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Innovations in Health and Social Care Enhancing Health and Well-being in Europe

WG 2 – Paying for value and innovation

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INTRO - Looking Back on current European Research Priorities

- Much emphasis has been placed on technological innovations in medicine and digital health.
  These have the potential to address key threats to human health, such as the rising burden of chronic disease or antimicrobial resistance.

- BUT: Do they provide a solution for our problems and questions, are they fit for practical use (and not only in lab-situations?)

- BUT: Are the Third Party Payers able and willing to fund these?

To successfully embed innovations and new technologies change is needed at many levels to ensure that health systems remain effective, efficient and long-term sustainable.

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Setting Research & Cooperation Priorities

WHAT WE NEED	WHAT WE DONT NEED
Health System Organisational Research	Solutions for narrow target groups
Services and policies inno-vation to ensure that advances are systematically embedded in existing systems	Projects that serve only single-interest groups and more silo-building
Solutions that benefit patients, populations and society broadly	More new nursing robots
Ideas on how to better involve decision makers and payers	Solutions that ignore payer's needs

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Tasks of Group A

- **Please split up in 3 SUB-GROUPS**

- **Each Group should discuss the following questions for max. 40 minutes and then develop 1-2 concrete recommendations**

- **The recommendation will be shared with the sub-groups of Group B, who will discuss the same questions and will come up with 1-2 recommendations each too.**

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Questions

- **What is the EU-wide added value of a research cooperation in this field?**

- **What do we need to know to learn / understand better from other countries?**

- **Where are the knowledge gaps?**

- **What to do to move forward (involve whom? Avoid or overcome which obstacles?)**

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Tasks of Group B

- **Please split up in 3 SUB-GROUPS**

- **Please have a first look at the recommendation(s) of Group A**

- **Each Group should discuss the following questions for max. 40 minutes and then develop 1-2 concrete recommendations**

- **The recommendations will be presented to the Plenum by the WG Chair/Co-Chair (max. 10 minutes)**

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Recommendations – Subgroup A

- We need should look more into communalities than on differences in health systems - also on regional level;

- We need to investigate the different processes and health care delivery models in the countries AND understanding the WHY;

- We need to come to a joint definition of value

- Encourage participatory approaches in health systems research;

- We still need to work on a more shared language and also look into the national processes

- We need to optimize and harmonize the key performance indicators in service delivery systems;

- HEALTH IS NOT AN ISLAND

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WG 2 - Reporting back to Plenum

- We should look more into communalities than into differences in health systems and needs for innovation - on regional and on municipal level;

- It seems that regions may listen more easily to fellow regions in other countries than in their own countries;

- We need to investigate the health care delivery models in countries/ regions AND understand the WHY;

- We still need to work on a more shared language and also look into the national processes;

- We need to work towards a more shared construct of value and person-centred care;

- Encourage participatory approaches in health systems research (and e.g. even in value-based procurement);

- We need to optimize and harmonize the key performance indicators in service delivery systems including outcome measurement (cf. Italy);

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