



ZENTRUM FÜR SOZIALE INNOVATION  
CENTRE FOR SOCIAL INNOVATION



# CHERRIES

RESPONSIBLE HEALTHCARE ECOSYSTEMS



## Innovation im Gesundheitssystem

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This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement n° 872873.  
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# Agenda

- Introduction
- ProEmpower – supervised diabetes self-management
- CHERRIES – Open and responsible innovation processes
- Ideas for Healthcare Innovation Hubs
- Discussion





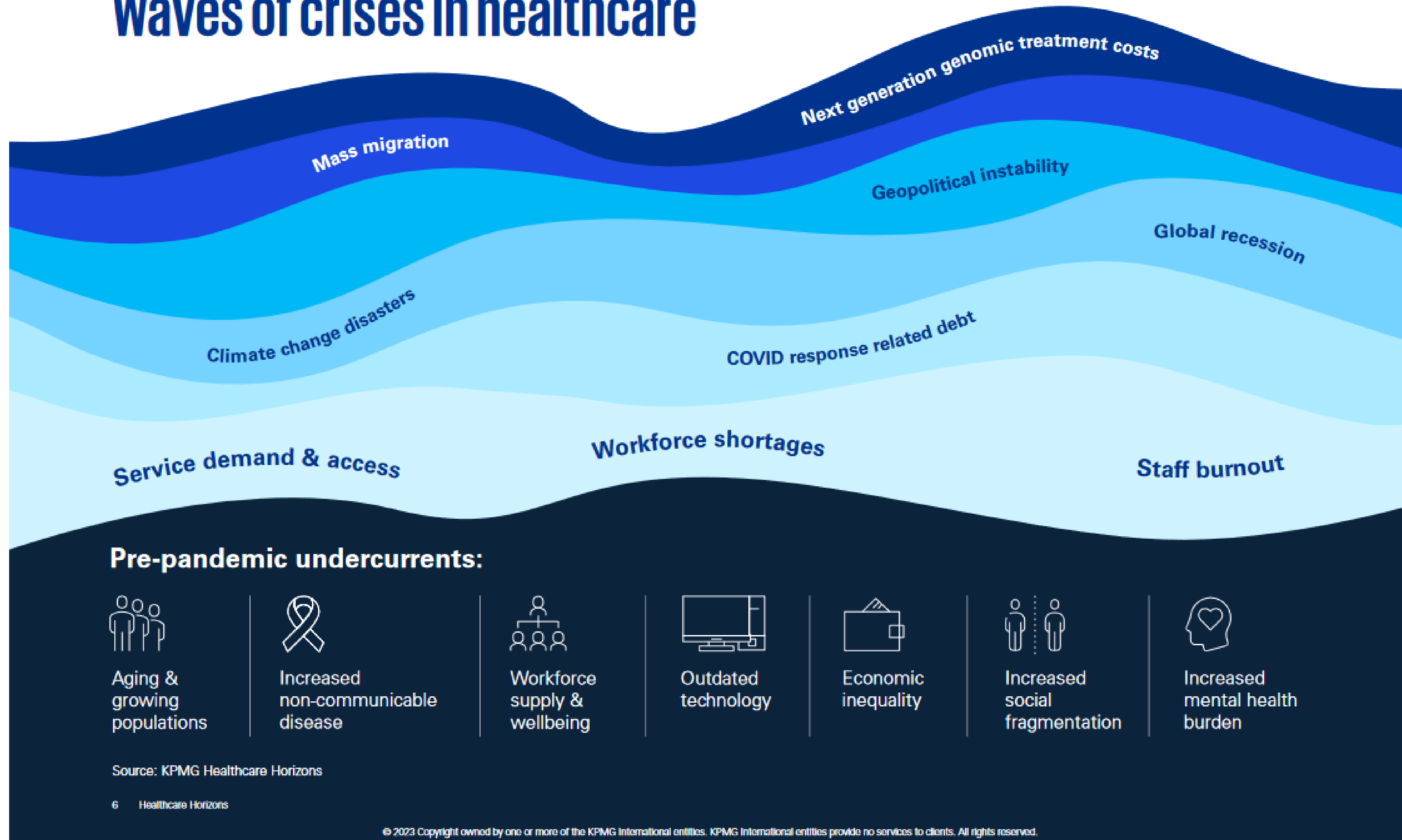
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Introduction

# Waves of crises in healthcare





# Innovation in Health

- Healthcare services are **consumed by all citizens** and are essential for human well-being
- **Pressures** on healthcare systems due to ageing populations, chronic diseases, workforce shortage, etc.
- Pressure to reduce costs while improving quality. Thus **innovation** is a critical factor for organisations within the healthcare system
- Healthcare innovations rarely achieve widespread **uptake** even when there is robust evidence of benefits
- Implementation failure in healthcare arises from **systemic conflicts** between system elements, working cultures, convictions, and the organisational and regulatory context







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Case: ProEmpower Project

# The Diabetes Challenge

- 1 in 11 adults worldwide have Diabetes, it is the ninth major cause of death
- Strong link with obesity, increasing age, ethnicity and family history
- Individuals have considerable influence on their disease and potential complications
- Change in lifestyle (healthy diet, physical activity, smoking cessation, body weight)
- Adherence to medical treatment and regular monitoring
- Person-centred approaches and team-based integrated care
- Self-management and monitoring from healthcare professionals
- Empowering based on educational approach that provides tools and skills
- ICT solutions for data collection, monitoring and communication between patient and healthcare professionals

# ProEmpower PCP

## Background, Idea and Trigger

- Recourse scarcity and need for new care settings
- Integrated and empowering approach based on ICT tool consisting of hard- and software, integrating self-management, remote monitoring and support

## (Social) Innovation

- New tool for data integration, self-management, communication, etc.
- Away from paternalistic model towards responsibility, empowerment, collaborative care and self-management

## Outcome

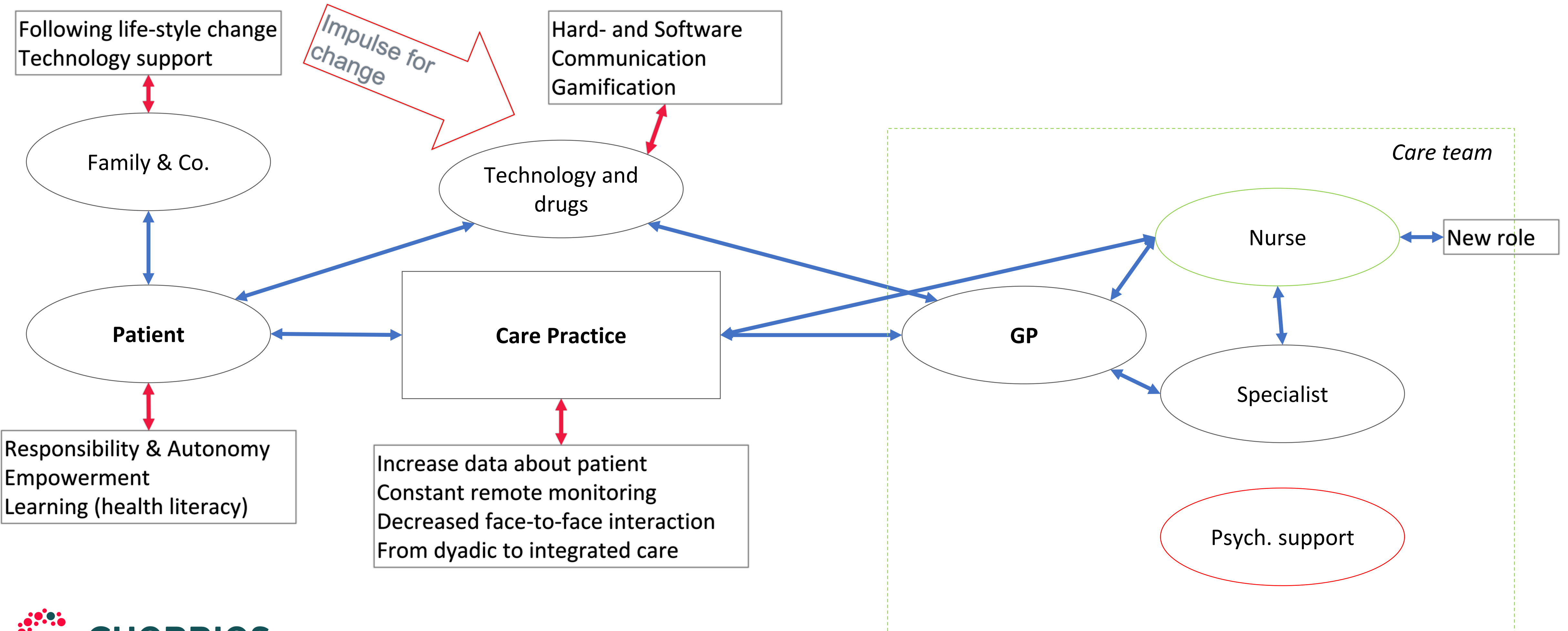
- Clinical impact with non-pharmaceutical intervention
- Content patients and healthcare professionals



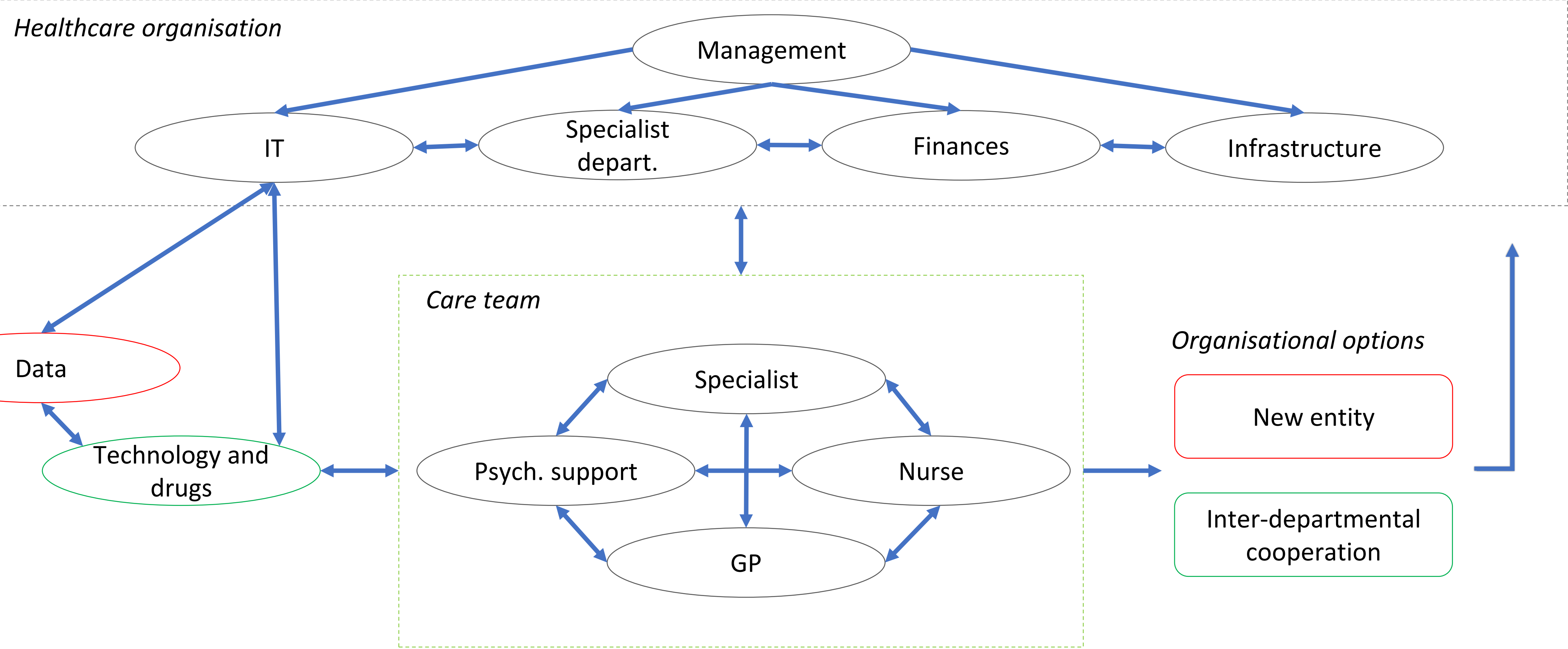
Screenshot from: <https://proempower-pcp.eu/>



# The new Practice, micro-level



# Organisational change, meso-level







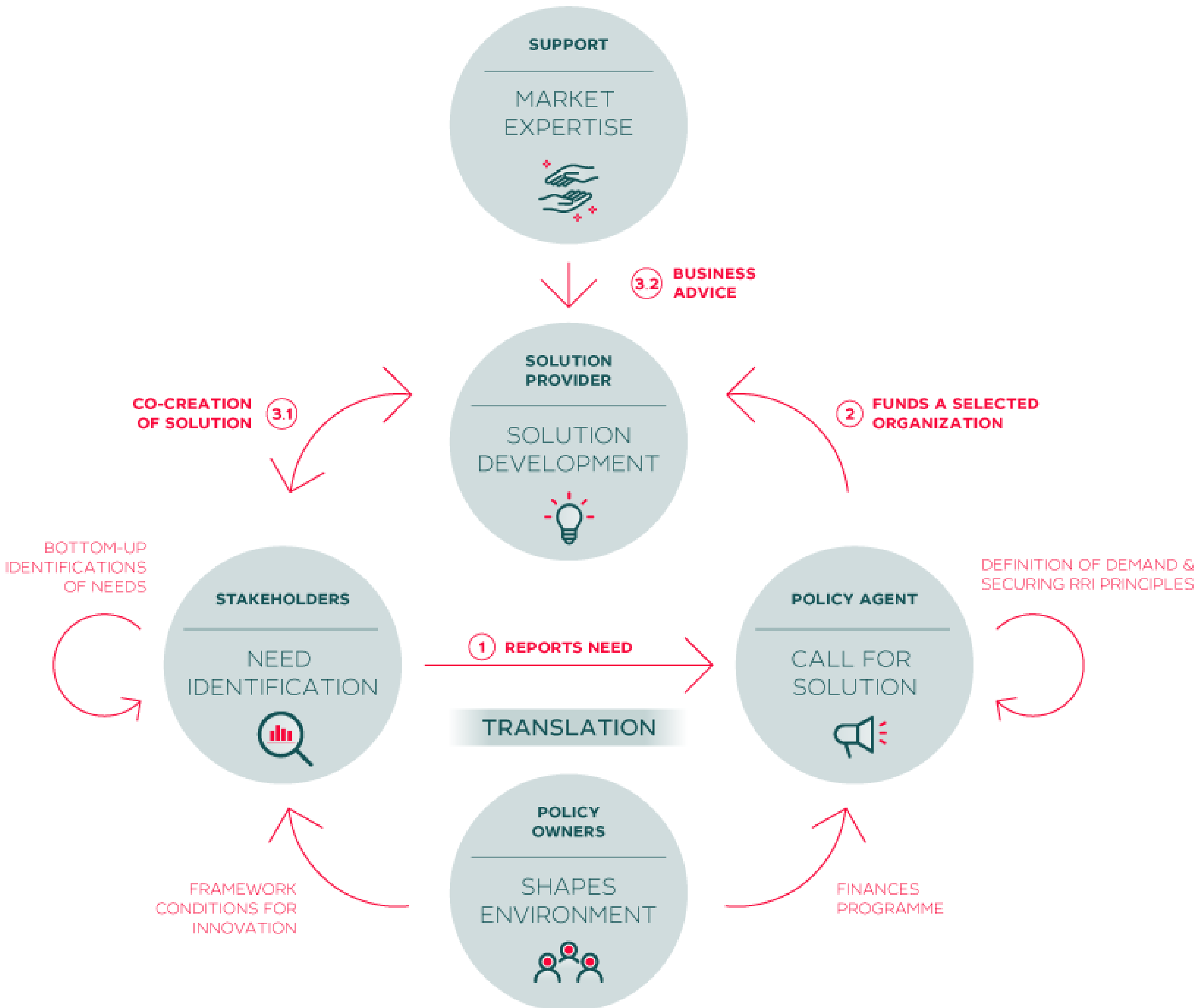
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Case: CHERRIES project

# CHERRIES – the Model



- **Need identification:** reflexive process building on stakeholder engagement, providing insights from their realities
- **Selection of Solution:** public tendering aiming at procuring an innovative Solution
- **Co-Creation of Solution:** co-creation process in order to guarantee the fit-for-purpose and -context. The solution is tested in a real-life setting in order to assess its value in practice.



# The Needs



**Breaking and Preventing involuntary loneliness among elderly**

Identified by Private citizen



**Provision of medical services to the Cypriot citizens that live in rural and remote areas and do not have easy access to healthcare services and prescribed medicines**

Identified by Healthcare Professional, Patient Association



**Early Detection of the progression of Multiple Sclerosis**

Identified by Patients, Patient association, health professionals (Neurologists and nurses), University researchers



# The Solutions

SE

**Name of the awarded proposal:** Seniors leading seniors to a more meaningful and healthier everyday life in Laxå municipality.

**Organization:** Laxå Municipality

**Country:** Sweden

Methods for outreach activities, where lonely elderly people are identified and reached, and offer a wide range of activities to counteract loneliness among the elderly

CY

**Name of the awarded proposal:** Doctors Hello

**Company:** Doctors Hello

**Country:** Greece

A peer-to-peer ecosystem, which provides innovative telemedicine services developed to support real-world healthcare based on real-time distributed data.

ES

**Name of the awarded proposal:** MS Care – Multiple Sclerosis Care

**Company:** PULSO EDICIONES

**Country:** Spain

Technological solution: ICT e-health Platform and kinetic algorithm to detect the progression of the Multiple Sclerosis





# Strengths of the model

- **Speed:** The process took approximately one year in all three regions. The rapid prototyping and testing provide benefits for all involved stakeholder.
- **Fit:** The co-creation aligns preferences and the testing identifies additional requirements and competences to improve the Solution.
- **Coalitions:** The model is an efficient way of building coalitions around a perceived problem. The co-creation and testing brings together actors in a network of shared understanding, trust, and visions.
- **Flexibility:** The model proved to be very flexible and can be adopted to varying contexts. We developed a product, a product-service organisational design, as well as a social innovation.



# Identified issues

- **Institutional ownership:** an actor (e.g., the Public Healthcare Organisation) needs to commit to owning and maintaining an innovation model
- **Arena for deliberation:** to provide directions, management objectives, align Solutions, and increase the acceptance of new approaches
- **Sustainability after pilot:** Questions of implementation or even scaling are beyond the model, as it aims to develop a prototype that needs a process of maturing







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Ideas for Healthcare Innovation  
Hubs. A new CHERRIES Model





Transformation through  
responsible, open and  
inclusive innovation:  
**the new CHERRIES Model**

<https://www.cherries2020.eu/the-new-cherries-model-is-out/>



# Future CHERRIES

- **Create a central space for deliberation about the future of healthcare:** An arena (Lab, Hub etc.) that brings together stakeholders to strategically manage transformations according to shared visions and needs.
- **Experiment with new approaches:** The CHERRIES is fit for developing new Solutions but the co-evolution of practice, organisational and institutional change needs more attention.
- **Adding a fourth Step:** Based on a successful pilot, a limited demonstrator of a new approach should be added to learn and gather evidence.

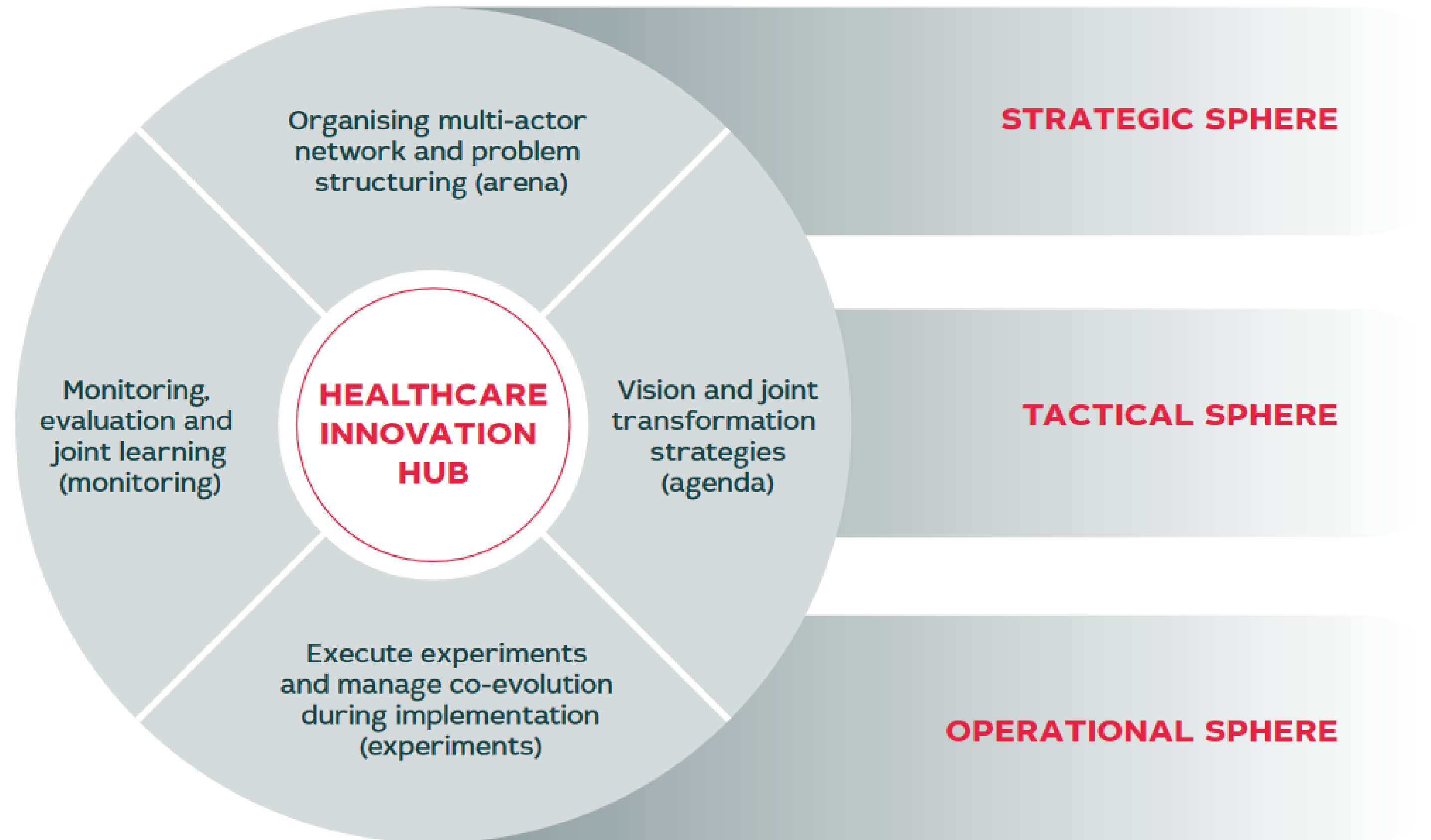
# Healthcare Innovation Hub

## Functions

- Strategically build network and structure jointly perceived problems
- Support development of visions and strategies for tactical interventions
- Provide operational context for experiments and implementation

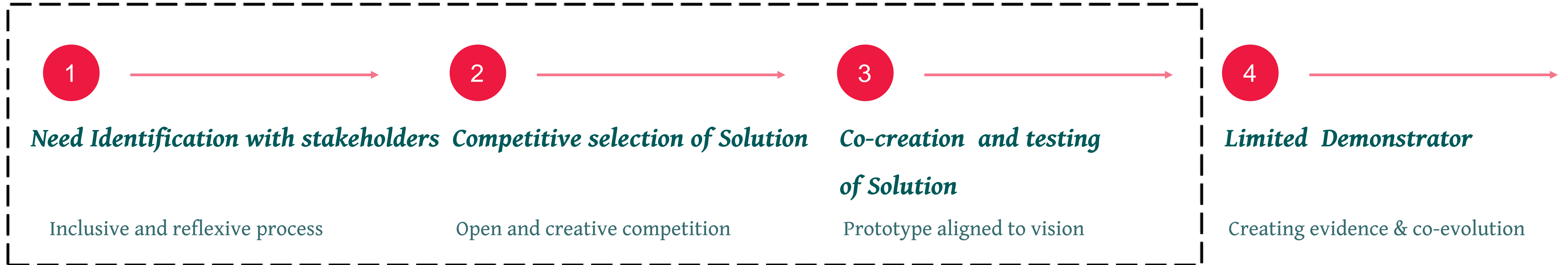
## Objectives

- Provide space for deliberating the future and for articulating a critique on current practice
- Enable the development actionable solutions within experiments
- Support implementation by mobilising others around a future practice to ensure its adoption



Based on [Loorbach and Rotmans, 2010](#)

# A four step model

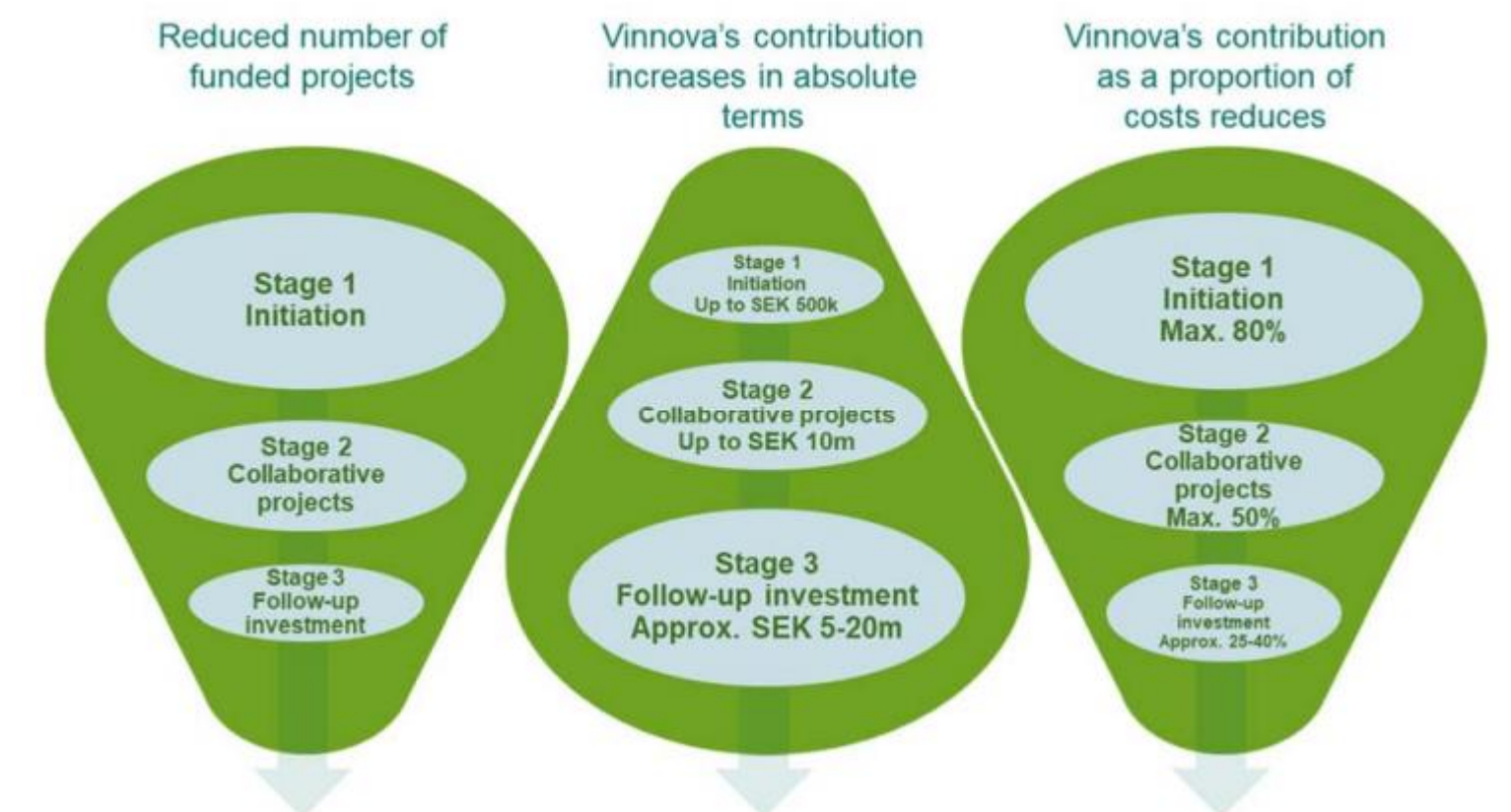


## The forth step:

- No automatism but a new project based on successful 3<sup>rd</sup> step with a clear objectives and limited time and scope
- Learning and reflecting in limited context to gather evidence on clinical, economic, etc. impacts
- Understand the transformative implications on levels of practice, organisations, and institutions
- Create legitimacy for Solution and prepare implementation process

## Inspiration:

### Vinnova's Challenge-driven Innovation







# Summarising

- **Innovations intervene in complex systems.** There is a need for understanding and managing the co-evolution between practice, organisations and institutions .
- **Experimental approaches** are needed to deal with complexity and uncertainty. They are a way of learning, building coalitions and challenging existing practices.
- **Place-based** approaches are needed for localised problems and capabilities. Context matters!
- **Innovation often is evolutionary.** There is a need to manage the transition between practices and approaches. Implementation includes the discontinuation of old solutions.
- **Power and resources.** Not every stakeholder has the same preconditions to engage in this innovation journeys but that does not mean they are not relevant.



# Get in touch!



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