# Project description On-site development project

# <Project title>

**<The document is to be brief, we expect 2½-3 pages in total. Please remove instructions in brackets such as this one. We prefer if you use English.>**

**<In addition to this document, please provide a brief CV (max 1 page) for the key developer(s) in the project.>**

<Date/version>

## Contact for proposal

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Phone: |  |
| Organization: |  | Postal address: |  |
| E-mail: |  |  |

## Purpose and aims

<Summarize what the project aims to achieve.>

## Participants

<List the organizations involved, including all clinical counterparts. Describe the individuals and their efforts in the table below.>

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Individual | Organization | Title, role in project & relevant expertise | Man-hours | Of which on-premise at… | |
| **…care provider** | **…CMIV** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## Project plan

<Describe activities, deliverables and time plan. Include brief description of technical methods to be used.>

## Budget

Total cost budget:

|  |  |  |  |
| --- | --- | --- | --- |
| Organization | Salaries (incl overhead) | Equipment | Travel /accomodation |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Total |  |  |  |

Specification of counter-financing:

|  |  |  |
| --- | --- | --- |
| Total project cost | AIDA funding requested | AIDA funding in % of total |
|  |  |  |

<Describe counter-financing plan: which/which parts of the above cost items are covered from other sources.>

## Brief information with respect to AIDA quality criteria

### Future clinical usefulness

<In what way can the project contribute to improved health care down the line? After a successful project, what remains to be done to reach clinical use of the results?>

### Technical readiness level (TRL)

<How mature is the existing AI solution that is to be refined in this project? Relate to the TRL definitions, see the [Medtech4Health TRL guide](https://www.vinnova.se/globalassets/utlysningar/2016-05340/omgangar/trl-trappa-mt4h-samt-trl-swelife.pdf872789.pdf). >

### Practical feasibility

<Is the project plan reasonable, for instance with respect to access to suitable expertise within the given time frame?>

### Gender equality

<How does the project consider gender equality in terms of contents and staffing? AIDA’s goal is that staffing in each subproject should be of good equality: not more skewed than 60/40, and no gender imbalance in the possibility to influence the results.>

### Ethical approval

<Mark the relevant box, and enter the approval ID, if any.>

Approval exists, ID: <Enter ID>  Will be applied for  Not necessary

### AIDA connection: contributions and benefits

<What added value does the project get from being in the AIDA environment? How will the project contribute to the other AIDA partners, for instance in the form of knowledge transfer?>

**Approval by clinical counterpart(s)**

I hereby confirm that our department are prepared to engage in this development project as outlined above, including to host developers on-site, if the above proposal is granted.

<Add more signature lines if there are several clinical counterparts.>

Name Place and date

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Title Signature

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