European Innovation Council

PATHFINDER CHALLENGE

BIOTECHNOLOGY FOR HEALTHY AGEING

EIC Work Programme reference: HORIZON-EIC-2026-PATHFINDERCHALLENGES-01-02
Call deadline date: 28 October 2026 at 17h00 Brussels local time
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The EIC will hold an Info Session on this Pathfinder Challenge topic on 30 March 2026 (TBC). Participation in the meeting, although encouraged, is optional and is not required for the submission of an application. A recording of this Info Session will be made available after the event. Further details of this (and possibly other) Info sessions will be disseminated through Events - European Innovation Council - European Commission.

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1. About this document

The Challenge Guide serves as guidance and background for the common understanding, participation rules and obligations for the EIC beneficiaries that are involved in the Challenge Portfolio. Contractual Obligations are further detailed in the EIC Workprogramme 2026.

The Challenge Guide is a guidance document accompanying a topic of the Pathfinder Challenge call for proposals to provide further information about how portfolio considerations will be considered in the evaluation of proposals for that topic.

The Challenge Guide is prepared by and under the responsibility of the relevant EIC Programme Manager (information about the EIC Programme Managers is available on the EIC Website (https://eic.ec.europa.eu/eic-communities/eic-programme-managers_en). It complements the Scope, Specific Objectives, Expected Outcomes and Impacts, and Specific Conditions set out in the EIC Work Programme by a description of the portfolio considerations that will be used in portfolio building and explains how a portfolio will be built. Please note that in no case does the Challenge Guide contradict or supplant the Work Programme text.

Following the selection of a proposals to be funded under the Challenge, the Programme Manager will work together with the consortia of the selected projects to develop a strategic plan for the Challenge, including a common roadmap. This strategic plan will integrate the activities and milestones of the individual projects into a shared set of objectives and activities across and beyond the projects. It serves as a common basis for the project portfolio and may affect the project implementation - including possible adjustments, reorientations or additional support to projects. The strategic plan will be updated on a yearly basis in light of emerging results or issues during the implementation.

2 Scope and objectives of the Challenge as defined in the Work programme

This section is a copy of the Challenge call in the EIC work programme text. Proposals to this Challenge are expected to explain how they relate to and intend to go beyond the state of the art, and how they interpret and contribute to the objectives of the Challenge.

EIC Pathfinder Challenge: Biotechnology for Healthy Ageing

2.1 Background and scope

Ageing, the gradual decline of organismal homeostasis and of physiologic functions throughout the body and mind, is a critical shared risk factor for many ageing-related chronic diseases. The EU also has an ageing society - by 2050, the share of 85+ year-olds in the EU is expected to more than double[1], but extended life expectancy is not matched with years spent in good health, which currently stands at 63.3 years and 62.8 years for women and men, respectively[2]. This will present significant social, economic and healthcare challenges and thus calls for interventions that will promote healthy longevity, as well as tools that will enable the adoption of these interventions.

Over the past decades basic research has identified hallmarks and cellular mechanisms of ageing[3,4], creating the basis for biotechnology-based or pharmaceutical therapeutic interventions, such as targeting cellular maintenance pathways, stem cell exhaustion, cellular senescence or metabolic fitness. Nonetheless, translating these insights into clinical interventions has had a low success rate, partially due to the difficulty of:

- Translating approaches from model systems
- Identifying when to intervene
- Rigorous validation, and
- End-to-end considerations of implementation (i.e. the delivery of an intervention).

This Challenge therefore looks to translate decades of ageing research into tangible biopharmaceutical solutions for healthy ageing.

2.2 Specific Objectives

Applicants to this Challenge will be expected to develop a proof of concept in one of the following three areas:

1. **An innovative preventative or therapeutic biotechnology-based or pharmaceutical intervention** that prevents, delays or reverts the onset of a specific age-related disease. Such projects must address all of the following objectives:
   - develop an intervention that targets a fundamental molecular or cellular process of ageing, such as the hallmarks of ageing
   - assess the generalisability of the intervention (showing that it is applicable more broadly to ageing-related traits beyond the primary indication targeted) by assessing the impact of the intervention on another distinct trait related to ageing
   - demonstrate proof of concept by carrying out an interventional study in a vertebrate animal model of ageing that is physiologically aged. Projects are also encouraged to include small-scale interventional clinical studies but must at a minimum anticipate how the intervention could be feasibly tested in a clinical setting, and
   - develop a plan for exploitation, which considers ethical and societal perception, economic viability and regulatory approval. At least two of these areas, considered most relevant for the intended application, must be assessed in greater depth,

suitably informing the project's technology development and contributing to the portfolio activities.

2. **A biomarker[5] based tool** to enable the responsible deployment of ageing-related interventions, taking into consideration the following:
   - The tool should be based on previously identified potential biomarker candidates or ageing clocks. All types of biomarkers are welcome, for example digital, molecular or physiological biomarkers (such as frailty measurements), combinations of biomarkers and multimodal biomarkers); as well as biomarkers for different applications (e.g. predictive, diagnostics). Biomarker discovery is explicitly excluded
   - The tool should integrate different measurements of multiple molecular, anatomic, physiologic, biomechanical or biochemical traits, as appropriate, to comprehensively capture the ageing process (i.e. it should not exclusively measure a single parameter/hallmark of ageing)
   - The above selected biomarker signature should enable a clear linkage between clinical features and the mechanisms of ageing to be shown
   - The signature should be robust to inter-individual and intra-individual variability in ageing to provide actionable, personalised insights
   - The tool should be assessed in an initial retrospective study to establish proof-of-concept. Applicants must therefore convincingly demonstrate that they have access to suitable longevity cohorts, and
   - The selection of the biomarkers and the development of the tool should prioritise deployment feasibility and actively incorporate feedback from potential users.

3. **A New Approach Methodology (NAM)[6]** that goes beyond the current state-of-the art to enable the future development of interventions for healthy ageing. The NAM should:
   - robustly capture the aged status of the system and the systemic/integrative nature of ageing (i.e. it should capture more than 1 molecular or cellular aspect of ageing, and more than 1 tissue type)
   - be benchmarked against a relevant animal model of ageing, and
   - be tested in the setting of a clearly specified use case (e.g. development of an intervention; as pre-clinical model in a regulatory setting).

   Precision nutrition, the development of novel ageing clocks and wellness applications fall outside the scope of this Challenge.

All proposals should consider biological sex and gender-specific health determinants[7] in their development, with reproductive ageing also in scope.

2.3 Expected outcomes

Ambitious proposals put forward under this call will deliver the following outcomes:

- Proof-of-concepts (TRL3 completed) of biotechnology-based or pharmaceutical interventions that prevents or delays the onset of, or reverts, an age-related disease in a vertebrate model system, based on the hallmarks of ageing, taking into consideration practical challenges of implementing such an intervention
- Tools to facilitate development or adoption of the interventions above, such as proof-of-concept validation of biomarker signatures or suitable pre-clinical models, and
- Approaches to address the shared regulatory hurdles and societal challenges linked to ageing-related interventions, thereby facilitating their adoption.

2.4 Portfolio approach

The portfolio of projects selected under this Challenge will ensure a coverage of projects developing interventions, biomarkers and NAMs, considering the following guidelines for portfolio composition:

- Interventions: no more than 5 projects. The portfolio of selected projects should collectively address a variety molecular and cellular processes related to ageing, and a variety of different age-related diseases.
- Biomarkers: no more than 3 projects. Projects will be selected to capture different application areas (diagnostic, predictive, prognostic biomarker), with preference to the inclusion of at least one diagnostic biomarker).
- NAMs: No more than 2 projects. Projects will be selected to capture a diversity of approaches to assess aged status in NAMs, different tissues or cell types and different use cases.

The selected consortia will benefit from mutual learning, and the exchange of expertise. Consortia will be encouraged to collaborate to address the following shared challenges faced by all ageing interventions:

- Scientific: preclinical models; Biomarkers of healthy/unhealthy ageing
- Path to Market: Defining suitable regulatory pathways, and
- Societal: Acceptance and role of preventative / therapeutic interventions, Need for improved longevity literacy.

2.5 Expected impacts

This Challenge looks to accelerate the development and uptake of clinically validated interventions that target the root cause of multiple age-related morbidities. It will deliver the following impact:

- Deliver biotechnology-based interventions for healthy ageing
- Accelerate the implementation of personalised care in ageing based on molecular phenotyping
- Provide recommendations for regulatory pathways addressing ageing as a target to inform developers, regulators, and other decision makers, and
- Improve citizen literacy on longevity.

2.6 References

[1] David Pinkus, Nina Ruer: Beyond retirement: a closer look at the very old. Bruegel analysis, 30 April 2024

[2] Eurostat: healthy life years statistics, data from 2025 (https://ec.europa.eu/eurostat/statistics-explained/index.php?oldid=681285). Unfortunately, the statistic mentioned in the Workprogramme is incorrect, what is mentioned in the Challenge guide is the correct reference.

[3] Carlos López-Otín, Maria A Blasco, Linda Partridge, Manuel Serrano, Guido Kroemer (2023) Hallmarks of aging: An expanding universe. *Cell* 186(2):243-278

[4] Tomas Schmauck-Medina et al (2022) New hallmarks of ageing: a 2022 Copenhagen ageing meeting summary. *Aging (NY Albany)* 14(16):6829-6839

[5] Biomarkers are biological characteristics, which can be molecular, anatomic, physiologic, or biochemical. These characteristics can be measured and evaluated objectively. They act as indicators of a normal or a pathogenic biological process. They allow the assessment of the pharmacological response to a therapeutic intervention. A biomarker shows a specific physical trait or a measurable biologically produced change in the body that is linked to a disease or a particular health condition. A biomarker may be used to assess or detect a specific disease as early as possible (diagnostic biomarker), the risk of developing a disease (susceptibility/risk biomarker), the evolution of a disease (prognostic biomarker) – but it can also predict response to a given treatment including potential toxicity (predictive biomarker)

[6] New approach methodologies (NAMs) represent potential alternatives to animal testing in the non-clinical development phase of new medicines. They may include human organoids or microphysiological systems (e.g. organ-on-chip, disease-on-chip), in

chemico methods, digital twins, virtual patient simulations, AI-enhanced predictive models, mechanistic or integrated in silico platforms, 3D- advanced human tissue model

[7] Sex: Refers to biological characteristics (including genetic, hormonal, physiological, anatomical) that distinguish between male, female, and intersex (in humans) or hermaphrodite (in non-human animals). Gender: Refers to socio-cultural norms, identities and relations that, together, shape and sanction what are considered "feminine" and "masculine" behaviours, and structure societies and organisations. From Gender In EU Research and Innovation (https://rea.ec.europa.eu/gender-eu-research-and-innovation_en)

3 Portfolio considerations for the evaluation of applications to the Challenge

This section describes how portfolio considerations will be taken into account in the second evaluation step. For more details of the full evaluation process please refer to the EIC Work Programme pages 34-37.

After the submission of your proposal, it will be evaluated in two steps:

- The EIC expert evaluators will assess each proposal separately against the award criteria and the EIC evaluation committee will ensure consistency across scores.
- The EIC evaluation committee, consisting of EIC expert evaluators and an EIC Programme Manager will map all the proposals above the threshold in a number of categories stemming from the overall goal and specific objectives of the Challenge.
- Following this mapping of proposals against categories, a suitable portfolio of proposals will be selected by the evaluation committee by applying portfolio considerations in order to propose a coherent set of projects for funding that will achieve the expected outcomes of the Challenge and maximise their impact.

3.1 Categories

All proposals will be mapped to one of the following categories and subcategories:

1. **Interventions** that prevent, delay or revert the onset of a specific age-related disease
    a. Purpose of intervention, i.e. for prevention, delay or reversion of age-related disease
    b. Targeted molecular or cellular process of ageing, e.g. cellular senescence, loss of proteostasis, deregulated nutrient sensing, inflammaging….
    c. Targeted age-related disease area, e.g. neurodegenerative diseases, musculoskeletal diseases, cardiovascular diseases, ….
    d. Type of validation: what vertebrate animal model of ageing is used? Is a clinical study foreseen?, …

2. **Biomarker-based tool**
    a. Application area, e.g. predictive, diagnostic, ….
    b. Type of biomarker(s), e.g. digital, molecular, physiological, combination of biomarkers, multimodal biomarker, …
    c. Type of measurement(s), e.g. molecular, anatomic, physiologic, biomechanical, biochemical

d. Link to what molecular or cellular process of ageing captured, e.g. cellular senescence, loss of proteostasis, deregulated nutrient sensing, inflammaging….
e. For what clinical feature or intervention
f. Cohort used for validation

3. New Approach Methodology

a. Way to capture the aged status of the system, e.g. by maintaining features of source tissue age, by conditioning reprogrammed cells to robustly represent different ages, in silico modelling of different aged status…
b. Type of tissue(s) and/or organs captured by NAM, e.g. neuronal, cardiac, skin, muscle…
c. Way to benchmark, i.e. comparison with what animal model and measurement of what physiological traits
d. Use case foreseen to test the NAM, e.g. in drug discovery, as pre-clinical model in a regulatory setting

3.2 Portfolio considerations

The process of building a balanced and impactful project portfolio will adhere to the following principles:

1. Diverse representation of different types of intervention (preventing, delaying or reverting age-related traits), targeting different age-related diseases and molecular or cellular processes of ageing

Ensure that the portfolio collectively captures all three types of interventions, if possible, and covers different molecular or cellular processes of ageing and a broad spectrum of age-related diseases, allowing for a diverse impact of age-related health interventions. This will be done primarily by selecting multiple (no more than 5) projects in the category “Interventions” that capture this diversity. The selection may be further guided by the availability of projects in the categories “Biomarkers” and “New Approach Methodologies” to ensure commonalities across the three categories.

2. Diverse representation of different types of biomarkers to inform the application of age-related interventions

Ensure that the biomarker projects included in the portfolio (no more than 3 projects) collectively represent different types of biomarkers and different types of measurements to inform the application of age-related interventions. Accordingly, this selection will also take into consideration possible commonalities with projects in the “Interventions” category by assessing what molecular or cellular processes of ageing are captured by the biomarkers or what clinical features are addressed. Preferably, at least one project developing a diagnostic biomarker will be included in the selection.

3. Diversity of New Approach Methodologies for future development of interventions:

Ensure that the NAM projects selected for the portfolio (no more than 2 projects) capture different approaches to assess aged status in NAMs, different tissues or cell types and different

use cases. This selection may also take into consideration possible commonalities with projects in the “Interventions” categories, for example with regards to use cases, or commonalities with projects in the "Biomarkers" category, for example for benchmarking.

Starting from the highest ranked proposal, a portfolio of proposals will be selected based on the portfolio considerations, ensuring coverage of the categories and diversity and commonality among the proposals. This implies that if the evaluation committee considers that a highly ranked proposal does not have a commonality with other proposals, it might not be selected for the portfolio. To ensure diversification, proposals which the evaluation committee considers to be very similar to a proposal already included in the portfolio might not be selected. Consequently, this means that the projects selected for funding after the second step are expected to differ from the ranking list established from the first step (score-based ranking after assessment of each proposal separately).

The following table summarises the portfolio building approach.

Categories	Subcategories	Portfolio consideration
Primary category	Allocation of project into one (and only one) of the following categories: • Interventions that prevent, delay or revert the onset of a specific age-related disease • Biomarker based tool • New Approach Methodology	
“Interventions”	Classification of projects according to: • Purpose of intervention, i.e. for prevention, delay or reversion of age-related disease • Which molecular or cellular process of ageing is targeted? • Which age-related disease is targeted, including the broader disease area? • What type of validation?	Primary consideration: diversity of purpose of intervention, mechanism of ageing targeted, age-related disease targeted Secondary consideration: commonalities with “Biomarkers” and “NAMs” Overall: no more than 5 projects
“Biomarkers”	Classification of projects according to: • Application area • Type of biomarker(s) • Type of measurement(s) • Link to what molecular or cellular mechanism of ageing • Actionable insight for what clinical feature or intervention • Cohort used for validation	Primary consideration: diversity of biomarkers with possible commonality with projects in the category “Interventions” Overall: no more than 3 projects
“NAMs”	Classification of projects according to: • Way to capture the aged status of the system • Type of tissue(s) and/or organs captured by NAM • Way to benchmark	Primary consideration: Diversity of NAMs with possible commonalities with projects in the categories "Interventions" and "Biomarkers"

	• Use case foreseen to test the NAM	Overall: no more than 2 projects

4 Implementation of the Challenge portfolio

Once funded, projects will be expected and obliged to work collectively during the implementation of their projects under the guidance of an EIC Programme Manager. This section summarises some of the key aspects of this pro-active management which applicants should take into account in preparing their proposals.

4.1 Proposal preparation and Grant negotiations

Based on first experience, it is proposed to foresee in your proposal a dedicated work package for portfolio activities and to allocate at least 10 person-months (see below for the purpose and examples of such activities). Annex 1 provides a template for such a work package. You are encouraged to use this template.

If you fail to do this during proposal time, your proposal will not be scored lower during the evaluation, but in case your proposal is selected for grant agreement preparation, you will be requested to add the portfolio work package to your grant agreement. Please be aware that in that case the maximum grant you receive will not change, and you will need to find the resources for portfolio activities within the foreseen project budget.

In order to maximise the chances of success of the portfolio it is also highly recommended that each project has a duration of 5 years. This will facilitate that the work carried out jointly by multiple projects is synchronized and well-aligned with regards to the life cycle of the individual projects. In addition, it ensures a suitable timeframe for projects to incorporate and benefit from the outcomes of the joint work into their own projects.

It is also expected that in your proposal you make a self-assessment of how your proposal maps to the categories used for portfolio building by filling in the following table in your proposal. The evaluation committee will confirm or update this and use it in the step 2 of the evaluation.

Categories	Subcategories	Enabling outcomes
Primary category	Allocation of project into one (and only one) of the following categories: • Interventions that prevent, delay or revert the onset of a specific age-related disease • Biomarker based tool • New Approach Methodology	
"Interventions"	Classification of projects according to: • Purpse of intervention, i.e. for prevention, delay or reversion of age-related disease • Which molecular or cellular process of ageing is targeted?	

	• Which age-related disease is targeted,including the broader disease area? • What type of validation?	
"Biomarkers"	Classification of projects according to: • Application area • Type of biomarker(s) • Type of measurement(s) • Link to what molecular or cellular mechanism of ageing • Actionable insight for what clinicalfeature or intervention • Cohort used for validation	
"NAMs"	Classification of projects according to: • Way to capture the aged status of the system • Type of tissue(s) and/or organs captured by NAM • Way to benchmark • Use case foreseen to test the NAM	

4.2 Portfolio Strategic Plan and portfolio activities

The selected consortia will benefit from mutual learning, and the exchange of expertise. Consortia will be encouraged to collaborate to address the following shared challenges faced by all ageing interventions:

- Science and technology: increased understanding of mechanisms of ageing; preclinical models; Biomarkers of healthy/unhealthy ageing
- Market Deployment: Defining suitable regulatory pathways, plausible implementation pathways, establishing methodologies for assessing cost-benefit of interventions, and
- Societal and ethical: Acceptance and role of preventative / therapeutic interventions, need for improved longevity literacy.

To accomplish the above, the Programme Manager will guide the projects to develop and agree on a strategic plan for the portfolio. This plan will integrate the activities and milestones of the individual projects into a shared set of specific objectives and activities across and beyond the projects. The strategic plan will be updated on a yearly basis in light of emerging results or issues during the implementation. The objectives can be revised, for instance based on projects' unexpected achievements, new technology trends, external inputs (other projects, new calls…).

In particular, the Portfolio strategic plan will include activities on the transition to innovation and commercialisation, and to stimulate business opportunities.

4.3 Governance through working groups

The development of the Portfolio Strategic plan will require regular meetings and exchanges among the portfolio projects, to identify collaborations on specific technical aspects and exchange of information, best practices, strategies, etc. A steering committee where each project is represented will be set up and will be supported by the Programme Manager. Additionally, 4 Working Groups will be set up to organize and implement activities:

- **WG1 Scientific and technological synergies**

This working group is aimed to enhance technology development by fostering interdisciplinary dialogue and possible scientific collaboration among developers of interventional solutions, biomarkers, and new approach methodologies (NAMs). This interaction allows for the integration of diverse expertise, leading to more comprehensive approaches that can address complex aging challenges. These include, for example, the identification of when and how NAMs can be deployed (e.g. during drug discovery or pre-clinical testing), how biomarkers can guide interventions, and gaining a deeper understanding of the biology of ageing through the characterization of interventional results. These collaborations may also ensure that interventions are closely aligned with biological and public health realities. Sharing insights across fields may thus accelerate the identification and optimization of therapies that target age-related conditions effectively and improve health outcomes for aging populations. Suitable formats for collaborations may include e.g. regular technology webinars for the portfolio, data sharing, scientific exchanges, and mutual testing of technologies.

- **WG2 Market deployment**

To accelerate the transition from technology development to market deployment, the projects will work together to identify and address shared challenges for bringing ageing-related solutions to the market. These activities should build upon the work carried out by individual projects in this area to generate a more comprehensive view on shared challenges. Activities could, for example, address deployment feasibility (including both feedback from potential users and economic viability), develop a shared understanding of the relevant patent landscape, address the relevant regulatory frameworks for ageing-related interventions, discuss business models and commercialization strategies, and map investment barriers and opportunities.

- **WG3 Ethical and societal considerations**

Given that ageing is a process that affects everyone, deploying interventions that prevent, delay or revert the onset thereof can raise ethical and societal questions. Such questions may relate, for example, to ensuring equitable access to interventions, or possible challenges related to overpopulation and resource allocation if healthspan extension also results in lifespan extension. Questions about the natural course of human aging and the implications of altering it, may prompt debate about the implications of interfering with natural life processes. Projects should therefore jointly identify possible concerns, as well as challenges and opportunities related to the acceptance and role of preventative or therapeutic interventions. In addition, the working group should also consider activities to improve longevity literacy. This working group should aim to engage a broad range of stakeholders involving ethicists, scientists, policymakers, and the public to identify, and build on any activities carried out by individual projects in this domain.

- **WG4 Outreach and Communication**.

The activities in this working group complement the communication and dissemination activities of individual projects, with the aim of building a strong and collaborative community within the portfolio and facilitating connections with stakeholders at the portfolio level. Accordingly, activities can be restricted to portfolio beneficiaries (e.g., to discuss the progress of the portfolio as a whole) or can engage external participants, for example via publications, public webinars, and participation in conferences. To cohesively structure the activities within this task, a communication and dissemination strategy will be developed, aiming to increase the visibility of the portfolio's achievements by identifying relevant external stakeholders within the broader community. Given that the Challenge portfolio projects represent a leading flagship group on translating research into tangible biopharmaceutical solutions for healthy ageing, the activities within this task should consider stakeholders broadly, including the general public, as well as the community working on diverse aspects of ageing, including the wider research community, policy makers, regulators, public health specialists, different medical staff categories (e.g. general practitioners, specialists, nurses) and carers.

Each project will nominate at least one representative for each WG. A chair will be nominated from among them. The chair will be responsible to prepare meeting agendas, links to the meeting and minutes of the meetings. WG Meetings are expected to be online and to be scheduled approximately every 3 months.

Additionally, it is foreseen to have one annual portfolio meeting per year in presence, where all working groups will meet and present progress.

The exchange of information for the purpose of EIC portfolio activities will fall under the conditions and non-disclosure obligations as specified in the EIC Work Programme 2026 (Annex 6, section 2).

5. Tools though which projects can receive additional support

Projects in the portfolio may be offered additional support, either individually or collectively, in order to reinforce portfolio activities or explore the transition to innovation. Such additional support includes:

- Booster grants of up to €50k (see Annex 5 of the EIC Work Programme).
- Access to additional EIC Business Acceleration Services (see https://eic.ec.europa.eu/eic-funding-opportunities/business-acceleration-services_en)
- Access to the Fast Track to the EIC Accelerator, which would follow a project review (see Annex 3 of the EIC Work Programme).
- The possibility to apply for EIC Transition if your Pathfinder project resulted in an experimental proof of concept (TRL 3), or a technology validated in the lab (TRL 4)
- Interactions with relevant projects and initiatives outside the portfolio, including other EU funding initiatives as well as those supported by national, regional or other international bodies.

Annex 1 : Template work package portfolio activities

WPX PORTFOLIO MANAGEMENT
Start Month 1, End Month (full project duration)
Objectives
Explore synergies and collaborations among the projects of the portfolio, to maximize the achievement of the scientific results, the exploitation potentials, the outreach opportunities with key stakeholders, the identification and overcoming of major barriers to introduce the innovation to the market ….

Specific objectives:

- Contribute to an effective governance of the portfolio and contribute to the working groups.
- **Contribute to the elaboration of the strategic plan** of the portfolio, which is composed by a list of activities of common interest to at least 2 projects identified by each working group, with the respective timeline and expected achievements.
- Develop a **collaborative framework for identifying and overcoming shared challenges** related to technology development, market deployment, and addressing societal and ethical issues.
- Develop and implement a **communication and dissemination strategy** to strengthen the community within the portfolio and engage external stakeholders

Description

Task X.1 Portfolio Management and Governance: This task will involve regular meetings and interactions among portfolio projects to identify collaborative opportunities on specific technical aspects and to share information, best practices, and strategies. A Steering Committee, comprising representatives from each project, will be established, supported by the Programme Manager. Portfolio Management will be enabled through an initial in-person kick-off meeting (Year 1), annual portfolio meetings conducted in person (subsequent years), and additional regular online meetings. Four working groups (WGs) will be formed to organize and carry out activities in the following areas:

- WG1 will focus on scientific and technological synergies;
- WG2 will address market deployment considerations, including IP protection, regulatory pathways, economic viability and deployment feasibility;
- WG3 will be dedicated to ethical and societal considerations; and
- WG4 will concentrate on outreach and communication.

Each project will appoint at least one representative for each WG, and a chair will be selected from among them. The chair will be responsible for preparing meeting agendas, coordinating meeting links, and documenting meeting minutes. WG meetings are expected to be held online and scheduled approximately every three months. Information exchange for EIC portfolio activities will adhere to the conditions and non-disclosure agreements outlined in the EIC Work Programme 2026 (Annex 6, section 2).

Task X.2 Portfolio Strategic Plan and other common documents: This task includes elaboration of the portfolio strategic plan under the guidance of the Programme Manager and reassessed on a yearly basis, taking into consideration progress made. The plan summarizes the detailed activities of the portfolio, providing a clear roadmap for achieving the objectives of the collaboration, ensuring that all projects work together efficiently and effectively. The Strategic Plan will specify the common documents or other concrete deliverables that the

portfolio will produce as an outcome of the other tasks specified in this work package. Individual projects do not need to add these documents as deliverable: they explain the contribution that they made to the portfolio activities in their corresponding Deliverable,X.2.i "Report on portfolio activities". A public version of the strategic plan will be published on the EIC website at Year 1, with annual updates of the completed and ongoing portfolio activities published each subsequent year in the Portfolio Annual Activity Report and a Final Portfolio Report published in the final year. It is expected that these documents are prepared under the supervision of the Portfolio Steering Group, with input from all other Working Groups, and dissemination support from the Outreach and Communication Working Group.

Deliverable X.2.i:
The report will present the contribution of the project to the strategic portfolio plan and to the portfolio activities that have been carried out in each reporting period. It also explains how the portfolio activities and the EIC proactive project management approach contribute to the achievement of the project objectives and help the transition to market.
Type: R: Document, report (excluding the periodic and final reports)
Dissemination level: SEN – Sensitive, limited under the conditions of the Grant Agreement
Due date: The report on portfolio activities will be submitted every reporting period.

Final considerations

- Effort to be allocated to this work package: **10 p.m.**
- To ensure synchronization of portfolio activities, all projects are encouraged to consider a duration of 5 years.