



My health innovation ecosystem...





The Scottish Ecosystem brings health, social care, housing, emergency services, voluntary sector, academic, industry and civic stakeholders together to create a community that exchanges knowledge and learning, and creates opportunities for collaboration and innovation that will improve the way health and care is delivered in Scotland, through the use of new innovative technology & services.

Hosted by the Scottish Government's Technology Enabled Care and Digital Healthcare Innovation Division, the ecosystem is governed by a Steering Group representing the key stakeholder groups and sectors.

Citizens and Carers



eHealth Professionals



Third/Voluntary Sector



Health and Care Workers





ottish Government

Scottish Academia



Scottish Industry



International Partners



First steps: how did the process start?

Joined up thinking...

SCOTLAND'S DIGITAL HEALTH & CARE STRATEGY

ENABLING, CONNECTING & EMPOWERING







'Digital technology has the potential to change the face of health and social care delivery.'

 Scottish Parliament Health and Sport Committee report on technology and innovation in health and social care











BUILD A PERSONALISED





Person-centred vision

I have access to the information, tools and services I need to help maintain and improve my health and wellbeing.

I expect my health and social care information to be captured electronically, integrated, and shared securely to assist service staff and carers that need to see it

... and that digital technology and data will be used appropriately and innovatively, to:

- help plan and improve health and care services
- enable research and economic development, and
- ultimately improve outcomes for everyone.'
- Co-design embedded....

Ref: Digital Health and Social Care Strategy 2017-22



Health innovation ecosystem – is it something unique?



"Innovation ecosystems create an active flow of information and resources for ideas to transform into reality. ... Additionally, an innovation ecosystem provides the means to create economic stability and resource sharing."

Mike Millard, Nov 2018

Recommendations

What would you recommend to regions that are still in the middle of the ecosystem building journey?

- Start with your "champions" (they are already active and willing) and build it from there.
- Make sure you have clear objectives about what you want to achieve from the outset

 otherwise your stakeholders may feel disengaged and that they are not deriving any benefit from it.
- Try to identify some "easy / quick wins" that demonstrate the value of the ecosystem
 to your stakeholders e.g. knowledge exchange events; information about new
 funding opportunities, etc.
- Continually revisit and "evolve" your ecosystem priorities and activities, in response to your stakeholders' needs.



My health innovation ecosystem...



Lead by Regional Ministry of Health and Families of Andalusia, Andalusia RS is composed of

Government/Health providers:

Regional Ministry of Equality, Social Policies and Conciliation; Andalusian Public Health System, Andalusian Healthcare Service, Andalusian Agency of Social Services and Dependency, Andalusian School of Public Health, Local social services.

Industry:

Indra-Minsait, Fujitsu, Phillips, Everis, Tunstall, Telvent-Vodafone, Telefonica Movistar, SOPRA STERIA, AYESA, ISOTROL, Pfizer, Merck Sharp & Dome, Novartis, Roche, Celgene, Allergan, Bristol-Myers Squibb

Research and academia:

University of Granada, University of Seville, University of Malaga, University of Cordoba, University of Cádiz (all with Med Schools), University of Jaen, Andalusian Society of Family and Community Medicine, Andalusian Society of Nursing.

Civil society:

Andalusian Council of Official Colleges of Pharmacists, Centers of Active Participation, Elderly Council, Elderly's associations (LARES, UDP Cadiz, CONFEAFA, FOAM, Fundación Gerón, CONFEMAD), Patients' associations.

First steps: how did the process start?

- Process started within the first call for RS of the EIP on AHA
- The 2012 call for EoI included the possibility of reflecting on the participation of entities and territories beyond MS.
- Leading role by the Regional Government (several election processes)
- Andalusia Office in Brussels is fully aware of our role. Active implication depending on needs
- Continuous process of mutual involvements due to local circumstances. Several formal agreements among institutions, projects involving different entities. Modulation is not easy.
- Evolution adaptation.

Health innovation ecosystem – is it something unique?

- Strong Digital Health Strategy in the region in place
- Healthcare system is the biggest «enterprise» in the region, with many links and opportunities for innovation
- Links with other innovation systems

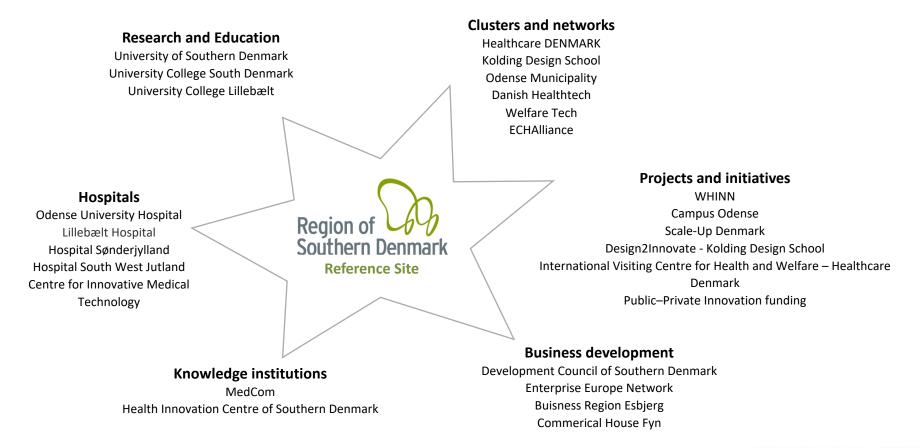
Recommendations

- Learn from peers in the process
- Based on on-going activities, get to know assets and potentials
- Adaptation through different environments
- Communication with others
- All RS are members of the RSCN, where opportunities for connections and links are available



My health innovation ecosystem...

...is composed of





First steps: how did the process start?

When did the process start?

- The structure of the present day ecosytem began in when a new structural reform was set up in Denmark
- State level (national) The Ministry of Health provides the overall framework for the provision of health and elderly care services
- Regional level run by Regional Councils
- Municipalities –local level



What kicked off the process? Bottom up drivers or top down drivers? Please describe

The process was mainly a top approach.

- Political support, commitment and investment
- Diverse political strategies



Who played the "coordinator", the "orchestrator" role? Who is it now?

- In 2012 the Region of Southern Denmark established the Health Innovation Centre of Southern Denmark to assist collaboration, support and development of innovative processes within the region.
- They are the coordinators for;
- the Region of Southern Denmark's ecosystem participation in EIP on AHA
- the South Denmark eHealth ECOsystem in partnership with Welfare Tech as part of the International ECHAlliance.



Did you involve your Brussels office? If so, what role does it play in your RS?

Yes, the South Denmark European Office (SDEO) was involved from the beginning.

SDEO were very much involved in the co-writing of the first EIP on AHA application in 2012 and are also involved in diverse ecosystems within the region.



What makes you say that it is a new quality now and not only individual actors living and acting side by side?

- Supportive strategies
- An established innovation culture
- Diverse ecosystem are interlinked creating a synergy of networks
- Focus on future development and sustainability.



Health innovation ecosystem – is it something unique?

Do you have innovation ecosystems in other areas in your region that you are aware of?

Yes other ecostems include:

- The welfare technological ecosystem in the Region of Southern Denmark
- Odense Robotics is also a regional ecosystem.
- Regional AI network (RAIN)
- ROBOCLUSTER a national innovations netværk
- UAS Denmark national droner netværk



Is the health one different from the other ones in terms of process or operation?

- Yes, the health ecosystem has financial constraints, as many of the partners are from non profit
 organisations within the public sector.
- Therefore resources to develop and sustain the ecosystem depends on organisational resources and commitment of the actors involved towards ongoing development and sustainability of the ecosystem.



Recommendations

What would you recommend to regions that are still in the middle of the ecosystem building journey?

- Political and organisational support and investment
- Mutual working agreement to ensure direction of the ecosystem.
- Interrelations between the partners in their daily working areas.
- Involvement of your European Office
- Access to international ecosystems will open up for new opportunities.



