

Appendix IV

Summary explanation of the impact of major deviation From Cost budget and From person-month budget

For the period 1st February 2006 to 31st January 2007

ACGT Contract n°026996

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Partner 06 (IJB) and 10 (UPM) have no major deviation to report

PARTNER 01 – ERCIM

1) Deviation on eligible budget and PM plan:

With a total of 12.70 Person-months declared over the period, ERCIM has been able to carry out its tasks in the project. While 15.33 person-months had originally been planned, the discrepancy comes essentially from our contribution to WP16 Exploitation.

While the exploitation activity is important for ACGT, this particular task is not a key priority at the beginning of the project. Indeed, focus from ERCIM was more on support to the dissemination activities (WP15) with 2.55 PM declared against 1.33 planned. This additional effort was essential to assist HealthGRID in its tasks and in particular in design and deployment of the ACGT web site, and in the definition of the Dissemination plan.

As for WP1, 9.30 PM have been allocated against 12 planned. The effort spent on WP1 by ERCIM picked up fast and was progressively reinforced with FORTH, ensuring a close follow-up of the project activities and ensuring the scientific coordination.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The project management had been unaffected. Yet, as the implementation plan intensifies and as some WP12 activities need particular attention, the WP1 effort will be reinforced in the reporting periods to come.

In cooperation WP16, ERCIM will provide more support to the Exploitation activities, and will remain involved in the WP15, in line with the PM planned for the second year of activity.

PARTNER 02 – FORTH

1) Deviation on eligible budget and PM plan:

FORTH's budgeted expenditure for the first 18 months is 828.628 Euro. The costs for the first year expenses amount to 515.841 Euro, slightly less than the planned amount (i.e. 2/3 of 828.628 = 552.418 Euro).

On the other hand the man-effort devoted to the project is substantially bigger than the anticipated one. Specifically, FORTH has consumed 68,35 man-months compared to the 46 man-months planned. The reason for this is the fact that we have been forced to use less expensive (less senior) staff than originally anticipated, since we were not able to attract in time the required personnel. This has the result that we need increased man-power to deliver the work allocated to us.

We will make sure that in the updated DoW we rectify this situation.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The above deviation does not have any real impact on the project implementation plan due to the fact that although the employed staff has a lesser degree of experience (hence it is cheaper) it is still supervised by senior researchers, and senior technical staff. Therefore the quality of the work delivered remains of the required high level of quality.

PARTNER 03 – INRIA

1) Deviation on eligible budget and PM plan:

The activity in WP14 has not started yet. We are dependant on the availability of the new version of the onco-simulator and of clinical data to develop training activities.

2) Impact on level of activity as foreseen in the original Implementation Plan:

Parallelization of the onco-simulator is not yet started. The furniture of the next code version by ICCS delays it. However, it has no impact for the moment on the continuation of other tasks in the projects. A grid node infrastructure has been set up locally (Ouest Genopole bioinformatics platform) to make the next version available to all the partners as soon as possible.

PARTNER 04 - UvA

1) Deviation on eligible budget and PM plan:

No major deviations in Budget.

Slightly underspending due to the fact that no suitable candidate could be found for the function of scientific programmer.

As from March 1, 2007 this position is fulfilled.

Person months: No deviations.

The x.33 person months mentioned in appendix III has to do with the fact that the person months mentioned are 2/3 of 18 months.

2) Impact on level of activity as foreseen in the original Implementation Plan:

None

PARTNER 05 – Philips

1) Deviation on eligible budget and PM plan:

Person-month budget: no major deviation.

Cost budget: Cost based on 25.8 man months; unfortunately it is not possible to calculate the actual cost for the remaining 9.1 man months.

Philips claims only personnel cost and overhead. (No travel costs)

2) Impact on level of activity as foreseen in the original Implementation Plan:

We have carried out the research activities as agreed in the original Implementation Plan and with full capacity.

PARTNER 07 – SIB

1) Deviation on eligible budget and PM plan:

No deviation from the overall budget in PM for SIB occurred. More resources in PM have been spent in WP6 and WP13 than originally planned. Those resources were taken from the budget WP7 and WP15.

SIB has little experience in the *development* of ontologies and would thus have had limited impact on the progress of WP7 at the stage of the project in the first reporting period.

Some material was sent to WP15 management for dissemination, however the time spent on this activity was considered very small (a small fraction of one PM) and no time was reported.

The heavier-than-planned involvement in the development of scenarios (in the context of WP2 and more significantly WP6) was considered more inline with SIB's competence and a more sensible use of available resources.

2) Impact on level of activity as foreseen in the original Implementation Plan:

Given the small number of PMs involved in the deviations indicated above, no impact on the overall development of the project is expected.

PARTNER 08 – LundU

1) Deviation on eligible budget and PM plan:

There is a large difference in budgeted cost and actual cost according to our accounting on the ACGT project. The reason for this is that we have not accounted for all personnel costs for period I within the accounting for period I. This will be adjusted for in the forthcoming period as an “adjustment” in form C.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The declared deviation will not have any impact on activity since this is only a technical adjustment.

PARTNER 09 – UMA

1) Deviation on eligible budget and PM plan:

		For the 1st reporting period (12 months)		
		All Partners - Eligible Person- month per Workpackage	AC Partners only -Own staff (non eligible)	TOTAL PMs
Total project person month	Actual WP total:	15,5	5	20,5
	Planned WP total:	21,33	0	21,33

- There was a small delay in recruiting personnel. Additionally, one of the contracted persons resigned his contract, which affected the actual eligible PM total. We are in the process of recruiting new personnel to cover project needs.

- The first 12 months are part of the initially 18 months planned. We expect to fulfil our planned dedication by the end of the first 18 months of this first period. Some activities (e.g. WP 13) are scheduled for this second part of the first 18 months.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The small PM plan deviation mentioned above did not have a significant impact in the development of the original proposed activities.

However we have spent 3 PM (+ 0,5 pm of staff personnel) in WP9 in order to fulfil project needs with our expertise regarding development of a prototype demonstrating integrated platform for Bioinformatics services and workflows (see appendix I for details of the performed work).

PARTNER 11 – FHG

1) Deviation on eligible budget and PM plan:

The actual total person-month is significantly lower than the planned person-month in several workpackages (WP3, WP4, WP7, WP11, WP14, and WP15). This is due to the fact that the planned person-month in Appendix III results from a linear distribution of the 18-month figures from the DOW to the 12-month reporting period, while the actual start of the technical workpackages was only at month 6. Hence, the figures in Appendix III give a somewhat skewed picture of the planned activities. In order to not unnecessarily complicate Appendix III with a detailed monthly person-month planning, the linear distribution was kept.

2) Impact on level of activity as foreseen in the original Implementation Plan:

None, the actual and planned person-month are expected to match at the end of the first 18-month period.

PARTNER 12 – BIOVISTA

1) Deviation on eligible budget and PM plan:

There is no deviation from the eligible budget.

PMs are slightly higher than planned for the 12 month period but within the expected margin of error of the original estimates.

Planned PMs for first 12 months = 22. Actual PMs = 26.4.

Due to the fact that actual salaries are lower than what was foreseen, the above difference has no impact on the planned budget.

WP 4: No PMs were foreseen for Biovista in this WP. However 2 MMs were spent on installing necessary Grid infrastructure at Biovista, becoming familiar with Globus and 'gridifying' 2 literature mining modules (for more details please see Appendix I).

WP5: 2 PMs were foreseen. In the reporting period Biovista followed work and discussions of the WP. As the architecture becomes implemented in subsequent reporting periods Biovista will develop the necessary tools and interfaces to make its literature mining services available in a distributed data access environment.

2) Impact on level of activity as foreseen in the original Implementation Plan:

There is no impact expected on the original implementation plan. Tasks in which Biovista was involved have advanced according to the plan.

PARTNER 13 – UoC

1) Deviation on eligible budget and PM plan:

Although, our contribution is as planned, this was mainly done by existing personnel (namely Prof. Sanidas, Prof. Stathopoulos, Prof. Mavroudis and Prof Charissis).

We faced some problems in identifying and resolving local administrative issues in hiring the additional, appropriately skilled, personnel required for the implementation of the project. We have hired one additional person as from October 2006. This is one of the reasons of our under-spending of planned resources.

The second reason is the fact that, since our main involvement and expenditure is expected to take place during the trial implementation phase, we estimate that we will be using significantly more resources during that phase. It is also foreseen that a substantial portion of the available funding will be used for covering the cost of specific consumables required by the ACGT clinical protocols.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The above deviation does not have any real impact on the project implementation plan due to the fact that our permanent staff has undertaken the main responsibilities to provide the required contributions to project activities.

PARTNER 14 – LUH

1) Deviation on eligible budget and PM plan:

The Institute for Legal Informatics of the Leibniz University of Hannover has spent 14,52 eligible PMs in WP10, although only 9,33 eligible PMs were planned (see Appendix III). That means that we provided about 55% PMs more in the first reporting period than it was planned in the DoW. The reason for this is that the legal problems and requirements within ACGT were much more complex than expected. Especially the legal and technical creation of the ACGT Data Protection Framework required much more effort than expected, as for example the anonymization of genetic data is very complex and legally neither solved nor regulated on a European level. The sensitivity of genetic data in combination with a trans-European GRID infrastructure created a lot of legal problems and challenges never discussed or solved before. Therefore a completely new Data Protection Framework had to be developed. This legal framework also had to be implemented in the technical framework of ACGT, which created additional problems, as the legal Data Protection Framework and the technical framework of ACGT have to match. These challenges required a lot of more research as expected and planned in the DoW.

Furthermore the Institute for Legal Informatics became WP Leader of WP10 just after the PMs were allocated to the particular partners, so that this additional activity was not taken into account, when the DoW was made.

Nevertheless we still are almost within the budget due to three major reasons: strict economy on the one hand and a rather juvenile age of the ACGT-staff on the other hand, so that the costs for our staff at the present are due to their age lower than the costs calculated within the funding. The third reason is that the IRI-permanent staff worked a lot more for ACGT than foreseen in the project-planning-phase with no further costs for the project.

Besides the LUH contributed to the legal part of the ethico-legal issues in D2.1 (User requirements and specification of the ACGT internal clinical trial), although no PMs of the LUH were planned in WP2.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The Deliverables D10.1 and D10.2 were finalized in time on 31st January 2007 (T0+12 months). They are currently undergoing the review process and will be delivered to the Project and Scientific Coordinator as well as to the EU Commission within the time limit. Just because much more PMs were spent during the first reporting period these Deliverables could be finalized in time. The deviation on the eligible PM plan was therefore necessary to achieve the Major Project Milestone M4 in time and to fulfil our obligations stated in the original Implementation Plan.

Due to the fact that we stayed in line with the budget, we are fully operational and on track without limitations concerning available person-effort in the following phases of the project.

PARTNER 15 – PSNC

1) Deviation on eligible budget and PM plan:

Due to a slow start of the project, PSNC decided to postpone hiring staff for the project. So, first staff was hired late, and PSNC worked mainly using its own, non-funded resources. A lot of time took to really understand and define fully the project needs, especially from the Grid perspective. Now, we come to the implementation phase, in which we foresee to spend much more resources. Having this in mind, we will use the resources as planned within next periods. At the first year the level of activity was lower.

2) Impact on level of activity as foreseen in the original Implementation Plan:

At the first year the level of activity was lower than expected in the original plan, but it is now expected, that the level of activity in the remaining part of the project will be much higher than planned. The efforts and costs should be balanced within the remaining period of the project.

Additional remark: PSNC provides an audit certificate for the reporting period. Annual Audit Certificate in every EC project is our internal common practise.

PARTNER 16 – Custodix

1) Deviation on eligible budget and PM plan:

For the first year of work in ACGT there have been more PM allocated for Custodix than foreseen in the original DOW. The reason is two-fold:

- Work on WP11 has started earlier than the originally planned M7.
- At the project start some personnel was reallocated within the company. A number of ACGT tasks (not the scientific lead) were assigned to less experienced, but equally qualified, people as initially foreseen. This implies that more person-months are required to perform the planned tasks. On the other hand, average PM cost has dropped. Hence this change has had no budgetary implications.

More PM have been allocated to ACGT by Custodix, however no changes in the budget, requested funding or work that will be done are expected.

Planned PM for first 12M (year 1, reporting period)

Note that the work planned for the first 18 months as listed in the DOW was not planned to be evenly spread over those 18 months. The table below explains the figures of Appendix III:

WP	Subject	Activity	PM First 18 M (DOW)	Planned PM First 12M
2	User Needs Analysis & Specs	RTD/Innovation	4	4
3	Architecture & Standards	RTD/Innovation	4	4
4	Biomedical Grid Layer	RTD/Innovation	4	3
9	Integrated ACGT Environment	RTD/Innovation	2	1
10	Ethics, Legal and QA issues	RTD/Innovation	2	1
11	Trust & Security	RTD/Innovation	12	7
11	Trust & Security	Demonstration	2	0
14	Training	Training	1	0
15	Dissemination	RTD/Innovation	2	0.5

2) Impact on level of activity as foreseen in the original Implementation Plan:

Custodix will spend more PM within ACGT as initially foreseen to complete the planned tasks. However, there are no changes to the budget itself or the planned spending rate of the budget.

PARTNER 17 – HEALTHGRID

1) Deviation on eligible budget and PM plan:

There was no deviation on the budget. However, due to a serious under estimation of the effort needed, HealthGrid has decided to hire junior, instead of senior, people who are costless, to be able to devote more man-month to the project.

Planned PMs allocation (all duration of the project)– WP15	Actual PMs allocation – WP15
27	19.76

Yannick Legré, is the legal representative of the HealthGrid association and thus has devoted 0,5 man-month to the ACGT project, both at the project management level and for the Dissemination Work Package management.

As President of a French non-profit association he assumes his duty voluntarily and thus he's of no cost for the association.

However, since December 2006, the HealthGrid Board of Directors has decided to gratify him on a monthly basis which will generate a cost for the association for the next periods.

2) Impact on level of activity as foreseen in the original Implementation Plan:

T15.1: this activity has been delayed in its delivery as there was incomprehension between the work Package leader and the expectation of the Management and the Exploitation activity.

The external website was first designed to fulfil the needs of a European project. However, the expectation of the Project Management as well as the Exploitation activity was much higher than that as they were expecting a website designed for the exploitation of final results of the project, since the beginning.

This has generated around 10 months of delay to succeed to produce a first version of this very ambitious website.

T15.2: mailing lists and document sharing server are hosted and managed by ERCIM. However, HealthGrid has taken in charge the setup of a private wiki server for ACGT.

The production of a video has not yet been undertaken as there is no budget nor man-month devoted to this task in the technical annex. Discussions are ongoing at the management board level.

T15.3: HealthGrid has attended and presented the ACGT project to several international events (cf. periodic activity report). No open meetings were organised by HealthGrid during this period.

T15.4: Due to the early stage of the project it is very difficult to organise partnership programme. However, this has already been taken into account and WP15 are very active in lobbying as well as publishing their work to prepare the ground for this activity.

T15.5: The first project conference is foreseen only in the second period of the project (project month 12-30)

T15.6: WP15 partners have produced more than 30 publications in several journals and revues. Several press releases have been issued, mainly at national level by specific partners.

T15.7: The internal website is composed by several tools which have already mostly been quoted. It has been setup since the beginning and allows partners to share documents, publish items and news, work collaboratively ...

PARTNER 18 – ICCS

1) Deviation on eligible budget and PM plan:

ICCS contributed to WP 4, 12 and 16 although this had not been initially planned, which produced a deviation between the actual number of PMs and the planned number of PMs for this reporting period, for the following reasons:

- I. The first year of ACGT implementation showed that the work already done by ICCS on the simulation of *in vivo* tumour response to therapeutic schemes during the previous nine years was an invaluable starting point for the initiation of the construction of much of the ACGT architecture and information flows. In this way a considerable acceleration of the overall ACGT implementation was achieved.
- II. The initial total number of PMs allocated to ICCS was underestimated; therefore there was no room for allocation of ICCS PMs to all workpackages in which ICCS contribution proved necessary.

2) Impact on level of activity as foreseen in the original Implementation Plan:

Due to the high complexity and markedly inhomogeneous character of the “Oncosimulator”-related ACGT modules, the actual level of activity proved to be moderately higher than originally expected. However, this is accomplished without any impact on the overall ICCS budget.

3) Audit certificate

Although it was not mandatory, ICCS provided an audit certificate for this reporting period as the provision of audit certificates for all reporting periods is considered a standard ICCS policy.

Notes:

- **It is noted that in most workpackages the PMs planned for the first 18 month –period were not meant to be uniformly distributed over the entire period.** This was necessary due to the strong interdependencies with other workpackages and the overall ACGT work orchestration needs. More concretely, in workpackages WP2 (User needs analysis & specifications), WP3 (architecture and standards), WP5 (Distributed data access, tools and applications), WP8 (Technologies and tools for *in silico* oncology), WP9 (The integrated ACGT environment) and WP15 (Dissemination) most of the work had to be done as early as possible, in order to set the framework for the development of the detailed ACGT technologies and tools. On the contrary, in WP14 (Training, training activities) for obvious reasons we had to wait till an initial crystallization of the ACGT architecture was achieved. Therefore the planned PMs for the first reporting period were 0.
- It should also be noted that apart from the personnel paid directly through ACGT, 18 PMs had been planned to contribute to the ACGT implementation through a **post graduate grant** provided by ICCS' own resources (see Description of Work, 5 December 2005, Final version p. 232). **4.5 PMs** out of this figure have been consumed during the first reporting period. However, this PM contribution has not been included in the PMR forms, in order to avoid any confusion, as these PMs had not been taken into account when estimating the initial total number of PMs (58) to be allocated to ICCS.

PARTNER 19 - USAAR

1) Deviation on eligible budget and PM plan:

WP2: PM planned: 6.66, done: 9.54

The work regarding questionnaire regarding task T2.2 did take much more time than expected. The reason for that was the effort that had to be undertaken to get enough input from all the partners.

To learn a common language to understand the different partners (IT-people, basic researchers, clinicians, jurists and ethicists) of the consortium did take a lot of time to get efficient. This was not expected at the beginning and addresses mainly the following parts of WP2:

- The development of scenarios for the ACGT Nephroblastoma
- The collaboration of IFOMIS with clinical partners in order to integrate user needs into the ontology

WP3: PM planned: 2.66, done 0.28

Because things in WP3 did fine, there was no request for more work. As stated in the Appendix I a lot of effort was spent to convince the IT people of the University Hospital to build a Grid node at our University Hospital. Because this grid node is still not implemented, there was also no more input possible from WP2 from this side. I strongly believe this is a general problem ACGT is facing in building up such Grid nodes in other hospitals. A solution in our university would be beneficial for the whole project. So this point is a little bit crucial to my view and we will put a lot of effort in that during the next period. Therefore I would like to move the unspent PM to the second period, if possible.

Besides the above mentioned point the main input that can be given is in updating the requirements relevant for the architecture and in T3.3 regarding monitoring the progress and developments regarding standards as defined by D2.1

The unspent PMs are without impact on the original implementation plan.

WP7: PM planned: 6.66, done 12.23

Much more time was necessary for the building of the Ontology. This is mainly due to the fact, that from the beginning a close feedback to clinicians was established and integrated in the work done by IFOMIS. This feedback is time consuming but also very efficient regarding the quality of the ontology.

WP13: PM planned: 2.00, done 0.60

Regarding user needs for Evaluation & Validation is done in WP2. The evaluation criteria for usability regarding validation of tools and software from a clinical point of view will be done during the next period. This causes no time delay.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The level of activity of USAAR was higher as foreseen in the original Implementation plan (32.05 versus planned 26.62 PM) and was mainly covered by the own staff of USAAR. This was necessary to achieve the goals of the original plan. Activity in the next period will focus on WP with less activity, especially WP13. The level of activity has no impact on the original implementation plan.

PARTNER 20 – SIVECO

1) Deviation on eligible budget and PM plan:

The actual budget spent in the first 12 months was under the initial estimations (18% from the 48 months budget), due to the specific of the WP14 Training in which we develop most of our activity. The number of PMs spent in the first 12 months is 14 instead of 15.67 as results as a 2/3rd from the 23 months planned for the first 18 months.

The effort (number of PM) used in the first 12 months was directed to the development of the ACGT Portal as the main interface of the ACGT Infrastructure and integrated within the Grid technology. The activity carried out in the first 12 months was basically in WP14 for R&D activities concerning the analysis of the ACGT Portal functionalities and implementation of the ACGT Portal prototype.

In the same time for other WPs, we spent no PMs in the first 12 months. This is the case with the training activities in WP14, dissemination activities in WP15 and exploitation activities in WP16.

As a direct effect the number of PMs spent in the first 12 months is not equally distributed as 2/3rd from the planned number of PMs to be spent in the first 18 months for each WPs in which we activate.

However, this distribution of the effort for the first 12 months cannot be considered a deviation from the plan at the level of the first 18 months, but only a distribution of the effort inside the 18 months project plan, according to the priorities established by the implementation.

2) Impact on level of activity as foreseen in the original Implementation Plan:

The WP distribution of our effort in the first 12 months actually corresponds to the original implementation plan.

PARTNER 21 – FUNDP

1) Deviation on eligible budget and PM plan:

Crid has not been involved in the WP 14 by its leader during this period because Crid's contribution was not needed. Therefore, there's no PM in the WP14 for this first period.

In accordance with ERCIM's Email dd. 04.10.2006, here is the new allocation of pm:

Corrected Pm for partner 21 for first 18 month period

WP1	WP2	WP3	WP4	WP5	WP6	WP7	WP8	WP9	WP10	WP11	WP12	WP13	WP14	WP15	WP16	Total
									16				1	1		18
									16				1	1		18

Existing breakdown in DoW for partner 21 First 18 month period

WP1	WP2	WP3	WP4	WP5	WP6	WP7	WP8	WP9	WP10	WP11	WP12	WP13	WP14	WP15	WP16	Total
	4	2							13	8	1		1	1	1	31
	4	2							13	8	1		1	1	1	31

2) Impact on level of activity as foreseen in the original Implementation Plan:

The deficit at the level of the WP14 has been compensate with PM in WP11 (not planned in the DoW after modification as explained in appendix I) and more WP in WP15 than planned in the DoW.

At the end of this first period, Crid has honoured the total of PM for this first period.

PARTNER 22 – UH

1) Deviation on eligible budget and PM plan:

Work-packages	Short Name	Previous PM allocation for the first 18 months	Actual PM allocation for the first 18 months	1.2.2006 – 31.7.2007		1.8.2006 – 31.1.2007		1.2.2007 – 31.7.2007		Total PM
				PM	Staff	PM	Staff	PM	Staff	
WP2	User Needs Analysis and Specifications	6	4	2	0,5	2	--	0	--	4
WP3	Architecture and Standards	2	0	--	--	--	--	--	--	0
WP10	Ethical, Legal and QA Issues	8	12	2	--	3	1,5	7	--	12
WP11	Trust and Security	3	3	0,5	--	0	0,5	2,5	--	2
WP12	Clinical Trials	1	1	0	--	1	--	0		1
WP15	Dissemination	2	2	0	0,5	0,25	--	1,75	0,5	2
Total		22	22	4,5	1,0	6,25	2	11,25	0,5	22

2) Impact on level of activity as foreseen in the original Implementation Plan:

WP2: User Needs Analysis and Specifications

Deviant from the scheduled PM allocation, we finished our work for WP2 within 4 PMs instead of 6 PMs. We needed less PMs, because UH could draw on expertise gained in previous research to prepare 21.1 as contribution of UH to D2.1.

WP3: Architecture and Standards

Different from what was initially scheduled, no ethical framing for architecture and standards was developed by UH in WP3, since preliminary ethical requirements were developed in WP2, and consolidated ethical requirements in WP10. Hence, the 2PM allocated to WP3 were shifted to WP10.

WP10: Ethical, Legal and QA Issues

The main work on ethical and legal issues regarding the ACGT assembly is done in WP10. Since the beginning ethical discussions on “scope of informed consent” and “data feedback to individual patients” were continuously followed. Other ethical issues which may be of potential importance for ACGT are additionally identified and examined (e.g. patients’ perspective,

research involving children, communication processes). Because of these further considerations that have necessarily been taken into account, the work for Chapter 2 (Ethical Requirements) as contribution of UH to D10.2 has increased. According to the elaborated requirements, we were also responsible for the production of patient information as contribution of UH to D10.1. Additionally, UH was involved in producing inform-consent forms. Due to the complexity of issues in D10.2, the implementation in D10.1 and the projected work plan for the following six months, we expanded our PMs from 8 to 12 for the first 18 months.

PARTNER 23 – UOXF.BP

1) Deviation on eligible budget and PM plan:

UOXF.BP underspent on salary for the first year since the starting date of the person working for ACGT was the 1st of November 2006. As a consequence the salary budget equivalent to 3 months was used rather than 1 year.

Travel costs, like running costs are delayed in being charged to the grant code due to late set up so any year 1 spend will be reported in year 2.

However members of the Growth Factor Group were able to support the ACGT project prior to 1st of November 2006.

Non-staff costs have been incurred throughout the project period but do not yet show on the Cost/Budget report because of the lateness of setting the grant up on the University finance system.

Non-staff costs for Year 1 will show in the next period report.

2) Impact on level of activity as foreseen in the original Implementation Plan:

Overall the person month activity is not greatly deviating from the original Implementation Plan but is skewed towards 'Own Effort' rather than 'EC Funded' activity.

PARTNER 24 (CPF25) – Uhok

1) Deviation on eligible budget and PM plan:

No eligible budget.

Deviation from PM plan (4.5 in place of foreseen 7.5) reflects longer-than-expected negotiations to establish the appropriate concrete role within ACGT for UHok, given its unfunded status. With this role now clarified, substantial work is beginning.

2) Impact on level of activity as foreseen in the original Implementation Plan:

None

PARTNER 25 (CPF26) – IEO

1) Deviation on eligible budget and PM plan:

The total amount of eligible costs incurred during the first year of activity, as reported on Form C, is of Euro 968,40.

The deviation from the planned budget reflects our tardiness in active participation due to the unforeseen and unfortunate illness of the Coordinator of Research. The activities which eventually were instituted were principally focused on exploring feasibility, planning pilot investigations in house and reorganising technical-genomic-bioinformatics teams to facilitate optimal participation in the ACGT project. (This was overdue and has been of considerable benefit internally at IEO).

All staff costs until now have been paid for by IEO.

2) Impact on level of activity as foreseen in the original Implementation Plan:

No major deviations on the original implementation plan.