Helseteknologi, innkjøp og ledelse som verktøy for økt kvalitet og effektivisering i helse og omsorg
Key figures - Oslo Medtech

• Founded November 2009
• Cluster, organized as a nonprofit membership organization
• 180 members/partners
• The full health value chain represented

• 37 bill NOK turnover and 5.7% growth in value creation in 2013

• Partner in Innovation Norway cluster program since 2009
Vision
Oslo Medtech is to become one of the most innovative global health technology clusters within 2020.

Mission
Our mission is to develop and industrialize world class health technology products and services that enables sustainable and high quality treatment and care, and Norwegian Medtech industry growth.

Main goal
To increase the competitiveness of the companies in the cluster and strengthen the attraction of the cluster internationally.
The cluster Oslo Medtech

Collaboration for increased innovation and international growth
Results and effects

Result goals:

Increased innovation ability

World class health tech products and solutions

Effect goals:

Increased industry growth and value creation

Sustainable and high quality treatment and care
Budskap

Helseteknologi, innkjøp og ledelse som verktøy for økt kvalitet og effektivisering i helse og omsorg
Norwegian and global societal trends and challenges

Less hands in healthcare  
Demografical changes  
Ricing health costs  
Access to technology
Challenges – «Eldrebølgen»

Figur 3.13 Prosentvis årlig endring i antall personer over og under 80 år 1950–2050

Kilde: Statistisk sentralbyrå 2012. Middelalternativet (MMMM) i befolkningsframskrivningene.
Number of elderly people

Figur 3.12 Antall personer i aldersgruppen 67 år og eldre 1950–2050

Kilde: Statistisk sentralbyrå 2012. Middelalternativet (MMMM) i befolkningsframstillingene.

Figur 3.14 Antall personer med demens framstillet 2010–2050

Background & aim

- PWC report, June 2015
- Trondheim, Bergen, Stavanger, Kristiansand and Oslo
  - Nordre Aker, St.Hanshaugen, Stovner, Søndre Nordstrand, Østensjø
- Spent 21 bill NOK in 2013 health and care
- 90% of the costs are related to services at home – and at institutions (hjemmetjeneste og institusjon)
Background & aim

- Large differences in spent resources to health and care between the large cities in Norway
- Aim of report – to identify the factors that explain the differences
- Identify future actions

Figur 4 Ressursbruk til PLO per behovskorrigert innbygger målt opp mot gjennomsnittet i ASSS

Ressursbruk per innbygger ifht gjennomsnitt i ASSS, 2013
Findings: What leads to resource reduction?

• Organizational culture:
  • Coordination and dialogue between procurement unit and home care unit
  • Collaboration – respect and trust
  • Visionary leaders with clear values, acting like role models
  • Aligned «message» between political and administrative management
Findings: What lead to resource reduction?

- Visionary management; focus on goals and strategies, and that management are “cultural carriers”
- Focus on the «customer»/user
- Room for innovation, creativity and try new things
- Active involvement of the employees
- Trust and respect between management and employee
St. Hanshaugen / Oslo

- Visionary management; focus on future
- Invested in health technology (clinical trials and procurement) (Velferdsteknologi)
- Focus on innovation and user needs, and involvement early in the patient pathway

- Aim and motivation:
  - Prevention
  - Employee and patient involvement
  - Independent living
  - Reduction of cost, and more efficient workflow
Daily health check - monitoring heart, diabetes, COPD, etc
St. Hanshaugen/Oslo – extraordinary results

• High motivation among employees
• The positive results, and motivation, is spreading to other areas in the
• Coordination among the management in St. Hanshaugen – do not create clients for other areas

• The fact that the political and administrative management is acting as a collective unit, healthcare emerges as a united service.
Positive effect on cost (reduction)
Innovative Procurement

Fase 1 - Forberedelse og forankring

Fase 2 - Anvendt R&D / Pre-Kommersiell anskaffelse (PCP)

Fase 3 - Offentlig anskaffelse av innovative løsninger (IPP)
Follow us on
@OsloMedtech
OsloMedtech
Contact
www.oslomedtech.no
mail@oslomedtech.no