

## Update of Hospital Administration contacts for ERN EpiCARE Centers

**The ERN EpiCARE Management team regularly needs to contact directly different departments of your Hospital Administration. Particularly when we are requested by the European Commission to sign a Consortium Agreement between accredited EpiCARE members (Institutions), Data Sharing agreements involving the Legal Dpt. and/or the Data Protection Officer and the Informatics Dpt.**

**We would very much appreciate if you provided to us by early January 2025 the information requested below.**

**It is understood that we will always also copy you, as medical representatives of your team, to all correspondence.**

The personal data collected from healthcare professionals (full name, organization, email address and country) will only be used for the purpose of the study and treated confidentially.

The Coordination Office takes all appropriate technical and organizational measures in order to comply with the applicable data protection laws, including the General Data Protection Regulation (EU) 2016/679 as from 25 May 2018, and ensures the protection of the rights of healthcare professionals as data subjects.

The questionnaire is also subject to SurveyMonkey's (or OTHER) Terms of Use, including its Privacy Policy.

**\* 1. Name of the Institution you are representing in ERN EpiCARE**

  

**\* 2. Name of the EpiCARE Centre Leader completing this "update contacts list"**

**\* 3. Name of your personal assistant (Secretariat of the Department)**

**\* 4. Email address of your personal assistant**



## Update of Hospital Administration contacts for ERN EpiCARE Centers

### General Director or Delegated Signatory

**Please provide the information of the General Director or Delegated Signatory, along with their assistant, who are responsible for signing any important contracts or documents required by an EpiCARE center.**

\* 5. General Director or Delegated Signatory LAST NAME

\* 6. General Director or Delegated Signatory FIRST NAME(S)

\* 7. Director or Delegate Signatory email address

8. ASSISTANT LAST NAME

9. ASSISTANT FIRST NAME(S)

\* 10. ASSISTANT (Secretariat) of GENERAL DIRECTOR or DELEGATED SIGNATORY e-mail address

**\* 11. Do you have in your Hospital a designated person/Administration Office who is in charge of all issues related to the ERNs present and to whom you can refer?**

☐ Yes

☐ No

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**Administration Office in charge of the Hospital ERNs**

**Administration Office responsible for all matters related to the European Reference Networks (ERNs) of which the center is a member**

\* 12. Administration Office in charge of Hospital ERNs contact email address

\* 13. Administration Office in charge of Hospital ERNs contact name

14. Other email address you would like to add



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### LEGAL DEPARTMENT

**Particularly when dealing with agreements to be signed by the hospital Administration we need to contact your legal Dpt. Ideally provide with one Name and contact, otherwise at least a generic email address of the Legal Dpt.**

\* 15. Legal Department email address

16. Legal Department contact name

17. Other email address you would like to add

## Update of Hospital Administration contacts for ERN EpiCARE Centers

### Data Protection Officer (DPO)

**We regularly need institutional agreements for data sharing, particularly related to Registries.**

\* 18. Data Protection Office email address

19. Data Protection Office contact name

20. Other email address you would like to add



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### Information Technology Department (IT)

**For all issues related to the implementation of RedCAP, access from the hospital computers to platforms such as the CPMS, the Webinars, the use TEAMS, ZOOM etc.**

\* 21. Information Technology Department email address

22. Information Technology Department contact name

23. Other email address you would like to add

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24. **ADDITIONAL INFORMATION:** Feel free to use the space below to provide any additional information or Contact that you consider would facilitate our interaction with your Hospital Administration

We thank you for your kind cooperation and help in filling out this questionnaire. We appreciate your valuable input.

**Prof. Alexis Arzimanoglou and the ERN EpiCARE Project Managers team**