

# White Paper

## 360° Health Innovation Accord

**Recommendations for Integrated and Resilient Healthcare**



NORTH DENMARK  
REGION



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HEALTH



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# Executive Summary

We are standing on a profound success: In recent decades, across Europe, major gains have been achieved in population health. Life expectancy has increased, premature mortality has been significantly reduced, and more people can look towards living into old age free of limitations. But with these amazing achievements, a new set of challenges have arrived. To ensure that population health and wellbeing remains an engine for social inclusion, economic wellbeing and competitiveness, we need to rethink, transform and reimagine healthcare.

As part of the Danish EU Presidency 2025, North Denmark Region together with Aalborg University Hospital had the opportunity to put this conundrum on the agenda when 460 experts, policy makers and practitioners from 26 countries met at the TOGETHER4HEALTH conference in Aalborg Denmark to exchange learnings, experiences and ideas.

What stands out from this gathering is that we may organise our healthcare systems differently, but we share many of the same challenges and solutions across Europe. We each hold important pieces of the puzzle for how to reimagine and transform our healthcare systems with patients' and citizens' long-term health and wellbeing at the centre.

The 360° Health Innovation Accord outlined in this White Paper and the lessons learned from the Together4Health conference is closely aligned with key EU policy frameworks, including the EU Life Sciences Strategy, EU4Health and Horizon Europe. Combined, these frameworks emphasise the need to move beyond isolated pilots towards system-level innovation, implementation and upscaling. Therefore, this white paper is intended as a resource for everyone involved in shaping tomorrow's healthcare, well aware that none of us have all the answers, but together we have more answers than on our own.

It starts by laying out the 360° Health Innovation Accord, a workable model for how to take a patient-centric, holistic and collaborative approach to driving innovation that is scalable and sustainable. As a front runner in integrated care, the model has been designed and tested by Aalborg University Hospital and their Innovation Clinic together with a broad range of stakeholders in the catchment area of North Denmark Region. The 360° Health Innovation Accord provides a shared framework to translate policy ambition into real-world implementation by aligning technology, data, organisation, financing, competencies, culture, ethics, and citizens' life situations.

Starting with the patient, the 360° Health Innovation Accord provides the backbone for the way we have structured the Whitepaper. Chapter by chapter, we present thematically how the dimensions have been applied in practice.

It has been our ambition to present the model as more than an intellectual framework, but rather as a conceptual blueprint that can be applied by everyone in the process of shaping tomorrow's healthcare system. In each chapter, you will find concrete examples and cases from North Denmark Region, alongside learnings and insights shared by colleagues during the conference, to illustrate the model in action.

The conference concluded with a resounding call to action to join forces to innovate boldly, collaborate openly, and commit to a health system that empowers every individual. This has been captured in a set of recommendations on how to operationalise the 360° Health Innovation Accord across Europe.

The recommendations are concrete, actionable and targeted at stakeholders within the health ecosystem from public authorities and regulators to hospitals and healthcare providers, companies and industry, knowledge institutions and universities, general practitioners and primary care, and of course – not to forget citizens and patients.

On behalf of North Denmark Region, we would like to conclude by thanking everyone who contributed to the conference, its call to action, the white paper and its practical examples – hard learned and earned.

Let us keep the momentum going and let us continue to work together to further build and strengthen the 360° Health Innovation Accord as a shared model for driving patient-centred, holistic and scalable innovation for the future of healthcare across Europe.

Together, we can learn faster: The health of Europe's citizens is the wealth of its nations, regions and communities.



Jakob Krogh  
Chief Executive Officer  
North Denmark Region



Lars Dahl Pedersen  
Director  
Aalborg University Hospital



## Introduction

**360° partnership-driven innovation is a prerequisite for developing the next generation of integrated healthcare<sup>1</sup> for the benefit of citizens.** This was the central message of the Danish EU presidency conference TOGETHER4HEALTH.

The conference highlighted how the European healthcare landscape is being shaped by changes in demography and a shrinking workforce, placing a double demographic pressure on our healthcare systems. This presents an opportunity to fundamentally rethink how we work and organise healthcare systems. It requires a transition away from sector-based solutions towards integrated, innovative, person-centred models of care. Such a transition can only be realised through cross-sectoral partnerships anchored in patient needs that align public authorities, health and care providers, academia, industry and civil society around common health outcomes.

Today, around 50 million people in the European Union live with two or more chronic conditions, mostly older people, and with a significant overrepresentation among disadvantaged and lower socio-economic population groups. While these changes present significant challenges, they also create opportunities to ensure that longer lives are matched by more years in good health, while addressing persistent inequalities.

To compound the challenge of increasing health needs, Europe is facing a shortage of around 4.1 million health workers by 2030, including 600,000 doctors and 2 million nurses – a combination of an ageing health workforce and waning interest among young people to enter healthcare professions<sup>2</sup>, highlighting a need to invest in our workforce and more attractive, sustainable health professions.

Structural barriers persist for transforming healthcare, including hardwired budgetary and organisational siloes between different parts of the health and social care systems, that further are competing up against increased defence budgets, climate mitigation and a needed trust in our social model with taxpayer-funded social welfare.

Against this backdrop, adapting healthcare systems to growing demands is essential to safeguarding sustainability and equity of the European healthcare model with its overarching values of universality, access to good quality care, equity, and solidarity. Addressing these challenges unlocks great potential for innovative approaches and cross-sector collaboration, leading to improved health outcomes, better patient and caregiver experiences, and increased system efficiency.

### Health at the Heart of Europe's Competitiveness

Health is at the heart of Europe's ability to stay competitive, resilient and socially cohesive. The Mario Draghi report called out the urgent need for Europe to strengthen its global relevance as a competitive power, emphasising that Europe must invest, innovate and integrate innovation more deeply to gain competitive advantages<sup>3</sup>.

Medical and technological advances hold great potential for transforming healthcare delivery by offering new opportunities for diagnostics, monitoring, treatment, and patient-centred care. Europe's life sciences sector is centrally positioned to be at the heart of the necessary transition, adding nearly €1.5 trillion in value to the EU economy and supporting 29 million jobs across the EU. As part of Europe's drive to strengthen competitiveness, the European Commission has made a bold ambition to make Europe the most attractive place in the world for life sciences by 2030<sup>4</sup>, by optimising the research and innovation ecosystem, ensuring smooth and rapid market access for life science innovations, and boosting its uptake and use in practice.

As we embark on the complex task of shaping tomorrow's healthcare, we need to join forces in a collective rethink of the way we organise, develop, invest in and deliver healthcare – within and across country borders. This calls for new ways of thinking and encourages innovative solutions. The complexities connected to healthcare

innovation simultaneously call for cross-sector collaborations that fully reflect the real-world needs and lived realities of patients - the people for whom healthcare exists. By sharing and learning together on what works and what doesn't, we can advance faster and become ready for change.

### Time for a Radical Rethink

North Denmark Region is a frontrunner in Integrated Healthcare, working towards bringing together healthcare professionals, businesses, researchers, civil societies, and citizens to co-create better, innovative solutions. North Denmark Region works on new ways to strengthen the healthcare system of the future, fully aware that some solutions remain unknown. This is why we must work together—locally, nationally, and across Europe.

Gathering stakeholders from across Europe, the conference offered an opportunity for a collective rethink for the future of Europe's healthcare in the face of shared challenges and opportunities. Delegates contributed with their practical learnings, innovative models and insights on what works and why. The discussions concluded with a joint call to action for a patient-centred and collaborative approach to health innovation as a key driver for a healthier, more resilient and competitive Europe.

The conference introduced the 360° Health Innovation Accord as a model that could be scaled towards this vision. The 360° Health Innovation Accord is a holistic and collaborative innovation model that puts patients in the centre of health innovation and enables a 360° collaborative approach.

Anchored in the conclusions from the TOGETHER4HEALTH conference, this white paper serves as an inspiration to embrace the complex challenges of innovating healthcare in Europe as a collaborative effort, and the 360° Health Innovation Accord as an invitation for shaping the future of healthcare together – sub-nationally, nationally, regionally and across Europe. The 360° approach is not presented as a finished blueprint, but as a living model that can be adapted, tested, and further developed in

partnership with other European partners who share the ambition of more resilient, patient-centred healthcare systems.

The 360° Accord has been put to the test in Denmark, which is known for its universal, publicly funded healthcare and a highly decentralised system, where responsibilities are divided across three different political and administrative levels<sup>5</sup>. Although our healthcare systems may be organised differently across Europe, the challenges we face and the experiences we share strike a familiar chord from one country to another<sup>6</sup>. This shows that there are more shared experiences and lived realities that unite us than divide us – a key observation from the conference.

### Together for Health

The 360° Accord can serve as a great tool for bringing innovation closer to the community and creating a joint language across organisational domains to cater for future healthcare. It helps bridge the gap between healthcare professionals and patients, breaking down siloes, building trust and better understanding among sectors, within the system and across different professional and civil society groups – once everyone can see themselves in a bigger picture context sharing the same goals. Not as fragmented pieces in a puzzle where different incentives and objectives prevail.

This white paper sets out to introduce the 360 approach and provides recommendations to further develop with inspiration from hands-on examples, presentations and discussions from the conference. Building on this collaborative approach, a clear conclusion emerged from the conference - we can realise the potential of innovation, and deliver better health outcomes within available resources, if we are smart in the way we deploy innovation – **TOGETHER**.



[Click here](#) to hear highlights on the conference from

**Mette Kierkgaard**

Denmark's Minister for Senior Citizens



# 1 Solving the Healthcare Innovation Paradox through the 360° Health Innovation Accord

Despite well-documented growing health care demands and the rapid expansion of potential healthcare technologies, many promising solutions fail to translate into routine clinical practice, resulting in limited impact. An apparent paradox frustrating both patients, public and private partners.

To dismantle this paradox, the North Denmark Region, as the governing body of the public regional healthcare systems, has launched a series of initiatives testing and validating an integrated care approach with hands-on impact for patients and citizens. These initiatives have been developed and demonstrated in collaboration between municipalities, hospitals, general practitioners, and the private sector, based on the notion that complexity is most effectively addressed by combining resources, knowledge, and networks across institutional domains.

While these initiatives have demonstrated the potential of integrated healthcare, several learnings have emerged, pointing to the need for a holistic innovation approach to mitigate future challenges in healthcare. This is further motivated by the observation that successful, scalable initiatives rely on bringing together diverse expertise across organisations, actively involving patients and citizens, and implementing technologies that fit seamlessly into the workflows and skills of both healthcare professionals and patients.

These findings also highlight the importance of integration and sustainable financial models, illustrating that meaningful progress depends on navigating both political, structural and practical conditions, among other factors.

These insights have resulted in the design of a conceptual innovation model underlying the **360° Health Innovation Accord** (see Figure 1), providing an investigative framework to address and dissolve the apparent healthcare innovation paradox.

The framework calls for a comprehensive, holistic innovation approach to meet future challenges. It holds the potential to take action on the complexity of healthcare

innovation and to create a shared framework—a common language—for public, civil, and private partners to develop solutions in close dialogue with the broader ecosystem, within the environment where innovation happens.

The 360° Accord places the individual—the person for whom healthcare exists—at the centre. Healthcare is created for citizens, and innovation should be developed with their needs, experiences, and everyday lives in mind. The individual also represents the professionals, who work with and for those who rely on healthcare, recognising that meaningful innovation must support both those receiving care and those delivering it.

Rooted in years of practice and inspired by academic perspectives, the 360° Health Innovation Accord outlines a conceptual framework that encompasses eight critical aspects that come into play when driving healthcare innovation<sup>7</sup>. Healthcare Innovation is thus understood as more than, e.g. a technology-driven endeavour. It addresses the complexity involved in developing and implementing healthcare solutions that are equally dependent on the skills and competencies of patients, caregivers and solution providers. Including access to appropriate digital infrastructures for effective data sharing and the use of AI, and the presence of suitable regulatory frameworks, financing mechanisms, and cross-organisational agreements to ensure seamless patient journeys.

The eight aspects of the conceptual model are interdependent and anchored in the understanding that if one piece of the puzzle is missing, progress will be void or limited to pilot projects. Successfully overcoming the healthcare innovation paradox and the potential for scaling innovations is therefore dependent on an insightful management of requirements derived from the eight aspects.

Furthermore, the model embraces the structural conditions that innovation projects must address. These aspects, which may lie beyond the direct control of individual projects, include regulatory requirements, financing structures, ecosystem partnerships, trust and

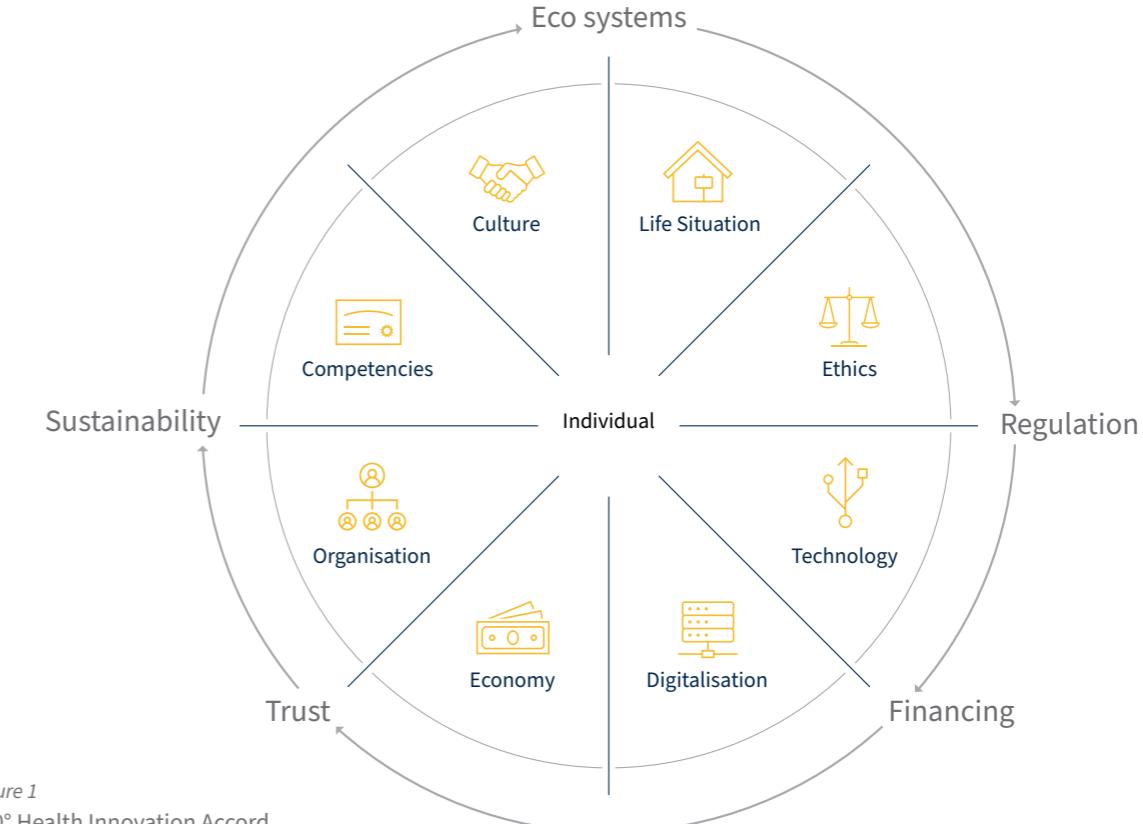


Figure 1  
360° Health Innovation Accord

recognition amongst collaborators and the growing demand for sustainability — all of which influence the likelihood of long-term scalability of developed solutions

The 360° Health Innovation Accord hence reflects core principles found in EU initiated healthcare initiatives, where system innovation, implementation science, real-world testing and cross-sector collaboration are recognised as prerequisites for impactful healthcare solutions. By addressing organisational, regulatory, financial, and cultural dimensions in parallel, the Accord offers a structured framework that enables healthcare innovations to move beyond demonstration projects and into sustainable practice.

In the following chapters, we present cases that illustrate and nuance how the 360° Accord has been applied in real-life practices, bringing the conceptual 8-aspect model to life as a practical tool for guiding collaboration in healthcare innovation among multiple stakeholders. These findings also incorporate best practices shared during the TOGETHER4HEALTH conference, forming the basis for actionable, stakeholder-specific recommendations with the potential to transform Europe's future healthcare systems



[Click here](#) to hear highlights on the conference from

**Rushdy Ahmad**  
Director of the Wyss Diagnostics Accelerator,  
Wyss Institute,  
Harvard University



[Click here](#) to hear highlights on the conference from

**Jens Andersen**  
VP Business Development at Ascom

## 2 Placing Patients at the Heart of Healthcare Innovation



At the core of integrated healthcare is a commitment to place the individual at the centre of every decision. Designing and implementing effective integrated health solutions cannot be done by a single actor; health systems and professionals must work hand in hand with patients as equal partners. Such collaboration requires shared responsibility, where all parties contribute with their expertise, perspectives, and resources, and jointly navigate challenges and risks. Crucially, this approach must be person-centred rather than institution-centred, ensuring that the lived experiences of patients guide every decision and shape the care they receive.

The emphasis on citizen involvement aligns closely with broader European Union strategies for healthcare. In particular, the EU4Health Programme demonstrates EU's commitment to embed patient involvement across the health system by directing funding toward initiatives that actively engage patients and their representatives. For individual citizens, this means that patient voices are increasingly being heard, including in the development of new treatment options and digital solutions. In this context, the 360° Health Innovation Accord directly supports the objectives of the EU4Health Programme. By embedding citizens and patients as equal partners throughout the innovation process, the Accord contributes to EU4Health's priorities on health system resilience, patient involvement and the translation of innovation into people-centred and participatory health systems across Europe<sup>8,9</sup>. This focus on patient involvement and lived experience also reflects the principles of the EU Mission on Cancer, which emphasises co-creation with patients, survivors and citizens as a core driver of prevention, early detection and improved quality of life<sup>10</sup>.

By putting the individual patient at the centre of innovative solutions, the 360° Accord provides a framework for dialogue that can unlock the full potential of patient-involvement. Recognising the importance of aspects such as patients' life situation and ethics, the 360° Accord helps ensure that innovation and collaboration remain anchored in fundamental principles of responsibility and dignity. Life situation is understood as the personal and environmental factors that shape an individual's life, while ethics refers to the fundamental moral principles and self-regulatory guidelines of healthcare, including respect for the individual's capacity and context.



Birgit Bauer

You find maybe one patient representative, or maybe less, in a panel. That's a no go. We have to listen, and we have to learn, and we have to do it together

## Case

### Lived Experience as a Driver of Change

In recent years, legislation requires Danish municipalities and regions to establish patient panels and citizen councils to give a voice to the beneficiaries of healthcare initiatives. One example from the North Denmark Region provides insight on how to move beyond formalities and integrate patients into the very fabric of tomorrow's healthcare system.

At the Centre for Recovery and Co-creation, Aalborg University Hospital, Denmark, the Peerboard is an example of how lived experience can be turned into a driving force for change. The board consists of current and former psychiatric patients and relatives who, through dialogue with healthcare professionals, bring their experiences into consideration when developing new solutions. As the name suggests, "peer" means equal. The Peerboard is built on the principle that lived experience should carry the same weight as professional expertise, with members actively verbalising the unique knowledge they bring.

The combined knowledge of professionals, patients and family is applied collaboratively to co-create solutions that serve everyone's needs and lived experiences. While some forms of user involvement risk becoming a formality, the Peerboard provides a space where experiences are recognised as valuable competencies.

For many members, the Peerboard represents an ethical recognition that patients and relatives, who may once have felt overlooked, are now seen as equal partners in shaping psychiatry. This recognition provides motivation, strengthens trust, and most importantly, leads to better outcomes. Recognised for promoting equal collaboration, the Peerboard received the national award for citizen-involvement initiatives and was praised for its work in engaging patients and relatives in treatment programmes and for providing practical tools to help them better manage everyday life<sup>11</sup>.

The initiative goes to demonstrate how integrating the perspectives of individuals and their life situations is not only ethically necessary but also practically effective in developing new approaches to mental healthcare. The work is not static; the format has continuously developed to reflect changes in how patients and relatives are met in the healthcare system, ensuring that lived experience remains a central and dynamic driver of improvement. Equitable collaboration requires awareness of existing power dynamics within the healthcare system and active efforts to create safe spaces that enable patients to challenge professional assumptions.

### Designing Tomorrow's Healthcare with Citizens, not just for Them

The 360° Accord highlights that without the citizen's perspective, innovation cannot be sustained or scaled. Involvement demands more than feedback at the end of a project. It requires that citizens and their relatives are actively engaged at the earliest design stages—testing ideas, shaping communication materials, and ensuring that interventions match their life situation. While involvement happens through different panels, we must ensure that it happens at the right frequency and depth.

The case on patient-involvement illustrates how real innovation must balance medical possibilities with what matters for the individual, ensuring that care is adapted to their situation. It also rethinks standard protocols through an ethical lens, showing how life situations must guide decisions. Ethics and individual perspectives are often described as values, but in practice they function as levers for building trust and lasting care, reminding us that new solutions only endure when they work in the everyday lives of citizens.

Equally important, many citizens bring expertise that goes beyond traditional consultation. Patients with chronic conditions often build insightful knowledge and strategies for managing their illness every day. In some cases, this knowledge exceeds that of health professionals. Recognising these competencies is an ethical obligation. It ensures that involvement moves beyond formal structures and becomes a true collaboration on equal footing.



## Lessons learned from TOGETHER4HEALTH

With the case on patient involvement as a starting point, the conference participants shared key insights on how to make citizen perspectives central to healthcare innovation. It was emphasised that while formal patient involvement exists, it is often partial and occurs too late in the process. True, meaningful engagement requires institutionalising citizen participation and hereby ensuring that it is not a one-off effort, but a continuous strategy. When patients are empowered to ask questions and actively participate, they become co-creators rather than passive recipients, helping the health system design solutions that are more responsive, equitable, and sustainable.

Moreover, engaging citizens thoughtfully can improve health outcomes, foster trust between patients and providers, and increase cost efficiency by encouraging more effective use of resources. To achieve this, a structured framework for patient involvement is essential, embedding engagement deeply into healthcare systems.

*To learn more about our findings from the conference please visit our website: [TOGETHER4HEALTH](#)*

### 3 Unlocking the Potential of Technology and Data in Healthcare



Technology, defined as the tools and systems developed to address health challenges and enable healthcare actors to connect and operate, together with digitalisation encompassing data and infrastructure, hold immense potential to transform healthcare. They provide opportunities to build healthcare systems that are effective, smarter, and more connected, putting better care within reach for every citizen. What were once theoretical tools are now becoming real-world applications — digital solutions are working alongside healthcare professionals in real time, supporting diagnosis, treatment, and decision-making.

The European Commission's Strategy for European Life Sciences emphasises the role of new technologies and innovation as key drivers in positioning the EU as a global leader in life sciences. While digital and technological solutions offer significant opportunities, they also present considerable challenges. In this light, the Strategy for European Life Sciences additionally highlights how technological innovations remain underutilised, not harnessed to their full potential due to several deeply rooted structural, regulatory, and technical barriers<sup>12</sup>. This includes great variations across Europe on the implementation of national regulations on the use of electronic health data, including medical AI<sup>13</sup>.

This gap is visible in many healthcare systems, where digitalisation efforts often result in isolated technologies rather than coherent digital transformation. Along these lines, the rapid pace of technological development presents challenges for healthcare implementation, underscoring the need for careful consideration to ensure these solutions deliver both effective and meaningful outcomes. While the European Health Data Space provides the regulatory and technical foundation for secondary use of health data, the 360° Health Innovation Accord addresses the organisational and clinical conditions required for data-driven solutions to be trusted, adopted and scaled in practice.

Thus, the 360° Accord translates regulatory ambition into everyday clinical usability, in line with Horizon Europe's focus on real-world impact. It frames technology not only as digital tools and AI-enabled solutions, but as part of a system where interoperable data, secure infrastructure, governance, and real-life clinical and citizen needs must align to enable safe, connected and effective care.



Dr. Tara Kiran

When considering the 360 Health Accord, elements such as competencies, IT, and infrastructure may vary across sites. If this variation is not addressed from the outset, the solution cannot be effectively scaled, as it risks being designed for only one site

### Case

#### Dehydration Monitoring in Practice

Dehydration can trigger a cascade of serious health problems. Without sufficient fluids, the immune system weakens, making the body more vulnerable to infections such as urinary tract infections and pneumonia. According to 2023 figures from Statistics Denmark, 19,6% of all re-admissions (2.550 cases) of people over the age of 67 were due to dehydration<sup>14</sup>. Despite repeated attempts to address the issue through various interventions, most have targeted only fragments of the problem, failing to consider the full picture.

Anchored in the 360° Accord, a thorough problem-and-needs analysis was initiated in close dialogue between Aalborg University Hospital, three municipalities and researchers from the Centre for General Practice at Aalborg University. The analysis focused on where and when dehydration occurs and why it is often only identified, when it reaches a severity that requires hospitalisation. Based on the findings, dialogue was initiated with more than 20 companies, each offering suggestions for potential interventions.

However, even promising technologically mature solutions, can run into difficulties. As a trial, a carefully selected technology was introduced to measure fluid intake, and the data collected was then automatically integrated into patient medical records. But inaccurate data reporting and frequent error notifications required healthcare professionals to repeatedly verify the technology's accuracy, creating growing frustration and waning trust in the specific tool among the healthcare professionals.

Ultimately, the healthcare professionals stopped using the technology, when treating their patients. In another case, a municipality's adoption of the same technology led to a very different outcome.

Through close collaboration with the technology providers, healthcare professionals received support throughout the integration process, allowing challenges to be addressed as they arose. As a result, the technology has become successfully embedded in daily workflows and is now being scaled across multiple care services.

Experiences thus far show that if solutions do not fit seamlessly into daily workflows or foster trust among professionals and citizens, they risk being abandoned. At the same time, such attempts can create valuable learning by highlighting unmet needs and underscoring the importance of ensuring that innovation matches the realities of clinical practice. As this case illustrates, the challenge is not a lack of technology but choosing the right solution for the right setting.

#### From Technical Promise to Lived Value

The case illustrates that innovation in healthcare is not simply a question of introducing new technologies or organisational models, but of understanding interdependencies including how cultural, structural, financial and individual factors are connected. In the case of the fluid intake monitoring solution, trust in how data is utilised and governed within the digital infrastructure, may help explain why the solution was temporarily pulled to sort out the teething problems. With the rise of new technological innovations it is now, more than ever, necessary to develop with organisations in mind and recognise that some rapidly changing innovations require a more in-depth and practical approach, taking the complexity of health care innovation into consideration.



The Baltic Sea Interreg project, Clinical Artificial Intelligence and Diagnostics (CAIDX) illustrates the necessity of a collaborative approach. The toolbox developed in the project specifically addresses the development and implementation of artificial intelligence (AI) in clinical settings. As part of a multi-stakeholder EU project, the toolbox provides both a development and implementation guide and a roadmap clarifying which actors should be involved across the lifecycle of an AI solution. The toolbox highlights that:

- Trust in AI is contingent upon robust legal and regulatory frameworks, including compliance with MDR and the EU AI Act, clear governance structures, and ethical use of AI.
- Access to high-quality, clinically relevant data, secure digital infrastructure, and transparent data governance is essential.
- There are persistent challenges related to implementation:
  - Limited user acceptance.
  - Insufficient validation and evaluation in local clinical settings.
  - Misaligned business and reimbursement models.

Collectively, these barriers illustrate that while the technological potential of AI is considerable, sustained impact depends on maintaining and aligning all structural elements across the health system.

Ultimately, a technology is successful when it provides and fulfils its technical promise but also makes daily tasks easier and alleviates workload. In line with the holistic perspective of the 360° Accord, those affected by the change should therefore be involved in either the development or the implementation of the health service to ensure alignment of technological capabilities with real-world operational needs. An approach that could further qualify the ongoing dialogue between healthcare actors and private companies to develop technological and digital solutions that meet their everyday needs.

However, its successful implementation is shaped by a set of structural elements that often determine whether technologies move beyond pilots and into everyday practice. The 360° Accord underscores the need to integrate the regulatory integration and eventual constrain in the coming implementation in the very early stage of the innovation process. Too often these structural conditions are brought in as an afterthought, but by creating a joint awareness at the very outset it can establish the level of trust required across the full ecosystem – the environment where stakeholders meet and innovation happens – for collective troubleshooting, organisational trust in data, and the eventual scaling of its everyday application.

This addresses the need to test and validate the 360° Accord as a tool to circumvent these challenges. Applying the 360° Accord helps navigate and inform the dynamics of regulation, such as directives, decisions and funding, balancing what can be achieved within regulatory and financial boundaries, while simultaneously ensuring that progress is not restricted because it was overlooked.



## Lessons learned from TOGETHER4HEALTH

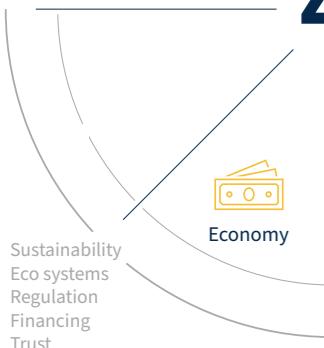
The challenges connected to integrating technological solutions in the everyday work of healthcare professionals in the case of the fluid intake monitoring solution were also echoed throughout the conference with the shared observation that technological progress is only meaningful when it is embedded in solutions, aligned with workflows and infrastructures, accepted by those using them, and addressing the right needs. Additionally, technology must follow purpose, not dictate it.

Throughout several talks and discussions, it was highlighted that uniting digital health services and data is essential to ensure transparency in data sharing and that citizens retain control over how their data is used across settings. Furthermore, to unlock the potential of digital solutions, it remains important to ensure digital health literacy for patients and healthcare professionals.

On a structural level within an ecosystem, technology was consistently framed as a support for cross-sector data exchange that reinforces human collaboration and citizen empowerment. During several sessions, it was imperative to highlight that while necessary, technology and digital services should not substitute valuable analogue options. Therefore, future innovation must be driven by clearly identified demands, involve relevant stakeholders and be tested and adapted in real-world healthcare settings before wider implementation, ensuring that technology adds genuine value and can scale to meet demographic pressures and the realities of a shrinking healthcare workforce.

*To learn more about our findings from the conference please visit our website:  
[TOGETHER4HEALTH](http://TOGETHER4HEALTH)*

# 4 Economy, Financing and Regulation as Enablers of Cross-Sector Collaboration



Health innovations and promising technologies aimed at addressing unmet patient and clinical needs, all too often struggle with delivering lasting impact due to structural limitations. Structural framework conditions such as financing - mechanisms for raising and pooling funding to finance new health innovation - and regulation, including directives, and decisions, directly affect the ability of organisations to scale-up and carry the cost of healthcare innovations through the economic resources. Too often validated clinical solutions fail to scale as these elements are not integrated in the early innovation and regulatory journey, which is further challenged in the shift toward integrated care, where new cross-sector models become crucial to support patients more effectively.

This is a pressing challenge across Europe, where financing mechanisms tend to favour activity in established healthcare settings and fail to incentivise prevention, early diagnostics, and integrated care pathways<sup>15</sup>. At the EU level, a growing number of programmes and strategies explicitly recognise the need to modernise how health systems are financed and how investments are directed. These include the European Commission's Strategy for European Life Sciences and EU4Health Programme, which support funding for health system strengthening and innovation<sup>16, 17</sup>.

The experience from North Denmark Region demonstrates how regional health ecosystems can function as testbeds for integrated care and health innovation, generating insights and solutions applicable cross-border. In this context, programmes such as Interreg provide a valuable platform for transferring, adapting, and scaling integrated care models across regions, facilitating cross-regional learning and policy alignment.

However, despite this strategic recognition at an EU level, structural barriers persist<sup>18</sup>. The EU's focus on working towards favourable financing and funding mechanisms underscores the need for new approaches to overcome entrenched structural barriers. The 360° Accord offers a framework to better understand how local economic resources can be mobilised and systems aligned to support meaningful and scalable health innovation. In this way, health system financing can serve as a catalyst and not a barrier for cross-sector collaboration.



“Home diagnostics aren’t about replacing hospitals... They’re about moving the first mile of care to where people live

Rushdy Ahmad

## Case

### Bringing Hospital Care Close to Citizens

In 2023, a Danish benchmarking report was published on the hospitalisation of elderly citizens in medical departments. Among other findings, it revealed that some elderly citizens were hospitalised without prior contact with their general practitioner for conditions that could typically have been addressed before escalating into acute admissions<sup>19</sup>. Further analysis found that the hospitalisation rate among citizens aged 80 and above in the North Denmark Region exceeded the national average. An audit of the case reports indicated that 43% of these hospitalisations did not add value for patients, while 25% could more appropriately have been managed within the primary care sector (municipality or general practitioner)<sup>20</sup>.

To reduce unnecessary hospitalisations a pilot model was proposed in which municipal nurses deliver hospital-level examinations and care to multimorbid patients in the local nursing homes. Elderly and frail patients were offered treatment in the care of local nurse practitioners, instead of transporting them to the hospital. The initiative quickly evolved into a more comprehensive project, which served as an inspiration to cross-sectorial collaboration in the newest restructuring of the Danish Healthcare Reform.

In practical terms this meant that patients received or completed hospital-level treatment in a municipal nursing home. Hospital doctors collaborated with nurses on the patient treatment course and interacted with them via phone or video conferencing, all while allowing the citizens to receive care in the comfort of their home-base. This proposed a regulatory challenge concerning the ownership of the medicine, which had to be addressed. Needed treatment and medicines were stored at the nursing home, while being owned and distributed by the hospital. These requirements can usually be handled flexibly during pilot phases, but not so easily at full implementation.

Project funds were used as neutral resources to cover project management, equipment and competence development, allowing the initiative to proceed without negotiating long-term financing or regulatory adjustments. The hospital and municipality decided to address financing and economic impact through a micro cost analysis. This means that all relevant activities in a pathway are identified and valued i.e staff, transport, medicine and equipment. The analysis identified the hospital and the municipality expenses for one patient's course within each approach. A comparison of the cost of a traditional hospital stay, and this new alternative was executed to determine potential differences for each sector. The results and final conclusions will be available primo 2026.

### Clear Frameworks as a Foundation for Progress

The case on nursing home-based hospital admissions goes to show that critical structural issues, such as economic conditions, financing and regulation, should be addressed up front to manage the transition from pilot to full-scale implementation. The case brings to light how funding mechanisms often require ongoing negotiation and, in some cases, new agreements to support collaboration and scale.

Regulation in existing organisational practices can also present significant challenges for collaboration. Rather than allowing pilots to be conducted as parallel systems outside the formal norms and legal obligations across both regional and municipal levels, they must demonstrate how they can function in a real-world setting. This requires adhering to standard processes such as reporting requirements, documentation standards, and responsibilities related to data security and patient safety. This ongoing fulfilment of mandatory requirements is particularly important for ensuring accountability and quality in care delivery and must be taken into consideration as pilots evolve from temporary projects to permanent practice.

The 360° Accord provides a way forward by integrating these structural considerations into the earliest phases of development. It anticipates transition points, clarifies which regulatory and financial conditions must be negotiated, and offers a shared language for aligning stakeholders across sectors. The 360° Accord provides a framework to assess economic disparities between stakeholders and to identify the contribution each party can offer. Placing economic considerations, financing and regulation as foundational dimensions, the 360° Accord helps prevent the common fate for promising innovations failing to scale due to unresolved structural barriers.

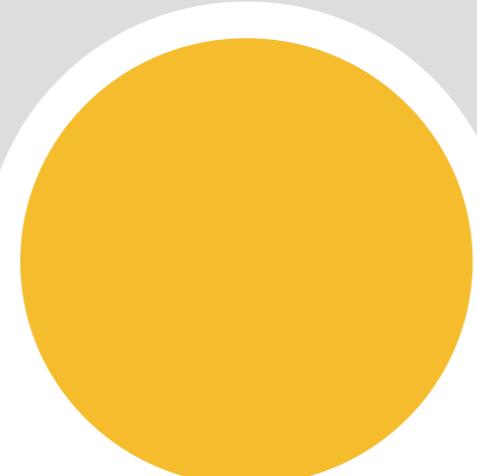
### Resource Optimisation is also Green

Along with the growing focus on ensuring financial viability and regulatory fit in the innovation process incorporating climate and sustainability is gaining increased focus. The European Green Deal aims to make European healthcare systems climate-neutral and sustainable by integrating environmental goals into operations, focusing on energy efficiency, waste reduction, circular economy principles, sustainable procurement, and reducing pollution all while maintaining high-quality care leveraging digital tools like telemedicine to meet the EU-wide targets<sup>21,22</sup>. Climate-neutral healthcare requires coordinated landscapes where hospitals, municipalities, private actors, universities, and suppliers work together, positioning sustainability as a shared responsibility. Reflecting this, the 360° Health Innovation Accord positions sustainability as a core structural element across the system.

While most health innovations start with the goal of improving patient experience and health outcomes, they often generate co-benefits for climate, resource optimisation, and system efficiency. Real-world examples demonstrate the potential impact of such approaches.

As an example, the UK NHS is a long-standing inspiration for their systematic efforts to become a Net-Zero public healthcare system by 2040. As NHS implements digitally enabled care pathways to expand capacity and improve patient experience, they also consider environmental impacts alongside clinical efficacy and cost. Virtual wards, providing acute care remotely to patients in their own homes, have been widely adopted in the UK.

A retrospective analysis was conducted which calculated carbon emissions for the entire patient journey of virtual ward patients with acute respiratory infections and frailty in a large acute hospital trust, against conventional inpatient bed days for similar conditions. The findings showed that an in-patient bed day on average produced 37.9 kg CO<sub>2</sub>e, four times higher than the 8.8 kg CO<sub>2</sub>e for a virtual ward patient day.



## Lessons learned from TOGETHER4HEALTH

The challenges witnessed in the case of hospital admissions at home, were also affirmed during the conference, where a pattern emerged supporting the 360° Health Innovation Approach: A coherent financing system is a decisive factor in Europe's ability to transition toward integrated care. From the early idea to a fully scaled solution.

The European healthcare systems rely on financing mechanisms designed for incremental service delivery rather than strategic investments, such as impact financing and value-based payments. As a result, promising innovations — even those with demonstrated impact, as in the case of hospital admissions at home — too often remain trapped in pilots because the financial architecture does not support long-term adoption. When investment logic is aligned with long-term value creation, systems gain the capacity to innovate; when financing remains reactive and siloed, transformation stalls. Prevention, early diagnostics, and community-based care remain underfunded, not because they lack value, but because traditional financing structures are not designed to recognise long-term societal returns.

A similar logic applies to regulation. When addressed early, regulatory considerations can become enablers rather than barriers. Clear regulatory agreements establish accountability, reduce uncertainty, and help organisations design solutions that can be adopted at scale. An understanding that was further developed to include the need to implement sustainable procurement and financing. This motivated by the fact that procurement practices, reporting obligations, and infrastructural planning, calls for a clear coordinated regulatory patch way.

*To learn more about our findings from the conference please visit our website: [TOGETHER4HEALTH](http://TOGETHER4HEALTH)*





## 5 How Competencies, Culture and Organisation Shape the Future of Health Systems

It seems self-explanatory – at the end of the day, successful innovation is driven by people and organisations willing to collaborate. The demographic shifts and growing workforce shortages within the EU are stretching existing healthcare models beyond their original design. In this way, innovation and collaboration have never been more important to find new ways of strengthening health systems' resilience across institutional boundaries. As health system pressures intensify, the need for organisations that can withstand these challenges—and maybe even grow stronger in response —has never been greater.

At the EU level, strategies such as the Strategy for European Life Sciences highlight how pressing challenges should not be met through isolated reforms or siloed interventions. Instead, they call for integrated approaches, emphasising the role of collaboration, partnerships, and coordinated action as key tools to advance health innovation and as a key driver in improving outcomes for patients and healthcare professionals<sup>23</sup>. The EU Pact for Skills additionally calls for tackling the urgent need for health workforce upskilling and reskilling and introduces 'The Health Large Scale Partnership' aimed at creating and implementing a shared model for skills development of the health workforce in Europe<sup>24</sup>.

Against the backdrop of the EU's strategic priorities, the 360° Health Innovation Accord offers a lens to understand how culture, organisation and competencies are interrelated and foundational aspects of shaping the everyday realities of cross-sectoral work. These three aspects are interrelated: while culture is defined as shared values, norms, and practices; an organisation is a structured system of individuals and groups working toward common goals; and competencies encompass the knowledge, skills, experience, and attitudes healthcare professionals bring to their work. In this sense, lasting change and innovation in healthcare should be seen as more than just systems and structures—it is rooted in how people work together, the cultures they adopt, and the competencies they bring to the table.



**“**We want to build a culture where it's obligatory to test and launch new initiatives. In short how can we do things differently while preserving patient safety and quality of care

Søren Pihlkjær Hjortshøj

## Case

### Exercise as a Preventative Intervention

Many of the underlying challenges experienced in the Danish healthcare system can be attributed to the siloed structures of the system. To overcome these issues, there is a larger attempt to create initiatives where general practitioners, hospitals and municipalities collaborate. Within this collaborative framework, two initiatives have been developed, which provide meaningful alternatives to surgery or lifelong management of chronic pain and support citizens in managing their conditions through targeted exercise programmes. One initiative focused on improving walking ability to delay or avoid the need for surgery, while the other addressed chronic lower back pain, offering non-invasive relief to vulnerable citizens who lack access to privately funded physiotherapy.

The initiatives were triggered by an early observation from a municipal project lead, who identified a discrepancy between clinical assessments and citizens' lived experiences, as some citizens tended to understate symptoms during consultations. This highlighted a need to rethink how care pathways are designed and where meaningful insight into citizens' needs is generated. In response, the programmes were developed to engage citizens in their local context and strengthen preventive, non-invasive interventions through closer cross-sector collaboration. By shifting focus towards everyday settings and continuous support, the initiatives enabled new ways of organising care that support learning, testing, and adaptation in practice, while maintaining quality and coherence across sectors.

Two municipality-owned rehabilitation centres chose to implement these initiatives. However, different organisational sizes and structures led to different implementation strategies. The smaller municipality (approximately 28.000 citizens) engaged directly and personally with local GPs, fostering early familiarity and active participation. In contrast, the larger municipality (approximately 225.000 citizens) relied more on digital

communication, which affected both the pace and volume of referrals. As a result, the larger municipality experienced a slower start and later adjusted its approach by increasing direct engagement and information-sharing with GP offices.

Throughout the process, the two municipalities collaborated to optimise implementation and shared experiences to strengthen outcomes. As an example, the physiotherapists from the larger municipality had experience with varying exercise methods and were therefore equipped with the competencies required to provide the necessary support for citizens. These methods were shared with the other municipality, along with knowledge on how to communicate with vulnerable citizens and address their challenges. These exchanges underline the importance of understanding local capabilities and aligning competencies to ensure that new initiatives gain traction and support effective cross-sector collaboration.

### Strengthening Healthcare from Within

The case of the preventative initiatives serves to illustrate how the dimensions in the 360° Health Innovation Accord – culture, organisation and competences – form the backbone of robust and lasting transformation. Differences in local practices, organisational size, and professional capacity influenced both the pace and nature of implementation in the two municipalities, while the ability to learn from each other and reinforce each other's competences created momentum for progress.

Lasting change is not driven by isolated initiatives, but by the continuous alignment of actors, roles, and competences across sectors. Progress emerges where collaboration is embedded in everyday practice, where local cultures support shared ownership of new approaches, and where competences are actively reinforced and applied where they create the greatest value.

Best for Us (Bedst for Os) addresses a mental health challenge of significant scale. Mental disorders account for approximately 25% of the total disease burden, surpassing both cancer and cardiovascular diseases, with nearly half emerging before age 14 and 75% before age 24 in Denmark. The initiative is backed by one of the largest single investments in Danish child and youth mental health from the Novo Nordisk Foundation, as well as funding from The Obel Family Foundation, signalling a commitment to long-term, system-level transformation rather than short-term project delivery<sup>25</sup>. Best for Us is a mission-driven initiative in the North Denmark Region, which comprises of six concrete action-points.

1. Developing an evidence base for all diseases related to mental health for children and adolescents, comprising municipality treatment and school support.
2. Establishing of a Family team to support continuity and coordination of the individual episode of care.
3. Establishing the family digital toolbox, comprising information of diseases, treatment plans and support opportunities.
4. Treatment concepts facilitating better access and better quality of care.
5. Securing continuity and coordination between municipalities, hospitals and GOs.
6. Building architecture facilitating mental health wellbeing.





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## Recommendations for Creating Integrated and Resilient Healthcare Systems

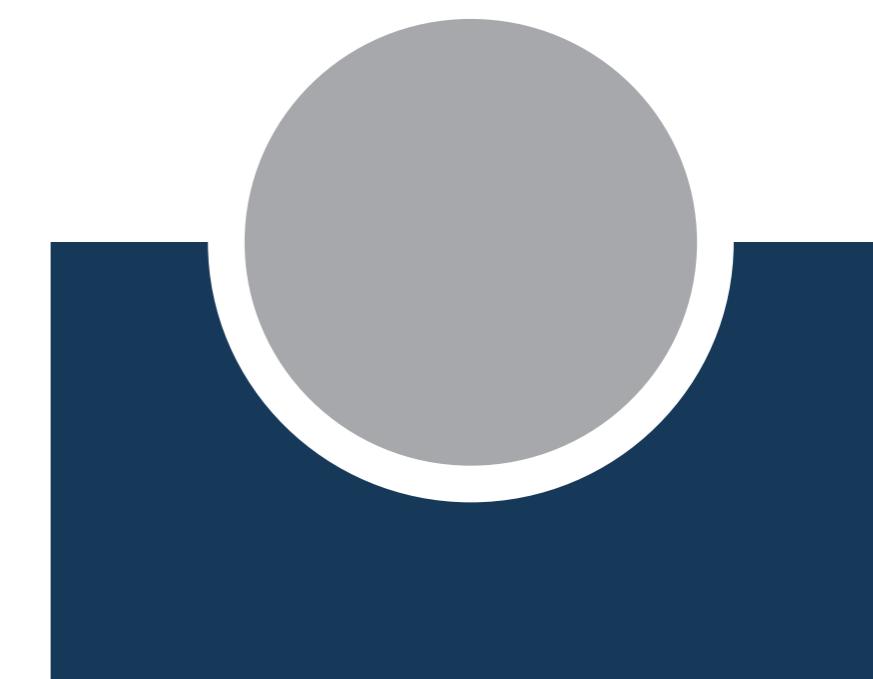
The challenges faced by our healthcare systems are complex, but they also present a unique opportunity: To rethink how care is designed, delivered, and experienced. The insights that emerged from the TOGETHER4HEALTH conference are not just ideas—they are a call for action anchored in everyday practice and lived experiences. They highlight new methods and models for how to transform and integrate our healthcare systems. We are deeply indebted to everyone who so freely and openly shared their insights, experiences and recommendations. It's a testament to the fact that we are indeed stronger united.

These recommendations have been turned into a joint call to action and an invitation to individuals.

### Operationalising the 360° Health Innovation Accord Across the European Health Ecosystem

The transformation of Europe's healthcare systems requires coordinated action across institutional levels and sectors. The 360° Health Innovation Accord provides a collaborative framework to translate policy ambition into real-world implementation by aligning technology, digitalisation, organisation, economy, competencies, culture, ethics, and citizens' life situations.

To ensure impact and scalability, the following recommendations are addressed to key stakeholder groups across the European health ecosystem.



## Recommendations for Public Authorities and Regulators

Public authorities play a decisive role in creating the enabling conditions for integrated and sustainable healthcare innovation.

- Embed integrated, person-centred care and continuity as system-wide quality objectives, supported by aligned financing and regulatory frameworks.
- Integrate the 360° Health Innovation Accord into the implementation of the Strategy for European Life Sciences, EU4Health and Cohesion Policy, with a focus on adoption and scale-up, not only research and pilots.
- Develop value-based and outcome-oriented financing models that reward prevention, cross-sector collaboration and long-term societal value.
- Accelerate the implementation of the European Health Data Space by ensuring interoperability, cross-sector data exchange and real-world clinical usability.
- Establish regulatory sandboxes and national test-beds for safe experimentation with digital health and medical AI, including clear evaluation and scale-up pathways.
- Embed environmental sustainability, workforce resilience and ethical governance as mandatory criteria in health policy, procurement and investment decisions.

## Recommendations for Hospitals and Healthcare Providers

Hospitals, not least University Hospitals, are pivotal transformation hubs linking innovation, clinical practice and system integration.

- Institutionalise the 360° Health Innovation Accord as a strategic framework for innovation, implementation and cross-sector collaboration.
- Shift from project-based pilots to integrated care models embedded in everyday clinical workflows, including home-based and digitally supported care pathways.
- Strengthen organisational structures that support implementation, scaling and collaboration with municipalities, universities, primary care, civil society and industry.
- Invest in hybrid competencies combining clinical, digital, organisational and green skills to strengthen workforce resilience, as well as digital health competencies among staff and citizens.
- Actively involve patients and professionals in co-creation by establishing permanent co-creation infrastructures through living labs and other initiatives, to ensure user-friendly solutions that deliver real-world value and reduce workload.

## Recommendations for Companies and Industry

European companies are key drivers of innovation, competitiveness and scale.

- Design solutions as system components that integrate seamlessly into existing care pathways, infrastructures and regulatory frameworks. Apply the 360° Health Innovation Accord as a strategic framework for developing, introducing and scaling innovation through cross-sector collaboration.
- Engage early with healthcare providers, public authorities, knowledge institutions and citizens to co-create solutions grounded in real-life needs i.e. Establishing partnership models with public actors.
- Document and demonstrate value beyond technology performance, including outcomes, resource optimisation, workforce impact and environmental sustainability.
- Align product development with the European Health Data Space, interoperability standards and ethics-by-design principles.
- Position trust, transparency and responsibility as competitive advantages in the European and global market.

## Recommendations for Knowledge Institutions and Universities

Knowledge institutions are central to building capacity, evidence and future-ready competencies.

- Strengthen collaboration with patients, healthcare providers, municipalities and industry to co-create, test and evaluate integrated health solutions, applying the 360° Health Innovation Accord as a strategic framework.
- Align education and training programmes with emerging needs for digital, organisational, ethical and green competencies.
- Engage in systematic development of innovative and technological solutions, including AI, to ensure an evidence-based, effective, and responsible healthcare system.
- Act as neutral conveners within health ecosystems, supporting knowledge-sharing and cross-sector learning.

[Click here](#) to hear highlights on the conference from:

**Carmen M Laplaza Santos**  
Head of Unit, European Commission



[Click here](#) to hear highlights on the conference from:

**Lars Dahl Pedersen**  
Hospital Director,  
Aalborg Universitetshospital



[Click here](#) to hear highlights on the conference from:

**Mette Kierkgaard**  
Denmark's Minister for Senior Citizens



[Click here](#) to hear highlights on the conference from:

**Jan Mainz**  
MD., Ph.D., MPA., Professor,  
Program Director at Bedst for Os  
North Denmark Region and Aalborg University



[Click here](#) to hear highlights on the conference from:

**Jens Andersen**  
VP Business Development at Ascom



[Click here](#) to hear highlights on the conference from:

**Rushdy Ahmad**  
Director of the Wyss Diagnostics  
Accelerator, Wyss Institute,  
Harvard University



## Recommendations for General Practitioners and Primary Care

Primary care is essential for continuity, prevention and coordination across the health system.

- Strengthen the role of general practitioners as coordinators of integrated care pathways, particularly for vulnerable citizens with chronic and complex conditions.
- Engage actively in cross-sector collaboration with hospitals and municipalities to support prevention, early intervention and home-based care. Strengthen feed-back loops for continued improvement based on in practice learnings.
- Adopt digital tools and data solutions that enhance clinical decision-making without increasing administrative burden.
- Contribute professional insight to the design and evaluation of new care models and technologies.

[Click here](#) to hear an excerpt on Team-Based Care: Accountability and Clarity on Impact from the session led



**Tara Kiran**

MD, MSc, Associate Professor, Department of Family & Community Care, University of Toronto

[Click here](#) to hear an excerpt on Strengthening Care for Patients Through Primary Care Research from the session



**Jens Søndergaard**

Professor and Head of the Research Unit for General Practice, University of Southern Denmark,

**Michelle Hjelm Birknow**

Ph.D., Head of Clinical Relations, Trial Nation



**Tina Lein Rasmussen**

M.Arch., Project Manager for Research & Innovation, Research Unit for General Practice, University of Southern Denmark,



**Nanna Herning Svensson**

PhD, Researcher and Project Coordinator, Research & Innovation, Research Unit for General Practice, University of Southern Denmark



## Recommendations for Citizens and Patients

Citizens are not passive recipients of care but essential partners in innovation and transformation.

- Participate actively in co-creation, patient panels and ecosystem collaboration as contributors of lived experience and expertise.
- Strengthen health literacy and digital health competencies to support self-management and informed decision-making by participating in civic networks.
- Engage with preventive services and integrated care solutions that support long-term health and quality of life.
- Contribute to building trust by participating in transparent dialogue on the use of data, technology and innovation in healthcare.

[Click here](#) to hear highlights on the conference from:



**Antonella Cardone**

CEO of Cancer Patients Europe

[Click here](#) to hear highlights on the conference from:



**Birgit Bauer**

Founder of Data Saves Lives Germany

## Concluding Perspective

Transforming Europe's healthcare systems is not the responsibility of one actor alone. The 360° Health Innovation Accord has been conceptualized in a Danish context, demonstrating that sustainable, equitable and competitive healthcare can only be achieved through shared responsibility, aligned incentives and trust-based collaboration across the entire ecosystem.

The approach 360° Health Innovation Accord has been developed in a Danish context, but with the insights from the conference we hope to provide inspiration on how to drive innovation in integrated healthcare. By acting together, Europe can turn health system transformation into a cornerstone of its social model, sustainability ambitions and global competitiveness.

**The time to act is now – TOGETHER.**



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# TOGETHER 4 HEALTH



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Co-funded by  
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