum amount. As the lump sum must be an approximation of the costs actually incurred,

the costs included in this detailed budget table must comply with the basic eligibility conditions for EU actual cost grants (see ERDF Interregional Innovation Investments Instrument (I3) General Model Grant Agreement⁴ (**I3 MGA**), Article 6). This is particularly important for purchases and subcontracting, which must ensure best value for money (or, if appropriate, the lowest price) and be free from any conflicts of interest. The assessment of best value for money will be guided by the Horizon Europe Lump Sum Dashboard⁵. If the best value for money cannot be demonstrated on the basis of the submitted application, the consortium reserves the right to request additional documentation for justification. If the budget table contains ineligible costs, the grants may be reduced (even later on during implementation of the project or after they end).

For a lump sum cost to be eligible, the following criteria must be met:

- the costs must fulfil the general eligibility conditions for the type of cost concerned as described in Article 6.1 of the I3 MGA and listed below;
- the costs must be declared under one of the budget categories listed below;
- the costs must be necessary and justified by the activities proposed;
- the work must be properly implemented by the Recipient⁶ in accordance with the work plan annexed to the FSA;
- the deliverables/outputs must be achieved in the period set out in the call and FSA (with the exception of deliverables/outputs relating to the submission of the final periodic report, which may be achieved afterwards).

General eligibility conditions:

- must be actually incurred by the Recipient;
- must be incurred in the project period set out in the FSA;
- must be declared under one of the budget categories listed below;
- must be incurred in connection with the action as described in the proposal and the Annex of the FSA;
- must be identifiable and verifiable, in particular recorded in the Recipient's accounts in accordance with the accounting standards applicable in the country where the Recipient is established and with the Recipient's usual cost accounting practices;
- must comply with the applicable national law on taxes, labour and social security.
- must be reasonable, justified and must comply with the principle of sound financial management, in particular regarding economy and efficiency.

Eligible cost categories for cost estimation:

- Personnel costs;
- Subcontracting costs;

⁴ https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/i3/agr-contr/mga_i3_en.pdf

⁵ <https://ec.europa.eu/info/funding-tenders/opportunities/portal/screen/programmes/horizon/lump-sum/dashboard>

⁶ Signatory of Financial Support Agreement

- Travel and subsistence (on the basis of the costs actually incurred and in line with the Recipient's usual practices on travel);
- Other goods, works and services;
- Indirect.

Indirect cost for this project is not eligible. Applicants must ensure that the proposed activities are not already funded under another EU grant. For the list of Ineligible costs and contributions, see Article 6.3 of MGA.

Applicants must propose the estimated lump sum breakdown for the action in the budget template document (per SME beneficiary), based on the expected:

A. Direct Personnel Costs: costs hours of the staff of the Applicant dedicated to actual work under the project.

B. Direct Subcontracting Costs (External expertise) limited to 20% of the total project budget: work carried out by a provider should be limited.

C. Other direct costs: C.1 Travel and subsistence, C. 3 Other goods, works and services (consumables, PR costs, etc.)

E. Indirect costs: will be reimbursed at the flat-rate of 7% of the eligible direct costs. The final amount of financial support will depend on the actual extent to which the action is implemented. The estimated budget must be based on expenditures planned to incur during the period of implementation of the project. It will be determined in accordance with the usual accounting and management principles and practices of the applicants. It will respect the principles of economy, efficiency and effectiveness.

4.4. Exclusion

If an entity falls into one of the exclusion situations described in Articles 136 and 141 of the EU Financial Regulation 2018/1046, it will be excluded from participation at any time (during the evaluation, contracting or implementation phases).⁷ Selected Applicants will have to confirm that they comply with the above conditions for receiving EU funding by signing a declaration of honour.

5. Evaluation and Selection

5.1. Procedure

The call is subject to a single-stage submission and a two-step evaluation procedure. The selection procedure will be managed by the VR Health Champions consortium. The consortium will oversee and validate the evaluation process, ensuring consistency of the selection process, and will check that there is no conflict of interest, fraud, or double funding.

⁷ See Articles 136 and 141 [EU Financial Regulation 2018/1046](#).

Proposals will first be reviewed for formal requirements, including admissibility and eligibility. The evaluation will then be conducted by an evaluation committee composed of three independent in-house experts, selected based on their expertise and experience. These experts will perform an independent quality evaluation, ensuring that they are not involved in the implementation of the action and have no conflict of interest. The responsibility for the selection process remains with the consortium.

At any stage — after the eligibility check, remote evaluation, or hearings — the consortium reserves the right to request missing documents or clarifications from applicants.

The evaluation will be carried out applying the evaluation criteria as described in Section 5.3 and following the established evaluation principles:

- **Transparency:** funding decisions are based on clearly described rules and procedures, and all Applicants will receive adequate feedback on the outcome of the evaluation of their proposals.
- **Independence:** evaluators assess proposals on an individual basis. Evaluators represent neither their employer nor their region or country.
- **Impartiality:** all proposals submitted to the Open Call are treated equally. They are evaluated impartially on their merits, irrespective of their origin or the identity of the Applicants.
- **Objectivity:** evaluators assess each proposal as submitted and not on its potential if certain changes were to be made.
- **Accuracy:** evaluators make their judgment against the official evaluation criteria of the Open Call, and nothing else.
- **Consistency:** evaluators apply the same standard of judgment to all proposals.
- **Confidentiality:** all proposals and related data, knowledge and documents are treated with confidentiality.

The top three highest-quality proposals will be invited to participate in a hearing and project selection process. A jury, composed of subject matter experts from the consortium members, will evaluate the presentations and select the final teams for funding. Following the hearings, one SME per challenge will be selected for funding. For each challenge, a shortlist of the top three applicants will be invited to the hearings, while all other applicants will be informed in writing that their proposal has not been selected for further evaluation. Following the hearings, one applicant will be selected for contracting, and the other two will be placed on a reserve list. If the selected applicant declines or withdraws, the next applicant from the reserve list will be invited to join the programme. All applicants will be notified in writing of the outcome of the selection process within 5 working days of the decision.

All applicants invited to the hearings will be granted access to the EIT Health Community Platform to support broader ecosystem engagement and cross-border

collaboration in healthcare innovation. This enables knowledge exchange, networking, and matchmaking with startups, SMEs, and partners active in VR/AR health.

5.2. Admissibility and eligibility check

All applications will be subject to an admissibility and eligibility check, as outlined in Section 4.1, which verifies that

- applications are complete, submitted via the VR Health Champions website, in English, and in accordance with the admissibility criteria, including required documents and formatting rules,
- applicants meet the geographical requirements, qualify as an SME under EU Recommendation 2003/361/EC and provide proof of legal existence. Only proposals that pass both checks will proceed to the quality evaluation stage.

5.3. Quality evaluation and scoring

5.3.1. Remote evaluation scoring

Criteria		Sub-Criteria	Max Score
Relevance	Relevance and Experience (25%)	1.1 Relevance of experience to the specific challenge	10
		1.2 Relevance, ambition, and effectiveness of the proposed approach in addressing the specific challenge	10
		1.3 Qualifications and experience of the proposed team	5
Quality	Methodology and Work Plan (25%)	2.1 Quality and clarity of the proposed methodology	15
		2.2 Objectives and extent to which the proposal matches the challenges and specific objectives of the call	10

	Feasibility and Risk Management (25%)	3.1 Approach feasibility within time and budget constraints, Best Value for Money - Justification of budget, cost breakdown, and alignment with market standards.	10
		3.2 Appropriateness of risk management approach	10
		3.3 Resource allocation efficiency	5
Impact	Impact and Value Creation (25%)	4.1 Added value compared to alternative approaches	10
		4.2 Potential for long-term collaboration	5
		4.3 Cross-industry knowledge transfer potential	10
TOTAL	Overall Maximum Score		100

Table 5: Quality evaluation criteria.

Scoring guide (remote evaluation)

- 0-1: Does not meet the criterion
- 2-3: Partially meets the criterion
- 4: Meets the criterion
- 5: Exceeds the criterion (for 5-point criteria)
- 6-10: Exceeds the criterion (for 10-point criteria)
- 11-15: Significantly exceeds the criterion (for 15-point criteria)

Any proposal receiving a score of **0 or 1** in any remote evaluation criterion will be automatically rejected.

For each challenge, a shortlist of the top three applicants will be invited to the hearings, while all other applicants will be informed in writing that their proposal has not been selected for further evaluation. Following the hearings, one applicant will be selected for contracting, and the other two will be placed on a reserve list. If the selected applicant declines or withdraws, the next applicant from the reserve list will

be invited to join the programme. All applicants will be notified in writing of the outcome of the selection process within 5 working days of the decision.

5.3.2. Hearing scoring

Criteria	Sub-Criteria	Evaluation Question	Max Score
Relevance	Relevance and Experience	How well does the team's experience and background align with the specific challenge context?	5
Quality	Methodology and Work Plan / Quality of the Proposal	Does the team demonstrate a sound methodological approach and a coherent solution design when answering questions?	5
	Feasibility	Do the responses show that the plan is realistic in terms of implementation timeline, resources, and cost-effectiveness?	5
Impact	Impact and Added Value	Does the proposed solution (as explained in the interview) promise meaningful impact and clear added value compared to existing approaches?	5
Team Capability	Team Composition and Expertise	Does the team have the right composition, expertise, and credibility to successfully execute the proposed activities?	5
Total	Overall Maximum Score		25

Table 6: Hearing evaluation criteria.

Scoring guide (hearings)

- 0: Does not fulfil the minimum requirements
- 1: Does not meet expectations
- 2: Falls short of expectations

- 3: Partially meets expectations
- 4: Fully meets expectations
- 5: Significantly exceeds expectations

Any proposal receiving a score of **0 or 1** in any hearing criterion will be automatically rejected.

Evaluation scores will be awarded for each criterion according to the defined scoring guide, ensuring a structured and objective assessment. Proposals will be ranked based on their total evaluation scores.

The overall score will be the average of all the evaluators. Based on the scores, the top 3 proposals with the highest ranking/challenge will be invited to participate in the hearing and project selection phase. For proposals with the same score, the priority order will be determined as follows:

- **Rule 1:** The proposals will be ranked based on their overall score.
- **Rule 2:** In case following Rule 1 there are proposals in the same position, priority will be given to proposals that have a higher score on the Relevance award criterion.
- **Rule 3:** In case following Rule 2 there are proposals in the same position, priority will be given to proposals that have a higher score on the Quality award criterion.
- **Rule 4:** In case following Rule 3 there are proposals in the same position, priority will be given to proposals that have a higher score on the Impact award criterion.
- If a distinction still cannot be made, the panel may decide to further prioritise by considering other factors related to the objectives of the call or to Horizon Europe in general. These factors will be documented in the panel report.

For each challenge, a shortlist of the top three applicants will be invited to the hearings, while all other applicants will be informed in writing that their proposal has not been selected for further evaluation. Following the hearings, one applicant will be selected for contracting, and the other two will be placed on a reserve list. If the selected applicant declines or withdraws, the next applicant from the reserve list will be invited to join the programme. All applicants will be notified in writing of the outcome of the selection process within 5 working days of the decision.

5.4. Grounds for appeal and appeal procedure

If an Applicant disagrees with the selection decision, they may appeal the process for the selection of their own proposal(s) within 15 calendar days of receiving the result notification.

Reasons for Appeal:

- a) Process errors;

- b) Technical problems beyond Applicants' control (e.g., the technical failure of the electronic submission system);
- c) Obvious human/mechanical errors made by the VR Health Champions Consortium

Non-Appealable Reasons:

Scores are awarded during the evaluation process based on various evaluation criteria.

Appeal process:

Applicants should send their appeals in writing to the following email: cascadecall@vrhealthchampions.eu, addressing the managing director of InnoStars as soon as they identify an error, but no later than 15 calendar days after the error occurred.

InnoStars assesses the claim and delivers a first response.

If there are grounds for appeal, the staff will attempt to remedy the consequences, e.g., if a technical error of InnoStars prevented the submission of a proposal or application, a late submission may still be accepted as eligible.

5.5. Legal and financial set-up of Commitment

Entities that are accepted for funding must execute a set of legal agreements (see the list below). Finalisation of the terms and conditions of such agreements will commence immediately after notification.

Sets of legal documents to be executed:

- The FSA outlines the terms and conditions for receiving financial support from the VR Health Champions project, including the start and end dates of the project, the form of grant, the cost eligibility, deadlines, deliverables, reporting and payment arrangements. (See Annex 2)
- Collaboration Agreement (CA) with Flagship SMEs (See Annex 3)

The standstill period for accepting financial support is 15 days from notification to signature of the FSA. Once this period concludes, the contracts are signed and the kick-off meetings for the projects are held.

6. Confidentiality and conflict of interest

All proposals submitted through the VR Health Champions website are accessible only to InnoStars e.V. staff members and the VR Health Champions consortium members for the processing of the application.

During the selection process, proposals are shared with assigned evaluators who

are employed by the consortium members and are contractually bound to confidentiality. Furthermore, InnoStars may give access to the submitted data to subcontractors who are tasked with maintaining the application and project monitoring platform. All such third parties are also bound by confidentiality provisions.

To comply with the obligations under the I3 MGA, the European Commission, OLAF, the European Public Prosecutor's Office (EPPO), and other authorized EU bodies may access relevant project data for audits, reporting, and compliance checks in accordance with Article 25 of the I3 MGA.

Applicants and Recipients of the VR Health Champions Open Call 2026 must avoid any conflict of interest and comply with the principles of transparency, non-discrimination, and sound financial management, in accordance with Article 12 of the I3 MGA.

The General Data Protection Regulation (2016/679/EU) guarantees that the processing of data is carried out in compliance with the fundamental rights and freedoms, as well as the dignity of the data subject, with particular reference to confidentiality, personal identity, and the right to data protection. By applying to the VR Health Champions Open Call, the Applicant agrees on the storage and use of Applicant's personal data for the execution of the VR Health Champions objectives and work plan. The VR Health Champions consortium commits to handling personal data confidentially, except for the call results, which will contain the following information:

- Information about successful VR Health Champions projects that will be made publicly available before the end of the project containing: project title, names of project partners and short project description (as provided by the Applicant in the application template).
- Information about the successfully completed VR Health Champions projects that will be publicly available after the completion of the projects: project title, names of project partners, awarded funding, updated short project description and project results (as provided by the project partners in the Final Report).

The processing of data that VR Health Champions intends to carry out will be based on lawfulness and correctness in the full protection of its rights and its confidentiality pursuant to the general principles of the GDPR and its art.24. Therefore, the competitors are informed of the procedure that the data provided by the Applicants will be treated exclusively with reference to the procedure for which they submitted the documentation.

For any inquiries regarding the processing of personal data, please kindly contact cascadecall@vrhealthchampions.eu. Applications selection and evaluation will be performed under the appropriate ethical conduct and will respect the confidentiality of the information received.

For selected Applicants who will use Armstrong's software as part of the project implementation, Armstrong's **SAAS Terms of Service**⁸ will apply in addition to FSA and CA. These terms govern software access, data handling, and service usage conditions. However, the VR Health Champions consortium ensures that all personal data processing under FSA and CA complies with GDPR and the applicable European data protection regulations. In case of conflicts between the SAAS Terms and GDPR requirements under the VR Health Champions grant, the GDPR framework will prevail.

7. Intellectual Property Rights rules

The Recipient and the Flagship SME shall sign the CA. Given the nature of the call, the results of the challenge will be obtained by the Flagship SME.

'Results' means any tangible or intangible effect of the action, such as data, know-how or information, whatever its form or nature, whether it can be protected, as well as any rights attached to it, including intellectual property rights.

The Granting Authority and the VR Health Champions consortium have the right to use non-sensitive information relating to the action and materials and documents received from the Recipients (notably summaries for publication, deliverables, as well as any other material, such as pictures or audio-visual material, in paper or electronic form) for policy, information, communication, dissemination and publicity purposes — during the action or afterwards.).

For more information, please see Article 16 of I3 MGA.

For dissemination and use of results generated through the financial support from the VR Health Champions Open Call, the recipients must credit the VR Health Champions project with the proper citation and appearance of the VR Health Champions logo and EU flag (emblem), including the proper EU flag and citation throughout the project: "This project has received funding under the European Union's Interregional Innovation Investments Instrument (I3) under grant agreement **101161333**."

8. Gender equality

VR Health Champions seeks gender balance. Therefore, applicants are invited to take all measures to promote equal opportunities between men and women in the implementation of the action. Applicants must aim for better gender balance at all levels of the personnel assigned to the action, including supervisory and managerial levels, to the full extent possible.

⁸ <https://vrhc.mybertie.ai/terms-of-use>

9. Communication and dissemination

All external communication from awarded sub-projects related to activities within VR Health Champions project have to mention that support has been received from the European Commission I3 fund for the development of the product/service. The communication must show the VR Health Champions project and the European Commission logos (these will be provided). Moreover, in the case of digital network communication, VR Health Champions should be tagged. More detailed instructions will be provided.

The outcome of the call must be published on the Recipient's websites, including a description of the selected projects, award dates, project durations, and (where applicable, and in compliance with GDPR) final recipient legal names and countries. Communication activities of the Recipients related to the action (including media relations, conferences, seminars, information material, such as brochures, leaflets, posters, presentations, etc., in electronic form, via traditional or social media, etc.) must acknowledge EU support and display the European flag (emblem) and funding statement.

The emblem must remain distinct and separate and cannot be modified by adding other visual marks, brands or text. Apart from the emblem, no other visual identity or logo may be used to highlight the EU support.

When displayed in association with other logos (e.g. of Recipients or sponsors), the emblem must be displayed at least as prominently and visibly as the other logos.

For more information, please see Article 17 of I3 MGA.

10. Right to ex-post monitoring

The Granting Authority may — during the action or afterwards — check the proper implementation of the action and compliance with the obligations under the Grant Agreement, including assessing costs and contributions, deliverables, and reports.

If needed, the Granting Authority may be assisted by independent, outside experts. If it uses outside experts, the Recipient concerned will be informed and have the right to object on grounds of commercial confidentiality or conflict of interest. The Recipient concerned must cooperate diligently and provide — within the deadline requested — any information and data, including financial statements, contracts, and supporting documentation, in addition to deliverables and reports already submitted (including information on the use of resources). The Granting Authority may request Recipients to provide such information to it directly.

For more information, please see Article 25 of I3 MGA.

11. Where to get help?

If you have any questions or require any further information about the call, please contact us by email at: cascadecall@vrhealthchampions.eu

To support the preparation of the call, a webinar will be held on:

22 October 2025, 15:00 CET

12. Disclaimer

Purpose: This text explains the VR Health Champions Open Call for proposals for information purposes only. No rights can be claimed on the basis of this document. Views and opinions expressed are those of the author(s) only and do not necessarily reflect those of the European Union or European Innovation Council and SMEs Executive Agency (EISMEA) of the European Commission. Neither the European Union nor EISMEA and the European Commission can be held responsible for them.

Mistakes or inconsistencies: The VR Health Champions consortium is not responsible for any mistakes or misinterpretations that this text may cause. In the case of inconsistencies, the VR Health Champions consortium will determine the steps to be taken, in cooperation with the Applicant concerned.

Modification of the Terms and Conditions: The VR Health Champions consortium partners, represented by the Coordinator are entitled to modify these Terms and Conditions (including re-opening/closing dates of the calls, in case of non-granting of funds and/or early depletion of the available funds, or as they see fit) at any time without notice. The current Terms and Conditions will be provided on the website always mentioning the version number. The most recent version of the Terms and Conditions of the VR Health Champions Open Call applies and prevails.

Consequential damages: In no event shall either party be liable to the other or any of its affiliates for any consequential, incidental, indirect, special, punitive, or exemplary damages (including, without limitation, lost profits, business, or goodwill) suffered or incurred by such other party or its affiliates in connection with this founding scheme, even if advised of the possibility of such damages.

The VR Health Champions consortium reserves the right to ask the Applicant for any document proving their existence, business or SME status during the process of selection and after, and to accept or reject their proposal.

13. Annexes

Annex 1 - Challenge Descriptions

1. CHALLENGE: Virtuleap - Market Entry and Product Launch Strategy for Cogniclear VR in Two EU Markets

Virtuleap Solution: Cogniclear VR is a cognitive assessment test designed to evaluate the cognitive performance of adults. By leveraging virtual reality technology, it provides an interactive and immersive testing environment that assesses cognitive functions through structured tasks. Cogniclear VR can be used as a supportive tool to assist healthcare providers in evaluating cognitive function.

This challenge focuses on establishing a market entry strategy for a VR cognitive assessment tool. Success depends on understanding private-sector adoption drivers, pricing, stakeholder influence, and competitive positioning to enable early revenue, data collection, and credibility ahead of future public-sector expansion.

Cogniclear certification as a CE-marked medical device is currently in progress. In parallel, the company wants to prepare for commercialization by defining the most effective go-to-market strategy for Europe.

At this stage, Cogniclear VR is targeting private-sector economic buyers — primarily decision-makers in private clinics, longevity clinics, rehabilitation centers, occupational health providers, and private insurers interested in digital health innovation. These buyers allow faster adoption and shorter procurement cycles, enabling early traction and data collection ahead of public-sector reimbursement pathways.

The challenge is to design a practical, evidence-based go-to-market strategy for two priority EU markets, with emphasis on private-sector adoption, stakeholder analysis, competitive benchmarking, and tailored marketing playbooks. This approach will prepare for initial commercialization while laying the groundwork for future expansion into public systems once clinical validation and health economics evidence enable reimbursement.

Strategic Relevance

This challenge directly bridges feasibility and value demonstration with a market-ready strategy. It ensures Cogniclear VR enters Europe with early adoption in private settings — generating real-world data and partnerships that support later reimbursement and scaling into public healthcare systems.

Unmet Need:

- Evidence-based selection of two EU markets with the highest potential for private-sector adoption
- Country-specific competitive benchmarking of VR and digital cognitive assessment tools
- Identification of private-sector buyer archetypes (clinic managers, hospital directors, corporate health buyers)
- Product positioning and pricing strategies tailored to private-sector decision-makers
- Actionable, country-specific marketing and sales playbooks
- Stakeholder mapping of private-sector decision-makers and influencers

Challenge Details

- **Challenge Type:** Market research, stakeholder analysis, commercialisation strategy development
- **Partner SME Contributions:** Expertise in EU private healthcare markets, digital health adoption, competitive benchmarking, stakeholder mapping, and GTM strategy and execution
- **Estimated Timeline:** 4-6 months
- **Estimated Capacity:**
- **Estimated Cost:** Up to €60,000

Expected Results

By the end of this challenge, the selected partner will deliver a comprehensive market entry and product launch plan for Cogniclear VR in two EU countries. The outputs will enable early private-sector adoption, provide validated competitive and pricing insights, and create a structured approach for stakeholder engagement.

Deliverables

- **D1: Market Prioritization Report** – Evidence-based selection of two EU markets with highest private-sector potential
- **D2: Country Market Assessments** – Analysis of private healthcare ecosystems, adoption drivers, and barriers
- **D3: Product Positioning & Pricing Strategy** – Differentiated value proposition and pricing tailored to private buyers
- **D4: Stakeholder Landscape Map** – Mapping of key decision-makers and influencers in private settings
- **D5: Country-Specific Marketing & Sales Plans** – Actionable communication and sales strategies, including tone of voice, buyer channels, and partnership models

Eligible Activities

- **Market Prioritization & Research** – Country selection and private healthcare ecosystem assessment
- **Stakeholder Analysis** – Mapping private-sector decision-makers and assessing influence, potential interviews with stakeholders to validate hypotheses
- **Competitive Benchmarking** – Review of VR/digital cognitive assessment solutions and best practices
- **Product Positioning & Pricing Analysis** – Localized value propositions and pricing scenarios for private buyers
- **Marketing & Sales Plan Development** – Country-specific strategies for communication, partnerships, and adoption



2. CHALLENGE: Virtuleap - GDPR, Cybersecurity, and Software verification and validation for Cogniclear VR

Virtuleap Solution: Cogniclear VR is a cognitive assessment test designed to evaluate the cognitive performance of adults. By leveraging virtual reality technology, it provides an interactive and immersive testing environment that assesses cognitive functions through structured tasks. Cogniclear VR can be used as a supportive tool to assist healthcare providers in evaluating cognitive function. Cogniclear VR runs on VR headsets, providing an immersive experience that requires controllers for interaction. It is compatible with Meta Quest devices namely: Meta Quest 2; Meta Quest 3; Meta Quest 3S; Meta Quest Pro. These Meta Quest devices are accessories, not included but necessary for the device's use.

Cogniclear VR is integrated into Virtuleap's Enterprise platform, which offers a comprehensive set of tools for healthcare organizations:

- Organizational Dashboard – a secure, web-based dashboard where HCPs can create and manage patient accounts and review assessment results.
- Remote Control tool – enabling HCPs to guide and support patients during VR sessions.
- Automatic billing system – providing flexible purchasing and licensing options for organizations.

Together, these components create a scalable and clinically relevant platform that supports healthcare professionals in administering VR-based cognitive assessments.

This challenge focuses on ensuring GDPR compliance, cybersecurity readiness, and software-as-a-medical-device (SaMD) verification and validation for regulatory alignment for Cogniclear VR. These aspects are critical to reduce legal liability and satisfy regulatory requirements in order to obtain the CE mark of Cogniclear VR as a Medical device Class IIa.

The challenge is to ensure that Cogniclear VR complies with cybersecurity standards, and software verification requirements necessary for CE marking. In addition, GDPR compliance must be ensured to guarantee the proper protection of personal data handled by the system.

Strategic Relevance:

Successful completion of this challenge will ensure that Cogniclear VR meets EU regulatory requirements for software verification and validation and demonstrates cybersecurity compliance—both critical prerequisites for CE marking and market entry. In parallel, ensuring GDPR compliance will be essential to safeguard personal data and build trust with users and regulators. Together, these steps will enable the

company to move from development to validated product deployment while mitigating legal, safety, and operational risks.

Unmet Need:

Software Testing & Validation

Software Verification & Validation

- Conduct or provide guidance in conducting system-level and integration software testing in accordance with EN 62304:2006 and EN 82304-1:2017.
- Prepare verification documentation suitable for incorporation into MDR Technical Documentation.
- Perform compatibility testing with supported web browsers and VR headsets.

GDPR Compliance

- Audit company and Cogniclear to identify gaps.
- Map data categories, processing activities, and legal basis.
- Define roles (Controller vs Processor) and legal liability strategy.
- Prepare Records of Processing Activities (RoPA) and Data Protection Impact Assessment (DPIA).
- Review consent flow, privacy policies, terms, and B2B Data Processing Agreements.

Cybersecurity Compliance

- Conduct or provide guidance on how to perform cybersecurity assessment according to ISO 81001-1:2021 and EN IEC 81001-5-1:2022. Prepare threat modeling and perform penetration testing with Cogniclear VR.
- Identify risks, mitigation strategies, and implementation recommendations.
- Prepare documentation suitable for MDR Technical Documentation inclusion.

Challenge Details

- **Challenge Type:** Regulatory analysis, software verification and validation, cybersecurity compliance
- **Partner SME Contributions:** Expertise in GDPR implementation, EN ISO 62304:2006 software lifecycle, ISO 81001 cybersecurity, and MDR Technical Documentation.
- **Estimated Timeline:** max 4 months
- **Estimated Capacity:**
- **Estimated Cost:** up to €30,000

Expected Results

By the end of the challenge, Cogniclear VR will have:

- System-level software verification and validation documentation aligned with EN ISO 62304:2006.
- GDPR compliance documentation including RoPA, consent flow guidelines, DPIA, privacy policies, and B2B agreements.
- Cybersecurity assessment and mitigation recommendations per ISO 81001 standards.
- Test plans and reports about integration, system and web browser compatibility tests.
- All documentation prepared for integration into the MDR Technical Documentation, supporting future Medical Device certification.

Deliverables

- **D1: System-Level Software Verification & Validation Report including compatibility testing** – Documented results including Software Development Plan, Requirements Review Report, Architecture Design Review Report, Interface Verification Report, SOUP Assessment Report, Unit Test Report, Integration Test Report, System Compatibility Test Report, Verification & validation (V&V) reports, Problem resolution process and traceable evidence for MDR technical documentation.
- **D2: GDPR Compliance Package** – RoPA, consent guidelines, privacy policies, DPIA, and Data Processing Agreements.
- **D3: Cybersecurity Assessment Report** – Security Risk Management File including risk analysis and risk control, Cybersecurity Management Plan, Security Architecture, Vulnerability Assessment Report, Penetration Testing Report, Security Configuration Guide

Eligible Activities

- **Software Testing & Documentation** – System-level verification, compatibility testing, and preparation of technical documentation.
- **GDPR Audit & Implementation** – Review, update, and creation of compliance documentation, consent flows, and legal risk mitigation strategies.
- **Cybersecurity Assessment** – Risk analysis, controls recommendations, and preparation of documentation for regulatory submission.

3. CHALLENGE: Virtuleap - Development of Healthcare Professional Onboarding for VR Adoption

Virtuleap Solution: Cogniclear VR is a cognitive assessment test designed to evaluate the cognitive performance of adults. By leveraging virtual reality technology, it provides an interactive and immersive testing environment that assesses cognitive functions through structured tasks. Cogniclear VR can be used as a supportive tool to assist healthcare providers in evaluating cognitive function.

Cogniclear VR is integrated into Virtuleap's Enterprise platform, which offers a comprehensive set of tools for healthcare organizations:

- Organizational Dashboard – a secure, web-based dashboard where HCPs can create and manage patient accounts and review assessment results.
- Remote Control tool – enabling HCPs to guide and support patients during VR sessions.
- Automatic billing system – providing flexible purchasing and licensing options for organizations.

Together, these components create a scalable and clinically relevant platform that supports healthcare professionals in administering VR-based cognitive assessments.

Virtual reality is still scarce in healthcare due to a variety of adoption challenges – from hardware requirements to clinical integration and trust. For Cogniclear VR to become a reliable tool in healthcare settings, healthcare professionals (HCPs) need accessible, structured, and clinically relevant training. Onboarding must go beyond technical setup: it should give HCPs the knowledge to understand VR fundamentals, configure the tools correctly, and feel confident supporting patients in VR-based assessments and interventions. By bridging the gap between digital literacy and patient care, such onboarding can enable smoother integration of VR into clinical practice and unlock its potential impact.

VR solutions in healthcare will only succeed if HCPs can confidently set up, operate, and integrate them into their workflows with patients. Currently, onboarding is fragmented, often relying on generic manuals or improvised instructions that fail to address the clinical context. The challenge is to design a **structured, web-based onboarding experience** that gives HCPs the knowledge and confidence to use Cogniclear VR in their settings and administer it to their patients.

The onboarding must be **modular and extensible**, so it can evolve as Virtuleap introduces new products and enterprise features, while remaining accessible for busy HCPs working in demanding care settings

Unmet needs

- A structured and scalable onboarding framework tailored for healthcare use of VR, focused on Cogniclear and Virtuleap's Enterprise platform.
- Resources that go beyond technical setup to show HCPs how to confidently integrate Cogniclear assessments into clinical workflows.
- Clear training pathways that combine VR literacy with patient-facing practices, ensuring safe and effective session delivery.
- Integration of Virtuleap's dashboard, remote-control and billing system features into onboarding, so HCPs can seamlessly add new users, purchase access to the products, manage patients and track results.
- A modular approach that ensures the onboarding remains extensible as Virtuleap's portfolio evolves.

Challenge Details

- **Challenge Type:** Product design, UX prototyping, usability testing
- **Applicant Contributions:** Digital learning design, UX/UI expertise, healthcare UX understanding
- **Estimated Timeline:** 4–5 months
- **Estimated Capacity:**
- **Estimated Cost:** up to €30,000

Expected Results

By the end of the challenge, Virtuleap will have a mid-fidelity interactive prototype of a structured onboarding solution that enables healthcare professionals to confidently adopt Cogniclear VR and the Virtuleap Enterprise platform. The result will demonstrate how onboarding can bridge technical setup, VR literacy, and clinical integration, providing HCPs with both confidence and clarity in using the solution with patients.

This will establish a reusable and extensible framework that supports not only Cogniclear but also future Virtuleap products, accelerating adoption and reducing friction for healthcare providers. Success will be measured by the usability and clarity of the onboarding prototype, validated through stakeholder feedback, and its readiness to evolve into a scalable deployment.

Deliverables

- **D1: Modular Onboarding Framework** – a structured outline covering all onboarding phases, designed to be extensible for future products.
- **D2: High-Fidelity Wireframes** – sketches of key interaction flows and content structure.

- **D3: Mid-Fidelity Interactive Prototype** – clickable Figma prototype showing step-by-step onboarding experience.

Eligible Activities

- **Context immersion** – tool demo and alignment with Virtuleap stakeholders; short interviews with HCPs (4-5 depending on availability)
- **Secondary research** – trends and best practices in onboarding and digital training in healthcare
- **Design interaction flows** – step-by-step web-based onboarding modules with checklists, scenario-based flows, and embedded media
- **Prototype development** – build the Figma prototype



4. CHALLENGE: MedApp S.A. - Pilot Clinical Stage Investigation & Formative Usability Evaluation (Kidney Biopsy AR Navigation)

MedApp Solution: CarnaLife Holo MedNav - Augmented reality navigation system designed to support precision and safety in kidney biopsy procedures by providing real-time visual guidance.

This challenge addresses early-stage clinical validation in the field of interventional radiology and nephrology, focusing on image-guided procedures. Clinical evidence and usability data are critical for medical device development, particularly for regulatory submissions under MDR and for adoption in hospital workflows. Success factors include compliance with Good Clinical Practice (GCP), involvement of clinical users (radiologists, nephrologists), robust study design, and the generation of evidence usable in the **Clinical Evaluation Report (CER)**.

We seek to perform a **pilot stage clinical investigation** with a small patient cohort (5 - 10 participants) to assess initial clinical **safety and performance** of our AR navigation solution for kidney biopsies. In parallel we seek to perform a formative usability evaluation to evaluate the user interface with intended users of our medical device (surgeons and radiologists).

This is a pilot stage study and a formative study intended to generate early clinical and usability evidence respectively, that will feed into our CER, guide device design modifications and provide further information for the design of a subsequent clinical investigation.

This challenge is critical now to bridge from technical validation (bench/simulations) to real-world use with patients, generating insights on safety, workflow fit, and clinician acceptance ahead of larger pivotal studies.

MedApp will provide the prototype and training necessary for performing the clinical investigation and the usability evaluation.

Unmet need:

- Design and execution of a GCP-compliant pilot study (5–10 procedures).
- Usability evaluation focusing on workflow, visualization, and surgeon/radiologist interaction.
- Collection and analysis of safety & performance endpoints (technical success, adverse events, biopsy adequacy).
- Structured usability data to inform risk management and human factors engineering.
- Early clinical feedback to strengthen Clinical Evaluation Report and regulatory roadmap.

Challenge Details

- **Challenge Type:** Pilot stage clinical investigation & formative usability evaluation.
- **Partner SME Contributions:**
 - Expertise in clinical research operations (protocol design, ethical approval submission, site coordination, data collection & reporting).
 - Support in usability studies and human factors validation (methods, data capture, analysis).
 - Knowledge of MDR, ISO 14155 and IEC 62366 requirements for clinical investigations and usability tests of medical devices.
- **Estimated Timeline:** ~9–12 months.
- **Estimated Capacity:** ~3–4 person-months (combined clinical, regulatory, and usability expertise).
- **Estimated Cost:** Up to €60,000

Expected Results

At the end of this challenge, we expect a Clinical Investigation Report and a Formative Usability Evaluation Report with clinical and usability findings from 5 - 10 participants. The study will generate evidence of clinical workflow integration, technical feasibility, performance metrics, and initial safety outcomes. Usability results will support device design modifications and feed into the human factors engineering file. These results will serve as input to the CER and strengthen our readiness for larger clinical investigations and regulatory compliance. The partner is responsible for acquiring formal approvals (eg. Bioethics committee approval) to perform the investigations.

Deliverables

- **D1: Clinical Investigation Protocol (CIP) (Draft & Approved)** – Protocol design, regulatory/ethics submission, and approval documents.
- **D2: Pilot Stage Clinical Investigation Report** – Results from 5 - 10 participants, including safety and performance endpoints, adverse event reporting, and biopsy adequacy analysis.
- **D3: Formative Usability Evaluation Report** – Structured feedback from clinical users, workflow integration observations, and recommended device refinements.
- **D4: CER Input File** – Summary of generated evidence aligned with MDR requirements, to be directly included in Clinical Evaluation Report documentation.

Eligible Activities

- **CIP Development** – Drafting protocol, submission for ethics/Institutional Review Board (IRB) approval, study registration.
- **Pilot Study Execution** – Coordination with clinical site(s), training, data collection during 5 - 10 participants.
- **Usability Testing** – On-site observations, structured questionnaires/interviews, analysis of workflow impact.
- **Data Analysis & Reporting** – Synthesis of safety and performance data, risk analysis inputs, preparation of CER-ready documentation.



5. CHALLENGE: MedApp S.A. - Segmentation (annotation) of a abdomen and chest CT images dataset.

MedApp Solution: CarnaLife Holo MedNav - Augmented reality navigation system designed to support precision and safety in kidney biopsy procedures by providing real-time visual guidance.

This challenge fits in the **medical imaging and AI training data domain**, specifically focusing on high-quality ground truth segmentation of CT scans. Access to reliable, radiologist-approved segmentation data is crucial for developing AI models that can support diagnosis, treatment planning, and regulatory approval under MDR. Success depends on the accuracy of annotations, medical validation, and compliance with medical device regulations - making collaboration with expert medical data labeling partners critical.

Our current bottleneck is the **lack of clinically validated segmentation data** for our CT imaging dataset. While we have DICOM datasets, they lack labeled organ and vessel segmentations. To progress toward MDR compliance and model development, we need a partner to provide **structured, radiologist-validated ground truth annotations** of abdominal and chest organs and vasculature.

MedApp will provide access to the data to be annotated.

This is critical now, as segmentation will allow us to:

- Advance our AI solution to higher TRL/CIMIT stages
- Enable clinical validation with real-world data
- Fulfill MDR/AI Act certification requirements

Unmet need:

- Segmentation (annotation) of images in the dataset containing:
- **50 abdominal CT exams with 3-phase imaging**
- **25 high-resolution chest CT exams**
- **25 standard-resolution chest CT exams**
- Mandatory structures to be segmented: **liver, hepatic veins/arteries, kidneys, renal vessels, aorta, heart, pulmonary vessels**
- Optional structures to be segmented: **tumors, cysts**, and any additional abdominal or thoracic structures that can be reliably segmented
- Radiologist approval of all final segmentations (MDR ground truth standard)

Challenge Details

- **Challenge Type:** Medical image annotation & segmentation with clinical validation

- **Partner SME Contributions:** Expertise in medical image labeling, DICOM handling, segmentation tools (e.g., ITK-SNAP, 3D Slicer, or proprietary platforms), quality control pipelines, and radiologist collaboration/oversight
- **Estimated Timeline:** 9–12 months
- **Estimated Capacity:** ~6–8 person-months (including annotation specialists + radiologist time for review)
- **Estimated Cost:** up to €60,000 (depending on structure coverage and validation scope)

Expected Results

By the end of the challenge, we expect to have:

- A **complete, radiologist-validated ground truth dataset** of 100 CT exams segmented at the structure level (abdomen + chest).
- Data formatted and structured for integration into AI pipelines (DICOM-SEG or NIfTI format).
- Documentation of labeling methodology, inter-observer validation, and radiologist approval process for MDR purposes.

This result will enable us to:

- Advance our AI development toward MDR certification.
- Train AI models with **clinically reliable data**.
- Position ourselves for multi-center validation and regulatory submission.

Deliverables

- **D1: Segmented (annotated) dataset** – 100 exams with radiologist-approved ground truth masks (per required structures, provided in DICOM-SEG/NIfTI).
- **D2: Annotation and validation report** – Documentation of methods, tools, annotator profiles, QC pipeline, and radiologist sign-off.
- **D3: Regulatory compliance package** – Documentation/support package showing data conformity to MDR-certification requirements (audit trail, approval records).

Eligible Activities

- **Data preparation and curation** – Ensure DICOMs are clean, anonymized, and structured for segmentation workflow.
- **Medical image annotation** – Perform segmentation of abdominal and thoracic structures as per agreed annotation protocol.
- **Radiologist review and approval** – Independent clinical experts verify and sign off on all final labels.

- **Data packaging for AI integration** – Conversion to DICOM-SEG/NIfTI formats and preparation of final dataset with metadata.
- **Validation & QC workflow** – Documentation of annotation accuracy, inter-annotator agreement, and clinical reliability for regulatory purposes.



6. CHALLENGE: Metaskills - Development of an integrated platform for scenario authoring, license management, and reporting for AI-driven VR soft skills training

Metaskills Solution: AI-Assisted VR Training for Medical Professionals' Soft Skills

Unmet need:

- Lack of scalable tools for creating and managing VR training scenarios without costly developer involvement.
- Absence of a structured interface for both administrators and client organizations (e.g., HR departments) to adjust training contexts safely.
- Limited ability to align scenario configuration with competency frameworks and training goals in healthcare.
- Insufficient reporting and visualization capabilities for clients to monitor training outcomes and user engagement.
- No standardized mechanism for integrating existing backend databases (Directus) with user-facing scenario generation and reporting tools.

Challenge details:

- **Challenge Type:** Technical implementation of a multi-tenant platform with integration to existing Directus backend.
- **Partner SME Contributions:** Frontend & backend development, security compliance, dashboard analytics.
- **Estimated Timeline:** 6–8 months
- **Estimated Capacity:** 4–5 person-months
- **Estimated Cost:** €55,000

Expected results:

The project will deliver a working platform enabling healthcare institutions and corporate partners to independently configure, manage, and monitor AI-driven VR training scenarios. The solution will support role-based access control, wizard-driven scenario creation, and license allocation. It will also include dashboard reporting to provide administrators with insights on adoption, usage, and performance metrics. This will establish the technical backbone for scalable commercial deployment

Deliverables:

- **D1: Technical Specification & Data Model** – Finalized integration approach with Directus, user roles, and licensing (Month 1)
- **D2: Scenario Authoring Wizard** – User-friendly module for non-technical staff to configure scenarios (Month 2)

- **D3: Role & License Management** – RBAC, organization management, and license allocation (Month 3)
- **D4: Dashboard & Reporting Module** – Usage analytics, progress tracking, and outcome reports (Month 4)
- **D5: Security, GDPR & QA Report** – Documentation of compliance, test results, and hardening activities (Month 6)
- **D6: Deployment Package & User Documentation** – Platform release with user/admin manuals (Month 8)

Eligible activities:

- Technical development of software modules and dashboards
- Integration with existing backend and data models
- Security hardening and GDPR alignment
- Documentation, manuals, and user onboarding support

7. CHALLENGE: Metaskills - Defining and implementing a digital twin model for soft skills, based on structured indicators, JSON data representations, and competency level mapping

Metaskills Solution: AI-Assisted VR Training for Medical Professionals' Soft Skills

Unmet need:

- Lack of validated methods to objectively measure and track soft skills in medical professionals beyond subjective observation or self-assessment.
- Absence of scalable, standardized data models that can capture behavioural and communication patterns across different training scenarios.
- Limited integration of VR training platforms with analytical frameworks capable of providing long-term development insights.
- No existing tools that translate VR-based training interactions into actionable, career-relevant competency profiles.
- Insufficient mechanisms to ensure fairness, transparency, and GDPR-compliant handling of sensitive training data in healthcare contexts.

Challenge Details

- **Challenge Type:** Research and model development combining psychometrics, AI, and explainable recommendation systems.
- **Partner SME Contributions:** Competency modeling expertise, algorithm development, GDPR & ethics review.
- **Estimated Timeline:** 4–6 months
- **Estimated Capacity:** 3 person-months
- **Estimated Cost:** €30,000

Expected Results

The project will provide a formalized framework for representing soft skills competencies in a structured, machine-readable format. This includes validated indicators, JSON-based data exchange models, and algorithms for updating individual competency profiles over time. The digital twin will form the foundation for adaptive learning pathways and explainable recommendations within MetaSkills.

Deliverables

- **D1: Indicator & Data Dictionary** – Comprehensive definition of competency indicators and JSON schema (Month 1)
- **D2: Competency Mapping Report** – Alignment with theoretical models and levels of proficiency (Month 2)

- **D3: Digital Twin Definition & Algorithm** – Rules for updating profiles and learning recommendations (Month 2–3)
- **D4: Pre-Validation Plan** – Design of methodology for assessing predictive validity (Month 3)
- **D5: Ethics & GDPR Report** – Minimization of bias, data protection, and compliance guidelines (Month 5)
- **D6: Integration Manual** – Technical guide for integration of the digital twin into the MetaSkills platform (Month 6)

Eligible Activities

- Competency framework definition and psychometric modeling
- Development of structured data models and update algorithms
- Ethical/legal review of data usage and bias minimization
- Preparation of integration documentation and guidelines

8. CHALLENGE: Metaskills - On-Premise Language Models (SLM/LLM) Proof-of-Concept for Secure and Scalable AI-Assisted VR Training

Metaskills Solution: AI-Assisted VR Training for Medical Professionals' Soft Skills

MetaSkills currently leverages cloud-based LLMs for AI-assisted VR training and feedback. To ensure compliance, scalability, and data control for expansion into EU markets, there is a clear need to transition towards on-premise or private-cloud language model deployment.

The challenge is to design and validate a **Proof-of-Concept (PoC)** that compares **Small Language Models (SLMs)** with **Large Language Models (LLMs)** in a local environment, assessing trade-offs between quality, cost, and scalability.

Unmet need:

- Validation of whether SLMs (lighter, cheaper to run) are sufficient for key use cases such as tone detection, empathy, and aggression analysis.
- Evaluation of LLMs for more complex use cases (nuanced conversation, irony, multi-language).
- Recommendation on whether to adopt SLM-only, LLM-only, or hybrid approaches.
- Development of a secure, local PoC demonstrating chat + RAG on proprietary English-language documents
- Delivery of a reference architecture & RFP pack for future MVP deployment in international markets.

Challenge details:

- **Challenge Type:** Technical feasibility study and pilot deployment of on-premise language models for business-oriented VR/AI training.
- **Partner SME Contributions:** Expertise in SLM/LLM deployment, RAG pipeline development, performance benchmarking, lightweight UI prototyping, licensing and compliance evaluation.
- **Estimated Timeline:** 4–5 months
- **Estimated Capacity:** 2–3 person-months spread over 5 months
- **Estimated Cost:** Up to €35,000

Expected results:

The project will deliver a vendor-neutral PoC that demonstrates the feasibility of both SLM and LLM deployment in a secure on-premise environment, with clear recommendations for future scaling.

Key outcomes:

- Operational PoC with chat + RAG on proprietary content.
- Comparative SLM vs LLM analysis covering quality, latency, hardware requirements, and cost efficiency.
- Recommendation report, including a possible hybrid deployment option (SLM for routine tasks, LLM for complex cases).
- Licensing and compliance matrix covering GDPR, ISO, and commercial restrictions.
- Final RFP Pack enabling MetaSkills to prepare for MVP and international rollout.

Deliverables:

- **D1: Kick-off & Risk Assessment Report** – requirements, risks, licensing matrix (Month 1).
- **D2: Reference Architecture & Environment Setup** – PoC environment with one SLM and one LLM candidate, baseline metrics (Month 2).
- **D3: Mini-RAG Implementation Report** – pipeline + preliminary evaluation on proprietary data (Month 3).
- **D4: Comparative Analysis Report (SLM vs LLM)** – extended benchmarking, cost-benefit analysis, hybrid recommendation (Month 4).
- **D5: Final PoC Report & RFP Pack** – consolidated results, architecture for scaling, vendor criteria, compliance baseline (Month 5).

Eligible activities:

- Deployment and configuration of on-premise language models (SLM/LLM), including quantisation and evaluation
- Design and implementation of RAG pipelines adapted to MetaSkills use cases
- Comparative testing and benchmarking of models (SLM vs LLM) with focus on latency, quality, and cost
- Compliance and licensing assessment with preparation of documentation covering GDPR/ISO/NIS2
- Preparation of RFP Pack and scaling guidelines for international markets (EU/US)

9. CHALLENGE: Meeva - Feasibility Study for VR skills training in neurodivergent teens

MEEVA Solution: VR single-player app for skills training in neurodivergent teens

Successful commercial implementation of VR skills training for neurodivergent teens requires:

- a deep understanding of the healthcare and caregiver markets,
- clear insights into alternative solutions and competitors,
- and an in-depth analysis of the product and its value proposition for both caregivers and healthcare institutions.

To ensure adoption, the strategy must also include a sustainable pricing model, an effective distribution channel, and a clear sales approach. Beyond market readiness, additional factors such as reimbursement opportunities, policy alignment with EU digital health strategies, and evidence of clinical impact are critical for building long-term business viability.

Although VR skills training in neurodivergent teens presents significant advantages, there is a clear need for targeted market research to facilitate rapid adoption in European healthcare institutions and in caregiver settings. Current knowledge gaps include pricing sensitivity, real-world acceptance and target customer definition. Furthermore, Meeva needs to identify its USP as well as a channel and sales strategy.

Unmet need:

Comprehensive market-oriented analysis including:

- Exploration of hybrid business models tailored for institutional buyers and NGOs (e.g., freemium for public sector, bundled services with training)
- Preliminary cost-benefit assessment for different stakeholder groups to support long-term viability of the business model
- Identification of key barriers to adoption (e.g., regulatory, organizational, cultural) and recommendations to mitigate them
- Detailed mapping analysis in selected EU healthcare markets (with preference toward Italy, Germany, Belgium and France)
- Comprehensive buyer persona and stakeholder analysis (including non-VR competitors)
- Pricing strategy evaluation and identification of optimal revenue models (subscription, licensing, service agreements)
- Product & Value proposition to identify Meeva USP
- Strategic sales recommendations for rapid commercial scalability

Challenge Details

- **Challenge Type:** Healthcare market entry research, business analysis, and marketing plan
- **Applicant Contributions:** Market research expertise, stakeholder analysis capabilities, and marketing expertise
- **Estimated Timeline:** 2-3 months
- **Estimated Capacity:** 4-5 person-months
- **Estimated Cost:** Up to €40,000

Expected Results

The project will deliver a precise roadmap for rapid market entry, focusing specifically on key stakeholders, and competitive positioning across selected European healthcare markets. It will also validate potential business and pricing models suitable for rapid market penetration.

Deliverables

- **D1: Competitive Benchmarking and Positioning Report** - Comprehensive analysis of competitive solutions (including non VR solutions), identifying strategic market positioning
- **D2: Business and Pricing Model Validation Report** - Recommended business, pricing, and financing models tailored to clinics and caregivers settings, including sustainability considerations and analysis of adoption barriers.

Eligible Activities

- Business innovation services aimed at designing and validating investment plans across healthcare-related value chains
- In-depth market and stakeholder research to identify viable commercial entry points. Insights will be gathered through structured interviews, surveys, and targeted workshops with healthcare administrators, caregivers and decision-makers
- Analysis of regulatory, economic, and organizational barriers and enablers for market access - Preliminary cost-benefit studies across multiple stakeholder types to inform sustainable business model
- Strategic advisory support for interregional investment, business planning, and go-to-market implementation
- Activities focused on identifying and establishing partnerships with commercial resellers, training providers, or other distribution channels that can facilitate scalable market entry and long-term business sustainability

10. CHALLENGE: Meeva - Marketing & Communication plan for VR skills training in neurodivergent teens

Meeva Solution: VR single-player app for skills training in neurodivergent teens

A solid marketing and communication strategy is fundamental to ensure visibility, credibility, and adoption of innovative digital health solutions. For Meeva, the challenge is to design a plan that combines **clear market targeting, compelling storytelling, and effective dissemination**, enabling both rapid commercial uptake and long-term sustainability in the European healthcare ecosystem.

The selected provider will be required to define customer segments, map the customer journey, and align marketing actions accordingly. Identifying SMART marketing goals and KPIs to track progress is key to accelerate market entry and drive wide-scale adoption in healthcare settings. While the project will not directly monitor KPIs due to its timeline, it should propose realistic indicators and success metrics to be validated and implemented later.

Additionally, the selected provider must develop a communication strategy that ensures visibility, stakeholder engagement, and wide dissemination of the solution's value. The communication plan should support business objectives, build reputation, and foster trust with key stakeholders including healthcare professionals, institutions, and caregivers.

It is essential to align the marketing plan with Meeva's social impact objectives and ensure it is supported by compelling storytelling and a narrative that reflects healthcare transformation.

Unmet need: Comprehensive market-oriented analysis including:

- Definition of an integrated funnel strategy with entry points, nurturing flows and final conversion steps adapted to institutional and B2B contexts
- Recommendations for marketing automation tools and CRM integration to support scalable outreach and lead management
- Select the most effective marketing channels to reach our target audience (digital marketing and direct sales/partnerships)
- Identify marketing goals and KPIs (to be validated post-project)
- Customer journey mapping and segmentation for all identified buyer personas
- Content strategy framework to support value-based marketing approach
- Development of a communication strategy that includes visibility actions, multichannel planning, stakeholder engagement and alignment with EU dissemination standards

- Website redesign aligned with business and marketing analyses, maintaining brand consistency while updating the visual identity.

Challenge Details

- **Challenge Type:** marketing & communication plan
- **Applicant Contributions:** Market research expertise, stakeholder analysis capabilities, and marketing expertise
- **Estimated Timeline:** 5-6 months
- **Estimated Capacity:** 2-3 person-months
- **Estimated Cost:** Up to €20,000

Expected Results

The provider will deliver a **clear storytelling strategy and content guidelines**, ensuring consistency and resonance across all touchpoints. It will also provide:

- an evaluation of institutional readiness and identification of adoption barriers (regulatory, organizational, cultural), with mitigation strategies, preliminary cost-benefit insights to support long-term sustainability,
- and a marketing plan designed to amplify Meeva's visibility and strengthen its reputation.

The expected outcome is a **comprehensive roadmap for commercialization and dissemination**, enabling Meeva to confidently engage with prospective customers and establish a strong foothold in European healthcare institutions. Operational enablers such as funnel design, audience segmentation, and scalable outreach tools will be key outputs to accelerate adoption.

The project will also outline key operational enablers such as funnel design, audience segmentation, and scalable outreach tools.

Deliverables

- **D1: Buyer Persona & Stakeholder Analysis** - Identification and profiling of key decision-makers and competitors beyond VR solutions, defining clear buyer profiles and market entry points
- **D2: Marketing Strategy** - Identify Marketing Channels including (i) Digital Marketing such as content marketing, SEO or social media marketing; (ii) Direct Sales and Partnerships
- **D3: Content & Storytelling Guidelines** - Development of key narrative pillars, tone of voice and core messaging to communicate Meeva's value in healthcare and caregiver contexts

- **D4: Website Redesign Recommendations** - Strategic guidance for a new Meeva website aligned with the marketing and communication strategy, maintaining existing logo but integrating a new visual identity
- **D5: Dissemination and Communication Plan** - Includes visual identity guidelines, narrative positioning, tone of voice, messaging pillars, key messages per audience, multichannel dissemination strategy, content formats, timelines, stakeholder alignment, and proposed metrics to evaluate potential communication impact (e.g. visibility, reach, engagement), to be validated and implemented post-project.

Eligible Activities

- Design and implementation of integrated marketing funnels tailored to B2B and institutional healthcare contexts, including audience segmentation, lead nurturing and conversion paths
- Strategic support in selecting and integrating marketing automation tools and CRM systems to ensure scalable outreach, lead tracking and customer engagement
- Definition of a KPI framework to evaluate marketing and communication effectiveness (to be validated post-project)
- Communication and dissemination activities: stakeholder engagement campaigns (media relations, content co-creation, interviews); development of digital assets (infographics, videos, web landing pages); participation in industry events and webinars; community building on social platforms; production of press releases and policy briefs.

11. CHALLENGE: Meeva - VR-Specific Technical & Documentation Framework Development

Meeva Solution: VR single-player app for skills training in neurodivergent teens

Bringing innovative VR cognitive, emotional and social training tools to European healthcare markets requires navigating complex regulatory frameworks. CE marking for such novel technologies demands specialized expertise combining VR technology understanding with deep regulatory knowledge.

VR cognitive, emotional and social training face unique regulatory hurdles in the EU market. Standard regulatory approaches often don't adequately address VR-specific considerations, creating uncertainty in documentation requirements and compliance pathways.

Unmet need

A structured methodology for preparing VR-specific technical documentation elements for CE Marking, with focus on:

Preparation for Technical documentation submission and regulatory approval including:

- Device description and specification
- Information to be supplied by the manufacturer (label + IFU)
- EU Declaration of Conformity
- Design and manufacturing information
- General safety and performance requirements including the identification of applicable EU regulations and harmonized standards
- Benefit-risk analysis and risk management
- Pre-clinical data – Needs identification (Software Verification and Validation; Cybersecurity; Stability, including shelf life; Usability)
- Additional information for specific cases (for example: Devices to be connected to other device(s) in order to operate as intended)
- Post-market surveillance and vigilance strategy
- Clinical evaluation, including preparation of a Clinical Evaluation Plan (CEP) and Clinical Evaluation Report (CER).
- Preparation of documentation related to the EU AI Act, anticipating compliance needs for future AI-enabled features of the product
- Preparatory framework for possible product evolutions, ensuring readiness for higher-class certification scenarios

Challenge Details

- **Challenge Type:** Regulatory documentation framework requiring expertise in CE marking for VR medical technologies + pre clinical evaluation
- **Partner SME Contributions:** Regulatory affairs expertise with focus on software medical devices and VR technology understanding;
- **Estimated Timeline:** 6 months
- **Estimated Capacity:** 6 person-months
- **Estimated Cost:** €60,000

Expected Results

This project will deliver a specialized technical documentation framework tailored to the unique regulatory challenges of VR serious games, intended to strengthen cognitive, emotional and social skills in children and young adults with autism and/or ADHD, providing Meeva with practical templates and guidance for CE marking compliance. The framework will include a detailed analysis of VR-specific regulatory considerations with emphasis on software validation, usability factors, and benefit-risk assessment methodologies particularly relevant to cognitive, emotional and social skills training in virtual environments. The deliverables will enable Meeva to clearly understand the regulatory requirements unique to their technology, implement a structured approach for addressing priority documentation elements, and establish a solid foundation for comprehensive regulatory submissions. By addressing the regulatory challenges specific to VR cognitive, emotional and social training tools, this project will accelerate Meeva's regulatory planning process, reduce uncertainty around novel technology aspects, and enhance their ability to navigate the complex CE marking pathway with confidence. The framework and templates will undergo review by regulatory experts familiar with medical software and will be assessed by Meeva's product development team to ensure practical applicability and alignment with their specific technology implementation.

Deliverables

- **D1: Technical documentation:** according to annex II and III of the MDR.
- **D2: Clinical Evaluation Package:** Preparation of a Clinical Evaluation Plan (CEP) and Clinical Evaluation Report (CER)
- **D3: AI Act & Future Progress Documentation:** Preparation of regulatory documentation addressing upcoming EU AI Act requirements and readiness for product evolutions

Eligible Activities

- **Test beds and complementary activities needed to improve regulations, standards and/or to remove barriers and bottlenecks to innovation** - Developing specialized approaches to address regulatory challenges unique to VR cognitive assessment tools
- **Advisory support for investment** - Providing expert guidance on regulatory compliance pathways to enable market entry for innovative VR healthcare solutions
- **Activities bringing innovative ideas and new products to the market**
Creating documentation frameworks specifically designed to facilitate regulatory approval for novel VR cognitive assessment technologies



12. CHALLENGE: Dotlumen SRL (.lumen) - CyberSecurity and Remote OTA in head-worn wearables

Dotlumen Solution: Glasses for the Blind - Advanced assistive technology for visually impaired individuals

.lumen builds Glasses that empower the blind to live a better life. The underlying technology can be described like a self-driving car, but on something that you wear on the head. And it's true, that from a technological perspective the .lumen glasses are a self-driving car which replicates what the guide dog for the blind is doing. If a self-driving car works on the road, the Glasses, powered by our proprietary Pedestrian Autonomous Driving AI (PAD AI), work on the pedestrian world.

However, this technology is being used by visually impaired people, and software features are always added. These must be remotely updated in a way which doesn't require complex user interfaces. Furthermore, the Glasses, having multiple live cameras embedded, acquire incredibly private data, and even if they don't record the videos/photos, they must be heavily protected from potential hacking.

The Glasses operate and advanced NVIDIA based embedded computer, which is connected to the internet via both WiFi and GSM-based data connectivity. Overall, they run a LINUX-based system. With time, the entire firmware must be updated, up to the level of low-level drivers, the LINUX kernel itself, and the custom .lumen code. This must be done securely and with close to no input from the user, which is visually impaired.

Unmet need:

- A comprehensive Over-The-Air (OTA) software update mechanism, which is safe from cyberattacks, including:
 - Researching methods to achieve this on the entire hardware (microcontrollers, Nvidia GPU, etc)
 - Having safe connectivity to an on-prem server, or a cloud-based solution
 - Having backup in case the update process does not work.

Challenge Details

- **Challenge Type:** Applied research and development in SLAM & VIO for head worn wearables
- **Applicant SME Contributions:** Expertise in computer vision / embedded AI / Machine Learning
- **Estimated Timeline:** 12 months
- **Estimated Capacity:** 6-7 person-months

- **Estimated Cost:** Up to €40,000

Expected Results

This project will deliver functional OTA system which is secure and:

- Works on the target Hardware
- Updates all programmable components (SoC, MCUs, etc)
- Will include documentation according to .lumen processes

Deliverables

- **D1: OTA Research Report** – Report on potential technologies that can be used to update the entire HW
- **D2: OTA Implementation & Documentation** – Fully functional and secure implementation of an OTA system for the .lumen HW, with documentation and testing

Eligible Activities

- **OTA Research** – Research of technologies for the main classes of HW required
- **OTA Implementation** – Implementing the cloud/server side and the edge side for the OTA

13. CHALLENGE: Dotlumen SRL (.lumen) – Indoor / Outdoor SLAM & VIO in Wearables

Dotlumen Solution: Glasses for the Blind - Advanced assistive technology for visually impaired individuals

.lumen builds Glasses that empower the blind to live a better life. The underlying technology can be described like a self-driving car, but on something that you wear on the head. And it's true, that from a technological perspective the .lumen glasses are a self-driving car which replicates what the guide dog for the blind is doing. If a self-driving car works on the road, the Glasses, powered by our proprietary Pedestrian Autonomous Driving AI (PAD AI), work on the pedestrian world.

One key component is understanding movement of self in the world, which is done using Visual Inertial Odometry. However, this must be perfected to better understand the specific of operating outdoor, in GPS rich areas, or indoor in darkly lit rooms.

SLAM (Simultaneous Localization and Mapping) and the underlaying VIO (Visual Inertial Odometry) are not particularly new technologies. However, due to hardware constraints they were only recently applied in wearables. The .lumen Glasses use this technology to understand the movement and positioning of the user. Through this challenge, we want to enhance these technology to better work in indoor environments, and in dark conditions. Furthermore, it must integrate with GNSS such that it can provide an absolute location wherever in the world. Some of the challenges are when the visually impaired user enters a building – how to get back to the entrance. Or a very complex one – how to determine what happens in an elevator. And all of these are happening on a low power wearable, the second generation .lumen Glasses.

Unmet need

A general-level Indoor / Outdoor SLAM & VIO algorithm, in a head-worn wearable:

- Researching the current implementation of VIO and SLAM on the current hardware
- Running experiments to understand the limitations
- Identifying tough scenarios for VIO & SLAM in real world use cases
- Implementing solutions for identifying said tough scenarios in order to be able to react to them
- Implement GNSS integration, Indoor-Outdoor transitions, fixes for proper translation and rotation detection regardless of tough scenarios

Challenge Details

- **Challenge Type:** Applied research and development in SLAM & VIO for head worn wearables
- **Applicant SME Contributions:** Expertise in computer vision / embedded AI / Machine Learning
- **Estimated Timeline:** 10-12 months
- **Estimated Capacity:** 10-12 person-months
- **Estimated Cost:** Up to €60,000

Expected Results

This project will deliver an upgraded VIO / SLAM set of components which will run on requested HW & SW architecture, and:

- Will integrate Loop Closure, GNSS, indoor-outdoor transitions
- Will work in tough scenarios as identified by the SME, together with researchers of .lumen
- Will include documentation according to .lumen processes

Deliverables

- **D1: Tough Scenarios Identification** – Together with the responsible part of the .lumen team, which deals with VIO integration, find major issues and map the main challenges in pedestrian urban navigation that SLAM can face. Documentation deliverables are also expected.
- **D2: Current Solution Benchmarking** – The current solution will be benchmarked and tested to get a baseline versus the tough scenarios previously identified. Documentation deliverables are also expected.
- **D3: SLAM/VIO Development** – Finally, SLAM/VIO will be implemented/upgraded to satisfy the requirements such that it can operate in tough scenarios such as low light, indoor / outdoor, GNSS restrained, etc. Documentation deliverables are also expected.

Eligible Activities

- **SLAM & VIO Research** – Research of tough scenarios, together with the .lumen team, in order to identify and benchmark them
- **SLAM & VIO Benchmarking** – Run the .lumen custom implementation and identify its performance and pitfalls in tough scenarios.
- **SLAM & VIO Development** – R&D improvements such that the SLAM & VIO pack would work well in the identified and agreed upon tough scenarios. Testing and documentation included.

14. CHALLENGE: Dotlumen SRL (.lumen) - Machine Learning Monocular Depth R&D

Dotlumen Solution: Glasses for the Blind - Advanced assistive technology for visually impaired individuals

The new generation .lumen Glasses, internally called LightKit, are a strong miniaturization of the first-generation Glasses. One of the key enabling technology for reducing the size, is the use of a Machine Learning model which provides Monocular Depth output, in relative or absolute units. This comes to replace other 3D Sensing technologies such as Lidar, or stereovision, and it must work on a monocular stream of image data.

While depth sensing technologies such as stereovision or lidar exist, they are impractical in a wearable due to their size. However, given a good quality RGB or Infrared image stream, a machine learning model capable of outputting depth can be designed and trained. Through this R&D, an SME must create and train such a model, based on .lumen data, and obtain a model that can output depth masks in real time on a wearable.

Unmet need:

Targeted monocular depth ML research, including:

- Researching Monocular Depth ML Architectures
- Testing and training custom ML monocular depth algorithms, on .lumen data
- Help the process of obtaining more data relevant for monocular depth
- Optimize trained models on the target hardware, to work real time
- Perform comparisons between the output of the custom trained model and state of the art sensors, based on .lumen datasets

Challenge Details

- **Challenge Type:** Applied research and development in monocular vision technology, prototyping, and user-centered design
- **Partner SME Contributions:** Expertise in computer vision / embedded AI / Machine Learning
- **Estimated Timeline:** 10-11 months
- **Estimated Capacity:** 10-11 person-months
- **Estimated Cost:** Up to €60,000

Expected Results

This project will yield monocular depth ML models, trained on proprietary datasets, which can work real-time and with good enough precision in the available hardware

specifications. The SME can provide contributions towards steering the technical development to specific camera sensors and specifications based on what is realistic to be in the BoM of the LightKit.

Deliverables

- **D1: Monocular Depth ML Research Report** – Detailed report on available model architectures which are compatible with the existing hardware and expected performance
- **D2: Monocular Depth Training Data** – Algorithms and scripts to take .lumen available data and process it to be used for training of new ML monocular depth models. Also, support in obtaining more data in terms of recording scripts, strategies and data reporting frameworks/dashboards to track the available / to be obtained / needed data. Together with documentation.
- **D3: Monocular Depth Models** – Finally, ML Monocular Depth models trained on the D2 obtained data, and tested by comparison with state-of-the-art sensors. Together with documentation.

Eligible Activities

- **Machine Learning Research** – Research of Monocular Depth architectures, tests and similar in the field of compute vision
- **Dataset Processing** – Processing and/or gathering new datasets, using .lumen provided sensors, in order to train models
- **Machine Learning Architecture design & Training** – Training new architectures based on datasets.

Annexes 2 and 3 – Financial Support Agreement template and Collaboration Agreement template



EIT Health InnoStars Financial Support Agreement

VR Health Champions Open Call 2026

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This financial support agreement, hereinafter the “**Agreement**”, shall have retroactive effect as of **31 January 2026** and is entered into by and between:

EIT Health InnoStars e.V.

Having its registered seat at Mies-van-der-Rohe-Str. 1C, 80807 Munich, Germany

Registration number: VR 206595

VAT number DE308252541

**Represented by Balázs Fürjes, managing director
(hereinafter referred to as: “InnoStars”)**

And

<Entity Name>

Having its registered seat at: <XXXXX>

Registration number: <XXXXX>

VAT number: <XXXXX>

Represented by <XXXXX>

hereinafter referred to as the “Recipient”;

Hereinafter, jointly or individually, referred to as “Parties” or “Party”;

WHEREAS:

InnoStars has entered into a Grant Agreement (“**GA**”) with the European Innovation Council and SMEs Executive Agency (**EISMEA**) (‘EU executive agency’ or ‘**granting authority**’), with the effective date of 1 October 2024, establishing a long-term cooperation laying down the general terms and conditions under which InnoStars must operate under the Interregional Innovation Investments (**I3**) Instrument - EISMEA.

The GA lays down the provisions concerning the implementation of the activities through grants, which, among others, allows InnoStars to provide financial support to third parties for projects and actions related to its **Business Plan** in the GA (the “**Financial Support to Third Parties**”).

The Recipient has been selected as a Third Party receiving Financial Support under **Project 101161333 — VRHealthChampions**, as part of **InnoStars VR Health Champions Open Call 2025** (the “**Project**”).

In this Agreement the Parties wish to lay down the contractual arrangements between them regarding their respective rights and obligations for the implementation by the Recipient of the Project, transposing to the extent needed the provisions of the GA.

NOW, THEREFORE, IT IS HEREBY AGREED AS FOLLOWS:

Article 1. Definitions

1.1. Definitions

Words beginning with a capital letter shall have the meaning defined either herein or in the I3 Programme or Grant Agreement, including their respective Annexes.

1.2. Additional Definitions

“Authorised Representative” shall mean the person or persons duly authorised to sign this Agreement, including its Annexes, on behalf of a Party.

“Effective Date” shall mean the date first referenced above.

“EISMEA” or **“granting authority”** shall mean the European Innovation Council and SMEs Executive Agency, currently regulated by Regulation (EU) 2021/690 of the European Parliament and of the Council of April 01, 2021 (**“EISMEA Regulation”**).

“Flagship SME” shall mean the five selected small and medium-sized enterprises (SMEs) participating in the VRHealthChampions project consortium, namely MedApp, Lightspace, MetaSkills, MEEVA, Virtuleap, which develop virtual reality (VR) and augmented reality (AR) innovations in the healthcare sector. VRHealthChampions project aims to upgrade the technology readiness level (TLR) of VR/AR innovations developed by Flagship SMEs from TRL6 to TRL9, in the subjects of medical navigation during surgery, therapeutic immersive games, cognitive evaluation, education of medical professionals and students, and VR headset customization for medical use. These use cases will be accelerated by closing the gap in their value chains and by assisting them with new services customized for the XR solutions in order to mitigate the market barriers.

“Force Majeure” shall mean any situation or event that:

- prevents either Party from fulfilling their obligations under this Agreement,
- was unforeseeable, exceptional situation and beyond the Parties’ control,
- was not due to error or negligence on their part (or on the part of other participants involved in the action), and
- proves to be inevitable in spite of exercising all due diligence.

“Grant Agreement” or **“GA”** shall mean the agreement signed by the EISMEA and the Beneficiaries including InnoStars (template available at https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/i3/agr-contr/mga_i3_en.pdf), setting out the rights and obligations applicable to the I3 grant awarded for the implementation of the Business Plan and as altered, amended, re-instated or replaced from time to time. The project number in the GA is 101161333.

“Interregional Innovation Investments (I3) Instrument” shall mean Regulation (EU) 2021/695 of the European Parliament and of the Council of 28 April 2021 establishing Interregional Innovation Investments (I3) Instrument, laying down its rules for participation and dissemination.

“Project” shall mean the project selected under the InnoStars VR Health Champions Open Call 2025, which the Recipient shall implement as described in the “Project Business Plan”.

“Third Party Receiving Financial Support” shall mean a recipient of financial support to third parties, (in the form of grants, prizes or similar forms of support as described in Article 9.4 of the GA).

“VRHealthChampions (VRHC)” refers to ‘Project 101161333’ carried out under the Grant Agreement. VRHC aims to accelerate the adoption of XR technology in healthcare by reducing market barriers for VR/AR applications in less developed European regions by addressing the gaps in the value chains of 5 Flagship SMEs, and by learning from the experience, customize innovation support services for other SMEs in the healthcare VR/AR sector.

Article 2. Purpose

The purpose of this Agreement is to lay down the contractual arrangements between the Parties regarding their respective rights and obligations pertaining to the implementation by the Recipient of the Project.

The Recipient acknowledges and agrees that in this Agreement, the conditions of the GA are transposed in the legal arrangement between InnoStars and the Recipient, in order to ensure that the InnoStars shall meet its obligations and exercise its rights (including those towards the EISMEA) under the GA.

Article 3. Entry into force, duration, and termination

3.1. Entry into force and duration

This Agreement shall have effect from the Effective Date and shall apply until the end date of the Project. The expected end date of the Project is 31.01.2027 (the period between the Effective Date and the end date of the Project being referred to as the “Project duration”)

However, this Agreement may be terminated in accordance with Article 3.2 of this Agreement.

3.2. Termination

3.2.1. In the event that the Recipient is in breach of its obligations under this Agreement, InnoStars may give formal notice to the Recipient requiring that such breach will be remedied within 14 calendar days of this formal notice, unless such breach cannot be remedied.

If such breach is substantial and is not remedied within that period or, is not capable of remedy, InnoStars may decide to declare the Recipient to be a defaulting Party and to decide on the consequences thereof which may include termination of this Agreement upon notice and other measures (for example suspend/recover any payment of (part of) the financial support or stop the Project).

3.2.2. InnoStars may terminate this Agreement with immediate effect through written notice to the Recipient in the event the further implementation of the Project is prevented or delayed with more than two weeks by Force Majeure.

3.2.3. If the GA is terminated by the EISMEA or InnoStars, InnoStars shall have the right to terminate this Agreement upon notice to the Recipient.

3.2.4. InnoStars may at any time terminate this Agreement immediately upon notice if one of the following events occurs:

- a change to the legal, financial, technical, organisational or ownership situation of the Recipient is likely to substantially affect or delay the implementation of the Project or calls into question the decision to select the Project (including changes linked to one of the exclusion grounds listed in the declaration of honour, signed by the time of the signature of this Agreement);

- the Recipient is subject to bankruptcy proceedings or similar (including insolvency, winding-up, administration by a liquidator or court, arrangement with creditors, suspension of business activities, etc.);
- the Recipient is in breach of social security or tax obligations;
- the Recipient (or person having powers of representation, decision-making or control, or person essential for the implementation of the projects) has been found guilty of grave professional misconduct;
- the Recipient (or person having powers of representation, decision-making or control, or person essential for the implementation of the Project) has committed fraud, corruption, or is involved in a criminal organisation, money laundering, terrorism-related crimes (including terrorism financing), child labour or human trafficking;
- the Recipient (or person having powers of representation, decision-making or control, or person essential for the implementation of the Project) was created under a different jurisdiction with the intent to circumvent fiscal, social or other legal obligations in the country of origin (or created another entity with this purpose);
- the Recipient (or person having powers of representation, decision-making or control, or person essential for the implementation of the Project) has committed substantial errors, irregularities or fraud

3.3. Effects of termination

3.3.1. Survival of rights and obligations

After termination, the Recipient's obligations that by their nature should survive the termination of this Agreement, including (in particular Obligations from GA: Articles 17 (Visibility and communication), 13 (Confidentiality), 33 (Liability), 43.1 (Applicable law) and 43.2 (Dispute settlement)), shall continue to apply.

Termination shall not affect any rights or obligations of the Parties incurred prior to the date of termination unless otherwise stipulated herein or agreed between the Parties. This includes the obligation to provide all input, deliverables, and documents for the period that the Agreement was still in force and effect.

3.3.2. Measures towards defaulting Recipient

InnoStars shall have the right to stop or reorient the scope of the Project. InnoStars shall also have the right to suspend any payment towards the defaulting Recipient and to request the defaulting Recipient to return the funds received (recovery or withdrawal of funds) without prejudice to its right to claim compensation for damages caused by Recipient's breach.

For the avoidance of doubt, InnoStars may decide to recover funds if and to the extent the Project implemented so far has not started or rendered, in the reasonable discretion of InnoStars, any substantial development or other benefit.

3.3.3. Termination report

The Recipient must – within 60 days from when termination takes effect – submit a termination report, for the open reporting period under the Project until termination, containing an overview of the progress of the work.

InnoStars will calculate the amount that might be due to the Recipient on the basis of the report submitted (i.e. Recipient's lump sum contributions for completed and approved Deliverables).

If InnoStars does not receive the termination report within the deadline, only costs and contributions which are included in the budget in Annex 1 and corresponding to an approved Deliverables report will be taken into account.

For the avoidance of doubt, after termination the Recipient's obligations in respect of providing further information, records and supporting documents in the context of checks, reviews, audits or investigations continue to apply.

Article 4. Implementation of the Project

4.1. General Principles

The Recipient is fully responsible towards InnoStars for implementing the Project.

The Recipient must:

- have the appropriate resources to implement the Project under its own responsibility.
- remain eligible under the I3 programme funding for the entire duration of this Agreement. Costs and contributions will be eligible only as long as the Recipient and the Project are eligible.
- promptly notify InnoStars of any significant information, fact, problem or delay likely to affect the Project.
- promptly provide all information reasonably required by InnoStars for the implementation of the Project.

4.2. Proper implementation of the Project

The Recipient must implement the Project as described in the Project Plan ('Annex 1').

4.3. Consequences of not properly implementing a Project

In the event of an improper implementation of the Project by the Recipient in accordance with the Project Business Plan, InnoStars, at its own discretion may apply one or more of the following measures:

- i. reduce the amount of financial support provided for the Project; and/or
- ii. stop the Project pursuant to the Go / no Go process;
- iii. suspend payment towards the Recipient;
- iv. request to reimburse the financial support, including pre-financing received for the Project.

Article 5. Monitoring and reporting

The Recipient shall:

- comply with any reporting policy and instructions issued by InnoStars, in accordance with the timing and conditions it sets out as may be amended/modified by InnoStars;
- comply with any and all other monitoring and reporting requirements, including any future requirements by InnoStars, as the case may be pursuant to requirements of EISMEA.

The Recipient shall provide InnoStars with the progress and results of the project development when requested within a timeframe of 3 years after the completion of the project implementation. Failure to fulfill these information obligations could lead to exclusion from participation in any InnoStars programs in the future. InnoStars will provide the granted teams with a questionnaire once or twice a year to map the results of the project development.

Article 6. Financial provisions

6.1. Financial support

6.1.1. The Recipient shall receive financial support for the implementation of the Project, carried out in accordance with this Agreement and the Project Plan ('Annex 1').

The maximum amount of financial support to the Recipient under this Agreement is in up to total **EUR 60 000** unless Annex 1 of this Agreement specifies otherwise. ("Project Budget")

6.1.2. The Recipient shall use the financial support transferred by InnoStars only for the implementation and execution of the Project as reflected in the Project Plan and Project Budget.

6.2. Eligibility for financial support

6.2.1. General

The cost eligibility rules of Article 6 of the GA are hereby transposed in this Agreement. The cost eligibility rules are further described in the GA (template available at https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/i3/agr-contr/mga_i3_en.pdf).

Lump sum contributions are eligible ('eligible contributions'), if:

- they are set out in Annex 1 and
- the Deliverables are completed and the work is properly implemented by the Recipient and/or the results are achieved, in accordance with Annex 1 and during the period set out in Annex 1 and in Article 3.1.

*

InnoStars shall be under no obligation to provide financial support to the Recipient unless

- the cost eligibility rules of Article 6 of the GA are complied with; and
- all reporting obligations are complied with by the Recipient.
- Payment shall be made upon the completion of the tasks / deliverables as outlined in the Project Plan. No payment shall be made for any deliverables/outputs that are not delivered in accordance with the terms set forth therein.

6.2.2. Cost reporting

InnoStars provides lump sum funding under this call to reduce administrative burden, risk of financial error, and complexity. As a result, there won't be thorough cost reporting at the end of the project; instead, a detailed cost estimate and work plan must be included in the proposal, and payments will be made upon the completion of activities.

For lump sum grant proposals, the estimated budget must be described in a detailed budget table. This will be used as a basis for justifying and/or fixing the lump sum amount. As the lump sum must be an approximation of the costs actually incurred, the costs included in this detailed budget table must comply with the basic eligibility conditions for EU actual cost grants (GA, Article 6). This is particularly important for purchases and subcontracting, which must ensure the best value for money (or, if appropriate, the lowest price) and be free from any conflicts of interest.

For a lump sum cost to be eligible, the following criteria must be met:

- the costs must fulfil the general eligibility conditions for the type of cost concerned as described in Article 6.1 of the GA;
- the costs must be set under one of the budget categories listed below;
 - o A. Direct Personnel Costs: costs related to the time spent by the Recipient's staff on actual work dedicated to the project.
 - o B. Direct Subcontracting Costs (External expertise) limited to a maximum of 20% of the total project budget: work carried out by a third party provider should be limited.
 - o C. Other direct costs: C.1 Travel and subsistence, C. 3 Other goods, works and services (consumables, PR costs, etc.)
- the costs must be necessary and justified by the activities proposed;
- the work must be properly implemented by the Recipient in accordance with the work plan annexed to this Agreement;
- the deliverables/outputs must be achieved in the period set out in the Agreement as per Annex 1 and Article 3.1.

6.2.3. Record keeping

The Recipient must keep the following to justify the lump sum contribution:

- a) documents prepared in accordance with Annex 1 justifying the completion of the tasks (deliverables/outputs)

The records and supporting documents must be made available upon request by InnoStars or in the context of checks, reviews, audits or investigations (see Article 10). If there are on-going checks, reviews, audits, investigations, litigation or other pursuits of claims under the Agreement the Recipient must keep these records and other supporting documentation until the end of these procedures. The Recipient must keep the original documents. Digital and digitalised documents are considered originals if they are authorised by the applicable national law. InnoStars may accept non-original documents if they offer a comparable level of assurance.

6.3. Payment Schedule

InnoStars will complete the payments via instalments linked to milestones / deliverables / acceptance conditions.

The Recipient will be paid as follows:

Each recipient is entitled to one pre-financing payment (Payment #1) and one final payment (Payment #2) as follows:

PAYMENT #1:

The recipient is entitled to one pre-financing payment equal to 50% of the total budget, payable within 45 days from the signature of this contract.

PAYMENT #2:

The recipient shall submit the final report to InnoStars latest by **15th February 2027** unless Annex 1 of this Agreement specifies otherwise. The recipient shall report on all work performed in connection with the Project in 2025 as well as on all results achieved in line with the Project Workplan. InnoStars transfers the amount indicated and properly justified in the report to the respective Recipient after the approval of the final report by **30th March 2026**.

If the Agreement is terminated before the completion of the Project, the Recipient shall refund all payments it has received except the amount corresponding to the costs already incurred and accepted by InnoStars (see. Article 6.2)

6.4. Payments

InnoStars notify the Recipient concerned promptly of the date and composition of the amount transferred to its bank account, giving the relevant references.

Payment by InnoStars to the Recipient hereunder, shall be made to the following bank account:

Official name and legal form of Recipient:

Bank name:

IBAN number:

SWIFT code:

Payments will be made from any of InnoStars' registered bank accounts. Any recoveries shall be made to the bank account that the InnoStars Project manager notifies to the Recipient.

6.5. Recovery

In the event the Recipient did not use the financial support from InnoStars for the purpose of the Project or not in accordance with the terms and conditions of this Agreement, it is under the obligation to return the unused or unjustified amounts within 30 calendar days upon notification from InnoStars.

InnoStars shall have the right to recover any undue financial support of InnoStars, if the terms and conditions of Article 6.2 of this Agreement (including the eligibility rules of Article 6 of the GA) are not complied with, or if the Recipient has not fulfilled all its other obligations pertaining to the implementation of the Project under this Agreement.

Article 7. Visibility rules and communication

7.1. Use of names, logos or trademarks

Nothing in this Agreement shall be construed as conferring rights to use in advertising, publicity or otherwise the name of InnoStars or any of its logos or trademarks without its prior written approval.

7.2. Co-branding

The Recipient shall take into account and respect any co-branding guidelines and requirements provided and set by InnoStars.

The Recipient shall comply with these co-branding obligations in accordance with the monitoring processes as provided by InnoStars.

Article 8. Intellectual Property Rights

Background means any and all data, information or know-how (tangible or intangible), including any Intellectual Property Rights (IPRs) that is/are owned or controlled by a Party or that a Party has a right to license, prior to the Effective Date.

Parties agree that no rights in the Background shall be transferred under this Agreement.

The terms for the Use of Results and Background shall be agreed upon by the Flagship SME and the Recipient and the details of the agreement shall be set out in Collaboration Agreement concluded between the parties.

Flagship SME and the Recipient shall enter into Collaboration Agreement regarding the use of the Results and the Background.

Article 9. Liability towards each other

9.1. Limitations of contractual liability

The Parties shall take all the necessary steps to limit or mitigate any damage.

No Party shall be responsible to the other Party for any indirect or consequential loss or similar damage such as, but not limited to, loss of profit, loss of revenue or loss of contracts, provided such damage was not caused by a wilful act, gross negligence or by a breach of confidentiality.

The terms of this Agreement shall not be construed to amend or limit either Party's statutory liability.

9.2. Damage caused to third parties

Each Party shall be solely liable for any loss, damage or injury to third parties resulting from the performance of the said Party's obligations by it or on its behalf under this Agreement.

9.3. Hold harmless

The Recipient shall hold InnoStars and its respective assigns and employees, officers and directors harmless from and against all losses, costs, liabilities, claims, damages and expenses, resulting from or relating to or arising out of the breach or default in the performance of any obligation on the Recipient's part under this Agreement through a legal action, including any counterclaim, that has proceeded to final judgment by a court of competent jurisdiction, in either case to the extent it determined a breach or default by the Recipient in the performance of this Agreement, provided it is not caused by InnoStars' wilful act or gross negligence. The Recipient will be entitled to make observations towards InnoStars, regarding the Recipient's obligation to hold InnoStars harmless and InnoStars shall reasonably consider such observations by the Recipient. InnoStars shall take into account the reasonable requests of the Recipient with regard to the defence and the settlement of

such claims, including the selection of counsels, and it is understood that InnoStars shall not settle any claim without the consent of the Recipient.

9.4. Force Majeure

No Party shall be considered to be in breach of the Agreement if it is prevented from fulfilling its obligations under the Agreement by Force Majeure.

Each Party will notify the other Party of any Force Majeure without undue delay.

Article 10. Obligations from I3 agreements

The Recipient acknowledges and agrees that some obligations imposed on InnoStars following the GA are also applicable to the Recipient and Recipient shall do everything that is necessary in order to enable InnoStars to comply with these obligations. More specifically, the Recipient agrees to comply with the clauses mentioned 12, 14 19, 20 25 of the GA (template available at https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/i3/agr-contr/mga_i3_en.pdf) related to inter alia:

- Conflict of interest (article 12 GA)
- Ethics and values (article 14 GA)
- General information obligations (article 19 GA)
- Record keeping (article 20 GA)
- Check, reviews, audits and investigations (article 25 GA)

Article 11. Confidentiality

The Parties must keep confidential any data, documents, or other material (in any form) that is identified as sensitive in writing, or when disclosed orally has been identified as confidential at the time of disclosure and has been confirmed and designated in writing within 15 calendar days from oral disclosure at the latest as confidential information by the disclosing Party, is “Sensitive Information”. Unless otherwise agreed between the Parties, they may use Sensitive Information only to implement the Agreement.

The Parties may disclose Sensitive Information to its personnel or other participants in the Project only if they:

- (a) need to know it to implement the Agreement and
- (b) are bound by an obligation of confidentiality.

It may moreover disclose Sensitive Information to third parties, if:

- (a) this is necessary to implement the Agreement or safeguard the EU financial interests and
- (b) the receiving parties of the information are bound by an obligation of confidentiality.

The confidentiality obligations no longer apply if:

- (a) the disclosing Party agrees to release the other Party.
- (b) the information becomes publicly available, without breaching any confidentiality obligation.
- (c) the disclosure of the Sensitive Information is required or permitted by EU, international or national law.

- (d) a period of 5 years after the disclosure of the Sensitive Information has passed, unless otherwise agreed upon between the Parties.
- (e) the Sensitive Information is subsequently independently developed by or on behalf of the receiving Party without use of the disclosing Party's Sensitive Information.

If, and when, the confidentiality obligations no longer apply, the receiving party of the information undertakes to return to the disclosing Party, or to destroy, on request all Sensitive Information that has been disclosed to the receiving parties including all copies thereof and to delete all information stored in a machine-readable form to the extent practically possible. The receiving parties may keep a copy to the extent it is required to keep, archive, or store such Sensitive Information because of compliance with applicable laws and regulations or for the proof of on-going obligations provided that the receiving party comply with the confidentiality obligations herein contained with respect to such copy.

If either Party becomes aware that it will be required, or is likely to be required, to disclose Sensitive Information to comply with applicable laws or regulations or with a court or administrative order, it shall, to the extent it is lawfully able to do so, prior to any such disclosure:

- notify the disclosing Party, and
- comply with the disclosing Party's reasonable instructions to protect the confidentiality of the information.

Article 12. Miscellaneous

12.1. Inconsistencies and severability

Should any provision of this Agreement become invalid, illegal, or unenforceable, it shall not affect the validity of the remaining provisions of this Agreement. In such a case, the Parties shall be entitled to request that a valid and practicable provision be negotiated which fulfils the purpose of the original provision.

12.2. No representation, partnership, or agency

No Party shall be entitled to act or to make legally binding declarations on behalf of the other Party.

Nothing in this Agreement shall be deemed to constitute a joint venture, agency, partnership, interest grouping or any other kind of formal business grouping or entity between the Parties.

12.3. Notices and other communication

Any notice to be given under this Agreement shall be in writing to the addresses and recipients as listed below.

Formal notices:

If it is required in this Agreement that a formal notice, consent or approval shall be given, such notice shall be signed by a Party's Authorised Representative(s) and shall either be served personally or sent by mail with recorded delivery or e-mail with receipt acknowledgement.

Other communication:

Other communication between the Parties may also be affected by other means such as e-mail with acknowledgement of receipt, which fulfils the conditions of written form.

Any change of persons or contact details shall be notified immediately by the respective Party to the other Party.

12.4. Assignment and amendments

No rights or obligations of the Parties arising from this Agreement may be assigned or transferred, in whole or in part, to any third party without the other Party's prior formal approval.

Amendments and modifications to the text of this Agreement require a separate written agreement to be signed by Authorized Representatives of both Parties.

12.5. Language

This Agreement is drawn up in English, which language shall govern all documents, notices, meetings, arbitral proceedings, and processes relative thereto.

12.6. Mandatory national law

Nothing in this Agreement shall be deemed to require a Party to breach any mandatory statutory law under which the Party is operating.

12.7. Applicable law

This Agreement shall be construed in accordance with and governed by the laws of Belgium.

12.8. Settlement of disputes

The Parties shall endeavour to settle their disputes amicably.

All disputes arising out of or in connection with this Agreement, which cannot be solved amicably, shall be finally settled before the courts of Brussels.

12.9. Data Protection

The Recipient ensures that any processing of personal data shall be performed in accordance with Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation).

The collected personal data will be used solely for the implementation, follow-up, reporting and management of this Agreement by the Recipient and its subsidiaries and for dissemination of information and communication purposes foreseen for this Agreement. Data subjects have the right to access, rectify or delete their personal data. Data subjects can also object to its processing.

Signatures

The Parties have caused this Agreement to be duly signed by the undersigned Authorised Representatives.

The signature of a Party via a scanned or digitized image of a handwritten signature (e.g. scan in PDF format) or an electronic signature (e.g. via DocuSign), shall have the same force and effect as an original handwritten signature for the purposes of validity, enforceability and admissibility. Each Party receives a fully executed copy of the Agreement. Delivery of the fully executed copy via e-mail or via an electronic signature system shall have the same force and effect as delivery of an original hard copy.

For InnoStars

Name: Balázs Fürjes

Title : Managing Director

In :

On :

Signature _____

Recipient: <xxxxxxx>

Name: <xxxxxxx>

Title: <xxxxxxx>

In: <xxxxxxx>

On: <xxxxxxx>

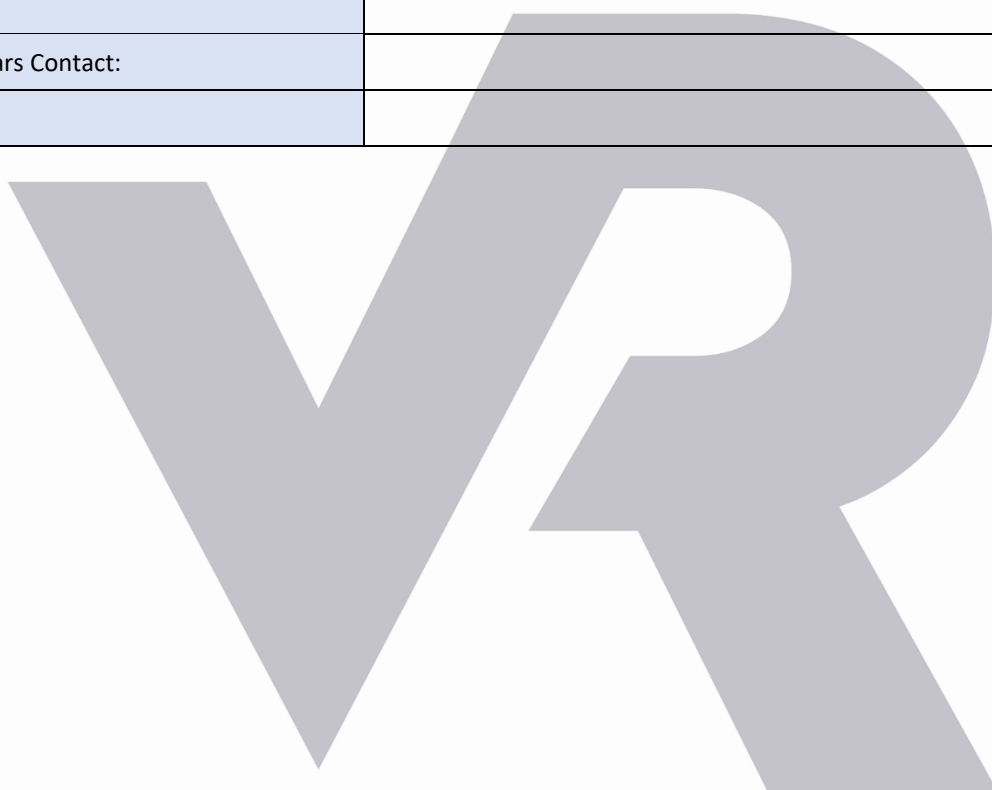
Signature _____

Annex 1

EIT Health InnoStars VR Health Champions Open Call 2026 Project Plan

Contact Information

First Name:	
Last Name:	
Phone:	
Email:	
InnoStars Contact:	
Email:	



Budget

EIT Health InnoStars offers **€60,000/per team** to facilitate and support the collaboration between the team members and the challenge owners.

Task no	Deliverables	Description of tasks / activities	Expected outcomes	Deadline	Estimated lump sum (EUR)	Justification (Explanation of how cost was estimated and why it is reasonable)
Task 1					0 €	
Task 2					0 €	
Task 3					0 €	
Task 4					0 €	
Task 5					0 €	
Task 6					0 €	
Task 7					0 €	
Task 8					0 €	
Task 9					0 €	
Task 10					0 €	
Total					0 €	

ANNEX 2

Final report template

Final Reporting

The final report is concise and includes a description of the chosen challenge, details on completed activities, and project impact.

Contact Information

Project Title:	
Organization Name:	
Organization Registration Number:	
Name of the reporter:	
Phone:	
Email:	
Website if applicable:	
Program Manager/Email	

Reporting Details

Reporting Period Start date	2026-02-01
Reporting Period End date	2027-01-31
Project Progress Details	Please provide a general overview of the team's tasks during the reporting period: 1. Summary of completed activities 2. Details of funding received and expenditures 3. Overview of ongoing tasks
Differences Between Expected and Actual Work	If planned work was not completed, the Recipient must explain why. Please provide a detailed justification that clarifies the reasons for the discrepancies between the expected and actual work.

The Accomplished Deliverables and Milestones

Kindly provide a detailed list of all deliverables and milestones outlined in the sub-granting agreement.

Main Deliverables

The Deliverable	Description	Task No	Target value (e.g., amount, quantity, etc.)	Target date	Achievement date	Comments and detailed justifications in case of delay

The Milestone	Description	Target value (e.g., amount, quantity, etc.)	Target date	Achievement date	Comments and detailed justifications in case of delay

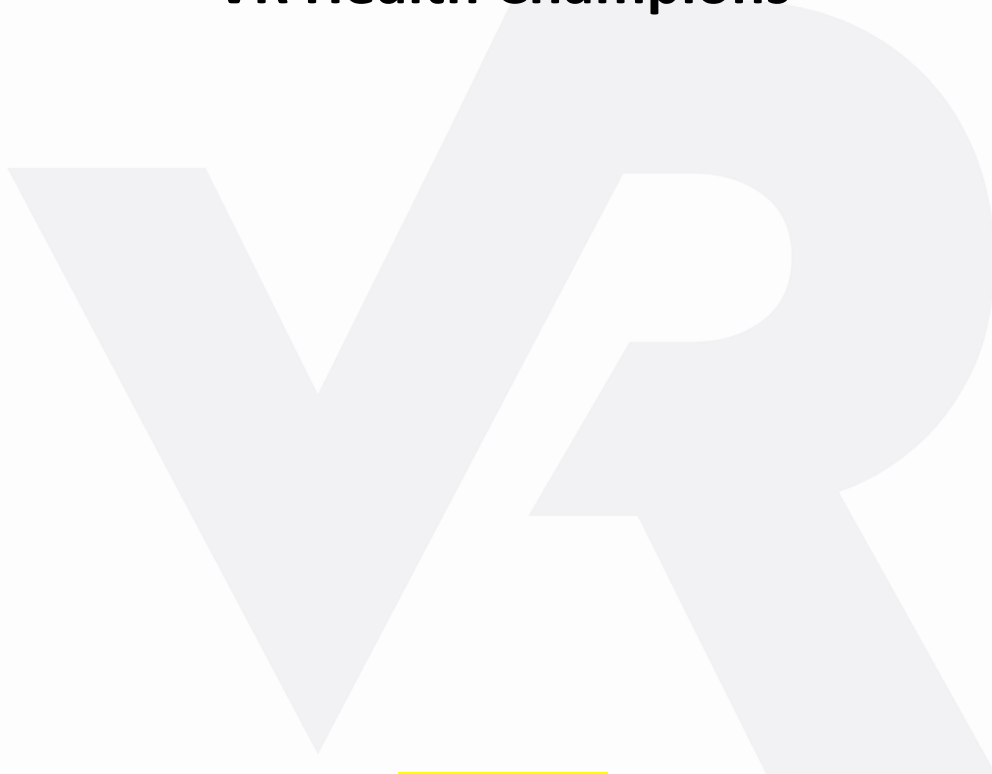
The Recipient hereby confirms that the information provided is complete, reliable, and true.

Place and Date:

The Recipient's Signature:

COLLABORATION AGREEMENT

VR Health Champions



31/01/2026

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This collaboration agreement, hereinafter the “**Agreement**”, shall have retroactive effect as of **31 August 2026** and is entered into by and between:

<Entity Name>

Having its registered seat at <xxxxxx>

Registration number: <xxxxxx>

VAT number <xxxxxx>

Represented by <xxxxxx>

(hereinafter referred to as: “Flagship SME”)

And

<Entity Name>

Having its registered seat at: <xxxxxx>

Registration number: <xxxxxx>

VAT number: <xxxxxx>

Represented by <xxxxxx>

hereinafter referred to as the “Recipient”;

Hereinafter, jointly or individually, referred to as “Parties” or “Party”;

WHEREAS:

Flagship SME has entered into a Grant Agreement (“**GA**”) with the European Innovation Council and SMEs Executive Agency (**EISMEA**) (‘EU executive agency’ or ‘**granting authority**’), with the effective date of 1 October 2024, establishing a long-term cooperation laying down the general terms and conditions under which Flagship SME must operate under the Interregional Innovation Investments (**I3**) Instrument - EISMEA.

The GA lays down the provisions concerning the implementation of the activities through grants, which, among others, allows the project consortium to provide financial support to third parties for projects and actions related to their Business Plan in the GA.

The Recipient has been selected as a Third Party receiving Financial Support under **Project 101161333 — VRHealthChampions**, and has been awarded funding to address the challenge set by the **Flagship SME for VR Health Champions Open Call 2025** (the “**Project**”).

The Recipient therefore has entered into a Financial Support Agreement (FSA) with EIT Health InnoStars e.V. (“InnoStars”) on behalf of the VRHealthChampions project consortium, in which they have laid down their respective rights and obligations for the implementation by the Recipient of the Project, describing the terms under which the Recipient provides the SME with the **Results** generated during the course of the Project carried out.

NOW, THEREFORE, IT IS HEREBY AGREED AS FOLLOWS:

Article 1. Definitions

1.1. Definitions

Words beginning with a capital letter shall have the meaning defined either herein or in the I3 Programme or Grant Agreement, including their respective Annexes.

1.2. Additional Definitions

“Authorised Representative” shall mean the person or persons duly authorised to sign this Agreement, including its Annexes, on behalf of a Party.

“Background” means any data, know-how or information — whatever its form or nature (tangible or intangible), including any rights such as intellectual property rights — that is:

- (a) held by the Parties before they acceded to the Agreement and
- (b) needed to implement the action or exploit the results.

If background is subject to rights of a third party, the Party concerned must ensure that it is able to comply with its obligations under the Agreement.

“Challenge” shall mean the problem defined by the Flagship SME for the VR Health Champions Open Call 2025, which the Recipient successfully applied to solve and will work on within the Project, as described in the FSA.

“Effective Date” shall mean the date first referenced above.

“EISMEA” or “granting authority” shall mean the European Innovation Council and SMEs Executive Agency, currently regulated by Regulation (EU) 2021/690 of the European Parliament and of the Council of April 01, 2021 (**“EISMEA Regulation”**).

“Force Majeure” shall mean any situation or event that:

- prevents either Party from fulfilling their obligations under this Agreement,
- was unforeseeable, exceptional situation and beyond the Parties’ control,
- was not due to error or negligence on their part (or on the part of other participants involved in the action), and
- proves to be inevitable in spite of exercising all due diligence.

“Grant Agreement” or “GA” shall mean the agreement signed by the EISMEA and the Beneficiaries including Flagship SME (template available at https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/i3/agr-contr/mga_i3_en.pdf), setting out the rights and obligations applicable to the I3 grant awarded for the implementation of the Business Plan and as altered, amended, re-instated or replaced from time to time. The project number in the GA is 101161333

“Interregional Innovation Investments (I3) Instrument” shall mean Regulation (EU) 2021/695 of the European Parliament and of the Council of 28 April 2021 establishing Interregional Innovation Investments (I3) Instrument, laying down its rules for participation and dissemination.

“Project” shall mean the project selected under the VR Health Champions Open Call 2025, addressing the Challenge defined by the Flagship SME, which the Recipient shall implement in accordance with the FSA. The detailed scope of the Project is set out in Annex 1, which reproduces the corresponding section of the FSA.

“Results” means any tangible or intangible effect created during the implementation of the Project with the purpose of assisting the Flagship SME to advance in its tasks under the GA, such as a prototype, data, report, documentation, know-how or information, whatever its form or nature, whether or not it can be protected, as well as any rights attached to it, including intellectual property rights.

“Third Party Receiving Financial Support” shall mean a recipient of financial support to third parties, (in the form of grants, prizes or similar forms of support as described in Article 9.4 of the GA).

“VRHealthChampions (VRHC)” refers to ‘Project 101161333’ carried out under the Grant Agreement. VRHC aims to accelerate the adoption of XR technology in healthcare by reducing market barriers for VR/AR applications in less developed European regions by addressing the gaps in the value chains of 5 SMEs, including the Flagship SME, and by learning from the experience, customize innovation support services for other SMEs in the healthcare VR/AR sector.

Article 2. Purpose

The purpose of this Agreement is to lay down the contractual arrangements between the Parties regarding their respective rights and obligations pertaining to their collaboration during the implementation of the Project.

The Recipient acknowledges and agrees that in this Agreement, the conditions of the GA are transposed in the legal arrangement between Flagship SME and the Recipient, in order to ensure that the Flagship SME shall meet its obligations and exercise its rights (including those towards the EISMEA) under the GA.

The Recipient shall

- Actively collaborate with the Flagship SME and potentially participate in meetings of the consortium
- Provide the agreed Results, including specialized services/expertise to advance the Flagship SME’s innovation
- Contribute to developing an interregional value chain in the VR/AR healthcare sector in collaboration with the Flagship SME

Article 3. Entry into force, duration, and termination

3.1. Entry into force and duration

This Agreement shall have effect from the Effective Date and shall apply until the end date of the Project. The expected end date of the Project is 31.03.2026 (the period between the Effective Date and the end date of the Project being referred to as the “Project duration”)

However, this Agreement may be terminated in accordance with Article 3.2 of this Agreement.

3.2. Termination

In the event that the Recipient is in breach of its obligations under this Agreement, Flagship SME may give formal notice to the Recipient requiring that such breach will be remedied within 14 calendar days of this formal notice, unless such breach cannot be remedied.

If such breach is substantial and is not remedied within that period or, is not capable of remedy, Flagship SME may decide to declare the Recipient to be a defaulting Party and to decide on the consequences thereof which may include termination of this Agreement upon notice and other measures (for example notifying InnoStars to suspend/recover any payment of (part of) the financial support under the FSA or stop the Project).

Flagship SME may terminate this Agreement with immediate effect through written notice to the Recipient in the event the further implementation of the Project is prevented or delayed with more than two weeks by Force Majeure.

If the GA is terminated by the EISMEA or Flagship SME, Flagship SME shall have right to terminate this Agreement upon notice to the Recipient.

Flagship SME may at any time terminate this Agreement immediately upon notice if one of the following events occurs:

- a change to the legal, financial, technical, organisational or ownership situation of the Recipient is likely to substantially affect or delay the implementation of the Project or calls into question the decision to select the Project (including changes linked to one of the exclusion grounds listed in the declaration of honour, signed by the time of the signature of the FSA);
- the Recipient is subject to bankruptcy proceedings or similar (including insolvency, winding-up, administration by a liquidator or court, arrangement with creditors, suspension of business activities, etc.);
- the Recipient (or person having powers of representation, decision-making or control, or person essential for the implementation of the projects) has been found guilty of grave professional misconduct;
- the Recipient (or person having powers of representation, decision-making or control, or person essential for the implementation of the Project) has committed fraud, corruption, or is involved in a criminal organisation, money laundering, terrorism related crimes (including terrorism financing), child labour or human trafficking;

3.3. Effects of termination

Survival of rights and obligations

After termination, the Recipient’s obligations that by their nature should survive the termination of this Agreement, including (in particular Obligations from GA: Articles 17 (Visibility and communication), 13 (Confidentiality), 33 (Liability), 43.1 (Applicable law) and 43.2 (Dispute

settlement)), shall continue to apply. (Template available at https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/i3/agr-contr/mga_i3_en.pdf)

Termination shall not affect any rights or obligations of the Parties incurred prior to the date of termination unless otherwise stipulated herein or agreed between the Parties. This includes the obligation to provide all input, deliverables, and documents for the period that the Agreement was still in force and effect.

Article 4. Intellectual Property and Ownership

Parties agree that no rights in the Background shall be transferred under this Agreement.

In accordance with this Agreement, or within the framework of its obligations arising from it or falling within its scope, the Recipient provides the Flagship SME with an irrevocable, royalty-free, worldwide, non-exclusive right to use, reproduce, modify, distribute, disclose, and exploit all property rights in relation to all Results works designed, developed, created or prepared for the Flagship SME by the Recipient, or with the assistance or participation of the Recipient. The rights are provided without limitation and without requiring the consent of, or providing compensation to, the other party. Neither party shall be deemed to infringe the rights of the other in exercising such rights.

The Recipient is not entitled to publish the Results itself without the prior approval of the Flagship SME, nor may the Recipient grant permission to a third party to do so.

The Flagship SME is entitled to publish the Results and transfer the copyright and usage rights related to the Results to third party(ies) or to dispose them in any other way without restriction.

Article 5. Obligations of the Parties

5.1. Obligations of Recipient

The Recipient shall provide the Results and deliverables in a timely manner to the Flagship SME and ensure that the Results and deliverables meet the requirements of the Project as specified in the FSA and reproduced in Annex 1 to this Agreement.

The Recipient shall provide the Results and deliverables in a timely manner to the Flagship SME with appropriate documentation and explanations necessary for the Flagship SME to understand the Results and deliverables and utilize them effectively.

The Recipient shall contribute to developing an interregional value chain in the VR/AR healthcare sector in collaboration with the Flagship SME

The Parties acknowledge that the successful implementation of the Project requires regular communication and coordination between the Flagship SME and the Subgrantee. To this end, the Parties agree to participate in coordination activities (including but not limited to online meetings, progress check-ins, or workshops) organised by the VRHC Consortium or the Flagship SME.

The frequency, format and scheduling of such coordination activities will be determined during the Kick-off meeting of the Project. The Parties agree to document the details of the schedule

in the meeting minutes of the Kick-Off meeting and enclose it in the present Collaboration Agreement as Annex 1.

5.2. Obligations of Flagship SME

The Flagship SME shall take appropriate measures to protect the confidentiality and integrity of the Results.

The Flagship SME shall report any use or exploitation of the Results in accordance with the requirements set forth in the GA.

Article 6. Liability towards each other

6.1. Limitations of contractual liability

The Parties shall take all the necessary steps to limit or mitigate any damage.

No Party shall be responsible to the other Party for any indirect or consequential loss or similar damage such as, but not limited to, loss of profit, loss of revenue or loss of contracts, provided such damage was not caused by a wilful act, gross negligence or by a breach of confidentiality.

The terms of this Agreement shall not be construed to amend or limit either Party's statutory liability.

6.2. Damage caused to third parties

Each Party shall be solely liable for any loss, damage or injury to third parties resulting from the performance of the said Party's obligations by it or on its behalf under this Agreement.

6.3. Hold harmless

The Recipient shall hold Flagship SME and its respective assigns and employees, officers and directors harmless from and against all losses, costs, liabilities, claims, damages and expenses, resulting from or relating to or arising out of the breach or default in the performance of any obligation on the Recipient's part under this Agreement through a legal action, including any counterclaim, that has proceeded to final judgment by a court of competent jurisdiction, in either case to the extent it determined a breach or default by the Recipient in the performance of this Agreement, provided it is not caused by Flagship SME's wilful act or gross negligence. The Recipient will be entitled to make observations towards Flagship SME, regarding the Recipient's obligation to hold Flagship SME harmless and Flagship SME shall reasonably consider such observations by the Recipient. Flagship SME shall take into account the reasonable requests of the Recipient with regard to the defence and the settlement of such claims, including the selection of counsels, and it is understood that Flagship SME shall not settle any claim without the consent of the Recipient.

6.4. Force Majeure

No Party shall be considered to be in breach of the Agreement if it is prevented from fulfilling its obligations under the Agreement by Force Majeure.

Each Party will notify the other Party of any Force Majeure without undue delay.

Article 7. Obligations from I3 agreements

The Recipient acknowledges and agrees that some obligations imposed on Flagship SME following the GA are also applicable to the Recipient and Recipient shall do everything that is necessary in order to enable Flagship SME to comply with these obligations. More specifically, the Recipient agrees to comply with the clauses mentioned 12, 14 19, 20 25 of the GA (template available at https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/i3/agr-contr/mga_i3_en.pdf) related to inter alia:

- Conflict of interest (article 12 GA)
- Ethics and values (article 14 GA)
- General information obligations (article 19 GA)
- record keeping (article 20 GA)
- Check, reviews, audits and investigations (article 25 GA)

Article 8. Confidentiality

The Parties must keep confidential any data, documents, or other material (in any form) that is identified as sensitive in writing, or when disclosed orally has been identified as confidential at the time of disclosure and has been confirmed and designated in writing within 15 calendar days from oral disclosure at the latest as confidential information by the disclosing Party, is “Sensitive Information”. Unless otherwise agreed between the Parties, they may use Sensitive Information only to implement the Agreement.

The Parties may disclose Sensitive Information to their personnel or other participants in the Project only if they:

- (a) need to know it to implement the Agreement and
- (b) are bound by an obligation of confidentiality.

It may moreover disclose Sensitive Information to third parties, if:

- (a) this is necessary to implement the Agreement or safeguard the EU financial interests and
- (b) the receiving parties of the information are bound by an obligation of confidentiality.

The confidentiality obligations no longer apply if:

- (a) the disclosing Party agrees to release the other Party.
- (b) the information becomes publicly available, without breaching any confidentiality obligation.
- (c) the disclosure of the Sensitive Information is required or permitted by EU, international or national law.
- (d) a period of 5 years after the disclosure of the Sensitive Information has passed, unless otherwise agreed upon between the Parties.
- (e) the Sensitive Information is subsequently independently developed by or on behalf of the receiving Party without use of the disclosing Party’s Sensitive Information.

If, and when, the confidentiality obligations no longer apply, the receiving party of the information undertakes to return to the disclosing Party, or to destroy, on request all Sensitive Information that has been disclosed to the receiving parties including all copies thereof and to delete all information stored in a machine-readable form to the extent practically possible. The receiving parties may keep a copy to the extent it is required to keep, archive, or store such Sensitive Information because of

compliance with applicable laws and regulations or for the proof of on-going obligations provided that the receiving party comply with the confidentiality obligations herein contained with respect to such copy.

If either Party becomes aware that it will be required, or is likely to be required, to disclose Sensitive Information to comply with applicable laws or regulations or with a court or administrative order, it shall, to the extent it is lawfully able to do so, prior to any such disclosure:

- notify the disclosing Party, and
- comply with the disclosing Party's reasonable instructions to protect the confidentiality of the information.

Article 9. Miscellaneous

9.1. Inconsistencies and severability

Should any provision of this Agreement become invalid, illegal, or unenforceable, it shall not affect the validity of the remaining provisions of this Agreement. In such a case, the Parties shall be entitled to request that a valid and practicable provision be negotiated which fulfils the purpose of the original provision.

9.2. No representation, partnership, or agency

No Party shall be entitled to act or to make legally binding declarations on behalf of the other Party.

Nothing in this Agreement shall be deemed to constitute a joint venture, agency, partnership, interest grouping or any other kind of formal business grouping or entity between the Parties.

9.3. Notices and other communication

Any notice to be given under this Agreement shall be in writing to the addresses and recipients as listed below.

Formal notices:

If it is required in this Agreement that a formal notice, consent or approval shall be given, such notice shall be signed by a Party's Authorised Representative(s) and shall either be served personally or sent by mail with recorded delivery or e-mail with receipt acknowledgement.

Other communication:

Other communication between the Parties may also be affected by other means such as e-mail with acknowledgement of receipt, which fulfils the conditions of written form.

Any change of persons or contact details shall be notified immediately by the respective Party to the other Party.

9.4. Assignment and amendments

No rights or obligations of the Parties arising from this Agreement may be assigned or transferred, in whole or in part, to any third party without the other Party's prior formal approval.

Amendments and modifications to the text of this Agreement require a separate written agreement to be signed by Authorized Representatives of both Parties.

9.5. Language

This Agreement is drawn up in English, which language shall govern all documents, notices, meetings, arbitral proceedings, and processes relative thereto.

9.6. Mandatory national law

Nothing in this Agreement shall be deemed to require a Party to breach any mandatory statutory law under which the Party is operating.

9.7. Applicable law

This Agreement shall be construed in accordance with and governed by the laws of [Belgium].

9.8. Settlement of disputes

The Parties shall endeavour to settle their disputes amicably.

All disputes arising out of or in connection with this Agreement, which cannot be solved amicably, shall be finally settled before the courts of Brussels.

9.9. Data Protection

The Parties ensure that any processing of personal data shall be performed in accordance with Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation).

The collected personal data will be used solely for the implementation, follow-up, reporting and management of this Agreement by the Recipient and its subsidiaries and for dissemination of information and communication purposes foreseen for this Agreement. Data subjects have the right to access, rectify or delete their personal data. Data subjects can also object to its processing.

Signatures

The Parties have caused this Agreement to be duly signed by the undersigned Authorised Representatives.

The signature of a Party via a scanned or digitized image of a handwritten signature (e.g. scan in PDF format) or an electronic signature (e.g. via DocuSign), shall have the same force and effect as an original handwritten signature for the purposes of validity, enforceability and admissibility. Each Party receives a fully executed copy of the Agreement. Delivery of the fully executed copy via e-mail or via an electronic signature system shall have the same force and effect as delivery of an original hard copy.

[Flagship SME]

Name: <xxxxxxx>

Title : <xxxxxxx>

In :

On :

Signature _____

[Recipient]

Name: <xxxxxxx>

Title: <xxxxxxx>

In: <xxxxxxx>

On: <xxxxxxx>

Signature _____

Annex 1

VR Health Champions Open Call 2026 Project Plan

Contact Information

First Name:	
Last Name:	
Phone:	
Email:	
Flagship SME Contact:	
Email:	

Challenge of Interest

What is the challenge your organization is interested in addressing?	
--	--

Solution Description

Please describe your solution (product/service) briefly, considering its quality, how well it is outlined, and fits with the challenge.	
---	--

Outcomes & Impact

Describe the expected outcomes and potential impact of your project.	
--	--

Main Deliverables

What are the specific tasks you aim to complete? What will you deliver, and what are the significant milestones in your plan? The end date for all tasks is 31.01.2027.		
	Start date: DD.MM.2026	Clarifying the Target: Deadline vs. Specific Goal
Task One		
Task Two		
Task Three		