BETA.HEALTH

BETA.VALIDATION

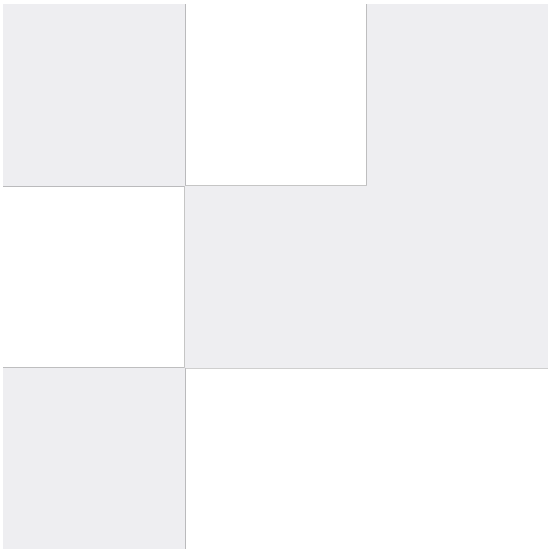
GRANT GUIDELINES

Winter Call 2027

CALL OPENS
1 December 2026

APPLICATION DEADLINE
31 January 2027

MORE INFORMATION
betahealth.dk



OVERVIEW

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SECTION 1

BETA.VALIDATION

These guidelines outline the BETA.VALIDATION grant and its application requirements. Applicants should review them carefully before applying to ensure compliance with all relevant criteria and procedures.

Information on how BETA.HEALTH processes personal data is available under 'Data & Privacy Policies' in the online application system (https://betahealth.eu-1.smartsimple.eu).

Purpose and areas of support

The BETA.HEALTH programme supports and accelerates innovation projects based at Danish hospitals, resulting in new or improved treatments and clinical solutions for the benefit of patients and society.

Many promising ideas and research findings emerging in hospitals never reach patients. BETA.HEALTH focuses on accelerating the development of innovation projects, maturing them into solutions that create meaningful impact for patients.

The accelerator programme is solution agnostic. Examples of supported projects include solutions that lead to:

- Increased diagnostic capacity
- Continuous and actionable decision support
- Faster and more precise diagnostics closer to the patient, enabling earlier intervention, treatment and monitoring and reducing the need for in- and/or outpatient visits
- Prospectively validated prediction models that support optimal resource allocation within the healthcare system
- More efficient care pathways that free up clinical time and capacity, so that more patients can be treated and waiting times are reduced

BETA.HEALTH DOES NOT SUPPORT

- Projects focused solely on testing products already on the market
- Projects with a procurement rather than development focus
- Minor incremental improvements to existing solutions
- Projects with limited potential to scale
- Projects focused solely on research rather than clinical innovation

The BETA.VALIDATION track

BETA.VALIDATION supports projects anchored in Danish hospitals that are ready to move from a mature idea or early prototype towards a solution ready for implementation.

Projects must address a need documented through clinical practice or research and have a clear plan for the next steps. The grant amounts to DKK 500,000, and the acceleration programme runs for nine months. During this period, projects mature through activities such as clinical feasibility testing, regulatory planning, health economic assessment, stakeholder engagement, business development and funding strategy.

THE GRANT AT A GLANCE

DKK 500,000 | nine-month acceleration programme | typically IRL 3–6 on entry

On entry, BETA.VALIDATION projects are typically at level 3 to 6 on the Innovation Readiness Level (IRL) scale, corresponding to a preliminary prototype or workflow concept with an early Proof of Concept (IRL 3) to Validation of Solution where the solution has been tested in a relevant environment (IRL 6). Read more about the IRL framework.

The acceleration programme

Through a structured acceleration programme, BETA.VALIDATION provides funding and tailored support to help projects advance towards clinical impact. The BETA.HEALTH team supports project development, helps overcome barriers, engages key decision-makers across hospitals and connects projects with relevant partners.

The programme combines the following core elements:

- **BETA.PARTNER:** an experienced member of the BETA.HEALTH team who follows the project throughout the programme, with strategy meetings and tailored support on the development themes that matter most to the project.
- **Innovation Bootcamp:** two days at the start of the programme where the problem, value and direction of the project are sharpened, and the project plan and IRL baseline are established.
- **Expert support:** giving access to specialists within, for example, regulatory affairs, data, IP and implementation, as well as facilitated engagement with relevant stakeholders.

In the BETA.HEALTH Pilot, BETA.PARTNERS supported projects on themes such as data, regulatory compliance, health economics, clinical testing, prototyping, team organisation, workflow, funding strategy, pitching, commercialisation and networking.

SECTION 2

FUNDING AND PARTNERS

Use of funding

The grant may cover project costs such as:

- External specialist consultancy, e.g. within clinical protocols, regulatory planning, data, EHR integration or business development
- External testing services, including laboratory analyses
- Equipment, hardware and software required for the validation activities
- Limited travel and accommodation
- Up to 40% of the DKK 500,000 to free up time for core project team members

> **PLEASE NOTE**
> That 5% (DKK 25,000) of the grant is reserved for programme activities, such as the Innovation Bootcamp and acceleration activities delivered by external providers.

THE GRANT CANNOT BE USED FOR

- Costs related to publication and presentation of research findings
- Projects solely focused on research, without the intention to develop and implement an innovative solution
- PhD projects

Collaboration with commercial partners

Companies can play a valuable role in BETA.HEALTH projects. BETA.HEALTH is funded by the Novo Nordisk Foundation and the Danish regions. The funding may not be used to support the business activities of companies, and it must comply with EU state aid rules. The rules below ensure that projects involving companies can be funded within that framework.

BASIC PRINCIPLES

- The grant is awarded to the hospital project and administered by the host institution. It cannot be paid out to, transferred to or shared with a company.
- The project must be driven by a clinical need and led by the main applicant, not by the development of a specific company's product.

PERMITTED FORMS OF COLLABORATION

A company can take part in a project in one of the two ways below. The application must state which form applies and describe the role of each party.

1 The company takes part in an open collaboration

The collaboration addresses a clinical need and takes place before the solution is on the market. No IP is created for or transferred to the company. The company receives no exclusive rights and covers all of its own costs. The foreground results are made publicly available.

> EXAMPLE
> A company lends equipment and offers technical sparring while the hospital tests a new workflow. The results are published, and the company gains no rights to them.

2 The company is an early stage startup

The startup is not yet a viable business. It has no revenue on market terms and has received no venture capital or other commercial investment when the programme starts (this does not include soft funding). The founders hold the majority of shares. The grant funds only the activities of the hospital, and the startup covers its own costs.

> EXAMPLE
> A clinician has founded a startup based on the project. The grant funds the validation of the solution at the hospital, while the startup pays for its own development. The startup licenses the IP of the region on market terms.

Collaborations outside these two forms are not eligible. If you are unsure whether your project qualifies, please contact the BETA.HEALTH team and your technology transfer office (TTO) before applying.

AGREEMENTS

In both types of collaboration, it is the applicant's responsibility to ensure that any necessary agreements with the company are in place, in accordance with the host institution's procedures. The agreement must ensure that the company does not gain exclusive access to results, data or IP on better terms than the market can obtain. The host institution is responsible for the state aid assessment as well as any other relevant legal agreements. At the time of application, you only need to describe the form of collaboration and the role of each party.

THE GRANT CANNOT BE USED FOR

Salaries or other costs of a company, development of a company's own product, or sales, marketing, investor preparation, company formation and other business development within the company.

CLINICIANS WITH INTERESTS IN A COMPANY

A personal interest in a company does not exclude a project, but it must be transparent and managed.

- The main applicant and team members must declare in the application any ownership, employment, board position, advisory role or other financial interest in a company that takes part in the project or may commercialise its results.
- Secondary employment and ownership must be approved by or reported to the employer according to regional rules.

- Inventions made as part of hospital work must be reported to the employer before they are used in a company (see Inventions and IP).
- Time funded by the grant must be spent on the hospital project, not on work for the company.
- A team member with a personal interest in a company cannot represent the hospital in negotiations with that company. The price of any IP or results transferred to the company must be documented as market price, e.g. through an independent valuation or a right of first refusal.

SECTION 3

ELIGIBILITY

Innovation or research?

We define ‘clinical innovation’ as the development, use and dissemination of new products or processes that provide better treatments and better everyday lives for patients, their families and healthcare professionals.

WHAT IS THE DIFFERENCE BETWEEN INNOVATION AND RESEARCH PROJECTS?

Innovation projects focus on stages 2 to 4 of the following:

1. Scientific or Clinical Research (Discovery)
2. Research & Development (Solution & Validation)
3. Implementation (Value Creation)
4. Spread & Scale (Impact)

Research seeks evidence, whereas innovation often acts on confidence built from data, user feedback and early results. Innovation projects therefore tolerate a higher level of risk.

Projects funded by BETA.HEALTH typically progress towards patient impact along one or more of the following pathways:

- Implementation and dissemination of new or redesigned clinical workflows, treatment processes, service models and digital tools across hospitals and the healthcare system.
- Collaboration with external partners (e.g. startups or industry partners) on the development, certification, implementation, distribution, scaling and long-term maintenance of new technologies, products or services.
- Creation of new companies, such as spinouts based on licensable IP

Applicant eligibility

Each application must have one main applicant, who is the project owner and is employed at a Danish public hospital, in the prehospital services or in psychiatry. The main applicant is responsible for submitting the application. Co-applicants may be included where relevant.

CO-APPLICANTS

- Can view and edit the application form but cannot submit it
- May be employed at the host institution of the main applicant or at a university, hospital, company or research institution in Denmark or abroad
- Other project affiliates, such as individuals, universities or companies, may be included as co-applicants or listed as ‘Team Members’ with their roles and responsibilities

If the project is managed by a team with shared responsibility and ownership, one team member must be formally appointed as main applicant, with the others included as co-applicants or Team Members.

We welcome diverse project teams and look for projects with high impact potential, regardless of the seniority of the applicants.

INELIGIBLE APPLICANTS

The following are not eligible to apply for or receive BETA.HEALTH grants:

a) Employees of the innovation units involved in BETA.HEALTH
b) Projects without the support of local management, or where the main applicant is unable to take part in the activities of the acceleration programme
c) Members of the BETA.HEALTH board or Review Committee. Committee members may, however, serve as collaborators or advisors on an application
d) Students

Inventions and intellectual property (IP)

Eligibility for a BETA.HEALTH grant does not depend on whether your solution involves IP.

Under Danish law, employees covered by the Act on Inventions at Public Research Institutions (*Forskerpatentloven*) must report inventions made as part of their work to their employer. The region may have the right to take ownership of the invention.

Each region has its own procedures for reporting inventions.

> IMPORTANT
> If your project involves an existing or potential invention, you must contact your regional innovation or technology transfer unit to clarify whether it needs to be formally reported.

You must also clarify ownership and IP rights with your region before making agreements with external companies or other partners.

Receiving a BETA.HEALTH grant does not change the ownership of inventions or IP rights.

If you are unsure whether these rules apply to your project, please contact your regional innovation unit or the BETA.HEALTH team for guidance.

SECTION 4

PROGRAMME AND APPLICATION

Participation in the acceleration programme

The main applicant is expected to take an active part in all programme activities, including the Innovation Bootcamp, the strategy meetings with the BETA.PARTNER and evaluation. We encourage the wider project team to take part as well.

KEY DATES

Call opens	1 December 2026
Application deadline	31 January 2027
Notification of outcome	No later than 19 April 2027
Innovation Bootcamp	26–27 May 2027 (two full days, including an overnight stay)
Expected project start and grant payment	June 2027

MANDATORY
Attendance at the Innovation Bootcamp, together with one or two team members, is mandatory and a condition for payment of the grant.

Application process

Applications must be completed and submitted through the BETA.HEALTH online application and grant management system: https://betahealth.eu-1.smartsimple.eu. Please refer to the Application Guidelines for information on how to access and navigate the system: [LINK].

IMPORTANT
Do not share patient data or irrelevant personal data in the application portal.

After submission, the BETA.HEALTH team may contact you, or experts from the BETA.HEALTH network, to clarify questions about your application or the solution domain.

The BETA.HEALTH team first screens all applications against the eligibility requirements in these guidelines. Only eligible applications proceed to assessment.

Eligible applications are assessed with the same tools and criteria nationwide to ensure consistency, transparency and equal opportunity. The assessment includes a due diligence process led by BETA.PARTNERS with input from external experts. The BETA.HEALTH Review Committee makes the final funding decisions.

All applicants are notified of the outcome by e-mail, using the address provided at registration. Applicants who are not awarded a grant are welcome to contact the BETA.HEALTH team for feedback.

All screening and assessment is confidential.

If your project is awarded a grant, your BETA.PARTNER will contact you to prepare the grant agreement and plan the start of the project.

SECTION 5

ASSESSMENT CRITERIA

Applications are assessed against the five criteria below. Together, they reflect the ambition of BETA.HEALTH: To accelerate the development of innovation projects, maturing them into solutions that create meaningful impact for patients.

The criteria are applied in proportion to the maturity expected at entry to BETA.VALIDATION. A project does not need to be fully developed, but it must show a credible potential to become a solution that can be implemented in clinical practice.

01 | NEED

Clinical need and innovation quality

- **Clinical need:** Does the project address a clearly defined and significant unmet clinical need?
- **Clinical relevance:** Is the need supported by insights from clinical practice and relevant stakeholders, such as patients, healthcare professionals and peers?
- **Innovation quality:** Does the solution offer a novel or significantly improved approach compared with existing alternatives?

02 | IMPACT

Value for patients and the healthcare system

- **Patient impact:** Does the project have the potential to create meaningful value for patients, directly or indirectly, for example through faster treatment, fewer hospital visits or a better patient experience?

03 | PLAN

Project plan and feasibility

- **Objectives:** Are the objectives and expected outcomes for the nine months of the programme clearly defined?
- **Feasibility:** Does the proposal have the potential to form a viable hospital business case?
- **Risks and uncertainties:** Are key technological, regulatory, data and organisational risks, dependencies and uncertainties identified, with appropriate mitigation strategies?

04 | EXECUTION

Team and commitment

- **Team competencies:** Does the team have the relevant clinical, technical and innovation competencies, and is it clear which competencies need to be added?
- **Commitment and capacity:** Does the team have the motivation, time and resources to deliver the project?
- **Collaboration:** Are relevant stakeholders and partners involved, or is there a clear plan for engaging them?

05 | IMPLEMENTATION

Implementation and scalability

- **Management support:** Is the management of the department engaged in and committed to the project, preferably with its own investment of time, staff or funding?
- **Implementation potential:** Is there a realistic pathway towards adoption and integration into clinical practice?
- **Scalability:** Does the solution have the potential to be applied across departments, hospitals or healthcare settings?
- **Sustainability:** Is there a credible plan for sustaining and further developing the solution after the BETA.VALIDATION programme?

SECTION 6

GOOD TO KNOW

Conditional approval

The Review Committee may grant conditional approval. In such cases, the grant is awarded subject to specific conditions, which must be met before the grant agreement is signed and the project starts.

Language

The application and any attachments can be written in Danish or English.

Further information

For call details, key dates and frequently asked questions, please visit betahealth.dk/apply. You are also welcome to contact the BETA.HEALTH team by e-mail.