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| **Call: Open Call 1 for SOFT projects** | |
| **Acronym & project ID** | **ECBC – PEIC – ROHU00472** |
| **Project title** | **Enhanced cross-border capabilities for primary, emergency and intensive care in Timis – Csongrád-Csanád cooperation area** |
| **Priority** | PRIORITY 2 - Cooperation for a more social and cohesive PA between Romania and Hungary |
| **Specific objective** | RS04.5 - Ensuring equal access to health care and fostering resilience of health systems, including primary care, and promoting the transition from institutional to family and community based care |
| **Implementation period** | 30 months (10 June 2025 – 09 December 2027) |
| **Objective** | To improve the resilience, quality, and accessibility of cross-border healthcare in the Timiș–Csongrád-Csanád area through strategic investments, enhanced interoperability of medical units, and strengthened professional collaboration. |
| **Partnership** | **Lead Partner:**  Timis County (RO) |
| **Project Partners:**  PP2: University Of Szeged (HU)  PP3: Emergency Clinical County Hospital "Pius Brinzeu" Timisoara (RO) |
| **Total buget** | EUR 3,028,002.04 out of which EUR 1,989,359.08 FEDR |
| **Summary** | The project ***„Enhanced cross-border capabilities for primary, emergency and intensive care in Timis – Csongrád-Csanád cooperation area” (ROHU00472 – ECBC – PEIC)*** aims to enhance cross-border (CB) healthcare services in the Timiș–Csongrád-Csanád region by addressing key gaps in intensive (IC) and pediatric care (PC) capacity, interoperability between healthcare institutions, and systematic cooperation among medical professionals. While Romania and Hungary have centralized healthcare systems, this border region offers unique opportunities for bottom-up development that responds to local needs, including the frequent cross-border movement of patients seeking care.  Strategic infrastructure investments will expand IC and PC capacity in Timișoara and Szeged, while soft components will strengthen professional collaboration through joint communication systems, consultancy support for complex cases, and a CB patient transfer protocol. The project also fosters continuous learning via webinars, conferences, and residency exchanges.  By involving leading regional institutions—Timiș County Hospital, Szeged University, and ECCHT—the project leverages their expertise and reach to benefit over 2,400 annual users of the improved infrastructure. Long-term results include sustained cooperation among organizations, adoption of joint strategies, and strengthened cross-border healthcare networks—ultimately raising the quality, accessibility, and resilience of care in the program area. |
| **Main results** | The main results of the project are:   1. **Timiș County Council (CJTIMIS) – Intensive Care (IC) Investment:** CJTIMIS will expand the ICU infrastructure within the Timiș County Hospital by adding 8 new mixed medical and surgical intensive care beds. The new unit, adjacent to the current ICU, will include 4 rooms (2 beds each), plus auxiliary areas for staff, equipment, and waste management. This will increase ICU capacity from 27 to 35 beds, directly addressing critical care needs. 2. **University of Szeged (SZTE) – Pediatric Care (PC) Investment:** SZTE will establish a new 15-bed pediatric care unit (361 m²) in the renovated basement of the Pediatric Department. The unit will include 7 double rooms and 1 accessible single room, all with private bathrooms, along with necessary support areas for admission, examinations, storage, and staff use. This investment will significantly enhance pediatric care capacity and service quality in Szeged. 3. **Emergency Clinical County Hospital of Timișoara (ECCHT) – IC Equipment Procurement:** ECCHT will procure advanced medical equipment to fully equip the new ICU beds. The investment also enables the integration of high-value equipment acquired during the pandemic (previously unused and in storage), ensuring that the expanded ICU is fully functional, technologically equipped, and operated by qualified staff. 4. **Joint Working Group Sessions**: 8 sessions to develop a consultancy support system for complex cases, a patient transfer protocol, and a medical communication channel. 5. **Webinars:** 10 CB webinars with 50 participants each, covering diverse healthcare topics in an international setting. 6. **Conferences**: 4 one-day CB conferences (2 RO, 2 HU) with at least 50 participants each, promoting knowledge exchange and project visibility. 7. **Practice Stages**: 4 CB practice stages (5 days each) for 32 residents to gain hands-on experience across borders. 8. **Protocols & Systems:** Partners will co-develop a cross-border patient transfer protocol, a consultancy support system, and maintain an operative communication platform to support continuous professional exchange. 9. Efficient project coordination through established governance bodies (PJSC, PIC, JWG), supported by comprehensive management and quality plans, digital communication strategies, and continuous monitoring to ensure high-quality implementation and effective cross-border cooperation. |