Monday, 8th November

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<tr>
<th>Time (CET / GMT+1) &amp; Venue</th>
<th>Activity</th>
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<tr>
<td>08:30 – 16:00 VA Room</td>
<td>IHF Young Executive Leaders workshop (by invitation)</td>
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**Parallel Sessions**

09:30 – 11:00 Room 5

**Hands-on acceleration and sustainability of healthcare innovation in COVID-19 times**

This session is hosted by Biocat, The BioRegion of Catalonia. This round table will present and draw conclusions on how the Catalan system of research and innovation has tackled the COVID-19 health crisis. In constant interaction with the public administration and other European clusters, the key players of our health ecosystem have worked in a collaborative way, accelerating new innovative and disruptive proposals to address the situation in a rapid and efficient way.

This session will cover the different actions that carried out from the different perspectives and a diversity of actors involved, including:

- **Dr Robert Fabregat**, CEO, Biocat (BioRegion of Catalonia), Spain
- Research and Healthcare System: rapid response in the preparation and execution of new research projects, prompting collaborations through the creation of a COVID-19 Network in Catalonia. - **Dr. Bonaventura Clotet**, Director, IrsiCaixa Aids Research Institute, Spain
- European Clusters: Internationally coordinated initiatives led by European clusters and alliances. - **Marc Dechamps**, President of the Board, Council of European BioRegions – CEBR
- Industry: the industrial sector has been highly mobilized as well supporting and developing initiatives, especially in the diagnostics and new therapies sectors. - **Elia Torroella**, R&D and Regulatory Affairs Director, Hipra Scientific Slu, Spain

This Round Table will also present a successful example of such coordinated initiatives: the development of ‘Heecap’, a new medical device which emerged from d-HEALTH Barcelona, a program led by Biocat. - **Sofia Ferreira**, Co-founder, Heecap, Spain

With a hands-on practical perspective, this parallel session intends to bring about good practices and outcomes of the collaborative forces within a healthcare innovative ecosystem that has accelerated the production of solutions to mitigate the impact of the pandemics.

Chaired by: **Dr. Montserrat Daban**, Scientific and International Relations Director, Biocat (BioRegion of Catalonia), Spain

**Dr. Oriol Roca**, Critical Care Specialist, Vall d’Hebron University Hospital, Spain will also be presenting.

09:30 – 11:00 Room 3

**Innovation and research with patients in a paediatric hospital**

This session is hosted by MWC Barcelona, 5G Programme.

Paediatric patients are at the heart of any innovation and research initiative at Barcelona Children’s Hospital. Children, young people and their families are involved with the aim to ensure that innovation and research are patient centric. During this session attendees will learn about:

- Innovation and research in the field of rare conditions;
- How to involve patients in the design of innovation and research projects: from co-creation to dissemination;
- The rights of children for their involvement in health and science;
- Future innovative paediatric hospitals: participatory medicine through 5G and smart connectivity.
  - Eduard Martín, CIO and Smart Connectivity Director, Mobile World Capital Barcelona, Spain
  - Begonya Nafria, Patient Engagement in Research Coordinator, Sant Joan de Déu Children's Hospital, Spain

09:30 – 11:00
Room 8

Social awareness and biomedical research management models geared towards health improvement: Citizenship mobilization

This session is hosted by Fundació La Marató de TV3.

Imagine a country where, every year, millions of people are enthusiastically involved in an initiative that seeks to improve their health. Imagine festive activities in the streets of every city. Imagine people who publicly share their illness experience and explain how is to live with it. Imagine lots of people making donations or give their time in solidarity. Imagine that all this energy and solidarity has been maintained and has increased over 30 years and has been transformed into 216 million euros for research to improve people’s lives. Imagine that these resources serve to raise public awareness of serious and chronic diseases and help to support the talent and perseverance of 1,500 research teams and 8,600 researchers in nearly a thousand research projects. Imagine that tangible improvements are being made in prevention, diagnosis, prognosis, and treatment of many diseases and health conditions, some of them quite seldom known for being minority conditions.

The emotion, effort, trust and solidarity of people as a driver for research to improve the quality and life expectancy of patients. Sounds like a utopia, doesn't it? In Catalonia it has been a reality since 1992 and it is called La Marató de TV3 and Catalunya Ràdio, a unique telethon in the world due to the great social and citizen’s mobilization that makes it possible, year after year.

Come to this session to learn about this unique project from the hands of some of the people who make it possible!

- Introduction by session chair: Sra. Raquel Sans
- Video releasing
- A unique solidarity project: La Marató de TV3 and Catalunya Ràdio are celebrating their 30th anniversary - Lluís Bernabé, Director, Fundació La Marató de TV3, Spain
- With rigor and transparency, to the pursuit of excellence - Dr. Marga Nadal, Director, Institut d’Investigació Biomèdica de Girona (IDIBGI), Spain
- The double “R”: Reputation and responsibility of the researcher awarded by the funds of La Marató - Dr. Beatriz Bellosillo, Head of Molecular Diagnostics, Pathology Department, Hospital del Mar, Spain
- A model of solidarity and participatory macro TV program also for other international televisions - Angels Molina, Directora de La Marató de TV3 del 2021, Televisió de Catalunya, CCMA, Spain
- What makes the La Marató audiovisual and graphic campaign unique? - Camil Roca, Founder, K1000, Spain
- Personal involvement in La Marató de TV3 – Elisenda Escriche, Image of the graphic campaign of La Marató de TV3 2018, Fundació La Marató de TV3, Spain

09:30 – 11:00
Room 4

Desarrollo Profesional Continuo. Competencias del Directivo de la salud

This session is hosted by SEDISA and will be in Spanish.

Importancia del Desarrollo Profesional Continuo y certificación de competencias en los Directivos de la Salud. Situación y líneas de trabajo al respecto en España

Modera: Candella Calle, General Director, Catalan Institute of Oncology | Member of the Board, Spanish Society of Health Directors (SEDISA)

Ponentes:
- Rafael López Iglesias, Member of the Board, Spanish Society of Health Directors (SEDISA)
### Digipatics: Digital Network Transformation of the Anatomical Pathology Departments of Catalan Health Institute Hospitals

This session is sponsored by Palex. DIGIPATICS project aims to optimize the pathological diagnosis in network at the Hospitals of the Catalan Health Institute through Digitalization and the use of Artificial Intelligence tools. This project covers from the sample request for Pathology to the submission of the clinical AP result.

- **Miquel Arrufat Vila**, Director de gestion, Institut Català de la Salut, Spain
- **Mercedes Gómez**, Laboratory Business Unit Director at Palex Medical, Palex Medical S.A, Spain
- **Pablo López**, Project Manager DigiPATICS, Instituto Catalán de la Salud, Spain
- **Prof. Xavier Matias-Guiu**, Chairman of Pathology, Hospital Universitari de Bellvitge, Spain
- **Mario Mesonero**, Head of Marketing, Palex Medical S.A, Spain
- **Dr. Santiago Ramón y Cajal**, Jefe de Servicio Anatomía Patológica, Hospital Vall D’Hebrón – ICS, Spain
- **Dr. Jordi Temprana-Salvador**, Pathologist, Vall Hebron University Hospital, Spain

### Transforming Healthcare with Apple

The session is sponsored by iDooTech. It will discuss how Apple is helping transformation in all areas of hospital care. The presentations will include:

1. The company iDootech - Inycom as Apple Preferred Partner for new generation healthcare environments
2. Three solutions used by Apple to transform healthcare:
   1. Experience of the hospitalized patient: ionTab solution that allows through technology to improve patient care during their stay in the hospital as well as offering healthcare personnel innovative technological tools that facilitate and enhance their work.
   2. Home care and/or hospitalization: Revita’s solution is a technological platform that brings the hospital and its professionals closer to the patient's home.
   3. Bedside care transformation by Alexia Clinic solution: it brings real mobility to transform healthcare last mile (bedside), by using an application that allows access to patient and medication information in real time.

- **Joan Solsona**, Key Account Manager health sector, iDoo Tech, S.L, Spain
3. Conceptual and Functional presentation of Alexia Clinic App: an in-depth understanding of how to digitise the last mile of healthcare at bedside by using a lean, user-friendly, easy to implement application which is integrated with hospital information systems (HIS) and runs in real time.

- **Eduard Farga**, Chief Operating Officer, ISERN Medical Telecom
- **Roger Rossell**, R&D Project Manager, ISERN Medical Telecom, Spain
4. User Experience by Consorci Hospitalari de Vic: the nurse leading the project implementation in the pilot hospital for Alexia Clinic will share her real experience and lessons learned. A trustable and honest testimonial to understand the overall project.

- **Anna Alsina Ribas**, Supervisora d'Infermeria Atencio Quirurgica, Consorci Hospitalari De Vic, Spain
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<th>Session</th>
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<td>11:00 – 12:30</td>
<td><strong>Strategies for the digital transformation of hospitals</strong></td>
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<td>Room 3</td>
<td>This session is hosted by SCGS i ESADE: Catalan Society of Health Management and sponsored by Alexion. This aims to provide a vision of how digitalization affects and will influence the development of new hospital services by increasing their internal efficiency through data ecosystems exploited with artificial intelligence tools and expanding their community reach thanks to the deployment of centrally operated tele-monitoring services. This activity is organized by the Observatory “Management matters” that the Catalan Society of Health Management launched in December 2020. One of the sections of the Observatory is technological and digital innovation that acts as a radar of the improvements in healthcare management as a result of the uptake of new information and communication technologies. The programme of the session is structured with a keynote about the Catalan strategy of digital health and a panel that will combine views from health and innovation managers from two reference hospitals in the city of Barcelona. Chaired by: <strong>Tino Marti</strong>, Director Observatory Management Matters, Catalan Society of Health Management, Spain</td>
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<td>- Introduction: Strategies for digital transformation in hospitals</td>
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<td>o <strong>Dr. Ramon Cunillera</strong>, President, Catalan Society of Health Management, Spain</td>
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<td>o <strong>Dr. Francesc Garcia Cuyas</strong>, Deputy Medical Director, Hospital Sant Joan de Déu de Barcelona, Spain</td>
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<td>- Keynote: The digital hospital in the Catalan strategy of digital health - <strong>Jordi Piera-Jiménez</strong>, Director of the Digital Health Strategy Office, Catalan Health Service, Spain</td>
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<td>- Panel: Digital transformation strategies in hospitals</td>
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<td>o <strong>Cristina Adroher</strong>, COO, Pediatric Cancer Center Barcelona, Hospital Sant Joan de Déu, Spain</td>
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<td>o <strong>Jordi Martinez</strong>, Chief Innovation Officer, Hospital del Mar- Parc de Salut Mar, Spain</td>
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<td>- Debate: Organisational and technological challenges in hospital digital transformations</td>
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<td>11:00 – 12:30</td>
<td><strong>Optimizing colorectal cancer screening: Insights after COVID-19</strong></td>
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<td>Room 8</td>
<td>This session is sponsored by HIPRA. Improvement of colorectal cancer (CRC) screening programs remains pivotal in order to reduce colorectal cancer morbidity and mortality. Colonoscopy, the cornerstone of CRC diagnosis, is an invasive procedure with associated risks and high cost. On the other hand, the faecal immunochemical test (FIT) is a non-invasive test widely used for CRC screening to select patients undergoing colonoscopy, but its high false-positive rate and low positive predictive value (PPV) still leads to a 30% of unnecessary colonoscopies. The backlog caused by the COVID-19 pandemic has amplified the already existing need to optimize current screening programs. In this session presenters will share, discuss and contrast about current measures to manage colonoscopy waiting lists during the pandemic and the use of new screening tools. Chaired by: <strong>Dr. Mariona Serra Pagès</strong>, Director, GOODGUT, Spain</td>
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<td>- <strong>Dr. Francesc Balaguer</strong>, Chief of the Gastroenterology Department, Hospital Clinic of Barcelona, Spain</td>
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<td>- <strong>Dr. Josep A Espinas</strong>, Coordinator of Cancer Screening Programmes. Catalan Cancer Plan, Department of Health Catalonia, Spain</td>
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<td>11:00 – 12:30</td>
<td><strong>What is MAFLD?</strong></td>
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<td>Room 4</td>
<td>This session is hosted by University of Barcelona and European Liver Patients’ Association under the sponsorship of a grant (FISPLAT) from the European Institute of Innovation and Technology (EIT) Health.</td>
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Metabolic Associated Fatty Liver Disease (MAFLD) affects approximately 25% of the population and is associated with various metabolic comorbidities, mainly obesity and metabolic syndrome. The first therapeutic strategy in MAFLD is weight loss by modifying lifestyle, particularly diet and exercise. Advanced practice nurses are the most qualified professional to care of these patients. Patients with liver disease are most often stigmatized, which results in low self-esteem and impaired quality of life. Before any health education program, the needs of people with the disease should be known; because the opinion of patients is paramount.

- **Introduction** - *Dr. Nuria Fabrellas*, Professor Public Health Faculty of Medicine and Health Sciences, University of Barcelona, Spain
- **Natural history of MAFLD and diagnosis** - *Adrià Juanola*, Physician in Hepatology Department, Hospital Clinic de Barcelona, Spain
- **Role of the nurse in the treatment of MAFLD** – *Martina Pérez Guasch*, Nurse, Hospital Clínic de Barcelona, Spain
- **Stigma in persons with MAFLD** - *Marta Carol*, Research Nurse, IDIBAPS, Spain
- **Patients’ perspective** - *Marko Korenjak*, ELPA President, European Liver Patients' Association – ELPA, Belgium
- **Unmet needs of liver patients and the role of ASSCAT and ELPA** - *Dr. Teresa Casanovas*, ELPA Director and Leader of ELPA Scientific Committee, European Liver Patients’ Association – ELPA, Belgium

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<td>12:30 – 13:30</td>
<td><strong>Lunch and Networking</strong></td>
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| 13:30 – 15:00| **Brilliant management for brilliant outcomes – innovation and efficiency driving hospital eye care**
- This session is sponsored by Alcon.
- Already today, cataract surgery is among the top most frequently performed surgeries. With the aging demographic, this will only increase. Cataract surgery can effectively restore vision and quality of life. But waiting lists are already long and outcomes variable. Being able to deliver timely care with excellent outcomes for the patient requires care models that seamlessly integrate patient experience and efficiency. This session explores innovative solutions in healthcare management that will transform and future proof eye care.
- *Dr. Luis Castillón Torre*, Chief of department of ophthalmology, Hospital San Juan de Dios del Aljarafe, Seville, Spain
- *Kristina Dziekan*, Head, Market Access, Government Affairs and Tendering, Surgical Europe, Alcon, Germany
- *Prof. Alexandre Lourenço*, President, APAH - Associação Portuguesa de Administradores Hospitalares, Portugal
- *Brian Mangan*, Managing Director, Brian Mangan Associates, United Kingdom
- *Johanna Öberg*, Chief Executive Officer, Memira Eyecenter, Sweden

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| 13:30 – 15:00| **Value-based healthcare: a real patient centric approach**
- This session is sponsored by Air Liquide.
- VBHC is a proven driver to integrate innovation in healthcare maintaining a patient centric approach.
- Value-based healthcare is a healthcare delivery model in which providers are paid based on patient health outcomes (PREMs & PROMs). Under value-based care agreements, providers are rewarded for helping patients improve their health and live healthier lives in an evidence-based way.
- Value-based care differs from a fee-for-service or capitated approach, in which providers are paid based on the amount of healthcare services they deliver. The “value” in value-based healthcare is derived from measuring health outcomes against the cost of delivering the outcomes. |
In this symposia Hospital Vall d’Hebron and Air Liquide Healthcare will share their experiences on this subject.

Chaired by: Carolina Aguilar, CEO and Co-Founder, INBRAIN Neuroelectronics, Spain
- Dr. Yolima Cossio, Director of IT and Decision Support, Vall d’Hebron University Hospital, Spain
- Saad El Garrab, Strategic Planning and Value Based Healthcare Director, Air Liquide Healthcare - Home Healthcare Europe Cluster

13:30 – 15:00
Room 8
Digital transformation of healthcare, from theory to practice: On-going activities and lessons learned in Catalonia

This session is sponsored by TIC Salut Social.
It will feature a roundtable discussion with representatives from local healthcare authorities and healthcare professionals. The session will explore different paths to transform processes through technology for improving clinical work and generate value. It will also reflect on the organizational, technical and human challenges encountered by health organizations and how they could be overcome to accelerate the uptake of new solutions and enrich processes.

Chaired by: Yolanda Lupiáñez, Head of Digital Transformation, Fundació TIC Salut i Social, Spain
The round table is divided in three parts:
- Digital Health Strategy in Catalonia
  Drivers of change in Catalonia - Dr. Josuè Sallent, Director, Fundació Tic Salut Social, Spain
- Round table, from theory to practice: digital transformation of healthcare processes. Debate on the recent digital transformation into a system that is beginning to incorporate non-presence in day-to-day practice, new models of attention.
  - Moderated by: Jesus Berdun, Responsible of the Model for digital and remote healthcare services, Fundació TIC Salut i Social, Spain
  - Dr. Juana Flores, Head of Endocrinology and Nutrition Department, Hospital del Mar, Spain
  - Dr. Salvador Pedraza, Chairman of Radiologist of Catalonia, Clinical Director of the IDI (Image Diagnosis Institut) in Girona Region
  - Dr. Sergi Yun Viladomat, Internal Medicine Specialist at Community Heart Failure Program, Departments of Cardiology and Internal Medicine, Bellvitge University Hospital. Bio-Heart Cardiovascular Diseases Research Group, Bellvitge Biomedical Research Institute (IDIBELL), L’Hospitalet de Llobregat, Barcelona, Spain
- New technologies and digital skills for patients and health professionals
  -Montserrat Gea, General Director for Health Professionals, Government of Catalonia
  -Joana Barbany, Director General for Digital Society, Government of Catalonia, Spain

13:30 – 16:00
Room 5
IHF Governing Council meeting (by invitation)
The Governing Council is the organ charged with the overall governing of the affairs of the International Hospital Federation. This meeting is for IHF Governing Council Members only.

Parallel Sessions
15:00 – 16:30
Room 6
Patient Blood Management: A disruption that is benefiting millions and could save billions
This session is sponsored by Vifor Pharma.
What went unnoticed for decades by health system leaders is the high prevalence of anemia in hospitalized patients. This condition is an independent predictor for significantly increased morbidity, mortality, hospital length of stay and cost. Anemia is also a main driver for transfusion, another independent risk factor for adverse outcomes. Taken together, anemia and transfusion represent one of the world’s biggest, largely preventable,
yet greatly underestimated cost drivers in healthcare. Patient Blood Management (PBM) is an evidence-based bundle of care addressing these issues by clinically managing and preserving a patient's own blood. This significantly improves patient outcomes with the potential to save billions of healthcare dollars. The proof of principle was demonstrated in Australia, where PBM is now considered a national standard of care. PBM represents a win-win situation for patients and health care providers, and its global implementation is now strongly supported by the WHO.

- The added value of Patient Blood Management on outcomes and safety of hospitalized patients - Prof. Aryeh Shander, PBM Expert, Englewood Health, United States
- Massive cost reductions with Patient Blood Management while improving quality of care - Prof. Axel Hofmann, Adjunct Professor, Faculty of Health and Medical Sciences, Division of Surgery, University of Western Australia, Australia
- How to make hospitals fit for Patient Blood Management: The MAPBM Project - Dr. Elvira Bisbe, Consultant, Hospital del Mar, Barcelona, Spain

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<th>15:00 – 16:30</th>
<th>Catalan Institute of Oncology: a model based on cancer networking</th>
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<td>Room 3</td>
<td>This session is hosted by the Catalan Institute of Oncology. The Catalan Institute of Oncology (CIO) is a public monographic cancer centre that provides attention to more than 50% of Catalonia's population (3.5 million inhabitants approximately). CIO is a multicentric institution with 3 main centres that work collaboratively with 3 partner university hospitals along with 19 community hospitals across Catalonia that is the most extensive oncological network in our country. The aim of the session is to show the key elements of the CIO oncological network model based in three central concepts: the assistance model to the patient and research, the drug policy and knowledge management model and the win-win model among community and central hospitals. These topics will be presented by clinical leaders in the areas of Oncology, Pharmacy and Health Management. Chaired by: Dr. Joaquim Julià-Torras, Director, Institut Català d'Oncologia – Badalona, Spain</td>
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<td>- Nuri Quer, Pharmacy Unit, Catalan Institute of Oncology – Girona, Spain</td>
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<td>- Dr. Vanessa Quiroga, Medical Oncologist, Head of Care, Medical Oncology Department, Catalan Institut of Oncology (ICO-Badalona), Spain</td>
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<td>- Dr. Anna Ribera, Medical director, Serveis de Salut Integrats Baix Empordà, Spain</td>
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<th>The Impact of Artificial Intelligence; Ethical and Practical Considerations</th>
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<td>Room 8</td>
<td>This session is sponsored by BSC Barcelona Supercomputing Centre. It will offer a panoramic view of the impact of Artificial Intelligence based applications in medicine, with focus on the potential ethical implications for data and methods. The invited speakers will cover topics related with the importance of open, available data in the context of data confidentiality and security and the importance of the quality and balance of the data sets to control biases. They will also discuss the implications for resulting AI-based systems, as well as the alternatives that at various levels from technical to legal, are available to detect and correct gender and other biases. Chaired by: Prof. Alfonso Valencia, ICREA Research Professor &amp; BSC Life Sciences Dept. Director, Barcelona Supercomputing Center (BSC), Spain</td>
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<td>- Biases in biomedical data sets and implications - Dr. Maria Teresa Ferretti, Chief Scientific Officer, Women's Brain Project, Switzerland</td>
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<td>- Big data and Open data as the basis for progress - Mercè Crosas, Open Government Secretariat, Generalitat de Catalunya, Catalan Government</td>
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<td>- AI applications for disease prediction from a gender aware perspective - Alison Gardner, Data Science, Keele University</td>
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<td>- Ethical and policy implications - Dr. Teresa Scantamburlo, Post-doctoral researcher, European Centre for Living Technology, Ca'Foscari University, Italy</td>
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| 16:30 – 18:00| Room 6 | **Digital & Data Transformation towards better patient care**                 | This session is sponsored by Novartis. The scope of new technologies such as big data, artificial intelligence and other digital tools is opening up a wide range of opportunities in the field of healthcare. Novartis’ responsibility is to embrace these opportunities and use them for the benefit of patients to improve and prolong people's lives. They will share 3 relevant projects about:  
- **H₂O Project:** Outcomes reported by patients are not usually incorporated in a comprehensive and systematic way into the decision-making process affecting their individual clinical care. Swift technological innovation represents a unique opportunity to provide patients with a trusted and tested system to register critical and reliable information about their symptoms, treatment experience and preferences which can be shared with their physicians. This allows for a richer and more fruitful dialogue between the patient and his/her health care provider resulting in more tailored and effective treatment decisions.  
- **Value-based healthcare: From Theory to Clinical Practice:** Hospital Clinic Project will present how to use PREMs and PROMs data in the benefit of patient care explaining its experience in dome pathologies.  
- **Biome Project:** The Novartis Biome Spain connects Novartis and the digital health ecosystem and allow to provide innovative, high-impact solutions to patients, healthcare professionals and the national health system - acting as a catalyst for impactful digital collaboration. Biome wants to put data science and digital solutions at the service of patients around the world and work across the entire ecosystem with partners from both public and private institutions.  
Chaired by: [Jose-Matias Perez](mailto:Jose-Matias.Perez@novartis.com), Value & Access and External Affairs Head, Novartis, Spain  
- [Dr. Yolima Cossio](mailto:Dr.Yolima.Cossio@uji.es), Director of IT and Decision Support, Vall d'Hebron University Hospital, Spain  
- [Dr. Faust Feu](mailto:Dr.Faust.Feu@hct.org), Director of Quality of Care and Patient Safety, Hospital Clínic de Barcelona, Spain  
- [Dr. Cesar Velasco](mailto:Dr.Cesar.Velasco@novartis.com), Director of Innovation, Novartis Pharma, Spain | [Jose-Matias Perez](mailto:Jose-Matias.Perez@novartis.com) |}

| Time          | Room 3 | **Benefits, tools and methods for real time patient care operations**         | This session is sponsored by GE Healthcare.  
- [John Deverill](mailto:John.Deverill@ge.com), General Manager - Partnerships and Solutions, EMEA, GE Healthcare, United Kingdom | |
| Time          | Room 8 | **How to get most out of collaborative hospital networking – A European perspective** | This session is hosted by ECHO - EUHA. As a hospital manager or leader in healthcare you’re expected to manage the today and tomorrow, but how can you effectuate change beyond the reach of your organization? There are many challenges like data standardization, care for rare diseases and affordable innovation in medicines and one can only get so far alone. Additionally, hospitals face many common challenges like caring for increasingly complex patients, staff shortages and implementing innovation. Creating networks for collaboration can help hospitals address these challenges in new ways and together they can leverage their voice to advocate for strategic interests.  
The interactive session will be led by two new international hospital organizations, the European University Hospital Alliance and the European Children’s Hospitals Organisation, and will enable you to discuss the following with their leaders and those of other European health stakeholders:  
1) What new opportunities does cross-border networking across multiple settings, including large hospital systems, specialized hospitals create? | |
2) How do patients see the value for patients of cross-border collaboration in healthcare, for example in rare diseases?

3) How can collaboration in healthcare strengthen Europe’s health assets, innovation and resilience post COVID-19?

4) How can you potentiate advocacy and lobbying with policy makers at the local or international level through multi-centre collaboration?

5) What lessons have been learned in turning shared challenges into concrete actions and how to avoid common pitfalls?

Chaired by: **Dr. Ruben Diaz**, Secretary General, European Children’s Hospitals Organisation (ECHO)

- **Dr. Albert Salazar**, Gerente Hospital Universitari Vall d'Hebron, Vall d'Hebron Barcelona Hospital Campus, Spain
- **Dr. Manel del Castillo**, CEO, Sant Joan de Déu Hospital, Spain
- **Dr. Jose Valverde**, Policy Officer, Unit B.3, DG-SANTE, European Commission
- **Prof. Fernando Seoane**, Senior Lecturer; Research Leader; R&D Coordinator, Karolinska Institutet; Karolinska University Hospital, Sweden

**HEALTHIO: Inclusive innovation that delivers**

This session is hosted by Healthio.

The health sector has undergone major changes in all spheres, which have accelerated over the course of the century. Some have been “disruptive” (involving a fundamental change in organizational and operational models), and many others have been incremental and progressive. Supporting creativity and innovation in health services is an integral part of the internal mission of health systems in general.

This has required progressively revitalizing the health model and giving it social legitimacy, through user-oriented policies and programmes, promoting the establishment of care networks, transferring decision-making rights where the organization’s knowledge bases are "stronger", fostering cooperation and teamwork as a cultural value, identifying public service around universal and timeless values, stimulating tolerance and intellectual honesty, enriching trust and clarity in internal relationships, fostering continuous learning, strengthening patterns of internal coherence and loyalty in institutional transactions, stimulating individual and collective responsibility and giving ethical credentials to the health service.

**HEALTHIO (WHERE PATIENTS, PROFESSIONALS AND COMPANIES MEET)**

highlights the importance of technology and its adaptation to solve social challenges. This session will showcase 3D projects, telemedicine and taking special relevance to COVID-19 success stories in different international environments.

- Validation of Digital Therapeutics in Hospitals and Primary Care - **Dr. Jordi Serrano Pons**, Co-Founder, HEALTHIO, Spain, Chair of the session
- 3D printing opportunities for the production of Dysphagia foods
  - **Dr. Bartomeu Ayala Márquez**, Doctor, head of training and development and head of the 3D printing unit, Althaia Xarxa Assistencial Universitària de Manresa, Spain
  - **Dr. Xavier Gironès**, Director of Research and Innovation University Foundation of Bages, Spain
- The impact of the 3D technology in the hospital ecosystem - **Dr. Ferran Fillat-Gomà**, Orthopaedic Surgeon MD, MSc PhD, Hospital Universitari Parc Taulí, Spain
- Innovations around the pediatric ecosystem - **Arnau Valls Esteve**, R&D Engineer, SJD Barcelona Children’s Hospital, Spain
- Asynchronous communication with primary care health services, **Dr. Josep Vidal Alaball**, Head of the Central Catalonia Research Unit, Institut Català de la Salut / CAMFIC,
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<td><strong>IHF General Assembly</strong></td>
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<td>Annual meeting of the IHF General Assembly, the formal decision-making body of the International Hospital Federation. All IHF Members are invited to participate.</td>
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<tr>
<td>18:00 – 19:00</td>
<td><strong>Welcome Reception</strong></td>
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<td>The Welcome Reception will provide an excellent opportunity to network and meet fellow delegates while touring the exhibition. All participants are invited to join. Tickets are included in the registration fee.</td>
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<td><em>Dress Code: Business Casual</em></td>
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### Tuesday, 9th November

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<tr>
<th>Time (CET / GMT+1) &amp; Venue</th>
<th>Activity</th>
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<tbody>
<tr>
<td><strong>09:00 – 09:45</strong> Auditorium</td>
<td><strong>Opening Ceremony</strong>&lt;br&gt;M. Hble. Sr. Pere Aragonès, President of Generalitat de Catalunya (Catalan Government), Hble. Dr. Josep M Argimon, Catalan Health Minister, and EXcma. Sra. Ada Colau, Barcelona Mayor will officially open the 44th World Hospital Congress. Dr. Risto Miettunen, President of the International Hospital Federation, Sr. Enric Mangas, President of La Unió Catalana d’Hospitals (Catalan Hospital, Health and Social Services Association), and Dr. Jaume Duran, International Affairs Commissioner at the GC of La Unió Catalana d’Hospitals will welcome all participants. This will be followed by a Scientific Opening led by Víctor Grifols-Deu, co-CEO of GRIFOLS and Dr. Antoni Trilla, Chair of the 44th WHC Scientific Committee. Dr. Hans Kluge, Regional Director for Europe of the World Health Organization, will provide a keynote address.</td>
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<tr>
<td><strong>09:45 – 10:45</strong> Auditorium</td>
<td><strong>Opening Plenary Session on Women Leadership: Agility, responsiveness and resilience in combating COVID-19</strong>&lt;br&gt;It has long been said that crises define leaders, and the COVID-19 pandemic has certainly demonstrated this. The coronavirus crisis has demanded leaders embrace traits not always associated with high offices and boardrooms: empathy, listening, creative collaboration, and authentic engagement with employees. These qualities are overwhelmingly associated with women. In observing the international handling of the COVID-19 crisis, it appears that healthcare systems with women leaders have done a remarkable job in their handling of the pandemic. In this Opening Session, participants will hear from senior female executives about the critical role of women’s leadership in combatting COVID-19, and will have the opportunity to take away new ideas to adopt as part of their own leadership practices. Chaired by: Deborah J. Bowen, FACHE, CAE, President and CEO, American College of Healthcare Executives; President Designate, International Hospital Federation&lt;br&gt;  • Dr. Sara Berbel Sánchez, Chief Executive, Barcelona City Council, Spain&lt;br&gt;  • Lucy Nugent, Chief Executive Officer, Tallaght University Hospital, Ireland</td>
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<tr>
<td><strong>10:45 – 11:00</strong> Catering Area and Exhibition Area</td>
<td><strong>Coffee break, exhibition and poster display</strong>&lt;br&gt;During the break, visit the exhibition area or the posters.</td>
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<tr>
<td><strong>11:00 – 12:30</strong> Auditorium</td>
<td><strong>Plenary Session 1: Getting ready for the next global pandemic: European and North American perspectives</strong>&lt;br&gt;COVID-19 won’t be the last pandemic in our lifetime. Public health leaders from Europe and US will share their views on ways to fight the next pandemic. Hospital CEOs from both regions will discuss how they are leading their organizations through COVID-19 and the lessons learned to get ready for the next global pandemic. This will include the changes needed in their organizations and local health systems to effectively respond to the next public health crisis. Chaired by: Dr. Risto Miettunen, President, International Hospital Federation&lt;br&gt;  • Prof. Natasha Azzopardi, Director, World Health Organization&lt;br&gt;  • Prof. Josep M Campistol, Chief Executive Officer- Clinic Hospital, Hospital Clinic Barcelona, Spain&lt;br&gt;  • Dr. Bechara Choucair, WH Vaccinations Coordinator, White House/USG, United States&lt;br&gt;  • Wright Lassiter III, President and CEO, Henry Ford Health System, United States&lt;br&gt;  • Bertrand Levrat, CEO, Geneva University Hospital (HUG), Switzerland</td>
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<td><strong>12:30 – 13:30</strong> Catering Area and Exhibition Area</td>
<td><strong>Lunch and Networking</strong></td>
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Plenary Session 2: Accelerating research, development and distribution of the COVID-19 vaccine: Lessons learned from key stakeholders

The COVID-19 vaccine response demonstrated that fast-tracked research development is possible to accelerate the implementation of solutions to benefit society, while assuring safety and good outcomes.

What can we learn and harness from this experience, including accelerating translational research, transforming the way vaccines are developed and distributed and utilizing new partnerships and collaborations from industry, governments and global public health actors?

This session will also explore the drivers and constrains for such an agile and good response to the crisis, as well as the key learnings that can be gleaned from the different stakeholders for the near future.

Chaired by: Prof. Natasha Azzopardi, Director, World Health Organization

- Dr. Carmen Cabezas, Secretary of Public Health, Department of Health of the Generalitat de Catalunya, Spain
- Dr. César Hernández, Head of Department of Medicines for Human Use, Spanish Agency for Medicines and Medical Devices, Spain
- Siff Malue Nielsen, Technical Officer Vaccine Acceptance and Demand, WHO EURO
- Dr. John Nkengasong, Director, Africa Centres for Disease Control and Prevention, Ethiopia
- Greg Perry, Assistant Director General, International Federation of Pharmaceutical Manufacturers & Associations

Parallel Sessions

15:10 – 16:40 Room 6

Hospital financing in times of COVID-19

This session is hosted by the World Health Organization.

The IHF and WHO have launched an international program of work called “Hospital financing in COVID times”. It will document the economic problems experienced by hospitals because of the COVID-19 crisis, the policy measures taken to relieve the sector, the contribution of hospital federations to the policy response and the possible broader consequences of the COVID-19 crisis for the hospital industry.

The main objective of this session will be to organize a triangular conversation between health financing experts, hospital federations and hospital managers. WHO will present early findings from the joint IHF-WHO program of work. Data presented will be extracted from international surveys implemented by WHO, IHF and national hospital associations. The European Observatory on Health Systems and Policies will present data from their COVID-19 Health System Response Monitor, with a focus on hospital financing issues. Results of these studies will be commented by two discussants providing an original view on how the hospital sector has been experiencing the crisis from an economic perspective.

The rest of the session will be dedicated to the interaction with the audience.

Chaired by: Triin Habicht, Senior Health Economist, World Health Organization

- Al-Karim Hai, Vice President, Finance and Chief Financial Officer, The Aga Khan University, Pakistan
- Bruno Meessen, Health Financing expert, World Health Organization
- Dr. Wilm Quentin, Senior Research Fellow, Department of Health Care Management, Technische Universität Berlin, Germany
- Saskia Maria Wegner, Policy Adviser on European and International Affairs, German Hospital Federation

15:10 – 16:40 Room 5

North American leadership insights: Leading during times of crisis

This session is co-hosted by the American Hospital Association and the American College of Healthcare Executives.

What does it mean to truly lead during a large-scale crisis? How can leaders do the difficult work of pushing organizations and staff forward while at the same time providing
support and space for individuals to take care of themselves, their teams and their loved ones? This session will focus on the core elements of strong leadership when a crisis hits and how leaders can balance the critical elements of agility and perseverance with the need to model self-care in order to support the long-term resilience and health of systems, providers and the patients they serve.

Chaired by: Rick Pollack, CEO, American Hospital Association, United States
- Dr. Melinda Estes, President and CEO, Saint Luke’s Health System, United States
- Michael Fosina, FACHE, President, New York-Presbyterian Lawrence Hospital, United States
- Carrie Owen Plietz, FACHE, Regional President, Northern California, Kaiser Foundation Health Plan, Inc. & Hospitals, United States

15:10 – 16:40 Room 8

In digital transformation, GS1 standards in action follow products to patients

This session is hosted by GS1.

Healthcare entered a new era with digital transformation introducing changes and opportunities, the pandemic pushing the change. In many countries medical products are barcoded by the manufacturer, but not yet scanned in the hospital. Barcode scanning however supports full (global) product traceability, reduces manual registration procedures, reduces the risk of errors, facilitates recall-procedures, and facilitates final automated check at the point-of-care. The then available data support rationalizing assortments, real-time locating assets, saving costs, and a possible reduction in variance of patient related outcomes. GS1 standards in action follow products to patients.

Presenters from Denmark and Spain will share how the use of GS1 standards supports their work in a hospital and health system.

Some learning objectives are how digital innovations in the healthcare supply chain support cost savings, enhance patient safety and full traceability of medical products; how these rationalize procurement and asset-management, also linking to experiences during the COVID-pandemic.

Chaired by: Dr. Els van der Wilden-van Lier, Director Healthcare Providers, GS1 AISBL
- Maria Ramirez, Logistics Manager, Andalusian Healthcare Service, Spain
- Henrik Stilling, IT Architect, Central Denmark Region, Denmark
- Albert Tarrats, Institut Català de la Salut

15:10 – 16:40 VA Room

Impact of COVID-19 on healthcare travel and its future prospects

This session is hosted by Private Hospitals Association, Jordan.

Learn about the expansion of healthcare travel based on Amman Declaration HT8 which was announced during the International Healthcare Travel Forum in 2017, which includes eight healthcare travel pillars: medical tourism, dental tourism, wellness tourism, spas tourism, culinary tourism, sports tourism, assisted residential tourism and accessible tourism.

Learn about healthcare travel in its broaden term and how the sector was badly affected by COVID-19 pandemic. International experts will share their experience and their pioneering actions taken to overcome the challenges and limitations of healthcare travel, the opportunities, ways of recovery, and how to adapt to the new era with the help of digital health and innovative solutions.

Chaired by: Dr. Fawzi Al-Hammouri, Chairman, Private Hospital Association, Jordan
- Dr. Antoni Arias-Enrich, Director, International Services, SJD Barcelona Children’s Hospital, Spain
- João Bocas, Chief Executive Officer, Digital Salutem, United Kingdom
- Dr. Prem Jagyasi, CEO, Dr Prem and Associates, India
- Irving Stackpole, President, Stackpole & Associates, US

15:10 – 16:40 Room 4

The transformational evolution of Korean hospitals in the era of COVID-19 and after

This session is hosted by the Korean Hospital Association.

Throughout the world, responding to the COVID-19 pandemic has been the greatest healthcare challenge in generations. Healthcare providers have risen rapidly to address challenges that were almost unimaginable before. We are witnessing the biggest shift in
healthcare which has been the most resistant to change. Even when the crisis is over, the industry will not go back to how it was. Korea is well known for having one of the best IT infrastructures, but not many are aware that the speed of population aging in Korea is the fastest in the globe. Many experts say it will soon become one of the oldest countries in the world. Korean hospitals have attempted many transformations even before the COVID-19 crisis in line with this aging population and the development of IT technology. The crisis has brought these efforts to the surface and accelerated the speed. In this session, the presenters will share their experiences and insights on the transformational evolution of Korean hospitals in the era of COVID-19 and after.

Chaired by: Dr. Hong-Gwan Seo, President, Korean National Cancer Center, South Korea
- Dr. Wang-Jun Lee, Chairman and CEO, Myongji Hospital, Myongji Medical Foundation, South Korea
- Dr. Sang-Gyu Lee, Professor, Yonsei University College of Medicine, South Korea
- Dr. Koon-Ho Rha, Director, Naver Healthcare Lab, South Korea

15:10 – 16:40 Room 3

### Supporting the implementation of patient-centred care in clinical settings: How to advance on patient humanization and self-management

This session is hosted by Avedis Donabedian Research Institute (FAD).

This session will introduce participants to the essential elements, opportunities and challenges of implementing patient-centred care and advancing humanization in clinical settings.

It will focus on how to bring the patient's voice into healthcare by prioritizing topics and outcomes that are valued by them, involving them in the process of care in partnership with the healthcare professionals.

The session will address how to harness the potential of humanization of care and self-management interventions to support person-centred care, quality improvement and research. It will feature real-world cases and practical methods for building patient-centred care in clinical settings.

Hear brief presentations on two case studies: a research project exploring the effectiveness of self-management interventions (COMPAR-EU) and a multicentre quality improvement project to improve humanization and patient experience in paediatric care (MIREMOS). Also, take part in small group exercises to discuss challenges with facilitators and develop collective solutions on building patient-centred care.

This session is designed for those involved or interested in supporting and evaluating the implementation of patient-centred strategies in clinical settings (policymakers, managers, healthcare professionals and researchers).

Chaired by: Dr. Carola Orrego, Deputy Director, Avedis Donabedian Research Institute, Spain
- Marta Ballester, Project Manager, Avedis Donabedian Research Institute, Spain
- Dr. Oliver Groene, Chief Executive Officer at International Network of Health Promoting Hospitals and Health Services
- Dr. Rosa Suñol, President of the Board of Trustees, Avedis Donabedian Research Institute, Spain

16:40 – 17:00 Room 3

### Accreditation model for excellence in perioperative safety

This session is hosted by Avedis Donabedian Research Institute (FAD).

Presentation of a model of accreditation of excellence in the safety of the surgical patient through an external evaluation procedure, carried out with the consensus of the main related scientific societies. The model includes the selection of good practices and criteria for evaluating perioperative safety, the development of the measurement methodology and the results of the piloting done. All this, taking into account the recommendations of the reference organizations at the national and international level.

Speaker: Dr. Daniel Arnal, Co-founder and Vice-president, SENSAR, Spain

16:40 – 17:00 Catering Area and Exhibition Area

Coffee break, exhibition and poster display

During the break, visit the exhibition area or the posters.
### Parallel Sessions

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<th>Time</th>
<th>Room</th>
<th>Topic</th>
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<tr>
<td>17:00 – 18:00</td>
<td>Room 8</td>
<td><strong>What does it take to be a ‘top performer’?: Lessons learned from over a decade of study</strong>&lt;br&gt;How do you know you are excelling in quality and safety, and that you exhibit the characteristics of a successful organization? This session will describe a methodology for assessing performance, provide findings from over a decade of study of top performers and share the experiences from a CEO that has been successful at driving top performance at three Academic Medical Centers in the United States.</td>
<td><strong>David Entwistle</strong>, President &amp; CEO, Stanford HealthCare, United States  <strong>Dr. David Levine</strong>, Group Senior Vice President, Advanced Analytics &amp; Data Science, Vizient, United States</td>
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<tr>
<td>17:00 – 18:30</td>
<td>Room 3</td>
<td><strong>Transforming healthcare organizations to anticipate for future challenges, in the context of a new scenario of needs and opportunities. Project + FUTURE</strong>&lt;br&gt;This session is hosted by La Unió Catalana d’Hospitals. It is a key moment to promote transformational changes in health and social care organizations to anticipate the needs of people and generate a greater impact on health improvement in society, to design the future we want. This round table, led by health and social care organizations leaders from Catalonia, presents and discusses which are the priorities in this transformational process, and explains a checklist to build back better, assuring organizational changes to promote telemedicine, health and care integration, to develop professional roles to improve the care process and patients experience and the humanization of care. The proposals are the result of a participatory process with 45 entities in Catalonia, that have worked collaboratively to identify key elements to transform healthcare and are highly operative proposals to undergo action. There are also practical proposals that can be escalated to other countries and sectors.</td>
<td><strong>Dr. Oriol Fuentes</strong>, CEO, QIDA, Spain  <strong>Cristina Adroher</strong>, COO Pediatric Cancer Center Barcelona, Hospital Sant Joan de Déu, Spain  <strong>Xavier Lleixa</strong>, Co-Founder and CTO, DIGIMEVO, Spain  <strong>Dr. Anna Ribera</strong>, Medical director, Serveis de Salut Integrats Baix Empordà, Spain  <strong>Dr. Ignasi Riera</strong>, Director of Healthcare Operations, Parc Sanitari Sant Joan de Déu, Spain</td>
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<tr>
<td>17:00 – 18:30</td>
<td>Room 6</td>
<td><strong>Insights from private health providers during COVID-19: Harnessing the responsiveness, resiliency and agility of the private health sector to combat a worldwide pandemic</strong>&lt;br&gt;This session is hosted by the International Finance Corporation – World Bank Group. This session will discuss the lessons learned from Private Hospitals during the pandemic. In some countries there was comprehensive revenue loss and increased focus on cost management and efficiency. Whereas in others COVID-19 revenue replaced some losses from other services but required additional operational and CAPEX to prepare infrastructure, staff and supply consumables. The lessons from this period will also support a look forward in terms of what’s next for the private health sector, the importance of cost and performance management, how to embrace new contracting payment tariff models, adopting digital health, managing staff during a crisis, evolving or implementing new business models and, the ingredients necessary for efficient and effective public-private collaboration.</td>
<td><strong>Charles Dalton</strong>, Senior Health Specialist, International Finance Corporation (World Bank Group)  <strong>Dr. Mohamed Hablas</strong>, Regional Director, Saudi German Hospitals in Egypt and North Africa  <strong>Leona Karnali</strong>, Chief Executive Officer, Primaya Hospital, Indonesia</td>
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COVID-19 and beyond: New Visions in Europe and cross-border collaborations

This session is hosted by Luxemburgish Hospital Federation.

In March 2020, most of Europe was shut down to contain the Covid-19 pandemic, and all countries were soon to be under unprecedented pressure. This emergency situation has quickly given way to transformations within healthcare, enabling hospitals and health systems to cope with the crisis. In parallel, while national borders closed overnight, severely impacting most travels from one country to another, cross-border collaborations emerged as a solution to face shortages and demonstrated the interdependencies between regions.

In this session, health leaders from various countries in Europe will discuss if cross-border collaborations emerged or increased during the pandemic and which ones will be sustained or enhanced post-COVID.

Chaired by: Caíriona Mullan, External Expert, Association of European Border Regions

- Antoine Grassin, Ambassador and Diplomatic adviser, Prefecture of the Grand Est Region, France
- Martín Guillermo Ramírez, Secretary General, Association of European Border Regions (AEBR)
- Mélissa Hanus, Member of Parliament, Chamber of Representatives of Belgium
- Dr. Cem Özbebek, Head of Cardiology Department, SHG Heart Center Saar, Germany
- Dr. Philippe Turk, Chairman, Luxembourg Hospital Federation, Luxembourg

Healthcare reforms in the Eastern Mediterranean Region: First glance at the main challenges and lessons learnt

This session is hosted by the WHO EMRO.

In October 2012, the WHO Eastern Mediterranean Regional Committee endorsed a resolution on health systems strengthening in the region’s countries. Among other priorities, Member States were called to move towards universal health coverage, harness telemedicine, and promote health management, leadership and governance. Nearly a decade has passed, full of hard work, surprises and challenges for the hospital sector. In this session, we will hear from various stakeholders, leading the hospital reforms in their countries. The session will set the stage for a more in-depth discussion that will take place at the 2022 World Hospital Congress in Dubai.

Chaired by: Dr. Awad Mataria, Director, UHC/Health Systems, WHO EMRO

- Prof. Alawi Alsheikh-Ali, Deputy Director General, Dubai Health Authority, UAE
- Dr. Abdelouahab Belmadani, Director of Planning and Financial Resources, Ministry of Health and Social Protection, Morocco
- Dr. Ahmed ElSobky, Minister’s Assistant for Monitoring and Follow Up, Ministry of Health and Population, Egypt
- Dr. Tahir Hussain, Chief Strategy & Transformation Officer R1, Ministry of Health, Saudi Arabia
- Dr. Najibullah Safi, Health system program manager, World Health Organization, Afghanistan

Local perspectives, global exchange: The 2021 IHF Young Executive Leaders

The Young Executive Leader (YEL) program of the International Hospital Federation (IHF) is an opportunity for young healthcare talents around the globe to meet with peers, discuss current trends and challenges, and offer perspectives from their experiences. Starting in April 2021, the third edition of the YEL program followed 31 participants from 18 countries, who became the voice of their hospitals, region or country represented during impactful international conversations and shared with the broader healthcare community.
During this session, the audience will hear the conclusions of the four YEL work groups, who adopted a global and transdisciplinary lens to work on the following issues:

1. How are different healthcare systems across the globe utilizing digital technologies to drive systemic change;
2. Towards an Integrated Concept of Health and Care Services Model: Value Driven Transformations;
3. How to cope with modern transformations and keep a humanistic care;
4. The employer-employee role in relation to support measures for frontline HCW wellbeing during the COVID-19 pandemic.

Chaired by: Dr. Rulon Stacey, Director, Programs in Health Administration, University of Colorado Denver, United States
- Emil Ackerman, Knowledge Architect, Tampere University Hospital, Finland
- Sara AlShaya, Head of operational planning section, Emirates Health Service, United Arab Emirates
- John Kueven, Senior Vice President and Hospital President, Wellstar Health System, United States
- Fatma Said Jahwari, Head of Patient Safety & Risk Management, The Royal Hospital, Oman
- Dawn Singerman, Director of Financial Resources (CFO), McGill University Health Center, Canada

20:00 – 22:00
Museu Nacional d’Art de Catalunya

After Work Social Dinner
The dinner offers the perfect opportunity to cap off the day, further connect with peers and share what you’ve learned from the sessions. It will also provide a taste of the vibrant local culture. You can purchase tickets for € 90.

Dress Code: Business Casual
**Wednesday, 10th November**

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<th>Time (CET / GMT+1) &amp; Venue</th>
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<tr>
<td>07:30 – 08:45 Room 5</td>
<td>IHF Association Leaders Circle breakfast (by invitation)</td>
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<tr>
<td>09:00 – 10:30 Auditorium</td>
<td>Plenary Session 3: Nursing leadership in transforming healthcare during a worldwide pandemic: examples from the field</td>
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<tr>
<td>10:30 – 11:00 Catering Area and Exhibition Area</td>
<td>Coffee break, exhibition and poster display</td>
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<td>10:40 – 11:00 IHF Booth (Booth D)</td>
<td>Let’s talk about Hospital communication: Book launch of &quot;Management of Hospital Communication&quot;</td>
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<tr>
<td>11:00 – 12:30 Auditorium</td>
<td>New perspectives in the management of age-related diseases</td>
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Nurses are recognized internationally for their contributions in fighting COVID-19. The pandemic challenged them unlike ever before and they have swiftly adapted to continuously changing situations and guidelines, responded to the needs of patients and their families, delivered care reliably and supported fellow nurses and healthcare workers while maintaining resilient.

In this session, the importance of global nursing leadership initiatives such as Nursing Now and the Nightingale Challenge will be presented by Lord Nigel Crisp. Nurse leaders in various roles from around the globe will share successes and innovations, as well as challenges they have faced during the pandemic. In addition, leading practices used to support ongoing resilience and mental health needs and strategies they have employed personally and with their teams will be highlighted.

Chaired by: **Dr. Robyn Begley**, CEO, American Organization for Nursing Leadership; Senior Vice President and Chief Nursing Officer, American Hospital Association, US

- **Romnick Aguilar**, Acting Chief Nurse and Infection Prevention and Control Officer, San Pedro Jose L Amante Emergency Hospital, Philippines
- **Lord Nigel Crisp**, Former CEO at NHS in England and Former Permanent Secretary of the United Kingdom Department of Health
- **Zipporah Iregi**, Nursing Officer Intern, Kitui County Referral Hospital, Kenya
- **Dr. Maria Eulàlia Juvé Udina**, Board Member, International Council of Nurses | Nurse Executive, Catalan Institute of Health | Nurse Researcher, IDIBELL Universitat de Barcelona, Spain
- **Prof. Adelaida Zabalegui**, Vice Director of Nursing, Hospital Clinic of Barcelona, Spain

- **Jean Georges**, Executive Director, Alzheimer Europe
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<th>Time</th>
<th>Session</th>
<th>Speaker/Details</th>
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| 11:00 – 12:30 | **How COVID-19 impacted UHC: perspectives from global NGOs**                                                                                 | In a few months, COVID-19 has spread worldwide laying bare inadequate health systems, gaps in social protection and structural inequalities. The pandemic brought in light the greater urgency to the quest for universal health coverage (UHC), the critical tool for achieving health for all. The session will explore how the pandemic impacted progress towards UHC and the recommendations of the representatives of some of the major international NGOs.  
Chairled by: Dr. Muna Tahlik, Consultant ObGyn & CEO, Latifa Women and Children Hospital, Dubai Health Authority, United Arab Emirates  
- Dr. Cary Adams, CEO, Union for International Cancer Control  
- Prof. Bettina Borisch, Professor/ Head of research group, University of Geneva/World Federation of Public Health Associations  
- Howard Catton, CEO, International Council of Nurses  
- Dr. Carsten Engel, CEO, International Society for Quality in Health Care  
- Dr. Oliver Gröne, CEO, International Network of Health Promoting Hospitals and Health Services  
- Dr. Otmar Kloiber, Secretary General, World Medical Association  
- Dr. Niamh Lennox-Chhugani, Chief Executive, International Foundation for Integrated Care (IFIC)  
- Kawaldip Sehmi, Chief Executive Officer, International Alliance of Patients’ Organizations, United Kingdom |
| 11:00 – 12:30 | **Value driven transformation: World landscape, European and Spanish examples**                                                              | This session is organized by Medtronic. Health care systems around the world have increasingly adopted a value-based health care (VBHC) outline. In this session, by the hand of 3 high level speakers, it will make known from an international perspective and through practical examples, the available solutions that intervene to obtain key results that really matter to patients achieving an improvement in health care.  
Chairled by: Dr. Francisco de Paula Rodríguez, Associate Director, ESADE’s Healthcare Management Program in Madrid; Director Health System Strategy, Medtronic Iberia (Spain and Portugal)  
Speakers:  
- Prof. Rifat Atun, Professor of Global Health Systems, Harvard University, United States  
- Dr. Peter Karl Jacobsen, Head of the Heart Tech Team and Arrhythmia Service, Rigshospitalet, Denmark  
- Dr. Marta Sitges, Director of the Cardiovascular Institute, Hospital Clinic of Barcelona, Spain |
| 11:00 – 12:00  | **An inside look at the pharmaceutical industry’s response to the COVID-19 pandemic and how it is preparing to face the antimicrobial resistance challenge and future pandemics** | This session is sponsored by the International Federation of Pharmaceutical Manufacturers & Associations. The COVID-19 crisis created a unique environment within the biopharmaceutical sector which allow for fast-tracked research development, accelerated implementation, unheard of collaborations amongst rivals and cooperation with regulators and global public health actors never seen before. |
Hear the inside story and gain insight into how the industry is confronting this evolving pandemic without losing sight of other looming health security threats like AMR.

Chaired by: Dr. Anna García-Altés, Director of the Catalan Health System Observatory, Agency for Health Quality and Assessment of Catalonia, Spain
- Thomas Cueni, Director-General, International Federation of Pharmaceutical Manufacturers & Associations

11:00 – 12:30
Room 3

Clinical and translational research as a way to promote sustainable and rapid access to innovation

This session is hosted by the Vall d’Hebron Institute of Oncology (VHIO).

The Roundtable discussion will focus on both the opportunities and challenges of clinical and translational research as drivers to promote sustainable and rapid access to innovation. Now more than ever before, especially as we all grapple with the pandemic, it is widely and so clearly documented just how important it is to translate major, fundamental advances in biomedicine into better preventive, diagnostic and therapeutic strategies against several diseases. Over the past decade, health research institutions globally have continued to join forces with academic hospitals and universities, non-profit foundations, in partnership with many other stakeholders, to lead this translational research paradigm by bridging basic research and access to innovation, and at the same time fostering sustainability of our health systems. Illustrative of how this marriage can expedite advances in healthcare and access to cutting-edge technologies. Dr. Antoni Plasencia of the Barcelona Institute for Global Health (ISGlobal) will present on progress in the field of global environmental and infectious diseases, Dr. Josep Tabernero from VHIO will highlight just some of the successes celebrated in the field of cancer research, and Dr. Angel Font from “la Caixa” Foundation, will discuss the contribution of a philanthropic organization that supports clinical and translational scientific and health research on diseases.

- Partnerships for clinical and translational research: the global vision - Dr. Antoni Plasencia, Director General, ISGlobal, Spain
- High-value cancer research in a General Hospital with a Comprehensive Cancer Centre: the Vall d’Hebron Institute of Oncology (VHIO) model - Dr. Josep Tabernero, Director, Vall d’Hebron Institute of Oncology (VHIO), Spain
- The philanthropic contribution to the biomedical research: boosting the impact for the society - Angel Font Vidal, Corporate Director of Research and Health, “la Caixa” Foundation, Spain

11:00 – 12:30
Room 8

Health professionals as the turning point of the COVID-19 pandemic

This session is hosted by the Portuguese Association for Hospital Development.

The current COVID-19 pandemic has imposed the need for a rapid adaptation and was an opportunity for health institutions and their human capital to accelerate and improve many areas in the care delivery model, which otherwise would not have evolved so rapidly.

In this context, using the results of a survey to health professionals and by presenting three experiences developed in Portuguese hospitals, which demonstrated resilience, singularity and determination, the aim was to find out which motivations and transformations have emerged and which remained, as a response to the new needs.

This session will highlight the importance of patients’ and health professionals’ safety, as an essential requirement for safe health systems; Analyze good practices and improvement areas, in health services, as a result of the pandemic; Identify new forms of management and organization and new healthcare practices and recognize the adaptation or creation of new functions within the teams.

Chaired by: Prof Carlos Pereira Alves, President, Portuguese Association for Hospital Development (APDH)
- Dr. Rita Coelho, Clinical Pathology Residency, Médio Tejo Hospital Centre (CHMT), Portugal
- Dr. Carlos Cortes, Head of Clinical Pathology, Médio Tejo Hospital Centre (CHMT), Portugal
- Prof. Margarida Eiras, Board Member, Portuguese Association for Hospital Development (APDH), Portugal
### Strategies adopted by the Hospital Authority of Hong Kong in managing the COVID-19 Pandemic

This session is hosted by the Hospital Authority, Hong Kong.

Massive sudden COVID-19 surge is a key challenge faced by the Hospital Authority (HA). HA has adopted the strategic health systems’ integration approach to conserve capacity and resources to maintain emergency and essential clinical services in HA hospitals, whilst at the same time managing the demand surge of the outbreak through service diversion, service re-engineering, and the enhancement of patient support by electronics means. In addition, HA has setup the Community Treatment Facilities (CTF) using repurposed exhibition halls to be redesigned for healthcare settings so as to manage the COVID surge. In addition, The Hospital Authority Head Office Major Incident Control Centre (HOMICC) acts as a systems’ connection hub to expedite the patient allocation process via close collaboration among different stakeholders within HA and external parties. This session will share the HA overall strategy, challenges of using CTF and the importance of a systems’ connection hub during the pandemic.

Chaired by: **Dr. Deacons TK Yeung**, Director, Cluster Services, Hospital Authority, Hong Kong

- **Dr. Frank WK Chan**, Chief Manager (Service Transformation), Hospital Authority, Hong Kong
- **Andy CM Kung**, Senior Manager, Hospital Authority, Hong Kong
- **Dr. Lap Yip Larry Lee**, Chief Manager (Integrated Clinical Services), Hospital Authority, Hong Kong

### Virtual Paper Presentations: The role of the workforce in driving health service transformations

Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations:

**Expanding community impact in the USA through strategic human resource management:**

*The potential of US health systems as anchor institutions*

*Presented by: Prof. Andrew Garman, Professor and Director at Rush Center for Health System Leadership, Rush University, United States and Prof. Tricia Johnson, Professor, Health Systems Management at Rush University, United States*

In the USA, health systems represent almost 18% of the economy, and in many regions are the largest stable employers, with wages higher than national averages. By viewing health systems as ‘anchor institutions,’ payroll represents a significant potential resource to improve community health. This presentation will describe Rush’s experiences in expanding the lens through which it assesses human resource management decisions, to include their potential for positively impacting community health. The presentation focuses in particular on two initiatives. The first involved researching the well-being of current employees, to better understand barriers they were facing to career growth and financial health. The second involved establishing a five-component Career Pathways program, to support employees in successfully pursuing higher-wage roles in high-demand areas: (1) Patient Care Technician career pathway; (2) Medical Assistant Pathway Program; (3) Health IT Pathway; (4) Nursing Pathway; and (5) College readiness program.
Expanding community impact in the UK through strategic human resource management: The potential for the NHS as an anchor institution

Presented by: Dr. Dominique Allwood, Assistant Director of Improvement at The Health Foundation, United Kingdom

The NHS employs more than 1.6 million people in the UK and, with more than 350 career options, represents a critical source of economic opportunity for people in the communities it serves. Research has demonstrated that there are robust relationships between work and health, and for work to have a positive health impact, it must provide stable employment, a living wage, fair working conditions, work-life balance and career progression. This presentation will report on the potential for healthcare to meaningfully impact the health of citizens through its employment practices drawing on the Health Foundation-sponsored report, “Building healthier communities: The role of the NHS as an anchor institution” and case studies from members of the newly formed UK wide ‘Health Anchor Learning Network’. The examples described will highlight how the impacts of COVID-19 have accelerated action in this important area.

The exodus of nurses and its’ impact on future workforce sufficiency

Presented by: Dr. Christine Mahoney, Professor, College of Business at Minnesota State University, Mankato, United States

This presentation addresses an important people issue—retaining nurses and the overall supply of nurses. The presenters will examine the factors that increase the probability that nurses leave nursing, particularly before retirement age. They will examine the difference in causes of turnover for rural and urban nurses. Turnover will have an impact on the future sufficiency of the workforce for any healthcare system. The supply of nurses is integral to both the quantity and quality of healthcare available.

Systematic second opinion before a surgical intervention: New national directive in Germany

Presented by: Dr. Doris Voit, Policy Officer at German Hospital Federation

Obtaining a “second opinion” is widely used in the German healthcare system: interdisciplinary co-operation is common and patients have free choice among specialists. The “Act to Strengthen the Supply in the Statutory Health Insurance” (2015) empowered patients: They became legally entitled to claim an independent second medical opinion before well-defined elective operations. On this basis, the Federal Joint Committee, the highest decision-making body of the joint self-government in Germany’s healthcare system, has developed a new directive. In force since December 2018, it regulates the process of the second opinion for hysterectomies, tonsillectomies, shoulder arthrosopies, knee-TEPs, foot amputation and spinal surgery. This new directive, part of the German quality assurance system (which is mandatory for all healthcare providers), regulates the duties of the involved medical specialists and defines the rights of patients in this context, aiming at empowerment of patients by enhancing active participation in the shared decision-making process.

Empowering Communities in Crisis: How Wsparcie dla Szpitala Connected Hospitals With Donors in Poland

Presented by: Dr. Jakub Jasiczak, CEO at PUEB Knowledge Transfer, Poland and Urszula Szybowicz, COO at Polish Hospital Federation

In March of 2020, Poland found itself in the grip of a global pandemic. With the borders shut, Covid infections rising, and crucial supplies dwindling, members of the public were stepping up to try and help hospitals on the front line. Local support groups popped up here and there, but they were overwhelmed by the task of coordinating their donations. A group of 8 scientists from the Poznań University of Economics and Business, 12 programmers from Clorce Company, and 16 activists gathered around PARK NGO - in substantive partnership with The Polish Hospital Federation - transformed uncoordinated, chaotic help provided to hospitals by residents and companies into an effective and efficient system of social support for the health care. WsparcieDlaSzpitala.pl-powered by the Salesforce platform helped 700 hospitals and nursing homes to declare their needs, donors to declare their help and a network of 360 local coordinators to collect and deliver.
Virtual Lightning Talks: Innovative collaborations, tools, and policies to improve the quality of service and care

Hear about innovative programs, projects, and good practices from various organizations thru these lightning talks. Presentations include:

International cooperation for kidney exchange success between Spain and Italy
*Presented by: Prof. Lluis Guirado, Head of the Nephrology Department at Fundació Puigvert, Spain*

The presenters will report the first transnational kidney exchange procedure carried out in the framework of an international cooperation managed and overseen by the National Transplant Organizations of Italy, Portugal, and Spain. These countries started their KEPs in 2006, 2010, and 2009, respectively. Two authorities and centers developed a common protocol and rules in 2017.

Identifying and prioritizing inefficiency factors in the health system of Iran
*Presented by: Dr. Alireza Olyaeemanesh, Head at Health Equity Research Center's (HERC); Professor at Tehran University of Medical Sciences (TUMS), Iran*

This presentation will tackle a long-standing issue of every health care system; Inefficiency. You shall be introduced to different inefficiency factors of the Iranian healthcare system, how they managed to identify and prioritize them (identification and prioritization criteria), and also how this information can be adapted in healthcare policymaking for future references.

Optimizing value driven transformation: Lessons from evaluating the Bridging Antenatal Care, Indigenous Babies & Smoking Cessation (BAIBS) Project
*Presented by: Dr. Shalomie Shadrach, Senior Epidemiologist at Darling Downs Health, Australia*

The Bridging Antenatal Care, Indigenous babies and Smoking Cessation or BAIBS is a Darling Downs Indigenous Health project that aims to improve the quality of antenatal care for women carrying indigenous babies. BAIBS partners with stakeholders in the region to identify culturally appropriate maternity service needs and co-design health care delivery through evidence-based practices. BAIBS uses motivation incentivised programs to nudge public health intervention, among pregnant women.

This presentation includes practical insights from BAIBS such as challenges, early wins and lessons learnt from implementing an integrated service delivery model in a regional and rural area of Queensland, Australia.

Territorial management of healthcare quality and patient safety in the field of mental health in Lleida and Alt Pirineu Aran
*Presented by: Laura Batalla-Peinado, Director of Quality and Patient Safety. Territorial management ICS Lleida, Alt Pirineu I Aran, I Health Department. Generalitat of Catalunya at Gestió de Serveis Sanitaris, Spain*

Quality and Patient Safety (Q&PS) in healthcare has made significant progress over recent decades. However, work has predominantly been focused on physical health. The Department of Health of the government of Catalonia approved a system for assessing the quality of its hospitals for acute patients based on the European quality model EFQM called Accreditation, which has proven to be an effective tool for the evaluation and improvement of the services provided.

This work aims to adjust this model of excellence in mental health care, integrating actions to improve the Q&PS trough an area of influence of 400,000 people in Catalonia.

Designing and quantifying the effect of a value-based bundled care model for schizophrenia on patient outcomes and health service delivery and utilization
*Presented by: Sarah Kipping, Director, Professional Practice and Health Information at Ontario Shores Centre for Mental Health Sciences, Canada*

Attendees will learn from this presentation how one organization has started its innovative journey to design a quality & value-based integrated care delivery model for Schizophrenia, which to date has proven difficult given the chronicity of the illness across the lifespan. The approach taken to first develop a proof-of-concept model will be shared and discussed, and the approach to quantify and measure against current practice will be
articulated. The overall pursuit of this work is the transformation of clinical practice to standardize and reduce variation in the care that patients receive, and to increase the quality of care received.

New challenges in the evaluation and adoption of health technologies. Prioritization of innovation in the COVID-19 pandemic

*Presented by: Dr. Marta Torres*, Researcher at CIBERESP - AQuAS- Agència d'Avaluació i Qualitat Sanitàries de Catalunya, Spain

The COVID-19 pandemic highlighted the urgent need to invest and adopt innovative solutions. To do it quickly and efficiently, new strategies are required. The presenters will share the first version of a novel tool to prioritize COVID-19-focused emerging/innovative technologies, which may help to support and speed up the process of innovation adoption.

Registry of patients and treatments of hospital medicines in Catalonia: A tool to improve quality and efficiency of hospital drug use

*Presented by: Dr. Marta Roig-Izquierdo*, Medicine Managed Access Coordinator at CatSalut, Spain

The Registry of Patients and Treatments for Ambulatory Drugs Dispensed in Hospitals (RPT-ADDH) has gathered prescribing and clinical data on over 280,000 treatments in more than 700 medical indications since 2012. Data from RPT-ADDH has been used to study drug use and related health outcomes, to define quality indicators based on effectiveness, to manage risk sharing agreement and for budgetary projections, amongst other uses. The presentation will provide a practical overview on the processes of creation and implementation of the registry, of some examples of use in drug management, and prospects for future development.

Risk management in ensuring patient safety and high-quality healthcare services

*Presented by: Dr. Mary Grace Sta. Ana*, Department Manager at Makati Medical Center, Philippines

The Risk Management Program of Makati Medical Center (MMC), guided by the hospital leadership, directs the activities of the organization in understanding, mitigating, and preventing possible errors and adverse events. Activities are implemented to ensure that its commitment of providing the highest quality of healthcare experience to all its patients, staff and visitors remain true.

Achieving high value surgical care by optimizing operating room cost transparency and accountability

*Presented by: Dr. Robert Glasgow*, Professor and Interim Chair, Department of Surgery at University of Utah, United States

Optimizing the value of surgical care requires one to optimize quality and the cost of delivering care. Cost transparency is key to understanding and optimizing the cost effectiveness of surgical care.

Slaintecare Integrated ANP community chest pain clinic: Impact of transforming chest pain assessment from the hospital to the community

*Presented by: Shirley Ingram*, Advanced Nurse Practitioner at Tallaght University Hospital, Ireland

The Integrated Community Chest Pain Clinic (ICCPC) provides an alternate avenue for the GP to refer patients with non-acute chest pain, avoiding the ED and a lengthy cardiology out-patients waiting time. During the COVID-19 pandemic access to hospital cardiovascular services was decreased with evidence of ‘collateral damage’ on patients with cardiovascular disease (ESC, 2020). Funded by Slaintecare this community clinic is a novel initiative led by an advanced nurse practitioner (ANP) and provided timely in the midst of the pandemic. This aims to describe the initial outcomes and impact of this nurse-led clinic.

Patients-reported outcomes: do they have influence in the right choice of venous access?

*Presented by: Susana Alvarez*, Deputy Director of Public Procurement at Madrid Health Service, Regional Ministry of Health, Spain
Use of new technologies as the ultrasound, and the application of protocols based on the scientific evidence in the choice, insertion, care and management of intravenous devices, adapting them to the real and individual needs, increasing the quality perception care and minimizing risks.

Within these discrete clinical practices, the presenter will share the patient-reported outcome measures (PROMS) and the patient-reported experience measures (PREMS) focused on improving the quality of care services and patient autonomy as they improve communication between patients and healthcare professionals increasing patient satisfaction when PROMs are used for clinical purposes.

13:30 – 15:00
Auditorium

Plenary Session 4: Harnessing innovations to build back better: European lessons from the pandemic
This session is organized in collaboration with the European Observatory on Health Systems and Policies.
This session will review some key organizational and technological innovations in the hospital sector during the pandemic with the aim to draw lessons on how to build back better our hospital services, specifically three areas of innovation: Telemedicine/technological solutions, skill mix, and bed management. The session will go beyond the innovations themselves which in many instances were already existing in the health systems; to learn lessons about the adoption, implementation and scaling up of innovations.

Chaired by: Dr. Josep Figueras, Director, European Observatory on Health Systems and Policies
- Prof. Dr. med. Reinhard Busse, Head of the Department of Health Care Management, Berlin University of Technology, Germany
- Dr Nick Fatih, Senior Researcher, Nuffield Department of Primary Care Health Sciences, University of Oxford, UK
- Prof. Marc Noppen, Chief Executive Officer, UZ Brussel, Belgium
- Dr. Dimitra Panteli, Programme Manager, Lead Health System Innovation, European Observatory on Health Systems and Policies
- Dr. Lisa Maria Voipio Pulkki, Director General of Strategic Affairs and Chief Medical Officer, Ministry of Social Affairs and Health, Finland

Parallel Sessions

15:10 – 16:40
Room 6
The visions and the role of hospital managers in a post-COVID-19 world
This session is hosted by the European Association of Hospital Managers.
The COVID-19 crisis has highlighted the lack of consistency in Europe and in the World concerning the management of health crises. We have seen our weaknesses, but overall each country has tried to manage the crisis in its own way, even if some coordination efforts have been made. This session will discuss the lessons learnt from and propose new paths based on shared visions. Hospital management should be adapted accordingly.

Chaired by: Lucy Nugent, Chief Executive Officer, Tallaght University Hospital, Ireland
- Philippe Blua, Chief Executive Officer, Hôpitaux Champagne Sud, France
- Daniel Greca, Population Health Management Director, Hospital Sírio-Libanês, Brazil
- Dr. Neale Fong, Chief Executive Officer, Bethesda Health Care, Australia
- Dr. Carlos Mur, Medical Director/Associate Professor/ Member, CAT Barcelona Clinics /Universidad Europea/SEDISA Board, Spain
- Inger-Kari Nerheim, Past President, Sub-Committee for Mental Health, European Association of Hospital Managers

15:10 – 16:40
Room 5
Violence around and in the healthcare setting: How to approach this reality?
This session is hosted by the International Committee of the Red Cross.
The session will provide a general approach to the issue of violence against and surrounding health care facilities. With the experience of the ICRC and the Health Care in Danger Initiative, there will be a presentation on the reality of violence worldwide, the
different expressions of violence and how it affects health services, including how the COVID-19 pandemic brought new challenges.

South African representatives will talk about their own challenges and plans to address this reality and provide an angle of how, as health governmental authorities, they see their role in responding to this issue. The American Hospital Association will share its new efforts to develop a comprehensive framework to address violence in the health care setting, mobilizing leadership and bringing the issue of safety to the table. The International Association for Healthcare Security and Safety will present technical aspects of looking into security measures, understanding that stand-alone measures might not be always as effective as bringing in a risk-informed and contextually designed intervention.

The session will also demonstrate the importance of different stakeholders in the prevention and mitigation of the impact of violence, as well as the existing resources to start working on the topic.

Chaired by: Ana Elisa Barbar, Adviser on issues of violence against healthcare, International Committee of the Red Cross

- Dr. Robyn Begley, CEO, American Organization for Nursing Leadership; Senior Vice President and Chief Nursing Officer, American Hospital Association, US
- Dr. Shaheem de Vries, Medical Director, METRO Emergency Medical Services, Western Cape Government Health, South Africa
- Paul Sarnese, Assistant Vice President for Safety, Security and Emergency Preparedness, Virtua Health Inc, US

15:10 – 16:40
VA Room

Leadership for Sustainability: How healthcare leaders can meet the challenge of climate change

This session is hosted by the IHF Leadership for Sustainability Special Interest Group.

Climate change is at risk of becoming the biggest public health threat of our generation. As its impacts upon the environment and society become ever clearer, the healthcare sector needs to urgently recognize the opportunity it has to lead the way in tackling this global crisis, and lead by example through reducing its own carbon footprint. Responding to the sustainability agenda is a long-term challenge for the healthcare sector and will require multi-year commitments to meet national and global climate change goals.

This special session will bring together healthcare executives leading this charge from across the world, to share their stories and strategies. Session participants will learn: Practical guidance on developing organizational advocacy for sustainability; Experiences of leaders accelerating the sustainability agenda in their organizations, providing pragmatic advice on making the business case for ‘green leadership’; Innovative examples of leadership programs and projects focused on responding to the sustainability and climate change agenda.

- Dr. Elizabeth Baca, Specialist Leader, Deloitte, United States
- Dr. Jaume Duran, CEO, Fundació Sanitaria of Mollet; Board Secretary, Catalan Hospital, Health and Social Services Association, Spain
- Carlo Giardinetti, Sustainability Lead Consulting, Deloitte Consulting, Switzerland
- Walt Vernon, Chief Executive Officer, Mazzetti, United States
- Dr. Nick Watts, Chief Sustainability Officer, NHS England & NHS Improvement, United Kingdom

15:10 – 16:40
Room 3


This session is hosted by the Department of Health – Abu Dhabi.

The Department of Health – Abu Dhabi (DoH), the healthcare regulatory authority for the emirate of Abu Dhabi in the UAE, ensures the highest standards of healthcare based of international best practices, for more than 3 million people. There are currently more than 3000 healthcare facilities licensed under DoH distributed over three regions. When COVID-19 hit, in addition to controlling the spread and instilling preventative measures, DoH had to ensure resources availability, access to care, and population health. This was accomplished through effective leadership and engagement of stakeholders to put the appropriate strategy that focused on the prevention of the spread of the infection, putting an effective governance structure, and utilization of advanced technologies for detecting,
tracking, monitoring, prediction and decision making. All of these efforts led to global desired outcomes evident by the low infection rates, low mortality rate, and relaxed healthcare system. DoH also worked proactively in reaching out for global collaborations; sharing resources, exchanging knowledge in clinical management, vaccine development and trials, and deployment of innovation and treatments.

Chaired by: Charles Evans, President & CEO, International Health Services Group, United States

- Dr. Nawal Al Kaabi, Chief Medical Officer, SEHA, UAE
- Dr. Farida Al Hosani, Executive Director Communicable Diseases Sector, Abu Dhabi Center of Public Health, UAE
- Dr. Omar Najim, Director of Executive Affairs Office, Department of Health, Abu Dhabi, UAE
- Hind Al Zaabi, Director Healthcare Facilities Sector, Department of Health, Abu Dhabi, UAE

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| 15:10 – 16:40 | **Paper Presentations: Digital transformation, AI and technological innovations for smarter healthcare delivery**  
  Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations.  
  Chaired by: Cédric Lussiez, Chief Executive Officer, Groupe Hospitalier Nord Essonne, France |

**Digital equity and global health care: People, process, and technology**  
Presented by: Zain Ismail, Director, Center for Healthcare Consumerism at AVIA Health Innovation, Canada and Kate Liebelt, Director, Strategy & Operations, Pharmacovigilance & Patient Safety at AbbVie Inc., United States  
Explore how the “power of digital” creates equity in global health care by way of patient access and health literacy, particularly during health crises such as the COVID-19 pandemic. To advance digital equity, health care organizations must prepare their leadership with digital knowledge and EEDI (diversity, equity, equality, and inclusion) education, and adopt new processes and technologies. The speakers will share their international research and experience in the domains of People (how leadership education in digital and EEDI supports a “digital equity mindset”), Process (how strategies to adopt new technologies that consider patient access and health literacy can promote improved outcomes), and Technology (how the selection of a digital tool must take into account issues of access (e.g. broadband access), and user experience (e.g. feature design, languages) to promote digital equity).

**Adapting teleconsultation to the public health system during the COVID-19 pandemic in the Republic of Paraguay**  
Presented by: Dr. Hector Dami, Head of IT department at Medical School of National University of Asuncion, Paraguay and Yuan-An (Tony) Wu, Project Manager for Health Information Management Efficiency Enhancement Project in Paraguay at Taiwan International Cooperation and Development Fund, Taiwan  
This presentation focuses on how the TaiwanICDF, Cathay General Hospital and Minister of Health and social welfare in Paraguay formed a project team to develop and implement the health information system (HIS) to the public hospitals in Paraguay. HIS was implemented to total of 57 health establishments, with the impact of COVID-19 pandemic, many patients and doctors were afraid of going to the hospitals. The parties sensed the need of adapting technology, to assist the patients with chronical disease in receiving the necessary medical attention, and for doctors, to have a safer way of attending patients. In May 2020, teleconsultation was implemented to HIS to the identified services, since the overall internet infrastructure in Paraguay is still not well developed, thus the parties believe using phone call is the best option.
An emerging eHealth model and its generalizability in the health care system

Presented by: Dr. Xavier Borras, Medical Director at Hospital de la Santa Creu i Sant Pau de Barcelona, Spain

An eHealth holistic behavioral-based intervention model was implemented in a hospital’s outpatient clinic. The software developed was the mHeart system, a mobile application primarily adapted to transplant recipients. The model showed excellent results on improving medication adherence, patients’ experience and in optimizing clinical care in these population.

As a mobile application for complex outpatient, their usefulness in the Non-presential care model promoted by COVID pandemic is a remarkable trait.

Fundació Sanitaria Mollet. Key success factors of its technological evolution to artificial intelligence

Presented by: Alberto Serrano, CIO at Fundació Sanitaria Mollet, Spain

Fundació Sanitaria de Mollet (FSM) is an example of how a deep technological transformation can be successfully carried out in a difficult economic context. In the last 10 years, despite the crisis, the organization has moved from having one obsolete hospital to having a new and modern acute care hospital, the remodeling of a social health hospital and the incorporation of three residences, attending a population of more than 170,000 patients. Furthermore, this expansion was rooted on the incorporation of new technology to face healthcare and social challenges. The amount of data handled, as well as the value and importance of analyzing, predicting and using patient data has increased significantly. Big Data technologies, analytics, artificial intelligence, and machine learning can be applied in hospital processes thanks to technological transformation.

AI Leadership for Healthcare: Curriculum and evaluation for remote upskilling the workforce to effectively manage AI for healthcare

Presented by: Dr. Kenyon Crowley, Managing Director at CHIDS, University of Maryland, United States

Most health systems are aiming to leverage AI as a strategic imperative. How to upskill the workforce to understand and manage AI effectively is a core component to any successful healthcare AI journey. In response to these demands, the University of Maryland launched in May 2021 the AI Leadership for Healthcare professional certificate program. This program was designed with significant stakeholder feedback from hospital executives, hospital trade association representation, clinical leaders, and healthcare consultants. This presentation will share an innovative dual curriculum for remote upskilling of healthcare workers infusing healthcare management and AI concepts towards real-world applications of AI for healthcare. Further, it will share the feedback and lessons learned from the first batch of learners and instructors who completed the program. Attendees can use the findings to help diagnose healthcare workforce professional needs and shape their own plans for AI upskilling of their workforce.

15:10 – 16:40
Room 4

Paper Presentations: Breaking out of the hospital’s walls: Ubiquitous and seamless healthcare experiences

Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations.

Chaired by: Dr. Salim Hasham, Chairman, Health Services International, Africa

Hospital at Home: Breaking hospital walls in times of COVID-19

Presented by: Dr. David Nicolás, Medical Coordinator at Hospital Clínic de Barcelona, Spain

The presenters will explain their experience in coping with the COVID19 pandemic in a large tertiary University hospital in Barcelona by strengthening a Hospital at Home (HaH) program. Their HaH unit contributed to decongesting the hospital by treating COVID-19 patients in three different settings (as Hospital at home, in a Medicalized hotel and with a virtual hospital) providing different levels of care intensity. But also the HaH boosted other
Preexisting programs for non-COVID patients aiming to shorten the mean length of stay for patients at hospital. The presentation will provide key information in order to facilitate the extension of the model to other centres and systems.

Post-emergency ward oxygen-therapy at home during the early phase of COVID-19: A shift of paradigm for Hospital-at-Home

Presented by: Ghislain Promonet, Deputy CEO at Fondation Santé Service, France
The emergency department of the Argenteuil hospital and Fondation Santé Service’s hospital-at-home service (HAH) have built a process for COVID-19 patients who return home in the early phase and still require oxygen. The objectives of the project were to allow a safe return of patients at home and to preserve the bed capacity of the hospital for their most severe patients.

The process was set up in November 2020 and still operating in May 2021. From 5 patients per week, it has gone up to 7 per day. More than 450 patients were treated and up to 115 simultaneously.

The number of patients included, the number of hospitalizations avoided and patient satisfaction testify to the success of the project.
It has significantly made change French HAH model by enforcing quick admissions at home, integrating telemedicine, increasing the use of local nurses and sharing the data through the regional patient information system.

Final consultation by nurse as key to emergency care efficiency of a region hospital (GIDA)

Presented by: Meritxell López Hernández, Nursing Director at Hospital de Viladecans - Institut Català de la Salut, Spain
An innovative healthcare management project “Infermera Management of Acute Demand” (GIDA) in response to the sustained increase in demand in the Emergency Department of Viladecans Hospital and recognizing the value of the nursing resource to contribute to the sustainability of the system.

A finalist consultation is created where an advanced practice nurse trained to diagnose and prescribe attends to minor acute pathologies in the emergency department.
GIDA goes beyond advanced triage, where delegated tasks are performed to improve patient comfort or advance tests while waiting to be seen by a physician. The objective of the GIDA is to provide a solution to the health problem presented by a patient by a nurse, in an agile and efficient way.
A transformation in the care of mild pathologies where the GIDA performs more than 30% of this activity, helping to reduce congestion and optimizing resources with the same quality and safety.

Making outpatient consultation patient visit demands and hospital capacity meet

Presented by: Maria Gutiérrez-San Miguel, Coordinator of the Process Unit at Vall d’Hebron University Hospital, Spain
Vall d’Hebron University Hospital has developed an adaptive methodology that merge organizational and care knowledge to help both clinicians and managers assign the required humans resources and hospital facilities that match patient and staff over-time-changing demands to make all care processes sustainable and value-based from a patient and professionals point of view. This methodology has been piloted for ophthalmology outpatient consultation (around 54.000 visits/year in the hospital) having as result the justification of less number of consultation cabinets that were firstly instinct-based requested.
Macro-process of surgical patient management: A value-based healthcare project
Presented by: Joana Seringa, Operating Room Manager at Centro Hospitalar Universitário de Lisboa Central, Portugal

The "macro-process of surgical patient management" project guides and defines the main activities, response times, and responsibilities at each of the stages of the surgical patient journey (from referral for the surgical specialty consultation to the postoperative follow-up consultations). This model is based on the best international practices and has the potential to be adapted to other healthcare institutions.

By defining and standardizing the journey of the surgical patient in the health system, this project allows for greater clarity of the entire process, potentially improving the effectiveness, efficiency, and satisfaction of professionals and the experience of the surgical patient.

The Queralt System: a new patient classification system for hospitalizations developed in Catalonia
Presented by: Marc Coca, Data Technician at Catalan Health Service (CatSalut), Spain, Júlia Folgher Profítos, Data Engineer at CatSalut, Spain and David Monterde, Data Technician at Catalan Institute of Health, Spain

Comorbidity measures and Patient Classification Systems are extremely powerful tools for healthcare management, research, benchmarking or resources allocation.

Queralt System has been developed using machine learning algorithms and aims to offer patient-level scores (indices and groups) for diagnosis and procedures separately. Thus, the user can combine both perspectives in order to achieve better performance.

This presentation aims to compare and evaluate the Queralt System outputs against other risk adjustment tools such as Charlson and Elixhauser Indices or Diagnoses Related Groups. On average, the presenters found that Queralt System offers better outcomes than previous mentioned tools in the following exercises:

- As a measure of risk adjustment.
- As a measure of comorbidity in order to predict critical outcomes in patients with COVID-19.
- As a tool for resource allocation.

16:40 – 17:00
Catering Area and Exhibition Area

Coffee break, exhibition and poster display
During the break, visit the exhibition area or the posters.

Parallel Sessions

17:00 – 18:00
Room 6

Rising to the challenge – JCI Remote Accreditation Surveys
This session is hosted by Joint Commission International.

There is no question that COVID-19 has reshaped the health care environment. Systems were disrupted and global mobility hindered. Healthcare delivery organizations and stakeholders in their respective ecosystems had to be nimble and creative in their responses to the COVID-19 pandemic.

Quality improvement and accreditation organizations such as Joint Commission International have traditionally relied on in-person collaborations with healthcare delivery organizations to maintain international standards in patient care. With global lockdowns and/or travel restrictions in 2020/2021, JCI’s commitment and operation in supporting global patient safety efforts persevered through innovation and resilience.

During this session, Joint Commission International will share lessons and experiences in how it leveraged knowledge and technology to ensure operational continuity in supporting global patient safety efforts and accreditation. Speakers will discuss specific areas of innovation while providing success stories from organizations that have successfully adopted new modes to operate and drive lasting improvements.

- Dr. Joel Roos, Vice President International Accreditation, Quality Improvement, and Patient Safety, Joint Commission International
- Linda Klouwens-Verhoeven, JCI program manager, Amphia Hospital, Netherlands
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<td>17:00 – 18:00</td>
<td><strong>Avoiding the traps in global partnerships: Case studies of collaboration with low and middle income countries to build capacity</strong></td>
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<td>Room 5</td>
<td>This session is hosted by the Catholic Health Association of the United States. This session, presenters with global health experience, combined with extensive experience in health associations, corporate, academia and standards and accreditation, will discuss the nexus that brings them together and opportunities for collaboration to strengthen local health systems through capacity building. This session will highlight how the four presenters combined interest in improving the impact for patient globally. Through a moderated conversation the presenter will discuss how using research, assessments, partnerships, mentoring and technology they have individually worked to improve the quality and safety in low- and middle-income countries.  Chair by: <strong>Bruce Compton</strong>, Senior Director, Global Health, Catholic Health Association of the United States</td>
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<td>17:00 – 18:00</td>
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<td>Room 3</td>
<td>This session is hosted by the Healthcare Financial Management Association. Health systems across the world are implementing a variety of payment reforms. Value-based care is a core component of many of these transformations. The extent and focus of value-based care and associated payments can vary widely – and there are learnings from the path taken by early adopters. Many countries have been experimenting with incentives for care improvement initiatives with varying results. Lessons learned from various countries’ leaders will help in determining your own journey and implementation. A panel discussion will include what is working, what is not, similarities and differences in approaches. You will learn about how to: Identify opportunities for reducing costs and improving the quality of care, develop a comprehensive and integrated team of caregivers and managers, establish targets and key results that matter, build a culture of continual improvement and resiliency, and develop a culture of collaboration to ensure sustainability.  Chair by: <strong>Mary Mirabelli</strong>, Senior Vice President, Strategy, Healthcare Financial Management Association, United States</td>
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<td>17:00 – 18:00</td>
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<td>VA Room</td>
<td>Today’s healthcare landscape is saturated with data, and yet it is rarely the universal basis for decision-making. In the right hands at the right time, accurate, meaningful data can empower healthcare organizations and hospitals to improve quality, deliver high-value care, mitigate patient safety risks, and accelerate innovation. However, when harnessing data for strategic decision-making, knowing where to start is often the biggest hurdle. The challenge of data-driven decision-making is taking an abundance of ‘big data’, organizing it, and connecting quality and financial metrics to drive decision-making.  This special session, hosted by the IHF’s ‘Harnessing Big Data’ Special Interest Group will bring together healthcare leaders from across the world to share their stories and strategies about navigating the complexities of ‘big data’. Session participants will hear and learn from: (1) Case studies, from across the world, focused on how leaders use data to well-informed decisions for organizational improvement and growth.</td>
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(2) Pragmatic advice from subject matter experts on how to report, compare and analyze data for executive decision-making at the C-suite level.

- **Dr. David Levine**, Group Senior Vice President, Advanced Analytics & Data Science, Vizient, United States
- **Prof. Anupam Sibal**, Group Medical Director, Senior Pediatric Gastroenterologist and Hepatologist, Apollo Hospitals Group, India
- **Dr. Shannon Sims**, Senior Vice President, Vizient, United States
- **Prof. James T Teo**, Clinical Director for Data and AI; Professor of Neurology, Kings College Hospital NHS Foundation Trust, United Kingdom

### 17:00 – 18:00
**Room 4**

**Smart Kitchen for better health: For people and the planet**
This session is hosted by Arcasa and Future Food Institute.

- **Artur Arques Girbau**, Director de Catering Arcasa, Catering Arcasa, SL, Spain
- **Roberto Limentani**, CEO, Camst International - Group M&A Director, Camst International, Italy

### 17:00 – 18:00
**Room 8**

**Paper Presentations: Transforming healthcare by empowering, supporting, and giving leadership to the workforce**
Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations:
Chairied by: **Dr. Layla McCay**, Director of Policy, NHS Confederation, United Kingdom

**Taking care of those who deliver care. A new role to be undertaken by ORPD in healthcare organizations**
*Presented by: Johanna Cáceres Terán, Director of Communications and Social Responsibility at Consorci Sanitari del Maresme, Spain*

COVID-19 highlights a new purpose for Occupational Risk Prevention Departments (ORPDs) which is of major social importance and lends them a strategic value in organizations committed to humanizing the relationship with their employees.

During the COVID-19 pandemic, the ORPD at CSDM worked closely with management and middle management on controlling the infection and implemented psychological-intervention initiatives (in groups and individually) among the most exposed employees (doctors and nurses in the ICU and in the COVID-19 wards).

The systemic focus and collaborative way of working, with attention to emotions, has become consolidated as an integral part of the company’s routine practice. This can bring about innovative contribution to: 1) policy, as re-orienting ORPDs leads to an entire cultural transformation; 2) practice, through multidisciplinary teamwork by ORPD, middle management and professionals who are experts on the field; 3) research to design appropriate indicators to assess the effectiveness of those interventions.

**The “Jo Innovo” contest as a tool for professional-led innovation strategy at Vall d’Hebrón University Hospital**
*Presented by: Dr. Victòria Valls, Innovation Project Manager at Vall d’Hebrón, Spain*

Vall d’Hebrón University Hospital has adopted an Open Innovation Strategy that has as main goal the encouragement for innovation from all the professionals. By creating the “Jo Innovo” contest, in which all the 7000 staff members can submit their innovative ideas, most of them rooted in their daily basis routines, has proven to be a successful approach. More than 260 ideas have been presented and more than 900 staff members have participated.

**Values-driven leadership for health sector reform**
*Presented by: Prof. Louis Jenkins, Head of Family and Emergency Medicine at Stellenbosch University | George Hospital at South Africa and Dr. Zilla North, Sub-district manager, George at West Cape Department of Health, South Africa*

In South Africa the health sector is groaning under high levels of staff burnout and a culture of poor collaboration, aggravated by COVID-19. The presenters initiated a project to care for the carer by creating a safe space for people to address everyday challenges within a values-driven leadership framework. They brought rural health care workers together in a multi-professional collaborative environment to understand how their values...
determined their leadership style. With the lead facilitator, Prof. Arnold Smit, Dr Zilla North and Prof. Louis Jenkins, 4 regional weekend workshops were conducted during 2019 in the Garden Route district of South Africa. During the four workshops, 64 nurses, doctors, allied health workers, and managers from six hospitals and clinics identified, framed and developed action plans for their values-based dilemmas at work. They learned about the connection between values-driven leadership on the one hand and personal, relational and organizational well-being on the other.

Enabling a system dialogue on the Catalan healthcare basket assessing how to enhance health services planning with a territorial focus

Presented by: Cristina Casanovas-Guitart, Coordinator of the Catalan Health Basket at Catalan Health Service (CatSalut), Spain and Jillian Reynolds, Health Services Planner at Catalan Health Service (CatSalut), Spain

In 2019, the Catalan Health Service undertook a system-level dialogue involving relevant stakeholders to build a common vision of the Catalan healthcare basket: is it an abstract concept or can/should it be used as an effective tool for operative health services planning? If so, how is this feasible and what enablers are needed? Due to the COVID-19 pandemic, the conclusions of this dialogue have not yet been publicly shared. Two years later the presenters will do so, reflecting on whether they hold true after the life-changing COVID-19 experience.

18:00 – 19:00
Auditorium

IHF Awards Ceremony

The IHF Awards were launched in 2015 and are recognized around the world as the premier awards program to honor hospitals and healthcare organizations. Find out who the winners are and why they were picked from hundreds of entries by attending this special ceremony.

21:00 – 22:00
Palau de la Música Catalana

Solidarity Concert at Palau de la Música Catalana

We invite you to join us for a special concert that will give tribute to John Williams, the most awarded composer in the history of cinema who has made us dream with the soundtracks of movies like Star Wars, ET, The Alien, Jurassic Park, Harry Potter, Tiburón. The Vallès Symphony Orchestra, conducted by Rubén Gimeno, will offer a taste of the composer’s repertoire.

Tickets can be purchased for € 20. Funds will go entirely to La Fundació La Marató de TV3 and Catalunya Ràdio which this year will be dedicated to funding research projects on mental health. Get more information and book your tickets here.

Dress Code: Business Casual

www.worldhospitalcongress.org | congress@ihf-flh.org
### Thursday, 11th November

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<tr>
<th>Time (CET / GMT+1) &amp; Venue</th>
<th>Activity</th>
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<tr>
<td><strong>07:30 – 08:30</strong>&lt;br&gt;Room 5</td>
<td>Women in Leadership Forum breakfast (by invitation)&lt;br&gt;Chaired by: Deborah J. Bowen, FACHE, CAE, President and CEO, American College of Healthcare Executives; President Designate, International Hospital Federation</td>
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<td><strong>08:30 – 10:00</strong>&lt;br&gt;Auditorium</td>
<td>Plenary Session 5: Humanizing technology for smart healthcare delivery: The COVID-19 impact&lt;br&gt;The session will focus on dispelling many of the misbeliefs around technology-enabled healthcare, with many patients traditionally citing it negatively impacts the patient experience and delivers a non-personable transactional relationship with healthcare professionals and healthcare services. Instead, the session will demonstrate how technology-enabled healthcare actually has huge potential to better humanize healthcare and deliver a more personable and dedicated patient experience.&lt;br&gt;The session will focus on how healthcare systems and services have fundamentally changed throughout the COVID-19 pandemic and how digitally enabled healthcare is now a mainstay of many hospital services around the world. The session will consider what this means for humanizing healthcare- has this introduction of technology always had the desired effect and impact, or is there more work to be done?&lt;br&gt;Chaired by: Ed Percy, Vice President, Teladoc Health, United Kingdom&lt;br&gt;</td>
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### Parallel Sessions

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<td><strong>10:00 – 10:30</strong>&lt;br&gt;VA Room</td>
<td>Resilience and Impartiality: The Afghanistan Hospital Sector during the Era of COVID-19: A Fireside Conversation with the Former Minister of Public Health&lt;br&gt;Prof. Alexander S. Preker of Columbia University will be interviewing Dr. Wahid Majrooh, Former Acting Minister of Public Health of Afghanistan. Hear about his journey to his previous role as Minister, his insights and his vision of the Afghanistan health care system.</td>
<td><strong>Dr. Hamid Ravaghi</strong>, Regional Advisor, Hospital Care and Management, World Health Organization, Regional Office for Eastern Mediterranean Region&lt;br&gt;<strong>Dr. Qasem Al Salmi</strong>, Director General, Royal Hospital, Oman&lt;br&gt;<strong>Dr. Motaz Bahageel</strong>, Lead of National Emergency Care Agency, Federal Ministry of Health, Sudan&lt;br&gt;<strong>Dr. Shagufta Hassan</strong>, CEO, AKU Outreach Health Network - Pakistan&lt;br&gt;<strong>Dr. Ali Sabateen</strong>, Head of Infectious Diseases Unit, Augusta Victoria Hospital, Palestine&lt;br&gt;<strong>Dr. Najibullah Safi</strong>, Health system program manager, World Health Organization, Afghanistan</td>
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<td><strong>10:00 – 11:00</strong>&lt;br&gt;Room 5</td>
<td>How hospitals are battling COVID-19 in the Eastern Mediterranean Region&lt;br&gt;This session is hosted by WHO EMRO.&lt;br&gt;When the world was hit by COVID-19, countries had to be agile, resourceful and innovative as they strived to survive the pandemic. Hospital CEOs from the Eastern Mediterranean region will share how they responded even with limited resources. The session will explore their innovative approaches, the challenges they faced and how they overcame them, as well as key lessons learned.&lt;br&gt;Chaired by: Dr. Hamid Ravaghi, Regional Advisor, Hospital Care and Management, World Health Organization, Regional Office for Eastern Mediterranean Region</td>
<td><strong>Dr. Qasem Al Salmi</strong>, Director General, Royal Hospital, Oman&lt;br&gt;<strong>Dr. Motaz Bahageel</strong>, Lead of National Emergency Care Agency, Federal Ministry of Health, Sudan&lt;br&gt;<strong>Dr. Shagufta Hassan</strong>, CEO, AKU Outreach Health Network - Pakistan&lt;br&gt;<strong>Dr. Ali Sabateen</strong>, Head of Infectious Diseases Unit, Augusta Victoria Hospital, Palestine&lt;br&gt;<strong>Dr. Najibullah Safi</strong>, Health system program manager, World Health Organization, Afghanistan</td>
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<td><strong>10:00 – 11:30</strong>&lt;br&gt;Room 6</td>
<td>IHF Awards Session – Showcasing best practices from around the world&lt;br&gt;Hear from the Gold winners of the IHF Awards. Discover their projects and programs and why they stood out as the best of the best from around the globe in health system innovation and excellence.</td>
<td><strong>Dr. Qasem Al Salmi</strong>, Director General, Royal Hospital, Oman&lt;br&gt;<strong>Dr. Motaz Bahageel</strong>, Lead of National Emergency Care Agency, Federal Ministry of Health, Sudan&lt;br&gt;<strong>Dr. Shagufta Hassan</strong>, CEO, AKU Outreach Health Network - Pakistan&lt;br&gt;<strong>Dr. Ali Sabateen</strong>, Head of Infectious Diseases Unit, Augusta Victoria Hospital, Palestine&lt;br&gt;<strong>Dr. Najibullah Safi</strong>, Health system program manager, World Health Organization, Afghanistan</td>
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| 10:00 – 11:30 | Room 3 | **A French (digital) revolution: Unicancer projects to improve cancer patients’ lives**<br>This session is hosted by Unicancer. The progress made in the field of real-world medical data and artificial intelligence is already changing the landscape of oncology. Analyzing and sharing big volumes of high-quality data can accelerate research projects, shed light on the therapeutic advances made in recent years and demonstrate the reproducibility and transferability of clinical trials’ results. Data sciences and AI are one of the major strategic axes of Unicancer, the French federation of comprehensive cancer centres (FCCC). With the ultimate objective of improving patients’ outcomes and quality of life, Unicancer is playing a central role in providing the scientific community with robust real-life epidemiological data. In this session, experts will describe the Unicancer flagship programs ESME, the largest European source of real-world data in oncology, and Consore, a powerful search engine for health big data. They will also illustrate other innovative projects within our network, such as UNIBASE, OncoSNIPE, Precision Predict, DeepSarc and Ependymomics. Chaired by: Sophie Beaupère, Chief Executive Officer, UNICANCER, France  
• Prof. Mario Campone, General Director, Institut de Cancérologie de l'Ouest, France  
• Julien Guerin, Head of Health Data Factory, Institut Curie, France  
• Prof. Anne Laprie, Radiation Oncologist at IUCT-Oncopole, France |  
| 10:00 – 11:30 | Room 4 | **VBHC and climate change: Can value-based health care support environmental stewardship?**<br>This session is hosted by the Australian Healthcare and Hospitals Association. Sustainability is a multifaceted concept that continues to evolve depending on the perspectives of different sectors. Fundamental, though, is the challenge to shift thinking away from humans and nature being separate in the world, and their activities and effects being compartmentalized. A value-based approach to health care is being used to transform health systems facing challenges to sustainability, yet environmental sustainability is typically considered independently, with limited evidence of initiatives purposefully aligning the two concepts in practice. This session will explore alignment of the principles of value-based health care and environmental sustainability. Discussions will explore the responsibility of the health system and the need to ensure improvement in health outcomes at both an individual and population level. Methods of measuring and monitoring the environmental and climate change impacts of delivering care will also be explored, along with the role of health leadership in promoting climate and health public messaging, innovation, and change. Chaired by: Kylie Woolcock, Policy Director, Australian Healthcare and Hospitals Association  
• Vicki Bennett, Head, Metadata and Classifications Unit, Australian Institute of Health and Welfare  
• Dr. Kate Charlesworth, Climate Risk Lead, Climate Council, Australia  
• Dr. Arnagretta Hunter, Clinical Senior Lecturer and Human Futures Fellow at Australian National University |  
| 10:00 – 11:30 | Room 8 | **Paper Presentations: Dynamic visions of adding value to go beyond healthcare service delivery**<br>Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations. Chaired by: Prof. Margarida Eiras, Board Member, Portuguese Association for Hospital Development (APDH), Portugal  
National Academy Of Medicine position on climate and healthcare  
Presented by: Walt Vernon, Chief Executive Officer at Mazzetti, United States |
The Climate is changing. ASHRAE tells us that the US is warming at least a degree a decade. We are experiencing more frequent and more intense severe weather events. We are experiencing movement of disease vectors, and changing health threats. In the face of these changes, the healthcare system must adapt, and must plan for resilience.

The Healthcare system has generally shied away from taking responsibility for its Climate Footprint. Today, we know that the Healthcare sector represents roughly 20% of the US Economy; 10% of US Greenhouse gas emissions; and 5% of global greenhouse gas emissions.

The National Academy of Medicine has decided to call the industry to adopt a new norm, recognizing the moral imperative for the healthcare industry to protect the health of everyone, and to include environmental protection in its definition of quality.

**Mental Health Cluster 2021 projects and initiatives**

*Presented by: Marta Sánchez Bret, Mental Health Cluster Manager at Mental Health Cluster, Catalonia, Spain*

The presenters will discuss what the Mental Health Cluster is and what they do. They will also talk about Brains Magazine, their science dissemination journal on Business, Research, Ageing, Innovation, Neurosciences and Social affairs. As well as their Corporate innovation and Technology transfer project, in collaboration with Esade Creapolis, Barcelona. They will also talk about the launch of the first Care & Autonomy Living Lab (CALL) in Spain, an open innovation tool focused on the development of the neuroscience, mental health and Silver Economy markets.

**A tale of two transformations: Trans people and Health System, sharing the pathway towards an integrated model of care**

*Presented by: Dr. Ramon Escureit, Sexual and Reproductive Health at Catalan Health System, Catalan Health Service, Spain*

Participation of Trans people along all the process was a key point to elaborate a new model of care according to their specific needs. A coordinated surgical program was created in three public hospitals with shared expertise, protocols, clinical guidelines and periodical assessment. Putting together all clinicians, policy makers and health commissioners with Trans people has helped the presenter’s system to adequately address their needs and also increase the volume of activity by increasing the budget from the Catalan Health Service.

**Driving international healthcare transformation through a collaborative innovation and entrepreneurship programme**

*Presented by: Dr. Daniel Moreno Martinez, Head of the Innovation Programme at Hospital Germans Trias i Pujol | Institut Català de la Salut, Spain*

Fostering innovation in healthcare settings is a challenging process, and while COVID-19 has accelerated innovation adoption, work remains to be done to drive the development of innovative projects. In this talk, the presenters will discuss the Healthcare Entrepreneur Exchange Programme (HEEP), a programme built and implemented in collaboration between Hospital Germans Trias i Pujol and the Leeds Teaching Hospital NHS Trust aiming at fostering intrapreneurship and international collaboration between healthcare professionals. The aims of the programme are:

- To build a reproducible programme to enable intrapreneurship with minimal internal investments in hospitals.
- To empower healthcare professionals to use their knowledge to solve technologically unmet clinical needs.
- To investigate the engagement of healthcare professionals with structured innovation programmes.
- To establish and grow the portfolio of available competitive projects
This presentation will revolve around how to establish a reproducible sustainable innovation management support programme in other hospitals, the necessary resources, and the expected impacts.

A singular partnership between civil society and Government: Matching good will with professional governance to provide high complex pediatric care

Presented by: Erika Bömer Cagliari, Director of Strategy and Innovation at Brasilia Children's Hospital, Brazil

Brazilian public healthcare systems (SUS) holds more than two hundred million people under with access to healthcare and is highly demanded for costly high complex care. Public-private partnerships may be part of the solution, as long as it has good governance. The Hospital da Criança de Brasília is a good example of this kind of partnership, resulting from the initiative of families whose children had cancer. The pathway they have followed with the local Government to offer humanized and distinguished care to thousands of children while managing appropriately public resources deserves attention and is a model to be followed.

Portuguese Registry of Clinical Outcomes in Cataract Surgery (CS): First report and next steps

Presented by: Prof. Joana Feijó, Business Developer Director at Health Cluster Portugal, Portugal

An effort to create a more sustainable and equitable health sector through the transition to value-based systems is necessary for societies to prosper.

A value-based-healthcare (VBHC) system is about continuously improving the relationship between outcomes and costs, essential to ensure long-term sustainability and better outcomes for patients.

With the objective to foster this approach, the Health-Cluster-Portugal (HCP) started the Value-Based-Health-Cataract (VBHCAT) project in 2018. Attendees will learn the importance of using VBH model on the funding and procurement in healthcare, and also how Portugal is starting to move forward on this topic.

Building the medicine of the 21st century based on bioengineering

Presented by: Dr. Teresa Sanchis, Head of Strategic Initiatives at Institute for Bioengineering of Catalonia, Spain

Bioengineering has played a fundamental role in the fight against COVID-19. Although therapies based on bioengineering are already benefitting millions of patients (such as prostheses, imaging technologies or robotic surgery), there is a long way ahead before the new paradigm of precision medicine and smart health is a reality.

We need to progress in an open innovation model, creating a shared space between scientists, engineers and doctors and encourage a framework for relations with clinicians and bio/medtech companies.

The presenters will discuss the barriers that limit the clinical translation of novel bioengineering technologies and the strategy of the Institute for Bioengineering of Catalonia (IBEC) to overcome them. They will outline the main axes of IBEC strategy to translate findings to clinical practice and build the medicine of the 21st century that ensures a sustainable healthcare for everybody. Their experience can inspire other R&D centres that develop healthcare solutions.

11:30 – 12:30
Catering Area and Exhibition Area

Brunch and Networking

11:30 – 12:30
Room 4

Virtual Paper Presentations: Improving value and performance of hospitals through research and evaluation

Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations:
Facing the COVID-19 pandemic emergency: The experience of two main hospital centers in Milan

Presented by: Dr. Samuele Rivolta, Medical Doctor in Clinical Management Staff at ASST Sant’I Paolo e Carlo, Italy

Lombardy has been one of the most affected regions by the first pandemic wave of SARS-CoV-2 in 2020. Hereby the presenters analyze two of the largest hospitals in Milan during this critical period (21/02/2020 – 31/05/2020). The elaboration of this study involved, on one hand, a qualitative analysis of the hospital response using the “WHO rapid hospital readiness checklist for COVID-19”. On the other hand, a quantitative analysis was carried out defining the results obtained in terms of output and outcome.

Emergency Room Overcrowding: A National Perspective

Presented by: Dr. Hossam Elamir, Research and Improvement Project Manager at Quality & Accreditation Directorate, Ministry of Health, Kuwait

ED overcrowding and increased Length of Stay are key global issues for more than 30 years, as they have serious repercussions. Emergency Department is amongst the most crucial departments in the hospital. No measurements have been done to assess the situation nationally before. In addition, expanding emergency departments and adding more beds have never succeeded in eliminating wastes and targeting the root causes of the problem.

The presentation will share how the Ministry of Health in Kuwait is addressing the problem of Emergency Departments Overcrowding as a part of its national project to improve the patient flow in Emergency Departments by applying lean-based interventions. The presentation contains a descriptive analysis of the current situation with the identification of the causes of overcrowding in general hospitals. The presentation illustrates a high-level environmental scan for the proposed interventions. The presentation will touch on the COVID-19 crisis as related to the project.

Supporting decision-making: from health evaluation reports to an evidence-synthesis tool

Presented by: Dr. Lidia Blanco-Silvente, Researcher in Health Technology Assessment at Catalan Agency for Health Quality and Evaluation (AQuAS), Spain

Hospitals use management tools to plan their investments. In that sense, evaluation reports focused on Healthcare Technologies Assessment (HTA) provide key findings and recommendations for decision-making, which emerge as sources to support decisions to acquire or update healthcare technologies. However, in some cases these reports are very detailed. The presenters will share a Synthesis product, which have been designed in order to summarize the most relevant information (evidence and recommendations), included in classic HTA reports. The Synthesis improves and facilitates the communication regarding the healthcare technology acquisition.

Transforming the model of clinical practice and quality management: The Vall d’Hebron University Hospital experience

Presented by: Dr. Soledad Romea, Director of Quality, Processes and Innovation at Vall d’Hebron University Hospital, Spain

The model of quality and clinical practice management of the Vall d’Hebron University Hospital has proven to have a successful approach. The results are enclosed in the following dimensions: improvement of health outcomes, patient experience, coordinated care, teamwork, quality, culture of safety, efficiency and flow simplicity, adequacy of intensity of care and decision making based on the best available evidence.

Three big changes were carried out:

1. Conversion into a matrix clinical process-oriented organization that combines knowledge (vertical vision) and patient flow and safety (horizontal vision).
2. New methodology for improving processes and patient-relevant outcomes, based in scientific model and Quality Deming Cycle (Plan-Do-Check-Act) and integrating different
tools (operational excellence, process management, design thinking, lean, sessions to collect patient experiences along their clinical pathways …) that led to an original methodology (Advanced Process Model).

3. Approach to value-based health care and a culture of continuous improvement integrated into daily work.

Integrated Care Hospital at Home: A 3 years experience of a geriatric H@H based in Barcelona
Presented by: Prof. Marco Inzitari, Director of Integrated Care and Research at Parc Sanitari Pere Virgili, Spain
The majority of older adults with complex care needs prefers to be treated at home, if feasible.

The presenters will share data accumulated from their 4 years’ experience of a geriatric integral and integrated Hospital at Home model, combining acute and rehabilitation care for older adults. Their interdisciplinary model (team including geriatrician, nurses, physical and occupational therapists, social worker and providing remote speech therapy if needed) is embedded in a geriatric intermediate care hospital and have attended 478 patients.

Building on previous research of their Group (6 international papers published since 2015), which showed comparable functional outcomes and home discharge with lower costs associated with this care model, they will show the results of this implementation experience with a relevant cohort of patients. They will also comment on barriers and facilitators of this model, and future developments.

11:30 – 12:30
Room 3

Virtual Paper Presentations: Humanistic approaches to policymaking, transformational leadership, patient pathways and sustainability
Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations:

People at the center of policy-making: Best practices in institutionalizing social participation
Presented by: Kira Koch, Technical Officer at World Health Organization
Many people think of Universal Health Coverage (UHC) in terms of health financing and service delivery. But health system governance, or the lack thereof, can make or break UHC reforms. Good governance can create a health system that is co-owned by populations, communities and civil society. It goes beyond a narrowed view of delivering services but touches upon broader issues related to transforming health systems to make them more responsive to the needs of the population.

WHO has recently launched the guidance book: voice, agency and empowerment - handbook on social participation for UHC, which aims to strengthen systematic and meaningful government engagement with the population, communities, and civil society in national policy, planning and review processes.

The presenter will provide a brief overview of key findings, and also reflect on the COVID-19 crisis and the importance of bringing in people’s voice into emergency responses and health policies.

A model for humanistic leadership engagement and collaboration for effective healthcare transformation
Presented by: Dr. Bernardo Ramirez, Director Global Health Initiatives/HMI at University of Central Florida, United States and Dr. Daniel J. West Jr., Professor and Chairman Department of Health Administration & Human Resources at University of Scranton, United States
Using principles of humanistic centered care, this presentations will discuss how to enhance the value of healthcare management practice and education developing interpersonal relations and leadership competencies.

The presenters’ multinational team developed and applied structured questionnaires and interviews to graduate students and early careerists for over a decade to identify and help
advance understanding of the different components of essential “soft skills” competencies. The model underscores important capacities specially on this “times of COVID” to address challenges and implement effective transformation leadership strategies to overcome workplace conditions to create health workplaces. Other significant findings are the relevance of social determinants and social media to improve and sustain healthcare. With the advent of new technologies and the many health practitioners interacting in chronic care, there is increased emphasis on creating a caring environment, sustainable culture, good governance, and stronger accountability to the community both in the healthcare organizations and the patients’ communities.

**Optimizing the patient pathway in the cataract surgery with a Lean Six Sigma approach**

*Presented by: Dr. Luis Castillón Torre, Chief of department of ophthalmology at Hospital San Juan de Dios del Aljarafe, Seville, Spain*

Ophthalmology is facing an increased volume of patients of a growing elderly population with healthcare resource limitations. Cataract is the most common cause of visual impairment around the world and cataract surgery is the most frequent surgical procedure performed in many countries. This surgery is projected to increase in a range from 72% to 144% by 2036 which challenge the sustainability of the current model. The aim of this project is to analyze the patient pathway in the cataract process and redesign it using a Lean Six Sigma methodology in order to increase the number of cataract surgeries performed daily and patient and staff satisfaction while maintaining patient care excellence. Before the project, Hospital San Juan de Dios performed approx. 1500 cataract surgeries annually. After a carefully analysis and using Lean Sigma Techniques they have been able to increase number of procedures by 25%, also reducing variation of in clinic time.

**Building sustainable initiatives with accredited graduate healthcare management educational programs**

*Presented by: Anthony Stanowski, President and Chief Executive Officer at Commission on Accreditation of Healthcare Management Education (CAHME), United States and Dr. Daniel J. West Jr., Professor and Chairman Department of Health Administration & Human Resources at University of Scranton, United States*

Healthcare managers need resources and tools to develop sustainable initiatives in patient safety, quality of care and financing innovative efforts. The CAHME-Canon Partnership will be explained and how highly successful sustainability initiatives can be identified. This partnership can be replicated in other countries enhancing global health outcome and preparing global healthcare leaders. The presentation will provide concrete examples of sustainability efforts from universities and explore outcome data supporting implementation of the ideas/concepts. Finally, teaching future leaders how to develop and design public-private partnerships to improve global health creates opportunities for research, scholarship and innovation.

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<td>11:30 – 12:30</td>
<td>Virtual Lightning Talks: Implementing digital healthcare strategies using telemedicine, AI and virtual reality</td>
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<td>Hear about innovative programs, projects, and good practices from various organizations thru these lightning talks. Presentations include:</td>
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<td>Surviving the COVID waves in the Emergency Department</td>
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<td><em>Presented by: Dr. Marta Castellà Rovira, Physician in Emergency Department at Hospital de la Santa Creu i Sant Pau, Spain</em></td>
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<td>Anticipating needs with sufficient time to adapt the resources optimally can make assistance more efficient. The management of Emergency Departments (ED), means of an easy-to-use Artificial Intelligence tool. The APIIS predictive platform allows to provide a real-time vision of the situation in all areas of the ED and it uses Machine Learning algorithms to predict the volume of arrivals, occupation, and the needs of hospitalization after urgent care.</td>
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The presenter posit that it is time to democratize AI in healthcare, and that in fact it is easier to introduce it in hospitals as support. This will create culture of trust in AI.

**Telemedicine, a tool to control chronic patients**  
*Presented by: Dr. Anna Carol Perez Segarra, Medical Director at Hospital Sant Rafael, Spain*  
The main objectives are to implement a telemedicine platform to monitor the patient from home, to prevent and treat disease exacerbations early, to promote the empowerment of the patient, promoting self-control of the daily recorded parameters and symptoms favoring an early detection of decompensation, to assess the patient’s adherence to the program and to reduce hospital admissions due to decompensation.  
The presenter believed telemedicine can help in patient follow-up and can contribute to the reduction in the use of health resources.  
During 2020, marked by COVID-19 they adapted the service and monitoring of patients.

An innovative telemedicine system to improve antenatal care in low-income countries: report on patients and healthcare workers acceptability in Tanzania  
*Presented by: Dr. Maria Angelica Rweyemamu, Lecturer at The University of Dodoma, Tanzania*  
PANDA (Pregnancy and Newborn Diagnostic Assessment) is a telemedicine system that uses mobile technology used to perform quality antenatal care (ANC) visits according to WHO recommendations. The presenter will talk about The role of mHealth in supporting ANC through mobile apps that helps patients and health care workers. As well as the patients and health care workers’ acceptability of the PANDA mHealth during ANC visits in Tanzania.

Redefining the future of healthcare  
*Presented by: Grace Asmar, Head of Marketing and Communications at Medcare Hospitals & Medical Centres, United Arab Emirates*  
The healthcare sector in the UAE has witnessed a boom in the use of telemedicine since the onset of the pandemic. It is because telemedicine consultation provides a safe and secure way for patients to keep up with their appointments and seek medical assistance, while maintaining social distancing.  
With the launch of Medcare's teleMEDCARE and Homecare Services, their patients’ perception of healthcare and how they can access it has been transformed. With a promising number of patients already accessing these services, they look forward to bringing consistent, high-quality healthcare to patients across the country.

Implementation of a telecare program in a Department of Paediatric Rheumatology  
*Presented by: Dr. Joan Calzada-Hernández, Pediatric Rheumatology Unit, Department of Pediatrics at Hospital Sant Joan de Déu, Spain*  
The presentation will show how telecare is a very useful resource in daily clinical practice in Pediatric Rheumatology. Its implementation modifies the reality of care, leading to a successful replacement of face-to-face visits. It allows better patient support and a more efficient organization of healthcare resources. Having a consolidated telecare program has been a major advantage in facing the challenging scenario of the COVID-19 pandemic. The presenter will also highlight the main role of the nurse-case manager and how the institutional support is essential to the success of the telecare program.

Home hospitalization for acute paediatric and exacerbated chronic paediatric patients checked by telemedicine  
*Presented by: Dr. Astrid Batlle, Pediatrician at Hospital Sant Joan de Déu, Spain*
On November 2019 a new program of Hospital at Home was initiated in the presenter’s Hospital to attend acute patients, mostly respiratory infections and outpatient antibiotic therapy. The use of telemedicine improves families’ satisfaction and facilitates monitoring. The talk will describe the patients’ characteristics and results from the satisfaction survey.

Collaborative information platform smartphone feedback system reporting critical results of diagnostic tests facilitates effective clinical communication and discharge healthcare delivered.

Presented by: Hsu Tung Chang, Deputy Director at Changhua Christian Hospital

Discharged patients are not easily to be contacted and communicated, requiring private and clear explanation. The presenter attempted to improve this problem from 49.5% to 88.2%, preventing delay patient treatment. There is still 11.8% gap required to be filled, which allows them to develop more security, friendly and accurate recalling measures, to assure discharge patient recalls.

High-performance ISQua healthcare policies for E-health and E-learning using the MediQapp software tool

Presented by: Dr. Peter Lachman, Lead Faculty Quality Improvement at Royal College of Physicians of Ireland (RCPI)

COVID-19 illustrated the need for digital solutions for the development of high-quality and standardized care that can be maintained by clinical teams. Digital solutions also need to meet the requirements of external evaluation and accreditation.

We will present a solution developed in Romania, called MediQapp which, through innovative automation, optimizes the management of standardized process documentation in both medical and support fields, provides e-learning and promotes continuous improvement for high-performance quality management. All of these contribute to the accreditation process by ANMCS, the ISQua accredited Romanian Accreditation organization.

Utility of Virtual Reality technology to enhance quality of patients care and convey of treatment-decision-related knowledge for oral cancer patients

Presented by: Yi-Chen Huang, Assistant Head Nurse at Taipei Veterans General Hospital, Taiwan

Surgical removal, either alone or in combination with electric tracheostomy, radiation therapy, chemotherapy, and immunotherapy surgery is sometimes supplemented with other treatments as necessary according to the clinical cancer staging.

The patients and family may hesitate to make decision to receive appropriate treatment. It is very important to provide understandable information in an efficient way including characteristic of disease, treatment options etc. Therefore, through virtual reality, we can understand the treatment process in advance before doing various treatments.

Under COVID-19, avoid long-term contact with people. The use of virtual methods in health education can reduce many opportunities for getting along.

Understanding the acceptance of outpatients of Chinese medicine in using the medical assistance information system by applying technology acceptance model

Presented by: Dr. Chen-Hung Lee, Attending Physician at Taichung Veterans General Hospital, Taiwan

This study applied a modified technology acceptance model to understand the current status (cognitive usefulness, cognitive ease of use, behavioral intentions), system usage acceptance (actual usage behavior), and system usage satisfaction of patients or their main care givers (their family) by using the Medical Assistant Information System. It not only shares how patients or their family use MAIS to self-report to physicians under the raging COVID-19 epidemic, but also explains how TCM physicians applied the diagnostic
methods of “inspection” and “interrogation” to make the most appropriate treatment decision-making for reducing the impact of patients’ illness of health.

**Parallel Sessions**

12:30 – 14:00
VA Room

**Paper Presentations: Reshaping healthcare delivery to a borderless system: Leading to outcomes which really matter to people**

Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations. Chaired by: Dr. Chin-Shui Shih, Deputy Director-General, Taipei Cultural and Economic Office in Geneva, Switzerland.

**Repurposing of the Hospital-at-Home (HaH) unit towards an integrative assistance model**

*Presented by: Dr. Antònia Baraldés-Farré, Medical Director at Hospital de Berga - Salut Catalunya Central, Spain*

It’s becoming more common the hospital admission of very elderly patients and patients with complex needs. The presenter’s institution decided to repurpose part of the activity carried out in the conventional HaH towards an integrated model (IHaH) aimed at the multidimensional treatment of the patient’s needs. The goal is to restore functionality after an acute event through a multidisciplinary intervention. Changing hospitalization to the homecare model during convalescence and rehabilitation process can be a successful strategy, and provided benefits in terms of healthcare quality (better functionality at discharge) and of economic efficiency (shorter treatment period). Furthermore, the IHaH avoids other risks inherent to conventional hospitalization. COVID-19 crisis has supposed a definitive impulse to this care model, since the main objective was to get patients out of the hospital as soon as possible, and facilitate the treatment at home, with safety and comfortability.

**Patient Safety Culture Assessment in the hospital care setting in the Eastern Mediterranean Region Countries: A Systematic Review and Meta-Analysis**

*Presented by: Dr. Hamid Ravaghi, Regional Advisor, Hospital Care and Management at World Health Organization, Regional Office for Eastern Mediterranean Region I Academic Member at Iran University of Medical Sciences, Tehran, Iran*

There is a need to picture the current status of patient safety culture in the EMRO region, resulting to adopt appropriate and effective actions aimed to enhance patient safety in the region. This systematic review aims to understand the overall perceptions of patient safety culture in the countries of the EMRO based on the findings of the Hospital Survey on Patient Safety Culture (HSOPSC). The review identified that a regional action on patient safety is needed to prioritize patient safety in health policies and to monitor the status of patient safety within the region regularly and systematically. It is also recommended that national policymakers develop some regulatory mechanisms to encourage staff to report the mistakes and to support the continuous learning from the previous mistakes.

**CHECK COVID-19: An assessment model for evaluating COVID-19 management in a tertiary care hospital**

*Presented by: Dr. César Llorente Parrado, Head of Health Services Accreditation Department at Vall d’Hebron University Hospital, Spain*

Check COVID-19 is an assessment tool to evaluate the development, implementation and impact of the preparedness and response plans against COVID-19 established in the hospital. Its main objective is to develop a systematic evaluation model in short cycles of continuous improvement, which allows identifying strengths and areas for improvement in an agile way. This model includes the following 3 elements:  
1. Self-assessment questionnaire, consisting of 30 standards subdivided into 97 measurement elements.  
2. On-site audits to verify the implementation of standards in the different areas of the hospital.
3. Surveys: one to assess the degree of adherence of professionals to the protocols implemented in the hospital and another to assess patient satisfaction.

Check COVID-19 is being validated for its multicenter application in the Catalan Health Service, as a diagnostic tool for the hospital's level of preparedness for possible future contingency situations caused by new pandemics or other crisis situations.

Reducing length of stay of six cardiac lesions to meet the international standards

*Presented by: Dr. Mohammed Al Ghafri, Pediatric Intensivist at Royal Hospital, Oman*

Lack of enough intensive care beds is major contributing factor for the long waiting cardiac surgical list. The aim of the authors was to reduce length of stay (LOS) in the unit in order to help decrease this waiting list. Initially, they searched the literature on the appropriate LOS benchmark for six cardiac lesions. Then they concentrated on implementing three main protocols; fast track extubation, optimization of analgesia and sedation and training nurses in the step-down. This reduction of the LOS contributed to the marked reduction of the waiting list from 260 patients on January 2018 to 50 patients on March 2021.

Do patients have a “clinic eye”? Comparison among health centers in Catalonia according to user’s satisfaction

*Presented by: Dr. Toni Iruela, Family Doctor at EBA Vallcarca SLP / ACEBA, Spain*

Based on PLAENSA-2018, users of the primary health care teams of Catalonia make 2 groups, on the one hand the 30 teams with the highest score and the 30 teams with the lowest score. Different variables (general, adequacy, effectiveness, efficiency) obtained from the 2018 results center of these teams are studied. The results are compared between the two groups of teams. The teams best scored with satisfaction by patients also have better indicators of care quality. This work invites to make much more efforts to incorporate patients and thus contribute to advancing in achieving Berwick’s triple aim.

Lightning Talks: Transformative approaches to add value to healthcare provision

*Chaired by: María Reventós, Deputy to the Director General, Consorci Corporació Parc Taulí, Spain*

Accreditation in 2030

*Presented by: Dr. Carsten Engel, Chief Executive Officer at International Society for Quality in Health Care (ISQua)*

The presentation will give attendees an overview of current trends that impact on accreditation and of visions for accreditation 2030.

The new Standards for Health Promoting Hospitals and Health Services: Optimizing health gain and building sustainable societies

*Presented by: Dr. Oliver Groene, Chief Executive Officer at International Network of Health Promoting Hospitals and Health Services*

The new 2020 Standards for Health Promoting Hospitals and Health Services reflect various novel areas of policy, practice, and evidence in order to support a broader implementation of the HPH vision. They build upon years of work within the HPH Network, as well as the developmental work for new standards in areas such as health literate organizations, standards for specific target groups such as the elderly, and thematic areas such as children and adolescent rights, environmental sustainability, and the societal impact of health care.

Pandemic drives health care provider and industry partnership

*Presented by: Daniel Piro, Executive Vice President, Vizient’s International Business Ventures at Vizient, United States*
Vizient is a member-owned health care performance improvement company with more than 50% of acute care hospitals and 95% of academic medical centers in the US participating. Vizient members network with colleagues to improve cost, quality and market performance. They purchase approximately $100B of goods and services through Vizient contracts annually. Through the pandemic, Vizient was in a unique position to help connect the leaders that are responsible for utilization of supplies, clinical outcomes and the supply sourcing to partner and positively impact COVID care delivery and response. This presentation will share how Vizient worked with its member hospital executives and clinical leaders, medical suppliers and government agencies during the pandemic and what they learned, what has changed and what priorities they see for the future.

Establishment of the clean clinic for women and child health services, in Dubai Health Authority during the COVID-19 pandemic

Presented by: Dr. Mai Ghubash, Specialist Registrar Family Medicine at Maternal and Child Fellowship, United Arab Emirates

Due to the COVID-19 pandemic, the show up rate for child health vaccination and prenatal care dropped significantly due to the fear of the ongoing pandemic. April 2020 the decision was to establish the concept of the “clean clinic” at the Dubai Health Authority. The clean clinic is defined as a clinic free of suspected or confirmed cases of COVID-19 or any symptoms of infectious disease. The target of this clinic was mainly providing services for children and pregnant women. The presenter will discuss the establishment of the clinic and its impact on the services.

Surgical operating safety during COVID: Multipurpose operating room

Presented by: Carmen Carmona Gallardo, Infrastructure and general service manager at Althaia, Xarxa Assistencial Universitària de Manresa, F.P., Spain

The Multipurpose Operating Room for COVID patients and NON-COVID patients is a response to the problems that have been triggered by the COVID pandemic crisis in the surgical field. With the solution that has been implemented, it has been possible to give an effective response to the problems that have arisen in the surgical field, guaranteeing the environmental quality conditions of the operating room and consequently patient safety and optimizing the occupation of the operating room for both types of patient, COVID and non-COVID.

Kingdom of Saudi Arabia National Health System transformation: A global case study of establishing a new health cluster

Presented by: Edward Fraser, CEO Advisor at Health Cluster Riyadh 3, Ministry of Health, Saudi Arabia

Transforming Home-care at scale: Tech-enabler and human-centered to deliver superior output

Presented by: Oriol Fuertes, CEO at QIDA, Spain

Home-care is delivering a transformation at its core and at Qida they want to lead from the forefront. The presenter will share how proactive case management, multi-disciplinary teams, thoughtful capacity building to patients/family members/carers and technology can lead to best in class patient-satisfaction results and more days, in better health, at home.

Centralisation policy for complex cancer treatments in Catalonia (Spain): Easy to audit and edit?

Presented by: Prof. Joan Prades, Senior Researcher at Catalan Cancer Strategy, Department of Catalonia, Spain
This presentation will cover the description of components of the centralisation policy in Catalonia for highly-complex cancer diseases, and a brief comparative perspective with respect to other reforms. An analysis of the indirect and unintended effects of the centralisation policy into the wider healthcare system will also be discussed together with challenges of the reform in terms of vertical and horizontal integration. COVID-19 issues will also be indirectly dealt with.

Quality-of-life measurement as a tool to improve hospital practices: The Feel’HAD study

Presented by: Dr. Marc Poterre, Head of Research and Innovation at Fondation Santé Service, France

As hospital operators, we tend to have a standardized approach to care. However, quality of life and other patient preference studies show that there is a need to tailor the procedures more precisely to different patient groups. The Feel-HAD study brings additional data supporting this concept.

Beyond measuring: Cultural change towards measuring patient outcomes and continuous improvement of the Stroke care pathway

Presented by: Dr. Marta Rubiera, Stroke Neurologist at Hospital Universitari Vall d’Hebron, Spain

Hospital Universitari Vall d’Hebron is implementing a comprehensive organizational transformation under the philosophy of Value Based Healthcare for stroke patients. For this, an original methodology was developed to carry out a transformation towards process management, measurement of health outcomes and calculation of costs among other aspects. One year and a half after implementation, the patients’ compliance of the questionnaires of the PROMs at 7 days was 75% and at 90 days it was 65%. Poor outcomes were detected in a high proportion of patients. Measures designed to increase compliance and improve outcomes are being implemented now.

Payment-by-results Schemes for new cancer drugs: 10 years experience from a comprehensive cancer center, Catalan Institute of Oncology

Presented by: Dr. Ana Clopés, Deputy Director at Catalan Institut of Oncology, Spain

Therapeutic innovation is often associated with uncertainties. When there is uncertainty, incentive-based schemes as payment-by-results schemes (PbR) could be alternatives to traditional fixed payment schemes. The main objective is to present the results of the application of this PbR in a Comprehensive cancer center during a period of 10 years. During this period, ICO has signed 17 PbR with 10 pharmaceutical industries. PbR has allowed ICO to enhance their results-oriented policy participated by health professionals, to determine therapeutic value, strengthening the changing relationship with pharmaceutical industry aimed at co-responsibility in results.

Breast Cancer Patients (BCPS): First results of shared follow-up between Primary Care and hospital (ACMA)

Presented by: Mireia Martinez, Family Physician at CAP Comte Borrell, Spain

A collaborative program for follow-up with BCPs: after initial hospital treatment, BCPs will have alternate appointments between the hospital and Primary Care Centers (PCCs) and receive the advantages of health promotion in Primary Care (PC) and breast cancer knowledge in the Hospital.

Central Lisbon University Hospital Centre Ambulance Transportation management quality improvement program

Presented by: Dr. Leandro Luis, Hospital Manager/Administrator at Central Lisbon University Hospital Centre, Portugal
The presenter will share the experience of transformation that were implemented in the Transportation Management Unit from the Central Lisbon Hospital Centre, using a quality driven approach. The Ambulance Transportation Unit was working for many years without a strategy for improving quality and client approach. They identified some of the major problems and started a solution-oriented approach using a balanced-scorecard that allowed to define responsibilities, and put in order a continuous improvement approach. This strategy is continuous and always ongoing, but for now they got better data, better response time and better employee satisfaction. You will see the results from their strategy.

How to optimize frail patient care in a Hemodialysis unit: New challenges
Presented by: Dr. Marta Arias Guillén, Nephrologist at Hospital Clinic Barcelona, Spain
Frailty is a strong predictor for the appearance of adverse events such as falls, fractures, cognitive decline, decreased quality of life and mortality, which represents a new scenario related with CKD patients care.
In view of the results obtained evaluating the fragility of the presenter’s hemodialysis patients (25% were classified as fragile and 45% as prefragile) a structural reform of the management of the dialysis unit was considered necessary to compensate for the gap between their patient profile and the care activity offered, in order to provide more individualized care according to the needs detected.

Cost-effectiveness of test biomarkers pre-hospital guided tPA in patients with stroke: Markov model
Presented by: Prof. Antoni Serrano Blanco, Deputy Director of Mental Health at Parc Sanitari Sant Joan de Déu, Spain
Thrombolysis with recombinant tissue plasminogen activator for ischemic stroke is an effective treatment, but it has a reduced therapeutic window. Using a biomarker blood-test in the ambulance to differentiate the type of stroke and treat the patient immediately, could be a great challenge for the management of this disease. The efficiency of this biomarker test is still unknown. The authors built a decision model based in literature review, clinical expert’s opinion and an ongoing clinical trial to assess the efficiency of the blood test-based pre-hospital treatment t-PA biomarker and guide recommendations for its use in Spain in stroke patients.

12:30 – 14:00
Room 5
Lightning Talks: Putting people at the center of the healthcare system through governance, leadership, integration and co-production
Hear about innovative programs, projects, and good practices from various organizations thru these lightning talks.
Chaired by: Prof. Alexandre Lourenço, President, APAH - Associação Portuguesa de Administradores Hospitalares, Portugal

The implication of an administration, aside from its official capabilities, to support medical services and the most fragile population
Presented by: Cédric Arcos, Directeur Général Adjoint at Conseil Régional d’Île-de-France
The « Région Île-de-France » health position from the beginning of the COVID-19 is a transformation for a regional government in a state where the government is responsible for all the health system. Thanks to partnerships with health associations, it gained a better understanding of the needs. This innovation for a French regional government is important because its aim is to create a new approach in which health is part of a global project, where prevention, education, regulation of hospitals, transport and territory development policy all contribute to a better protection for patients and citizens.

Exposing Obstetric Violence to improve rights-based and respectful maternal care in the Eastern Mediterranean Region (EMR)
Presented by: Merette Khalil, Consultant at World Health Organization (EMRO), Egypt
Obstetric violence is a form of gender-based violence against childbearing women which threatens the provision of high-quality, rights-based, respectful maternal care. COVID-19 has increased the incidence of obstetric violence across hospitals globally. Obstetric violence manifests in all health systems, regardless of income-levels and is likely prevalent in the EMR as maternal care in the region is highly technocratic and overmedicalized. This presentation centers women’s experiences of the seven categories of disrespect and abuse in childbirth to expose obstetric violence in the Region and to inform recommendations for policy and practice on improving rights-based and respectful maternal care.

KSA vision 2030 in leading the way for changes in humanistic leadership across the Kingdom of Saudi Arabia

Presented by: Dr. Sami Yousif, CEO of the Healthcare Leadership Academy at Saudi Commission for Health Specialties, Saudi Arabia

The presentation will focus on relationships between people and how important this is for leadership. The key focus will be on humanistic leadership and how leaders need to adapt to this. Delegates will learn from the Saudi Arabia Healthcare Leadership Academy about the long-term 2030 transformation programme to reform healthcare across the Kingdom. This will be based on a collective and accountable leadership framework and model. Lessons learned from literature and from the Kingdom’s response to COVID-19 will be shared in terms of policy, sustainability, and leadership requirements as one example of the need for change.

A social approach of health care institutions: 10 years of social contribution to local territory

Presented by: Marta Cardoner, PR & Communication Director at Fundació Sanitària Mollet, Spain

Social projects of health care institutions: providing not only health services but also local social projects to help cover needs of socially excluded groups, has proved along 10 years to be a coherent way of integrating health institutions as part of local society. Also, it prevents these groups from incurring in major health problems. Health professionals feel personal satisfaction and corporate pride when working on social projects.

Development of an effective system of provision of services, the Mediker experience

Presented by: Dr. Aigul Kulmukhamedova, Acting Director at Mediker International Hospital, Kazakhstan

MEDIKER has created and is constantly improving its own corporate culture, reflecting the close relationship between the members of the group of companies. Today the company has introduced an integrated approach to health management: diagnostics - treatment - medical rehabilitation - prevention. They have 25 medical centers in the country, a network of their own dentistry and pharmacies, a distribution network for the supply of equipment, rehabilitation, industrial medicine in production, a stem cell bank and training center. The presenter will show the lessons that their company learned during the pandemic.

A new ICU model: The architecture at the service of person-centered care and patient protocol

Presented by: Clara Rius, Partner Architect at Estudi PSP Arquitectura, Spain

The patient protocol developed in the Infrastructure and Biomedical Engineering Department, reflects the need to involve patients and first-line professionals in the decision making of the works carried out in the department. The protocol was developed with the intention of avoiding the last-minute unforeseen events that arise in the works. For this, there is a classification of type of participation according to the contact that patients have in a specific area where renovation will be carried out.
Highly realistic clinical simulation to involve field professionals in decisions about work environments and processes

Presented by: Dr. José M Quintillá, Head of Clinical Simulation Unit at Sant Joan de Déu Barcelona Children’s Hospital, Spain

Highly realistic clinical simulation has been widely used as an educational tool for training professionals in technical and non-technical skills. In the presenter’s Simulation Unit the concept is extended, using simulation also as a tool for analysis, design and decision making on work environments and processes. This service line of the Clinical Simulation Unit helps to narrow the gap between work-as-imagined and work-as-done. This presentation describes how, through simulation, front-line professionals contribute to making relevant decisions about the configuration of their workspaces and how to work in them.

Raising awareness to health professionals about emotional needs of families suffering perinatal loss through a short documentary

Presented by: Elisenda Campreciós, Midwife at Fundació Althaia Xarxa Assistencial i Universitària de Manresa, Spain

The loss of a child during pregnancy, or shortly after birth, is not a common occurrence, but it is a prevalent fact in our society. When this loss happens, life and death walk together. The grief that parents experience following a perinatal loss is a devastating experience. The presenter believes that the video named “When the illusion vanished” has contributed to help health care professionals to empathize and understand the need to be able to accompany these families with the appropriate care, respectful, empathetic attitude and professionalism so that they can start the path to a ‘healthy’ mourning.

Integrated Responsibility Centres: Illustrations of professionals’ initiative for improved performance and service response in a tertiary teaching hospital in Lisbon

Presented by: Maria João Freitas, Hospital Manager at CHULC - Centro Hospitalar Universitário Lisboa Central, Portugal

Integrated Responsibility Centres (CRI) represent a specific management model within Portuguese NHS Hospitals. These are born from professionals’ initiative and commitment to achieve certain performance goals, responding to specific problems posed by demand pressure on services, most frequently resulting in extremely high waiting times for consultation or surgery and leading to poor evaluation results. Teams organize themselves in a more flexible way, assuming a principle of intersubstitution, improved standards of service delivery and quality. Innovation and research are relevant axis, but the experiences of accountability, pay for performance and augmented staff autonomy are meant to be the transformational shift.

Setting of multidisciplinary teams for inherited kidney diseases at Puigvert Foundation-Hospital Sant Pau

Presented by: Prof. Roser Torra, Consultant at Fundació Puigvert, Spain

The presenter will review the utility of multidisciplinary teams for managing inherited kidney diseases. As these diseases are multisystem, it is mandatory to involve several different specialist, which may not always be easy. The presenter will highlight the role of the case manager nurse coordinating patient care and empowering patients. During last year, her role has been determinant by dealing with the COVID-19 pandemic and minimizing the impact on patients with inherited kidney conditions.

Casuistics and comorbidity of the patient with COVID

Presented by: Dr. Natalia Allué, Head of Clinical Documentation at Fundació Sanitària Mollet, Spain
In COVID patients it is essential to identify the profile of the patient with the highest risk of complications or suffering a death in order to be able to establish measures from the first contact of the user with the healthcare device and prevent the complication. The aim is to describe the patients with 2019-nCoV disease discharged from Mollet Hospital, and identify the profile of the patient most susceptible to suffering a complication or death, according to comorbidity. This study is a pioneer at the national level in the identification of comorbidities and identification of the characteristics of COVID patients.

Reducing the pediatric cardiac surgery waitlist at the national heart centre  
Presented by: Dr. Aia Al-Lawati, Head, Department of Cardiothoracic Surgery at National Heart Centre, Royal Hospital, Oman
Learn the steps the presenter took to reduce their overwhelming surgical waitlist in paediatric cardiac surgery using an innovative approach that utilized lean management principals and improved the system’s efficiency at various levels. You will also learn about their approach towards effective utilization of resources and the impact of introducing “Flow Management Services” in their centre.

Support and information service for women with breast cancer during chemotherapy sessions  
Presented by: Neus Domenech Oller, Chief Innovation Officer at Fundacio Hospital Olot i Comarcal de la Garrotxa, Spain
The CLOSE 2U project intelligently manages a set of 50 interactive videos, based on the patient's history and initial questions, throughout the chemotherapy process. An algorithm has been generated, capable of collecting all of the patient's personal data, at each moment in the process, and deciding which videos are ideal for each session, to provide support, information and personalized accompaniment at all times. Another important aspect is the information obtained, which is used to optimize each treatment and carry out statistical studies of interest.

Unitary action on World Diabetes Day in an urban territory  
Presented by: Señora Zoe Herreras Pérez, Médica de familia y comunitaria at CAP Comte Borrell CAPSBE, Spain
This presentation will promote a unitary community intervention during the WDD in Primary Care Centres (PCC) and Hospital Diabetes Units (HDU) as benchmarks in an urban territory to sensitize the community/professionals about the importance of an early detection of type 2 diabetes (T2D) and evaluate risk (FINDRISK) obtained in community/professionals. It will also propose new strategies according to needs detected in community.

**Lightning Talks: Transforming healthcare delivery with digital tools and AI**

Hear about innovative programs, projects, and good practices from various organizations thru these lightning talks.

Chaired by: Dr. Cary Adams, Chief Executive Officer, Union for International Cancer Control (UICC)

Is informed consent necessary when using Artificial Intelligence as clinical decision support?  
Presented by: Prof. Tom Balthazar, Professor in health law at UGent and Zorgnet-Icuro, Belgium
Artificial Intelligence (AI) can be used in different ways. During the diagnostic process it can help the physician to analyze data. During the therapeutic process AI can help the doctor to choose the best therapy. A new question is if it is always necessary to inform the patient about the utilization of AI and to obtain his consent.
There is no doubt that a patient has a right to be informed about his health status and has to give his consent before starting a proposed treatment. Does this change when Artificial Intelligence was used to support the decisional process?

Health-Circuit: Digital health tool for personalised continuum of care management: Cluster randomized controlled trial
*Presented by: Carmen Herranz, Nurse at CAPSBE, Spain*

This study evaluates the potential of a digital health tool, Health-Circuit, for improving the management of complex chronic patients with risk of hospitalization, as well as the operational capacity of health teams in the community. The current study assesses the prototype, aiming at fostering patients' self-efficacy and enhancing management of unplanned events, facilitating collaborative work across the system. The mHealth tool showed good usability score and high acceptance rate. The intervention group used less healthcare resources, increased patients’ empowerment and had better perception of continuity of care. Completeness of technological developments and large-scale assessment of Health-Circuit is encouraged.

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<th>Development of an App to support clinical decision-making and promote the standardization of practice of pediatric nurses</th>
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<td><em>Presented by: Ana Gil Carrasco, Pediatric Nurse at Hospital Sant Joan De Déu, Spain</em></td>
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The presenters will talk about the E-pedia development project, an innovative App with support resources for the pediatric nurses’ practice, which provides tools and content based on scientific evidence for making clinical decisions and solving doubts.

E-pedia contains scales, algorithms, procedures, tables, images, videos and calculators, designed to permit the user to obtain information in an intuitive, agile and interactive way, offering updated and customizable content, with instant access at the bedside. This project aims to promote evidence-based clinical practice and thus generate greater homogeneity, safety and quality of care for patient’s benefit.

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<th>Patient-centered care at Grup Mutuam with Ekon Health platform</th>
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<td><em>Presented by: Fernando Leeson, Healthcare Systems Implementation Consultant and Project Manager at iSalus, Spain</em></td>
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Digital transformation is a key concept and a lever to boost the quality of services provided in the health sector and guide them properly.

Providing healthcare professionals with a comprehensive management tool with a patient-centric added value allows, in addition to covering clinical and care functions, a personal humanistic orientation for each patient and their "Preferences, Wishes and Values".

Grup Mutuam has successfully opted for Ekon Health solution to meet its functional and technical requirements: a Patient-centric tool that focuses on both individual patient and Clinical-Healthcare needs with an integral Patient Journey Map.

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<th>Impact of the implementation of an in-hospital multidisciplinary 3D planning Unit (4 years’ experience)</th>
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<td><em>Presented by: Arnau Valls Esteve, R&amp;D Engineer at SJD Barcelona Children's Hospital, Spain</em></td>
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In recent decades, disruptive technologies such as new medical imaging tools and 3D Printing (3DP) are impacting healthcare providing novel and personalized solutions for complex clinical treatments, improving resident training and surgery planning.

In some surgical services it begins to be gold-standard practice for certain complex interventions. Hospitals begin to integrate 3DP, moving manufacturing of medical devices from plant-to-bedside.
The presenters will share the experience, impact and results of the implementation of an in-house multidisciplinary 3D planning service in a tertiary specialized hospital and its implication in COVID-19: SJD Barcelona Children's Hospital 3D4H Unit born in 2015.

Innovative UVC technology - decontamination solutions dedicated to hospitals & medical sectors
Presented by: Mateusz Grabka, Managing Director at Eco Light Biosafety Technology, Poland
Attendees will be provided with a comprehensive insight into the benefits of innovative UVC technology and its contribution to environmental microbiology safety within European healthcare sectors. Gain exposure to the latest high-level detailed analysis of ESKAPE pathogen laboratory testing undertaken through the use of UVC in 2021. The presentation is highly beneficial and informative to those who manage infection prevention teams, epidemiologists, and professionals that have a direct interest in the reduction of hospital-acquired infections.

COVID-19 pandemic: Effect on patient utilization of telemedicine in Dubai Health Authority (DHA)
Presented by: Dr. Nouf Alnoon, Family Medicine at Dubai Health Authority, United Arab Emirates
Presenters will share their experience with telemedicine to provide care in Primary health care setting, the effect of the COVID-19 Pandemic on utilization of telemedicine and their experience, as well as future aspect of telemedicine utilization in Dubai.

How did we manage to start remote care process in few weeks?
Presented by: Dr. Paula Turunen, Director of Development at Central Hospital of Kanta-Häme, Finland
The presenters will share their experience. The key factors were strong external forcing factor (COVID-19) and multi-professional team which knew the needs of professionals, understood IT challenges and security requirements when planning the implementation. The timing was crucial and they were able to respond to the need quickly.

Telehealth adoption by international patients at a major US academic medical center during COVID-19
Presented by: Benjamin Seo, Global Business Development Manager at Cedars-Sinai, United States
The majority of international patients traveling to the US, approximately 100,000 to 200,000 unique patients annually, are treated at major Academic Medical Centers (AMCs). With medical travel significantly disrupted by the pandemic, US AMCs have been working quickly to understand global telehealth regulations in order to maintain access for these patients. In this study, we examine the adoption of telehealth for international patients at Cedars-Sinai Medical Center (CSMC), a tertiary care 886-bed AMC located in Los Angeles, California that receives 2,300 unique international patients from over 100 countries annually.

Developing a tele-neonatology program in response to the COVID-19 Pandemic
Presented by: Simon Minford, Clinical Innovation Consultant at Alder Hey Children’s Hospital, United Kingdom
Presenters will provide an overview of services and geography of the hospitals involved in the program, the problems they faced during the COVID lockdown, a walkthrough of initial tele-neonatology rapid implementation program, improvement of initial implementation with additional equipment, evaluation and insight from staff and families, video of a remote surgical consultation, and how to apply learning from this project to future challenges.
Artificial Intelligence-based predictive algorithm for strategic planning of surgical demand and compliance with waiting lists deadlines  

*Presented by: Dr. Juan A. Hueto-Madrid, Coordinator of Surgical Process of Hospitals at Catalan Institute of Health, Spain*

Fitting resources and surgical capacity to demand at hospitals has been always a challenge in countries with universal healthcare systems with guaranteed waiting time for surgical procedures. Is it possible to predict months in advance the evolution of demand and surgical waiting lists to make a proper allocation of sessions to departments? We present ALBA, an AI and Machine Learning algorithms-based tool at the Catalan Institute of Health to manage waiting lists, prediction of surgical demand and the allocation of surgical resources at hospitals.

Enabling an Artificial Intelligence and machine learning infrastructure to improve patient care and outcomes by improving healthcare data analytics  

*Presented by: Luis Magalhaes, Director, Customer Solutions, Site and Patient Network at Clinerion Ltd, Switzerland*

Attendees will learn the description of the development of an AI/ML infrastructure & the application of AI/ML learning models in a federated/local network. They will also understand how EHR-based patient data analytics can detect undiagnosed / misdiagnosed / rare disease patients. As well as discover how AI/ML technologies can enrich patient data and thereby support drug development and epidemiology.

**Virtual Paper Presentations: Using technology to deliver effective, patient-centered health services**

Learn and be inspired by brief presentations of innovative programs, projects, and good practices from various organizations:

- **A multi-sensor integrated teleconsultation model for critically ill patients to enable timely conjoint resuscitation in a district hospital**  
  *Presented by: Dr. Ming Ming Wilfred Lee, Associate Consultant at Accident and Emergency Department, Tin Shui Wai Hospital, Hospital Authority, Hong Kong*

  The presenters will share the experience of teleconsultation to ICU in a district hospital, in which a teleconsultation system integrated with high resolution video-conferencing and various Internet of medical things (IoMT), including digital stethoscope, remote ECG and point-of-care testing access, real-time streaming of ultrasound and endoscopy views were demonstrated.

- **Implementing effective, sustainable acute care telemedicine programs: The neonatal tele-resuscitation paradigm**  
  *Presented by: Dr. Jennifer Fang, Medical Director, Teleneonatology; Assistant Professor of Pediatrics at Mayo Clinic, United States*

  Successful acute care telemedicine programs allow organizations to expand their reach by supporting smaller hospitals that have limited experience caring for critically ill patients. During this presentation, attendees will learn about best practices for designing and implementing acute care telemedicine programs, such as telestroke, tele-emergency medicine, and neonatal tele-resuscitation. The presenters will review strategies for establishing effective and sustainable acute care telemedicine programs, including: 1) addressing a defined patient need or quality gap; 2) using an efficient clinical workflow and high-performing telemedicine platform; 3) establishing collaborative relationships with originating sites; and 4) measuring program performance, including process and outcome metrics. Thoughtful design and implementation are important as it impacts program adoption and scalability.
Critical Actions for Response and Escalation System (CARES): A combination of modern healthcare and advanced technology

**Presented by:** Dr. Kevin KF Wong, Consultant at Department of Surgery, NTWC, Hospital Authority, Hong Kong

The implementation of CARES, coupled with modern technology (electronic early warning system), result in an increase in completeness of vital sign documentation in the presenter’s surgical ward, making the use of early warning score feasible and more practical. Moreover, the system was accepted and positively evaluated by the ward staff, showing its potential in improving clinical effectiveness and patients safety.

Follow-up call for patients diagnosed with SARS-CoV-2

**Presented by:** Artur Beja, Nurse at Centro Hospitalar Universitário Lisboa Central, Portugal and Ana Tomaz, Nurse at Centro Hospitalar Universitário Lisboa Central, Portugal

Taking advantage of the established clinical team and focused on a dynamic phone follow up, CPU unit adapted itself to swiftly respond to the current pandemic, allowing the monitoring and support of thousands of patients, preventing unnecessary visits to the hospital or other health care units.

Putting the healthcare workforces back onto the right tracks: The values of informatics-driven process automation in operating theatres

**Presented by:** Dr. Carmen Lam, Consultant Anaesthetist at Hospital Authority, Hong Kong

Based on the presenter’s findings, Radiofrequency Identification (RFID) specimen auto-tracking system was installed in OT and specimen locations were auto-tracked and logged on the specimen coordinating dashboards. This spared nursing manpower from specimen checking. Auto-notification system was established to interface the OT readiness signals from ACIS to the staff paging system. This further relocate nursing attention to patient-focused care and the quality of patient care will be augmented. To enhance patient experience in the perioperative journey, AI-chatbot “Family Link” was developed, through which the family could make instant enquiries into the operative status and information related to the operation. This helps offload the mental and psychological burdens of the family, particularly during COVID, which precludes the family from hospital visits. And in the long run, this helps alleviate the pressure on nursing manpower and the healthcare workforces could be put back onto the right tracks of patient-centred care.

Digitalization of documentation and workflow in emergency department as prototype of less-paper hospital with decision support – The eAED project

**Presented by:** Dr. Chun Tat Lui, Consultant at Tuen Mun Hospital Authority, Hong Kong

Digital transformation of clinical documentation and workflow in busy emergency department with high throughput would be a good role-model to illustrate the practicality and gained value to achieve a less-paper or paperless clinical worksite. Digitalization is not just a value of modernization and being environmental friendly, but dramatic impact on enhancement of quality and safety care, and healthcare sustainability. Workflow automation, big data analytics on digitalized data for decision support to improve workflow efficiencies. Digital transformation would be one of the effective measures to sustain a double-win for both healthcare quality and efficiency.

Development and establishment of the Hospital Intelligent Management System

**Presented by:** Dr. Mahmoud Khodadust, Vice-Chancellor in Administration and Resources Development Affairs at Shahid Beheshti University of Medical Sciences, Iran and Dr. Alireza Zali, Chancellor at Shahid Beheshti University of Medical Sciences, Iran

Hospital Intelligent Management (HIM) System is an innovative information management and business intelligence system of Shahid Beheshti University of Medical Sciences (SBMU). HIM is a comprehensive and integrated decision-making and business intelligence system. In this system, the functional information of hospitals is integrated and
standardized from various databases and is provided to managers in the form of performance reports and specialized dashboards. The comprehensiveness, accuracy, precision and timeliness of the information is a unique feature of this system, which has enabled the purposeful planning and monitoring of the distribution and consumption of resources, improving productivity and improving the quality of medical services.

Polish Medtech Startups
Presented by: Dr. Ligia Kornowska, Managing Director at Polish Hospital Federation, Poland
The “Top Disruptors in Healthcare 2021” Report is the first review of innovative medical start-ups in Poland. Identifying the most promising start-ups on the Polish healthcare market, obtaining key information about these entities and presenting this information in a structured and consistent manner to potential recipients is one of the many assumptions implemented by the Report.

12:30 – 14:00
Virtual Lightning Talks: Leadership and teamwork models for service delivery centered around health practitioners and patients
Hear about innovative programs, projects, and good practices from various organizations thru these lightning talks. Presentations include:

Ethical management model in a health institution
Presented by: Dr. Ana Rodríguez, Director of Strategy and Corporate Social Responsibility at Institut Català d'Oncologia, Spain
The Institut Català d'Oncologia integrates Corporate Social Responsibility (CSR) into its management in order to improve the quality of life of employees, the communities in which it develops its activity and society as a whole. The COVID-19 pandemic has shown that CSR is more necessary than ever, because it highlights the need to transform organizations and their relationship with stakeholders. Their ethical management model can serve as an example for other health centers to move towards transparent organizations with comprehensive and equitable care that seeks the best possible personal treatment through alliances and provides support to improve quality of life.

A sustainable path forward - Lessons from the field in well-being
Presented by: Elisa Arespacochaga, Vice President, Clinical Affairs and Workforce at American Hospital Association
Burnout is not new, however COVID-19 has highlighted the challenges faced when administrative burden, sub-optimal communications systems, and uncoordinated teams collide with an extended crisis. In addition, the traumatic impact of COVID-19, has amplified the need for support. This presentation will share organizational steps for addressing well-being and the role of leadership to scale across institutions. Additionally, the strategies for creating personal supports and scaling interventions in light of the COVID-19 pandemic will be discussed.

Ensuring the health system sustainability: Tackling low-value clinical practices in Catalonia (Essencial)
Presented by: Johanna Milena Caro Mendivelso, Researcher-Responsible Value based healthcare at Catalan Agency of Health Quality and Assessment (AQuAS), Spain
This initiative is innovative, appropriate and relevant because it is an intervention for enhancing people-centered integrated healthcare, improving evidence-based performance quality of the healthcare system, allowing the optimization of the resource allocation and protecting the sustainability of the Catalan universal healthcare system. The preliminary analysis of five low-value clinical practices (out of 78 published) at the Catalan primary level, has pointed out a relevant reallocation resource, giving the opportunity for reinvestment on higher value practices. Moreover, there is also a relevant clinical impact for patients as reducing adverse events related to overuse.
Establish a clinical audit system to improve the quality of disease care in a Medical Center in Central Taiwan

Presented by: Dr. Shih-An Liu, Director of Center for Quality Management at Taichung Veterans General Hospital, Taiwan

In 2017, the Center for Quality Management (CQM) initiated the internal Clinical Auditing system, and sketched a blueprint for "quality management of disease treatment and nursing care". The presenter hopes that clinical physician can use evidence-based medicine and guidelines to approach selected topics, to establish standardized treatment models, and set to create clinical pathways. Through clinical audit, they aim to understand the differences between clinical practice and empirical evidenced-based medicine. They further analyze the causes of the gap and initiate improvement processes. Finally, they would like to promote the ability of medical professionals as well as to enhance multidiscipline cooperation.

Cognitive bias awareness, coding, and debiasing as a serious safety event reduction strategy

Presented by: Dr. Brian Wagers, Associate Chief Medical Officer Quality and Safety at Riley Hospital for Children | Assistant Professor of Emergency Medicine and Pediatrics at Indiana University Health, United States

Participants will learn what a cognitive bias is and how the presenter's organization used awareness of these phenomena and debiasing strategies to decrease the number of serious patient safety events that occurred at their institution. This led to a record number of days between serious patient safety events and thus decreased harm for patients.

Deployment of the Safety strategy in the Vall d’Hebron University Hospital

Presented by: Dr. Jesus Martinez Perez, Safety Leader at Hospital Universitari Vall d’Hebron, Spain

The methodology for a cultural change towards a front-line professional leadership linked to the Safety strategy deployment of the Institution has led to exceed the KPI target increasing the safety incident reporting rate (IRR) more than a 400% and developing more than 30 improvement projects as corrective measures in six months.

Interdisciplinary cancer units: Clinical Microsystems to improve results

Presented by: Dr. Jordi Trelis, Director of Care at Catalan Institute of Oncology, Spain

There is enough scientific evidence that interdisciplinary teamwork in cancer allows better decisions to be made and better health outcomes. Catalan Institute of Oncology (ICO), as a high reliability organization, it has developed clinical Microsystems called Functional Unit of Oncology Care (UFAO), whose mission is the diagnosis, staging of the disease and the design of the most appropriate therapeutic strategy for each patient.

The objective of the presentation is to present a model that combines patient-centered care with interdisciplinary care and how these two actions can affect health outcomes.

Empowerment of the families in a pediatric home hospitalization program for acute and exacerbated chronic patients

Presented by: Ane Achotegui, Nurse at Hospital Sant Joan de Déu, Spain

Pediatric home hospitalization has characteristics that require caregivers to have extensive knowledge of both the health-disease process and the care it requires. Early recognition of alarm signals, correct use of devices, self-administration of treatments and trust in the healthcare team are essential for the success of the program. Empowerment and self-care are key concepts of the service.

In this presentation, you will learn about the training process that the nurses of the San Joan de Déu Hospital carry out with the patients and their families or caregivers before moving them home, as well as the monitoring that is performed.

Integration of a psychogeriatry unit in a hospital intermediate care unit- when the sample is n = 1 ACP model

Presented by: Dr. Esther Celda, Directora del Hospital Sociosanitario Bernat Jaume de Figueres at Fundació Salut Empordà, Spain
The knowledge of the biography, preferences and values of each patient together with a careful multidimensional assessment allow addressing behavioral disorders beyond the disease and its phases. The person-centered model with the integration of patients with dementia in a conventional care unit can be extended to permanent living spaces of patients such as residences avoiding differentiated spaces and insulating environments that affect people’s quality of life. The need for specific psycho geriatric units is questioned. In 2020 and throughout the pandemic, the care model was maintained by adopting the appropriate measures with common sense. Overall mortality did not increase.

The Catalonia Patient Expert Program (PPE-CAT®) in Chagas Disease: A pioneering experience addressing comprehensive care involving affected people

**Presented by: Isabel Claveria Guiu**, Nurse at International Health and Communicable Diseases Unit in Drassanes/Valle Hebron University Hospital, Spain

The methodology used shows that implementing programs that promote self-care and autonomy of people with chronic illnesses gives them tools to manage the physical-psycho-social impact of the disease. Also, the EP plays a key role as a multiplier of knowledge and sensitizer of screening for Chagas disease, both in the country of residence and in the country of origin. This implication gives the EP a social recognition and strengthens the sense of group of the collective.

How listening acutely to patients catalysed the conceptualisation of a patient centric Disease Specific Center

**Presented by: Dr. Dilip Panikar**, Lead Consultant - Neurosurgery at Aster Medcity, India

Traditionally, the onus of navigating through the process of fighting a complex disease lies with the patient - from finding the right doctor/s to understanding the disease. The initiative of putting together a disease specific center, created an environment where the patient has easier access to a pool of experts, has a better understanding of the disease and is guided through pre- and post- hospitalization phases.

The theme primarily revolves around how the voice of the patient can influence and break traditional methods of delivery of patient care.

Humanization of healthcare spaces: Putting people at the center of healthcare transformation

**Presented by: Esther Puig**, Administrative in Participation and Fundraising Unit at Althaia Xarxa Assistencial i Universitària de Manresa, Fundació Privada, Spain

The presenter’s organization is promoting the humanization of healthcare so their aim is to create a hospital that reflects their environment and community. To provide the best experience for their patients and clinical teams. Their project focuses on giving patients a voice in both care development and the designing of spaces and general atmosphere of the hospital itself.

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<tr>
<td>14:00 – 15:00</td>
<td><strong>Closing Plenary Session and Ceremony</strong></td>
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<td><strong>Dr. Zsuzsanna Jakab</strong>, WHO Deputy Director-General, <strong>Hble. Dr. Josep M Argimon</strong>, Catalan Health Minister and <strong>H.E. Awadh Al Ketbi</strong>, Director General of the Dubai Health Authority will provide keynote addresses. Sr. Enric Mangas, President of La Unió Catalana d’Hospitals (Catalan Hospital, Health and Social and Services Association) and Roser Fernández, CEO of La Unió Catalana d’Hospitals, will hand over the World Hospital Congress to Dubai Health Authority, the host of the 2022 edition. Finally, <strong>Deborah J. Bowen</strong>, FACHE, CAE, President Designate of the International Hospital Federation, will officially close the event.</td>
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<td>15:00 – 18:00</td>
<td><strong>Hospital site visits</strong></td>
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<td>You can sign-up to join one of the site visits offered to Congress delegates at an additional cost of €30. You can book your slot during registration. <a href="#">More information available here</a>.</td>
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