



# ANNUAL REPORT 2022



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# PRESIDENT'S MESSAGE

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Dear Members and Friends,

On behalf of the Board of Directors, I would like to thank you for your continued commitment and support to EHMA which proved essential for the accomplishment of multiple successes. Over the past twelve months, EHMA worked to strengthen our portfolio of initiatives, enrich the program of the Annual Conference, and continue to share knowledge on health management through several events and webinars.

Looking back at this past year, I was pleased to be able to meet many of you in person again at the EHMA Conference in Brussels. It was inspiring to be together and discuss lessons learnt, but also look to the future of health management. On behalf of my colleagues in the Board, we sincerely thank our member, KU Leuven for the support in the organisation of the conference.

2022 also brought new projects, the most relevant certainly being the BeWell project that aims to draft the future health workforce strategy on digital and green skills. EHMA is the coordinator of this 24-partner consortium. But we are also looking at the broader health system level with a project that identifies obstacles to vaccination of physical, practical or administrative nature and develops recommendations in all 27 EU Member States. Finally, this year we further strengthened our policy work producing four white papers directly addressing health management challenges: the burden of Respiratory Syncytial Virus (RSV) on health systems; inspirational examples of value-based healthcare projects and outcome measures; the environmental impact of medicines; and the digitalisation of medication management in hospitals.

Our ambition for next year is to continue our commitment to excellent health management for a healthy Europe. It is our mission to continue to grow EHMA, and we look forward to receiving fresh ideas on how to continue to enrich this wonderful community.

I look forward to another year of collaboration and sharing knowledge to achieve excellence in health management, together.

- Prof Sandra C Buttigieg, EHMA President  
and on behalf of the EHMA Board



# TABLE OF CONTENT

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<b>President's message</b> .....	<b>1</b>
<b>Vision and mission</b> .....	<b>3</b>
<b>Our events</b> .....	<b>4</b>
EHMA 2022 Annual Conference .....	5
Webinar series .....	6
Executive trainings .....	7
<b>Our EU-funded projects</b> .....	<b>8</b>
BEWELL .....	9
EUVECA .....	10
COVIRNA .....	11
REBECCA .....	12
EcoQUIP+ .....	13
HEART .....	14
HaDEA SERVICE CONTRACT .....	15
<b>Our policy initiatives</b> .....	<b>16</b>
The health systems burden of RSV in Europe .....	17
EU HPP Stakeholder Network .....	18
Embracing value-based healthcare .....	19
The impact of medicines on the environment .....	20
Digitalisation of medication management .....	21
EU Health Coalition .....	22
Alliance for Value in Health .....	23
Other policy networks .....	24
<b>Member groups and activities</b> .....	<b>25</b>
Scientific Advisory Committee .....	26
Programme Directors' Group .....	27
South-Eastern Europe SIG .....	28
<b>Partners and sponsors</b> .....	<b>29</b>
<b>Membership</b> .....	<b>30</b>
<b>Board of Directors</b> .....	<b>31</b>
<b>Finances</b> .....	<b>32</b>

# VISION & MISSION

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## Our vision

Our vision is excellent health management for a healthy Europe.

## Our mission

Our mission is to support the spread of knowledge on effective health management.

## Our values

Our values are excellence, quality, inclusiveness, relevance, and respect.



# OUR EVENTS

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Our events portfolio has been expanding. All our events are tailor-made. The choice of topics, speakers, format and target audience vary every time. Special attention is given to new formats and techniques to facilitate exchanges and reach each event's objectives.

Diversified stakeholders are invited to attend our events. Thanks to forty years of experience in building and supporting communities of interest within the field of health management and policy, we use effective engagement techniques to involve various profiles ranging from healthcare managers and professionals to policymakers, researchers and educators.



# EHMA 2022 ANNUAL CONFERENCE

**305**

*delegates*

**+50**

*speakers*

**34**

*sessions*

**180**

*abstracts*

The EHMA 2022 Annual Conference ‘From people to systems: leadership for a sustainable future’ took place on 15-17 June 2022 in Brussels, Belgium. EHMA co-organised the event in collaboration with the Leuven Institute for Healthcare Policy.

The Conference brought together experts worldwide to explore challenges and solutions for creating sustainable health systems and ways in which health managers can lead this transformation.

The Conference gathered an audience of over 300 delegates representing health managers, academia, researchers, healthcare professionals and policymakers. Furthermore, the event hosted in total 34 sessions

including abstract presentations, interactive discussions and partner sessions.

EHMA was proud to support a number of awards for academic excellence. The Karolinska Medical Management Centre & EHMA Research Award was awarded to **Ms Astrid Van Wilder** (Belgium). The EHMA Award for Best European Paper went to **Prof Tania Gaspar** (Portugal). **Prof Mohamad Alameddine** (UAE) was presented with the EHMA Award for the Best Non-European Paper. **Mr Nguyen Anh Thoai Le** (United Kingdom) received the EHMA Award for Best Poster.



## THE EHMA 2022 CONFERENCE REPORT

Every year, following our Annual Conference, we publish a report gathering summaries from all the sessions. The report is a collection of the latest health management research and best-practices; it showcases the discussions around trending and complex topics in health and care; and it sets the agenda for health management for the following year.

The EHMA 2022 Conference Report ‘From people to systems: leadership for a sustainable future’ gathers 34 session summaries, including three high-level plenaries, ten partner sessions, and 21 abstract sessions.

# WEBINAR SERIES

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**16** **13**  
*webinars* *speakers*

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**+500**  
*participants*

As European health systems continue to recover from the COVID-19 crisis and take stock of the lessons learnt from the management of the pandemic, EHMA designed a webinar series to discuss health management topics crucial to improve health systems preparedness and response.

The series '*Health Management in action: Fostering health systems' resilience*' showcased specific areas of expertise of health managers, as well as experiences, case studies and best practices developed during the COVID-19 pandemic. The series aimed to identify evidence-based recommendations that can support decision-making for future health threats at various levels, including organisational, regional, national and European.

The series was addressed to a variety of stakeholders, including health managers, research, academia, healthcare professionals, and policy-makers. Each episode remains available on the [EHMA website](#) and [YouTube channel](#).

## THE WEBINARS

- [Health managers and leaders: harnessing the power of digital technologies](#)
- [Co-created responses to crisis situations](#)
- [How can funding models foster health systems' resilience?](#)
- [Towards future-readiness: measuring health systems' resilience](#)
- [Health service delivery before and after the pandemic](#)
- [Mental health at the frontline of the pandemic: health workforce stress management](#)
- [Empowering communities: a way towards stronger health systems](#)
- [Towards a better EU health preparedness and response: gaps and solutions](#)
- [From COVID-19 to monkeypox: how to apply the lessons learnt](#)
- [The legacy of COVID-19](#)



# EXECUTIVE TRAININGS

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We aim to improve the uptake and implementation of effective practice through knowledge sharing activities and educational and training opportunities addressed to our members and the health management community.

The executive training series *'The many avenues of Health Management'* included four online workshops that looked at why and how to empower clinicians as leaders; how to design services and connect providers to enhance the patient experience; how to practically assess and implement actions for health organisations and systems resilience; as well as the what, why, and how of the journey toward value-based health care.

## 1. PHYSICIANS AS LEADERS

The first module looked at

- How can we develop hybrid roles in committed organisational leaders?
- Why do clinicians often seem to be reluctant leaders?
- How to sustain their transition toward higher level managerial capabilities?



## 2. BUILDING A HEALTHCARE SYSTEM ONE INDIVIDUAL AT A TIME

The second module looked at how to design the service to enhance the patient experience, analysing business modelling logic and tools applied to health services.

## 3. WHAT MANAGING RESILIENT HEALTH SYSTEMS LOOKS LIKE

The third module looked at:

- Assessing health systems resiliency;
- Actions and directions to avoid the next storm;
- KPA and KPIs to assess and drive the development of resilient health organisations and systems;
- Planning the roadmap and step-by-step actions.

## 4. EVERYBODY'S BUSINESS: VALUE-BASED HEALTHCARE

The fourth module looked at what VBHC is and how health authorities and industry can contribute to making it happen.

- Why should systems and organisations drive the value-based revolution?
- What should they do to make it a reality?
- How to frame the VBHC agenda and steer the cultural shift towards it?

# OUR EU-FUNDED PROJECTS

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We have extensive expertise in both project management and communication and dissemination activities.

The projects we are involved in address key health management topics. One of our focus area is health workforce and the digital and green transformations. We are involved in projects developing a skills strategy for the health workforce and other practically providing trainings. We work on projects using wearables for improving breast cancer care and city urban development. Other projects address innovation procurement; vaccination confidence and an emergency response action to COVID-19.



# BEWELL

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BeWell - Blueprint alliance for a future health workforce strategy on digital and green skills is an Erasmus+ project that aims to upskill and reskill the European health workforce. The project will develop a green and digital skills strategy that can be implemented at a local, regional, national, and ultimately at the European level through the Pact for Skills.

Comprising 24 organisation partners from 11 European countries, the BeWell project will help promote the sustainable transformation of European health systems by four primary actions, including:

- Developing skills intelligence on the digital and green skills needs of the health workforce
- Establishing the first Blueprint Alliance for the health ecosystem to create a skills strategy to be implemented at a local, regional, national and, ultimately, European level via the Pact for Skills
- Launching a large-scale skills partnership under the Pact for Skills initiative
- Conceiving and implementing a pilot training programme on digital and green skills in the healthcare sector and for emerging occupational profiles.

## A European upskilling and reskilling strategy for the health workforce

### WHY YOU WILL BENEFIT

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You will be able to employ a multistakeholder-consulted green and digital skills strategy that will modernise the health workforce. This means integrating digital technologies in health systems to lessen the burden on day-to-day operations and promoting better value-based outcomes for patients.

It will also tap into the potential of competences of current health professionals to help prepare even the next generation of health workers. Co-created training programmes on green and digital skills will be available to empower and unite Europe's health ecosystem.

# EUVECA

EUVECA - European Platform for Vocational Excellence in Health Care is an ERASMUS+ project designed to support the development of future-oriented skills within the health and care sector. At the heart of the project is the creation of 7 European Regional Vocational Excellence Hubs, which will collaborate using a European Platform for Vocational Excellence in Health Care.

The overall ambition of EUVECA is to showcase how substantially Vocational Education and Training contributes to moving innovation forward within the European healthcare sector and ensuring its sustainability both on European and regional levels.

By and large, the project aims to:

- Increase the quality and appeal of vocational training and lifelong learning within the European healthcare sector and the health care education system;
- Support the implementation of the European Skills Agenda 2020 by ensuring continuous and high-quality VET is available to professionals in the health care sector, with a focus on lifelong modern skills training;
- Contribute to the development of the European Education Area by fostering long-term, sustainable collaboration across the higher education and VET sectors.

## Supporting the development of future-oriented skills within the health and care sector

### WHY YOU WILL BENEFIT

Learnings and progress made in the project will support the training of digital skills among health professionals. This means that initiatives considering the integration of digital technologies in health systems will be met with a more prepared workforce capable of maximising the use of such tools.

Furthermore, as professionals will be digitally more competent to leverage such technologies, health systems could experience more streamlining in practices and operations. This could translate into lower expenditures and better patient health and quality of life outcomes.

# COVIRNA

COVIRNA is a patient-centred Innovation Action aimed at generating a diagnostic tool to identify COVID-19 patients at risk of developing fatal cardiovascular complications.

The COVIRNA diagnostic test will be based on cardiovascular RNA biomarkers highly predictive of the clinical outcomes of COVID-19 patients. The test will enable individualised surveillance, care and follow-up of these patients in the context of the current pandemic.

The project will:

- Build a biobank of 2,000 blood samples from existing cohorts of COVID-19 patients in Europe
- Select a subset of highly specific lncRNAs predictive of COVID-19 clinical outcomes using bioinformatics, AI and biostatistics
- Build a prediction model
- Design a reliable, cost-efficient and easy-to-use in-vitro diagnostic test and achieve CE marking
- Raise stakeholders' awareness of advantages brought by the newly designed diagnostic solution as a valuable decision-support tool for healthcare professionals to deliver the best health outcome for the most vulnerable COVID-19 patients
- Engage communities of stakeholders in sharing practical knowledge on the use of the novel medical technology

## A prognostic test for COVID-19 patients

### WHY YOU WILL BENEFIT

Health systems and organisations will have access to a minimally invasive, affordable and simple yet robust prognosis tool in the context of the current COVID-19 crisis and other health scenarios.

This translates to possible savings in health expenditures, from a shortened length of hospitalisation to optimised decision-making processes regarding treatment and care.



This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No. 101016072. This page only reflects the author's views.

# REBECCA

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REBECCA - REsearch on BrEast Cancer induced chronic conditions supported by Causal Analysis of multi-source data - aims to tap into the potential of Real-World Data to support clinical research and improve existing clinical workflows.

REBECCA will combine clinical data with data describing patients' real-life behaviour including physical activity, eating habits, sleep and online interactions. These new forms of Real-World Data will be collected via mobile and wearable devices.

The emergence of Electronic Health Records (EHR) and digital registries and the widespread use of smartphones and wearable devices have led to an increasing amount of health and lifestyle data that can be continuously collected for each patient. Such Real-World Data (RWD) present a major opportunity for advancing clinical research.

REBECCA 360° platform will be offered to breast cancer survivors as a means of supporting their everyday life and enhancing their interaction with health experts. The platform will be deployed within 7 clinical studies in 3 countries, Norway, Spain, and Sweden, involving over 650 individuals, and it will help shape future guidelines and practices for post-cancer treatment. Best practices resulting from the studies will be disseminated to researchers, public health and regulatory bodies throughout Europe.

## Tapping into the potential of Real-World Data to support clinical research

### WHY YOU WILL BENEFIT

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At the end of the project, you will be able to present and use the REBECCA 360° platform – a combination of minimally obtrusive, non-stigmatising mobile applications that help breast cancer survivors with their everyday life and enhance interactions with health experts.

You will be able to make the most of a well-tested platform deployed within seven clinical studies in Norway, Spain and Sweden, with 650+ individuals. Future guidelines and practices for post-cancer treatment will be made available to invite better outcomes in health systems and patients.



This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No. 965231. This page only reflects the author's views.

# EcoQUIP+

The ECOQUIP+ project builds on its successful predecessor, EcoQUIP, and related projects on public procurement for innovation (PPI).

These projects aimed to demonstrate how pro-innovation procurement methods help to improve the efficiency, quality and sustainability of healthcare. In addition to developing the pro-innovation capability of individual partner hospitals, the project has the following aims:

- To connect EU-supported R&D to procurement outcomes
- To strengthen market demand for innovation by improving the capability of hospitals to engage in multilateral and collaborative actions
- To improve the use of the innovation potential in SMEs to support healthcare outcomes
- To actively seek options and opportunities for joint procurement where they are feasible and add value in terms of outcomes and innovation

However, the need to align budgets and timelines is a serious impediment to joint procurement for both buyers and suppliers. Therefore, as well as mechanisms for cross-border joint procurement, the project will be looking at other options for joined-up procurements that have proved effective in engaging suppliers and demonstrating joint demand.

## Improving the sustainability of healthcare through innovation procurement

### WHY YOU WILL BENEFIT

The project will foster the creation of an 'Innovation Procurement Leaders Group' of hospitals that will be able to pioneer new approaches to collaborative procurement.

As the project will stimulate demand for innovative goods and services to deliver practical procurement outcomes, it will serve as a best practice model for at least 15,000 European hospitals.

Lastly, you'll have access to a series of webinars aimed specifically at healthcare managers, exploring innovation procurement's potential in addressing key healthcare challenges.

# HEART

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HEART - HEALThier Cities through Blue-Green Regenerative Technologies aims to improve urban health and reduce health disparities through innovative Blue-Green-Solutions-based implementation mechanisms of urban planning that embrace and promote health and wellbeing as key-planning criteria.

The consortium will use medical evidence in clinical and non-clinical settings. For each case study, medical and social experts of the consortium under the supervision of the local medical centres will select 800 individuals.

Most of the recruited persons to participate in the demonstration phase will be equipped with the proposed wearable devices. HEART will follow a technical process that includes various pieces of information from medical data in non-clinical settings. The HEART project will also take advantage of additional sources from existing environmental sensors, satellite/remote-sensing data and European services like Copernicus.

The project will then process all information in the data management tool, which includes advanced machine learning and artificial intelligence techniques, modules and other tools.

This approach will invite the production of evidence to support the effects of various Blue-Green Solutions on public health and well-being.

## Improving urban health and reducing health disparities

### WHY YOU WILL BENEFIT

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Upon project completion, you will have access to innovative urban planning methodologies that can serve as fundamental standards for the future design of urban districts and the regeneration of urban environments, especially those that have been neglected.

You will be able to share these delineated approaches with health, city, regional authorities to help influence policymaking decisions and actions.



This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 945105. This page only reflects the author's views.



# HaDEA SERVICE CONTRACT

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The HaDEA service contract aims to support EU Member States in overcoming obstacles to vaccination of physical, practical, and administrative nature, and increase vaccination coverage rates across the region.

The consortium will partner with national and regional health authorities in all 27 EU Member States to complete six core tasks:

- Mapping vaccination services in every EU Member State, with the support of designated country experts, to determine obstacles to vaccination
- Conduct a large-scale survey of EU citizens and health professionals to determine to what extent these obstacles have a negative impact on vaccination coverage rates
- Identify and analyse best practices developed by EU Member States to overcome these obstacles
- Organise on-site visits to the EU Member States from which best practices have been identified, so as to promote international knowledge-sharing and cross-pollination between health authorities
- Implement pilots of selected best practices in EU Member States to evaluate effectiveness, efficiency and transferability
- Develop final recommendations for overcoming obstacles to vaccination to present to the European Commission.

**Overcoming  
physical,  
practical, and  
administrative  
obstacles to  
vaccination**

## **WHY YOU WILL BENEFIT**

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Once the project ends, you can take advantage of a newly developed website that can help health managers across Europe make more informed and cost-effective decisions related to vaccinations.

The evidence gathered will also help you better influence policymaking decisions at different levels.



This project has received funding from the European Union. This page only reflects the author's views.

# OUR POLICY INITIATIVES

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Our policy initiatives and our involvement in policy networks is an opportunity to drive positive changes at all levels, including connecting and engaging with key stakeholders across the European health system; contributing to long-term strategic thinking and policy development; influencing political debates; and raise the health management policy priorities for the European Union.

Our involvement in policy networks paves the way for breakthrough collaboration opportunities. We share work from our initiatives and feed relevant information to our members so that policy networks can inform and guide some of our activities and vice versa.



# THE HEALTH SYSTEM BURDEN OF RSV IN EUROPE

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The white paper presents the study findings on the burden of paediatric RSV in hospitals and the community, and the impact of RSV-infection on health systems performance and healthcare resource use over the last three RSV seasons (2018/19, 2019/20, 2020/21). The study is based on a survey conducted among 374 HCPs in 20 European countries, from August 2021 to January 2022.

## The public health impact of RSV

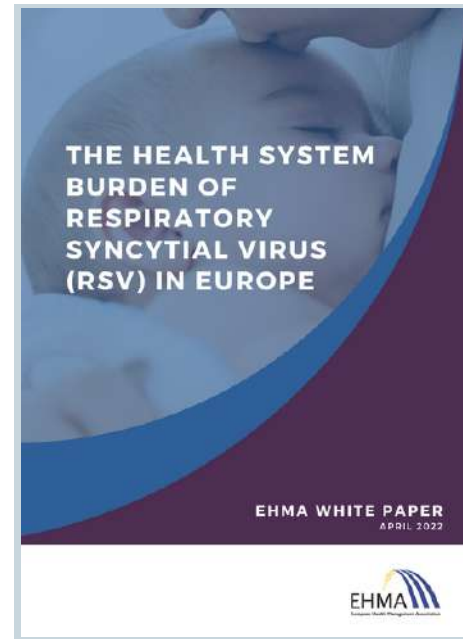
The seasonality of RSV is a strong factor impacting on optimal health system performance. The peak rise in RSV infections and hospitalisation occurs between October to March in Europe. This results in acute pressure on primary care providers, emergency services, and paediatric hospital capacity.

RSV burden is strongly felt as there is no active treatment for the infection. RSV-related disease management is limited to symptomatic relief. No preventive option is available yet, for all infants. This is an unmet medical need.

## Our survey

EHMA performed a cross-sectional survey on 380 healthcare professionals (HCPs) in paediatric hospitals and the community, across 20 countries in Europe. The results confirm the burden of paediatric RSV is significant and system-wide and affects all care settings. 89% of survey respondents consider RSV's disruptive effects is moderate to extreme.

Seasonal outbreaks of RSV and the resultant increased demand for healthcare services lowers levels of patient safety, leads to



deteriorated work conditions for healthcare providers, and significant delays and disruptions to care delivery. HCPs across all care-settings ranked increased workload, and high levels of stress and exhaustion, as the foremost impacts of the RSV-associated health system burden.

Most infants are not optimally managed and routinely undergo unnecessary investigations and receive treatments (e.g., antibiotics) of doubtful efficacy for RSV infection. This is an avoidable and unnecessary public health burden.

Following a careful assessment of the burden, impact, and disruption of paediatric RSV infections on the health system in Europe, we developed five evidence-supported, actionable recommendations geared towards building a better RSV-resilient and RSV-prepared health system:

- Broaden the understanding of RSV among caregivers, communities, and clinicians.
- Maintain infection control measures.
- Improve and expand diagnostic capability.
- Standardise the management of RSV infection.
- Prepare for access to immunisation.

# EU HPP STAKEHOLDER NETWORK

Qualified, trained and skilled healthcare professionals are key to building resilient health systems. The report of the EU HPP Stakeholder Network on 'Profiling and Training the Healthcare Workforce of the Future' includes recommendations addressing policy-makers at all levels. It aims to trigger change and raise awareness of the existing and foreseeable skills gaps of the European health workforce in the context of visible trends and challenges.

The report identifies four skill areas that are pivotal to delivering better, more resilient, sustainable and effective person-centred care:

- Digital, eHealth and AI skills;
- Patient-centred communication skills;
- Interdisciplinary and coordination skills; and
- Green skills.

Any concrete actions should be preceded by a large-scale comprehensive data collection about skill needs and supported by an overall strategy. To secure long-term sustainability, it is not only the healthcare professionals but also educators who should be upskilled and reskilled. Additionally the educational and training institutions should be equipped with the necessary infrastructure and knowledge to provide courses addressing large audiences in a tailored manner. Last but not least, top-down measures such as education reforms and prioritisation of health workforce skills development on the political agenda should be combined with a continuous engagement of healthcare professionals in monitoring and evaluating their performance and eventually developing training materials.



The recommendations include:

- **Digital skills:** Upscale and integrate digital competencies into health professionals' education and training, lifelong learning, continuing professional development, and staff exchange programmes.
- **Communications skills:** Incorporate effective patient-centred communication – especially with vulnerable groups and older persons – in training programmes and academic curricula.
- **Interdisciplinary and collaboration skills:** Assess the needs of educators delivering interdisciplinary and collaboration skills development, while focusing on adaptability in healthcare professionals' education programmes.
- **Green skills:** Promote good practices and raise awareness of what green skills mean and what new job positions will be needed, while enhancing climate literacy and climate health literacy.

# EMBRACING VALUE-BASED HEALTHCARE

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Many of the problems in today's healthcare can be addressed through value-based healthcare (VBHC). To date value-based healthcare implementation has been primarily discussed in technical term of measurements, organisational structure and competition. However, a true shift from volume to value requires a change in culture and a different way of working of healthcare professionals. Organisations that have succeeded in measuring outcomes are not widely disseminated in ways that improve service delivery and ensure evolution to become value-based care providers. It is within this context that the UNIVANTS of Healthcare Excellence Award was launched.

EHMA joined this global program as a founding partner to stimulate and celebrate healthcare excellence as well as disseminate best practices around the world. We have therefore produced two white papers that provide insights, best practice and actionable guidance to implement the value-based healthcare shift.



EHMA is proud to be one of the UNIVANTS founding partners and to have actively collaborated with this prestigious program to foster scalability, replication and understanding of practices with proven effectiveness in transforming and consolidating delivery according to value-based healthcare principles.

We are delighted to announce the publication of two reports which gather the best practices submitted and awarded by the UNIVANTS program in 2020 and 2021 and their contribution to value-based healthcare:

- [UNIVANTS as a driving force for Value-Based Healthcare](#)
- [Making the difference – UNIVANTS' contribution to the outcomes' quest](#)

# IMPACT OF MEDICINES ON ENVIRONMENT

Medicines are crucial to save human lives and improve wellbeing. However, when prescribed, used, or disposed inappropriately, they can impact human health and severely impact wildlife and ecosystems. There are various ways in which pharmaceuticals impact the environment. Firstly, the medicines and medical equipment supply chain releases large amounts of greenhouse gas emissions. Secondly, wastewater from the production and usage of medicines can be detrimental to wildlife and expedite the emergence and spread of antimicrobial resistance (AMR). It is estimated that there are 33,000 human deaths linked to antibiotic-resistant bacteria in the EU/EEA each year.

Multi-stakeholder and multi-sectoral engagement with the One Health approach across the medicine's lifecycle is urgently needed to address this issue. So far, existing recommendations and strategies to reduce the environmental impact of medicines have primarily been focusing on the actions that can be taken by industries, community pharmacists, and practitioners. Yet, targeted recommendations for health managers are lacking.

Our White Paper is written from a health management perspective and focuses on the stages of the medicines' lifecycle that can be influenced by health managers. These include: procurement, logistic planning and distribution, prescription, consumption and use, and disposal. The White Paper exhibits case studies and associated recommendations and best practices that health managers can put in place to help reduce the environmental impact of medicines in these five stages.



Our White Paper presents recommendations that health managers can implement at the various stages of the medicine's lifecycle:

- Incentivise a standardised data collection at European level about healthcare emissions.
- Establish an EU database of good practices to minimise the environmental impact of medicines.
- Adopt a multistakeholder approach.
- Leverage digital technology to monitor prescription, adherence, procurement and disposal.
- Increase environmental health literacy and green skills of healthcare professionals, patients and citizens.
- Centralise processes in procurement, supply chain, and logistics to favour the purchase of medicines with low environmental impact.

The White Paper also contains 13 case studies highlighting best practices from across the European region.

# DIGITALISATION OF MEDICATION MANAGEMENT

Medication is the main part of the therapeutic process for hospital patients and with stocks of up to 200 medications held by hospital settings, it is estimated to be the second-highest spending chapter of health budgets. Management of medication stocks, their prescription and administration to patients – better known as the ‘medication management pathway’ – is an onerous activity for hospitals and healthcare professionals. Tasks in this pathway are largely manual and non-digitalised. Visibility of medicine stocks is low; medication data is unfindable and low digitalisation of the pathway makes it highly prone for the occurrence of medication errors. Current rates of digitalisation combined with the high rates of manual activities undermines patients and healthcare professionals’ wellbeing and hospital systems resilience.

For medication errors alone, the impact from the current low levels of digitalisation in hospitals costs the OECD group \$54 billion and 3 million avoidable hospital days. With the advent of the European Medicine’s Agency new European Shortages Monitoring Platform (ESMP) which will manage medication shortages and the European Health Data space for cross border patient care, current levels of Digitalisation of Hospitals Medication management pathways will reduce the reliability and success of these new initiatives to respond effectively to future health care crises. It is therefore crucial that the European Union invests in the Digitalisation of Hospitals Medication management pathways for patient safety, healthcare professionals’ wellbeing and for hospital resilience.



The white paper outlines the Alliance for the Digitalisation of Medication Management in European Hospitals’ calls for action, providing examples from across of the European Union of digitalisation of the pathway. The Calls for actions include:

- Implement digital systems in hospitals for the effective employment of the European Shortages Monitoring Platform.
- Enhance patient safety and hospitals’ pharmaceutical systems resilience by digitalising hospital’s medication management pathways.
- Support hospitals to scale up and update their IT infrastructure.
- Provide sustained funding to scale up digital medication management.
- Develop healthcare professionals’ digital skills and provide trained experts to support change management in hospitals.
- Standardise and include medication treatment data from ambulatory care and hospitals in the European Health Data Space.

# EU HEALTH COALITION

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The EU Health Coalition is a multi-stakeholder initiative looking at mapping the future of healthcare in Europe. The Coalition explores how to make the most out of innovation, investigates the role of the European Union in addressing healthcare challenges, and critically assess how different sectors can converge to deliver the best outcomes for patients in Europe. The vision of the Coalition revolves around people-centricity, prevention and wellbeing (including health inequalities), and value- and outcomes-based healthcare.

The EU Health Coalition brings together 43 organisations representing patients, EU research-oriented medical societies, industry organisations, healthcare providers, regional and local health authorities and other relevant stakeholders, making it the largest and most diverse and influential for the health policy community in Brussels. We joined the Coalition in 2019 to ensure that health management best practices are taken into account when discussing the future of health in Europe.

## The work of the EU Health Coalition

Since its inception, the EU Health Coalition worked with its members to issue recommendations to health policy and decision makers around four themes:

- Boosting health research & innovation
- Improving access to health innovation and reducing inequalities
- Accelerating the digital transformation of European health systems
- Advancing health systems integration.

As EHMA we are active in the working groups dealing with the digital transformation of healthcare and integration of health systems.



In November the EU Health Coalition presented its recommendations at the 2022 EU Health Summit. The Coalition's vision is of a Europe where health and life sciences represent the third strategic pillar alongside the green and digital transitions, and where health and care systems are without siloes and centred on people and patients.

### Recommendations

- **Digital transformation:** We must ensure that the European Health Data Space is designed to collect standardised data; investment is made in digital skills and infrastructure; and the EU embraces a common approach to make Europe a world-class AI hub.
- **Health system integration:** we call for EU health policies and programmes to strengthen and measure the implementation of integrated care and Health in All Policies. This should be supported by a dedicated report on 'EU Health Systems Integration' in the 'State of Health in the EU' process.
- **Boosting research & innovation:** the EU must invest in human, intellectual and innovation capital; ensure alignment between the Industrial and Pharmaceutical Strategies; and drive patient-centric development of preventative and therapeutic tools which address patients' unmet medical needs.
- **Access to innovation:** the EU should establish a monitoring centre for innovative health technologies and clinical practices; support patient-centric and outcomes-based approaches to healthcare; and view healthcare expenditure as an investment not a cost.



# EUROPEAN ALLIANCE FOR VALUE IN HEALTH

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The European Alliance for Value in Health is a group of associations representing a broad range of stakeholders including patients, scientific and professional societies, healthcare managers and professionals, hospitals, payers and industry active in the broader European health systems.

The vision of the Alliance is a Europe where health systems are value-based, sustainable, and people-centred. By connecting different stakeholders, their mission is to facilitate health system transformation, share knowledge and best practices, and engage with policy makers and stakeholders at European, national, and regional levels.

The Alliance believe value-based, sustainable, and people-centred health systems are built around six key principles:

- Outcomes that matter to people and patients, as well as benefits valued by health systems and societies, are at the centre of decision-making.
- Interventions and services addressing prevention, social care and healthcare are organised in an integrated way around people and patients.
- Resources are allocated towards high value care and prevention, with outcomes and costs of care measured holistically.
- Continuous learning, education and healthcare improvement is based on evidence, and supported by data and insights.
- Innovative ways of care delivery are fostered.
- Financing models and payments reward value and outcomes.



EHMA is an active member of the Alliance. Our Executive Director, George Valiotis is co-chair of the alliance together with Thomas Allvin, Executive Director for Strategy and Healthcare Systems at the European Federation of Pharmaceutical Industries and Associations (EFPIA).

Our involvement in the group is focused on ensuring that health management knowledge and best practices are taken into account when discussing how to building health systems that are value-based, sustainable, and people-centred.

In December 2022, the Alliance published a '[Taxonomy on value-based healthcare](#)'. It describes terms related to value-based healthcare (VBHC) and represents a milestone towards creating a language around the concepts of value in health that is common to different stakeholders.

# OTHER POLICY NETWORKS

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All Policies for a Healthy Europe (AP4HE) is an intersectoral initiative that aims to ensure that citizen's health and well-being are a core priority for Europe and a strategic objective for the next European Commission.



Mental Health Europe is committed to the promotion of positive mental health and prevention of mental distress. Their Mental Health Advocacy Platform ensures that mental health is a priority at EU level and advocates for an EU Strategy on mental health.



EU4Health is a civil society alliance launched before the 2019 European Parliament elections focussed on keeping health high on the EU policy agenda. It advocates for meaningful participation of public interest civil society in initiatives of the European Commission.

# MEMBERS' GROUPS AND INITIATIVES

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The EHMA Membership is open to all those committed to improving health management in Europe and beyond.

We welcome applications from universities with relevant courses in healthcare; hospitals and healthcare service providers; associations of hospital managers; research centres; regional and national health policy agencies; and anyone else sharing our mission to spread knowledge on effective health management.



# SCIENTIFIC ADVISORY COMMITTEE



The Scientific Advisory Committee (SAC) supports the wider mission of EHMA providing advice on research and scientific issues.

Building on EHMA reputation for academic excellence, the SAC comprises EHMA Members who bring the highest standards of research governance to ensure that the EHMA work programme and activities are of an internationally recognised high standard.

The SAC plays an important role in providing a focus and voice for the EHMA research community.

SAC Members advise the Board on the key directions for health management to be pursued in the future. They also contribute to the EHMA Conference by proposing themes and research topics for the development of the program.



**Prof Sandra C. Buttigieg, MD**



**Prof Teresa Magalhães**



**Prof Americo Cicchetti**



**Prof Dr Henk Nies**



**Dr Rui Dang**



**Prof Mag Dr Manfred Pferzinger**



**Nabil Jamshed, MSc MBA BBA**



**Prof Dr Rui Santana**



**Prof Marija Jevtic, MD**

# PROGRAMME DIRECTORS' GROUPS

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Excellence in post-graduate health management programmes was a key-driver behind the establishment of EHMA in 1982 and it remains a principal focal point today. We have an established Programme Directors' Group, which brings together Programme and Course Directors, Heads of Department, Deans or any other individual representing a study course, to help ensure that taught programmes continue to provide the highest quality education for health managers, healthcare professionals and other stakeholders.

Programme Directors' Group meetings are a regular twice-a-year event, providing space for discussing pressing challenges, sharing knowledge on market needs, supporting improvement in programme content and delivery, and supporting the promotion of member programmes to prospective students. Programme Directors meet in person in March and online in November each year. They also organise an informal gathering in occasion of the EHMA Annual Conference to present the group and their activities to prospective new members.

The Programme Directors' Group is working to develop a database of case studies about health management in practice from across Europe. At the outset, the case studies will focus on the areas of:

- Workforce
- Digital transformation
- Quality improvement
- Finance

## GROUP MEMBERS

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- Prof. Ann Mahon, University of Manchester, United Kingdom - Chair
- Dr. Daiga Behmane, Riga Stradins University, Latvia
- Prof. Sandra C. Buttigieg, University of Malta, Malta
- Prof. Americo Cicchetti, Catholic University of Sacred Heart, Italy
- Dr. Zoltan Cserhati, Semmelweis University, Hungary
- Prof. Mark Exworthy, University of Birmingham, United Kingdom
- Dr. Maarten Janssen, ESHPM Erasmus University, The Netherlands
- Prof. Axel Kaehne, Edge Hill University, United Kingdom
- Prof. Catherine Keller, EHESP, France
- Prof. Todorka Kostadinova, Medical University Varna, Bulgaria
- Dr. Judit Lam, Semmelweis University, Hungary
- Prof. Rui Santana, ENSP, Portugal
- Prof. Dr. Walter Sermeus, KU Leuven, Belgium
- Prof. Dr. Christoph Zenger, University of Bern, Switzerland

# SOUTH- EASTERN EUROPE SIG

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At the moment, the South-Eastern Europe Health Network (SEEHN) provides the leading example of a collaborative intergovernmental body for health in the South-Eastern European region and has been working on broad initiatives for collaboration between countries since its inception in 2001. However, there is space for further regional collaboration on health issues, particularly to address existing challenges related to health management. For this reason, EHMA has created a Special Interest Group on South-Eastern Europe (SIG SEE), to support health managers in the region to address these challenges.

Broadly, the SIG SEE aims to strengthen health management capacity to create more resilient health systems that deliver excellent quality care and improve health outcomes for the region's citizens. Achieving this aim involves many interrelated activities, including dissemination of evidence-based practices in health management, ensuring that these practices are supported by strong policy, creating a forum for health managers to exchange knowledge, supporting the implementation of lessons learnt from the COVID-19 pandemic, and helping to meet the training needs of the health workforce.



As a first step in this work, the SIG SEE requires a strong understanding of the issues faced by health managers across the region. This paper aims to provide this understanding through a comprehensive literature review covering the current health management challenges present in each country in the region. Rather than presenting data and statistics on health systems and health outcomes, which is already widely available through national government sources and organisations like the World Health Organization, this review will focus specifically on outlining the landscape for each country specifically from the health management perspective, including workforce, policy and economic considerations.

# PARTNERS AND SPONSORS

We would like to acknowledge and thank all the partners and sponsors who have supported our activities, including our Annual Conference, over the past year.



# MEMBERSHIP

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**43**

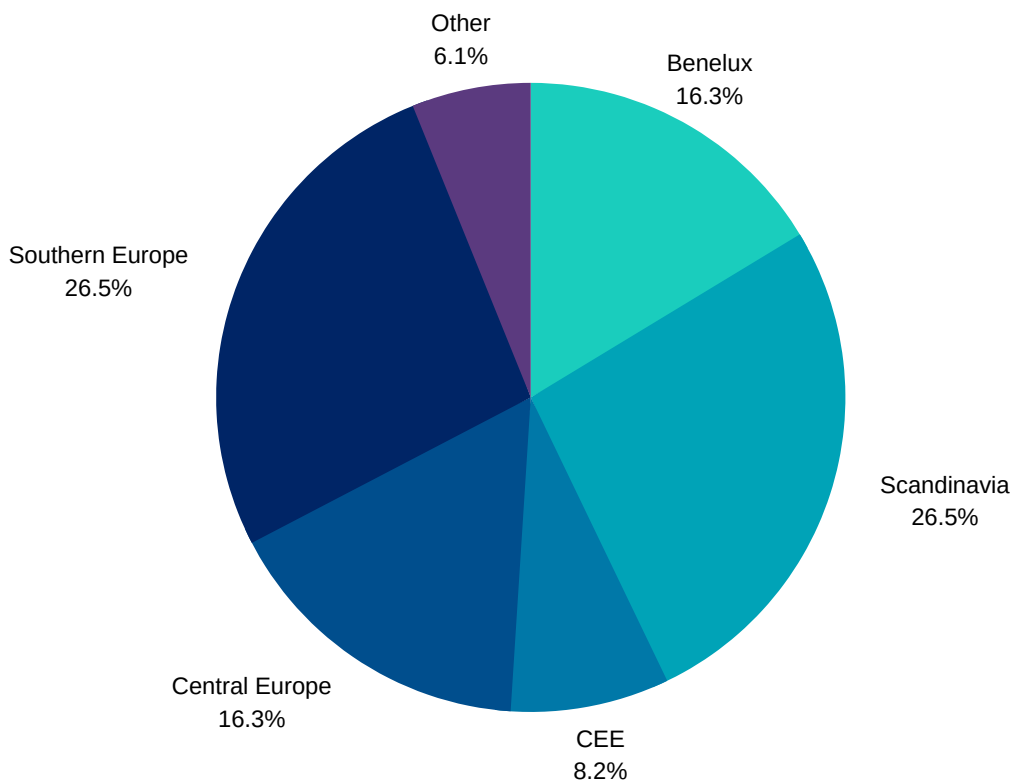
**ORGANISATIONAL MEMBERS**  
from 20 countries

**23**

**INDIVIDUAL MEMBERS**  
from 18 countries

## GEOGRAPHICAL DISTRIBUTION

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# BOARD OF DIRECTORS

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The Board of Directors, on behalf of the EHMA Members, governs how we achieve our vision of excellence in health management for a healthy Europe. They do this by ensuring EHMA achieves appropriate results at an appropriate cost; and avoids unacceptable actions and situations.

The EHMA Board of Directors maintains a governance policy manual to define how EHMA is to be governed, the strategic purpose of the EHMA, the role of the Board, how they delegate their authority, and how they manage risks.

The Board report to the Member's Annual General Assembly.

## Board of Directors

June 2022 - June 2024

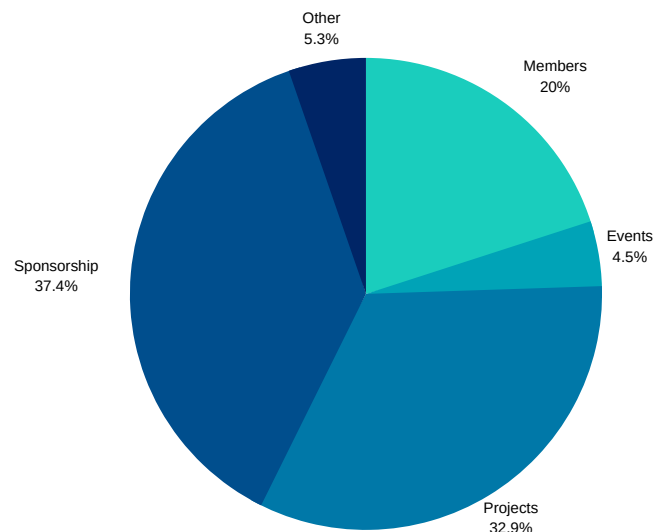
- **Prof Sandra C. Buttigieg - President**  
University of Malta, Malta
- **Prof Axel Kaehne - Vice-President**  
Edge Hill University, UK
- **Dr Alexandre Lourenço - Treasurer**  
APAH, Portugal
- **Dr Teppo Heikkilä**  
Helsinki University Hospital, Finland
- **Prof Todorka Kostadinova**  
Medical University, Varna, Bulgaria
- **Dr Eszter Kovacs**  
Semmelweis University, Hungary
- **Prof Federico Lega**  
University of Milan, Italy
- **Prof Ann Mahon**  
University of Manchester, UK

# FINANCES

## EHMA 2021 Income

Members contributions	100,455.00
Conference and events	22,336.51
Projects	164,815.17
Sponsorship	187,500.00
Other income	26,605.16
<b>Total</b>	<b>501,711.84</b>

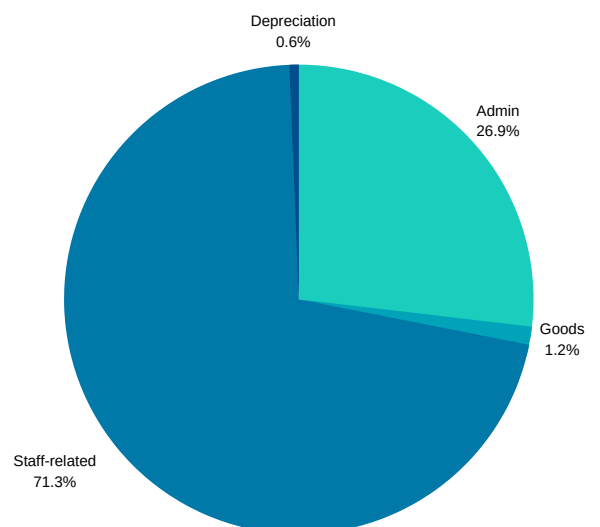
## EHMA 2021 Income



## EHMA 2021 Expenditure

General admin	132,204.88
Goods and consumables	6,100.00
Staff-related charges	350,664.46
Depreciation & other	3,175.75
<b>Total</b>	<b>492,145.09</b>

## EHMA 2021 Expenditure



Other financial income	9,409.98
Financial charges	- 1,108.91

**2021 Financial result 17,867.82**



**European Health Management Association (EHMA)**

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