

Regional Hearing
Aalborg
October 31st 2012

The hearing was held at the Aalborg Kongres- og Kultur Center and about 50 participants – representing politicians, healthcare professionals, and private companies - discussed the conditions for public-private cooperation on healthcare innovation.

Four presentations showed aspects of public-private innovation cooperation:

1. “How the Ideas Clinic facilitates innovations” by Project Manager Pernille Mejer Højholt, The Ideas Clinic, Aalborg University Hospital.
2. “Practical solutions for a public-private innovation project at Herlev Hospital” by Market Director, Jakob Søholm, Grundfos Inc.
3. “A cluster perspective on public-private innovation cooperation” by Cluster Manager Lars Horsholt Jensen, Brains Business.
4. “A Baltic Sea Innovation Agenda” by Project Manager Thomas Karopka, BioCon valley, Germany.

The aim of the conference was for one part to contribute to the Baltic Sea Innovation Agenda, and for another part to develop recommendations for a North Denmark approach to health innovation.

During the hearing a large number of ideas were developed, and the majority is collected here under three headlines:

1. Partnerships:

The aim is to establish strong partnerships. Cooperation across businesses and sectors were emphasised, together with the need for creating mutual responsible centers and cross-sectoral projects.

A great focus was put on the need for venture capital. Also willingness to engage in innovation processes with more risk were sought - both in the public decision making process and in the private companies. The importance of a public fund for supporting innovation projects was emphasised as well as less bureaucratic financing models.

A concrete recommendation was to establish *innovation cooperations* with the aim of connecting SME's with larger companies, and in that way fostering cooperation rather than competition.

2. Processes:

Professionalism in project management and conditions for public – private cooperation is needed, both for the public project managers and the private companies, in order to support better innovation projects.

The need for a mutual understanding of and competence regarding the preconditions for public-private innovation projects was stated, and it was proposed to develop a *Handbook for public-private innovation projects*.

The role of the public authorities was emphasised, both regarding maintaining the longer perspective, and in relation to top-management back-up and focus on implementation of novel solutions.

It was recommended that users and producers are actively involved early on in the process from idea to final solution. Furthermore, it was deemed important to create systems for sharing knowledge and experiences in order to avoid re-inventing existing solutions.

Structures like Living Labs were recommended as a vehicle for public and private actors to co-create new solution close to practice, in order to ensure effective solutions.

Finally, a clearer and more comprehensive description of the needs and problems in the healthcare practice is essential. Partly to focus on problems rather than solutions, in order to leave room for innovation. Partly to ensure a thorough insight in healthcare practice, for potential private partners.

3. Products:

It was a general realisation that public-private innovation projects should focus on generating value in three dimensions: for the end-users, for the public healthcare system and for the private companies.

These three equal goals should be analysed and described in business cases with a regular follow-up on the progress. The business cases were also suggested as a way to support the development of the Baltic Sea area as a healthcare economy, e.g. in the shape of a master plan for smart specialisation in healthcare innovation.

Finally, the necessity to integrate scaling in the design of the solutions was emphasised along the need for a global mind-set to ensure quality solutions with a large market potential.