ONLINE SEMINAR - INNOVATING PUBLIC HEALTH PROGRAM

Date: Friday 13th Nov 2020

ONLINE SEMINAR – INNOVATING PUBLIC HEALTH PROGRAM Date: Friday 13th Nov 2020 Public Health Innovations Across Borders

In this interactive seminar we will look at the introduction and transferability of public health innovations in relation to comparative and diverse health systems across Europe. Together with the other participants and in collaboration with the University of Copenhagen, Oxford Academic Health Science Network, Achmea, EIT Health, and the Centre for Public Health in Economics and Business the crossroad between public health and health systems will be discussed and applied to real-world examples. Which factors determine public health interventions to be successful and how can innovations adapt to fit different systems?

Click here for the full program, or click here to register!















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| Date | Friday 13th of November, 2020 |
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| Time | Programme |
| | WELCOME |
| | Prof. dr. Jochen Mierau, Director of the Aletta Jacobs School of Public Health |
| | Topic: Crossroad between public health and health systems? |
| 13:15 | KEY NOTE 1 |
| | Dr. Regien Biesma-Blanco Topic: Implementation of global health innovations: Building Blocks of Health Systems |
| | This session gives an overview of the crossroad between public health and health systems level. Major public health challenges, such as ageing population, increasing levels of chronic disease and widening inequalities are discussed. Health systems are explained on the basis of the WHO building blocks, focusing on global, national and regional differences. |
| 13:45 | BREAK |
| 14:00 | KEY NOTE 2 |
| | Prof.dr. Karsten Vrangbæk, Public Health and Political Science, University of Copenhagen Topic: Public health innovations and the diversity of health systems Health systems are facing similar challenges including population aging, increasing burden of chronic care diseases, rising expectations, economic constraints, costs of technological advances (pharmaceuticals, personalized medicine, digitalization, robotics, new materials etc) Public health innovations are important pieces in the puzzle of finding appropriate responses. But such solutions are developed and implemented in very diverse health systems. While the core of medical science is similar across countries there is much more diversity in public health approaches and in the organization and implementation of health care. This can be seen at the system, organization and individual level The talk will provide examples and discuss the implications of diversity for public health responses to common challenges. |
| 14:30 | KEY NOTE 3 |
| | Erwin Heeneman, Public Engagement Manager, Achmea Topic: How to survive the valley of death? |
| | A road to a financial sustainable business case for health innovations. What are gaps between research and business. Which 11.111 steps are there to bridge the gap? And more on health reimbursement systems in Europe. |
| 15:00 | BREAK |
| 15:15 | WORKSHOP |

The Oxford Academic Health Science Network

Topic: eMaps – a knowledge hub for life science innovators

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This workshop will focus on the eMaps tool. Its goal is to contribute to the adoption and diffusion of innovation into different healthcare systems by providing expertise and a clear understanding of: key factors that affect successful penetration into markets; methods that enable assessment of market readiness; health financing and reimbursement systems; and, an understanding of how innovation can be adapted to fit different systems.

16:15 BREAK

16: 30 PANEL DISCUSSION incl. breakout sessions

Panelists:

Prof. Dr. Lena Ansmann Prof.dr. Karsten Vrangbæk

Prof. dr. Jochen Mierau Erwin Heeneman Dr. Regien Biesma-Blanco Tracey Marriott

Propositions:

- 1) There are no borders in public health.
- 2) The COVID-19 pandemic highlights the need for a more heterogenous approach to public health interventions.
- 3) Implementation of innovations it's a matter of organization(s)
- 4) The transition from cure to prevention can only be achieved with accountable health governance.

17:20 CLOSING