



TRANSFORMING HEALTH
AND CARE SYSTEMS

Sustainable and Innovative Ways of Investing in Health

Monday, 28 September 2026 – 15:00-16:00 CET

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- Welcome to the Learning Week. During sessions, please remember:
- The sessions are being recorded.
- Microphones are muted and cameras are off.
- Please get involved! Use the chat for your questions, observations and comments.
- For additional information go to: <https://knowledgehub.thcspartnership.eu/>





Dr. Gerda Geyer, Programme Manager at FFG the Austrian Research Promotion & Work Package Lead “Strengthening Ecosystems” within Transforming Health and Care Systems



Professor Joanna Lane, Managing Director of Stichting Health ClusterNET; Co-Chair of the Advisory Board for the European Partnership for Transforming Health and Care Systems



Dr Despoina Petsani, Aristotle University of Thessaloniki, co-chair of ENoLL Health & Wellbeing Working Group.



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Continuing our shared dialogue across different initiatives on what it takes for promising initiatives to cross the “missing middle” between funded project and sustainably embedded practice.

What you will gain

- A greater understanding of innovative financing instruments (from Smart Capacitating Investment to blended finance and outcome-based contracts).
- The governance and ownership conditions that must precede rather than follow the innovation
- Insights on ensuring citizens and patients hold a genuine stake in how value is defined and reinvested.
- The practical implications of how public procurement and multi-stakeholder business models can help promising interventions and digital health solutions reach system-level scale.

*#transformation #InnovationFinancing #SmartCapacitatingInvestment #OutcomeBasedContracts
#SustainableValueDefinitions #MissingMiddle*



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[Home](#) / [Capacity building](#) / 📢 Save the Date - THCS Learning Week 2026: “Transforming Health and Social Care: Meaning, Models and Measurement”

Date published: 14/07/2026

Date amended: 11/09/2026

📢 Save the Date - THCS Learning Week 2026: “Transforming Health and Social Care: Meaning, Models and Measurement”



THCS
TRANSFORMING HEALTH
AND CARE SYSTEMS

THCS Learning Week

 **From 28 September to 2 October**

 **10 sessions** |  **1 hour each** |  **Engaging & collaborative**

SAVE THE DATE


[< Previous](#)

September 2026

[Next >](#)

Mon	Tue	Wed	Thu	Fri	Sat	Sun
	1 .	2	3	4	5	6
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14 .	15 .	16 .	17	18	19	20
21	22	23 .	24 .	25	26	27
28 .	29 .	30 .				

Learning Week 2026

- Thank you for joining this session.
- The session recordings will be hosted on the Knowledge Hub:

<https://knowledgehub.thcspartnership.eu/>



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TRANSFORMING HEALTH
AND CARE SYSTEMS

WP9 – Strengthening ecosystems

Lead partner: FFG
Gerda Geyer

Co-leads: TAU and ZonMW
Learning Week, 28 September 2026

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Ecosystems

In the THCS Partnership, the term ecosystem at a basic level is used as a broad concept of health and care stakeholders and other related entities, from regulators to end-users, from funders to service providers, from governing bodies to health and care professions, and from NGOs to companies and innovators.

Transformative ecosystems ...

... have a shared vision,

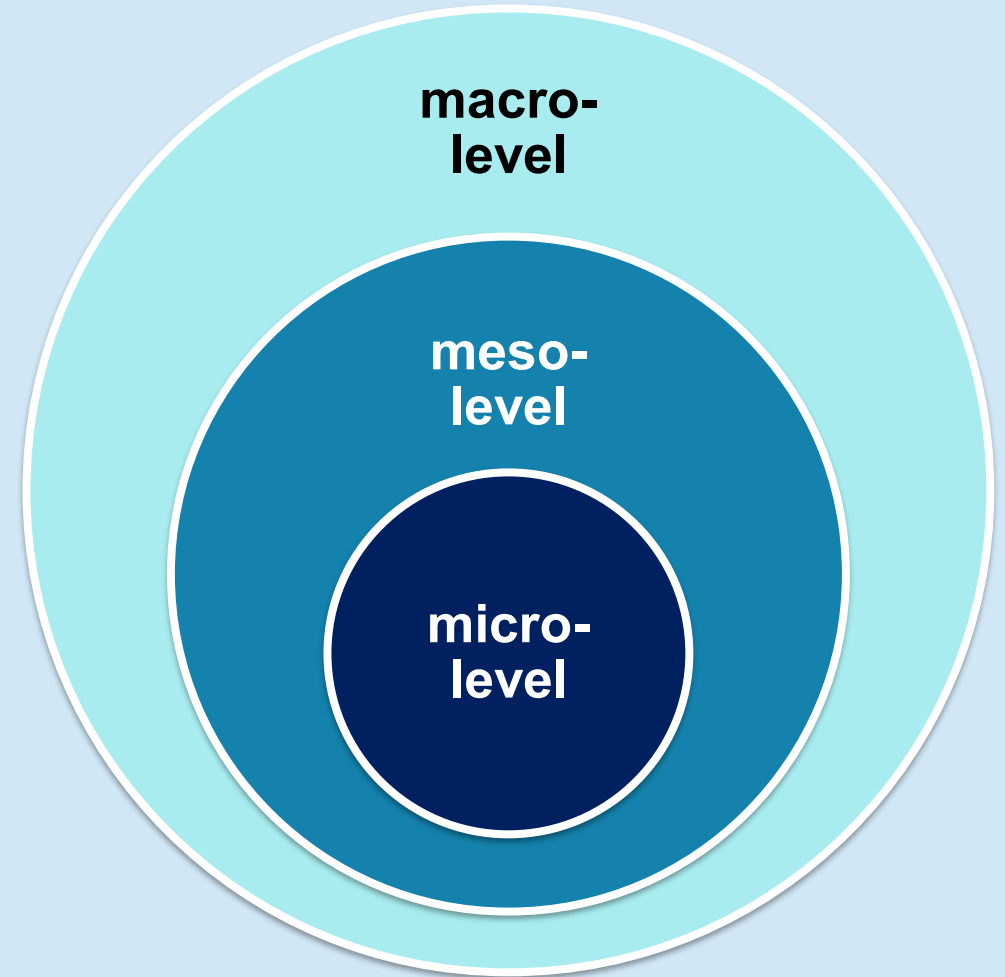
... aligned strategies and activities,

... measurable impact.



Three ecosystem levels

- Continuous feedback loops keep legitimacy & momentum across all layers



Promote the ecosystem-wide approach at national, regional, and local levels

Strengthening Ecosystems

Target Group:
Ecosystems

Understand

Target Group:
THCS funded projects

Support

Target Group:
Mirror groups

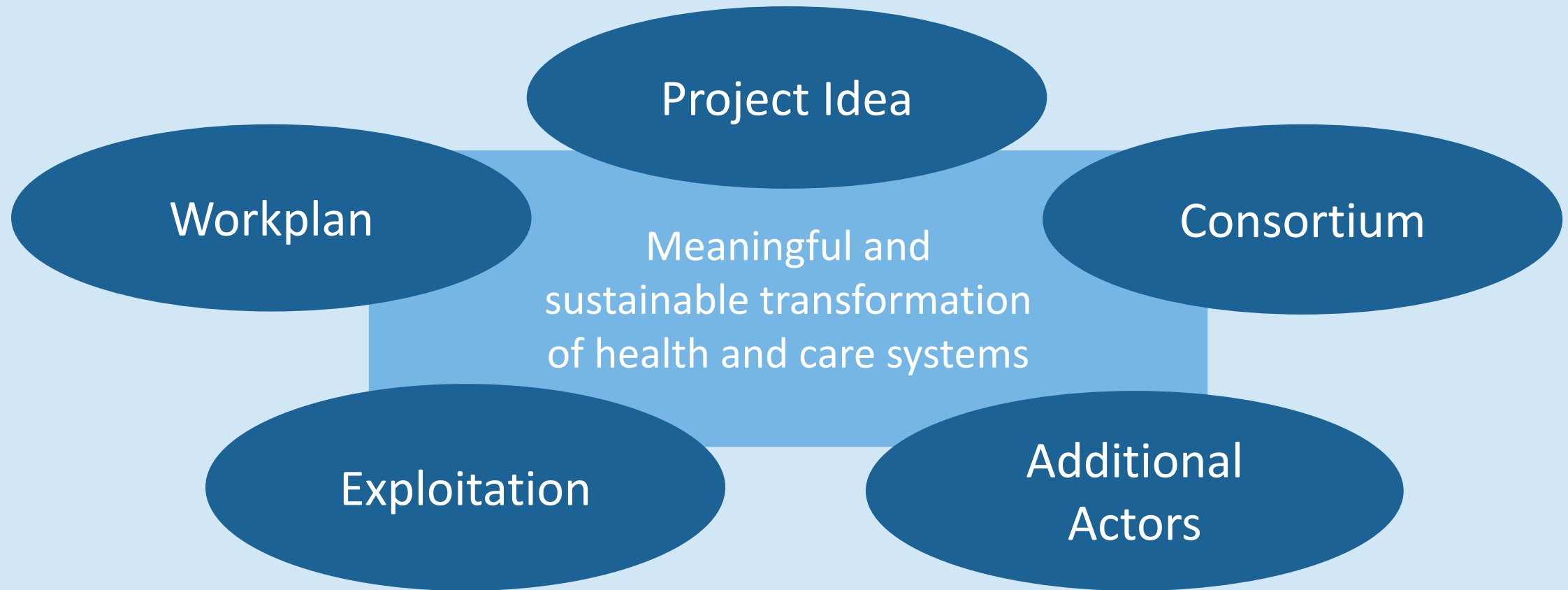
Convene

Target Group:
**National/regional/
local stakeholders**

Connect to



ECOSYSTEM-WIDE APPROACH IN FUNDED PROJECTS



Enablers of transformation

People drive change – transformation needs committed individuals.

Shared sense of urgency among stakeholders catalyzes coordinated action

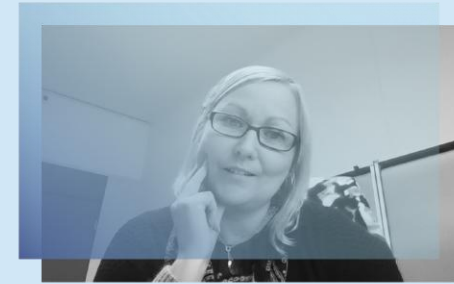
Political will and continuous support are essential to sustain momentum.

Credibility through groundwork – robust measurement and evaluation frameworks.

Integration of citizens and service users – orientation toward demand through active involvement of users, patients, and patient organizations.

No universal formula – transformation is complex and context-specific, requiring tailored approaches.





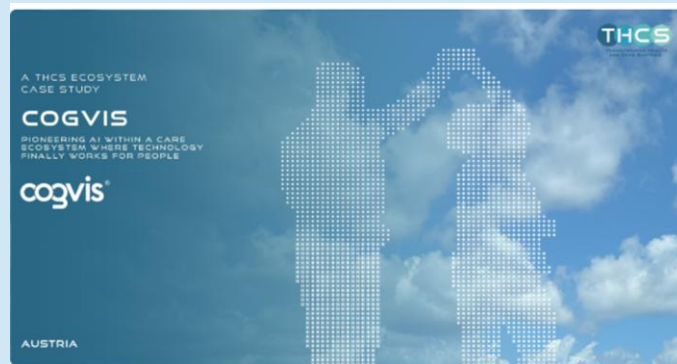
16 Voices One Aim

*Ecosystems in
Health and Care*
The THCS Podcast

Apple Podcast, Spotify, YouTube: <https://www.youtube.com/@THCS-HorizonEU>

Transformative Ecosystem Examples

<https://knowledgehub.thcspartnership.eu/documents/77>



<https://knowledgehub.thcspartnership.eu/documents/30>



<https://knowledgehub.thcspartnership.eu/documents/76>



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■ Spotify:

<https://open.spotify.com/show/11EcezW9VSuNdgoCcbli4U>

■ Apple

Podcasts: <https://podcasts.apple.com/us/podcast/ecosystems-in-health-and-care-the-thcs-podcast/id1887092760>

■ YouTube: <https://www.youtube.com/@THCS-HorizonEU>

D9.4

<https://www.thcspartnership.eu/deliverables/deliverables.kl>



<https://www.thcspartnership.eu/>



<https://www.linkedin.com/in/thcs/>



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Smart capacitating investment and the 'missing middle'

THCS Learning Week · Sustainable & innovative ways of investing in health

Prof. Joanna Lane: Invest4Health, SHCN, FHEF, USN, THCS Partnership Advisory Board



THE PROBLEM

Prevention works — but is structurally underfunded and not financed to scale

6–13%

of GDP that EU countries spend on health care

< 3%

of that health spend goes to prevention

> 60%

of the NCD burden traces to preventable risk factors

THE “MISSING MIDDLE”

Between a proven project and system-wide practice lies the phase where promising health-promotion, prevention and integrated-care innovations lose momentum — and quietly stop.



Fragmented governance



Insufficient financing



Limited collaboration



No implementation support

Source: joint Invest4Health–THCS WP9 White Paper — “Hard but not impossible: Scaling what works in health promotion, disease prevention and integrated health and care through the ‘missing middle’.”

Smart Capacitating Investment: from cost to investment

PREVENTION TODAY

A cost item on an annual budget: first to be cut, last to be funded.



WITH SCI

An investment that builds capacity and returns measurable value across sectors.

SCI means working together, sharing risks, and investing early in what matters most for health.

Unconventional investments — financial or non-financial — in health promotion and disease prevention, using new or reallocated resources to build individual and community capacity, address the determinants of health, and drive sustainable, equity-focused change.



Capacitating Builds systems, capabilities and partnerships — not just short-term outputs.



New or reallocated Reallocating, pooling and repurposing resources within and between sectors.



Equity-focused Localised benefits and fairer outcomes, with returns shared, not extracted.

Anchoring investment



Building investment-driven transformational health ecosystems



SMART CAPACITATING INVESTMENT

New way to fund health promotion and disease prevention



SOCIAL OUTCOMES FUND

Independent SOFs are a structure that makes innovative outcomes-based investment work



INTERVENTIONS

Interventions financed on the basis of results achieved and not activities performed.



RECYCLED INVESTMENT

When projects or interventions succeed the savings generated can be shared.



What a good pitch looks like: example 1

Investing in Early Childhood Wellbeing

The problem:

Across Europe, children in low-income families are **twice as likely** to experience obesity and mental health challenges by age 12 (WHO Europe, 2023).

The solution:

We propose **Healthy Start**, a cross-sector partnership linking childcare centres, public health services, and local businesses to improve nutrition, movement, and mental wellbeing in early childhood. The approach builds on WHO and EU best practices for integrated early years investment.

The impact:

For every €1 invested in early health promotion, societies save **€6 in future healthcare and social costs** (OECD, 2021). Beyond the numbers, this investment nurtures healthier, more resilient communities — reducing long-term inequalities and boosting workforce participation.

The ask:

We invite regional authorities and investors to contribute **€1.5 million in catalytic funding** (public and social investment) to expand the programme to 10 municipalities, supported by outcome-based evaluation.



Healthy Cities, Strong Economies

The problem:

Chronic diseases now account for **80% of health costs** in our city — yet most are preventable. At the same time, urban design discourages physical activity, deepening health inequities and social isolation.

The solution:

Our “**Active Neighbourhoods**” initiative redesigns public spaces to promote walking and cycling, integrates nature into dense areas, and links local health, transport, and planning budgets through a shared investment model.

The impact:

For **every €1 invested, cities see up to €4 in returns** — through reduced healthcare costs, increased productivity, and cleaner air (WHO HEAT, 2022). Similar projects in Copenhagen and Ljubljana show measurable gains in wellbeing and local business vitality.

The ask:

We are seeking a **€2 million blended investment** — public, private, and philanthropic — to scale this model to five districts, co-creating healthier, more inclusive urban environments, with a goal of scaling city-wide within three years.



A three-layer financing architecture

Three mechanisms for delivering SCI, anchored by a protected public foundation. Invest-NL already runs the outcome layer live (Het Beweeghuis, GelijkGezond).

FOUNDATION



Public foundation — ring-fenced SCI prevention layer

A protected, multi-year public allocation pooled across health, housing, social care, education and employment — a per-capita prevention premium with an outcomes add-on, governed outside any single ministry's annual budget cycle.



Outcome layer — Social Outcomes Fund

Pooled, multi-payer, outcome-based contracts for measurable, near-term returns — one mechanism for delivering SCI, at city or regional scale.



Asset layer — long-term patient / institutional capital

Asset-based structures for the infrastructural models: co-ownership, a regulated-asset-base logic, municipal & community bonds, and blended finance with a first-loss public tranche.

These are mechanisms for delivering SCI, not the whole of it — the ring-fenced foundation anchors and de-risks the two capital layers below it.

Ring-fenced layer drawn from the RHFH working-group White Paper “Why Prevention Fails — and What It Would Take to Make It Stick: Changing the financing logic. Rypple Foundation”

Governance and ownership must come first

Move governance, budget lines and ownership from the **programme** to the **ecosystem** before funding ends, not after.



A “transition facilitator” function



Owens the crossing — Someone must be accountable for the move from pilot to embedded practice.



Holds the mandate & budget — With authority to pool funds and convene payers across sectors.



Captures & reinvests value — So savings created in one pocket can be reinvested by another.



Proven in real-world testbeds

Eight regional testbeds now stress-test SCI models in live health ecosystems:

CORE TESTBEDS

Sweden

Germany

Spain

Wales (UK)

SECOND-TRANCHE TESTBEDS

Sweden

Italy

Serbia

Portugal

Citizens and patients as co-owners of value

Co-define the value proposition with citizens and patients **from inception** — not validate it after the model has already been designed.



A stake in the metrics

Citizens help define the outcomes that count — what “value” means and how it is measured.



A stake in the money

Genuine participation in financing design and in how returns and savings are reinvested.



A stake in governance

Citizen co-governance built into the collaborative platform — representing vulnerable groups by design.



Finance citizen co-governance as a design line-item — built in from the outset, not a voluntary add-on. Multi-stakeholder business models and social franchising then replicate what works rather than rebuilding it.

Crossing the middle: hard, but not impossible

THE SCI PACKAGE



Knowledge base



Practical toolkit



Competence programme



Collaborative platform

WHAT IT TAKES

- ✓ Embed governance and ownership early — before the funding ends.
- ✓ Match the financing instrument to the specific “wrong-pocket” problem.
- ✓ Give someone the transition mandate and a multi-year budget.
- ✓ Keep citizens and patients in defining value and reinvestment.

BUILD SHARED TRANSITION INFRASTRUCTURE

The missing middle is a shared problem and a shared opportunity. Let's connect the frameworks, tools and evidence across:

THCS · Invest4Health · INVEST-NL · AHA-RSCN



**European
Network of
Living Labs**

Living Labs and citizen co-creation as a pathway to sustainably investable health innovation

Despoina Petsani

Research Associate, Lab of Medical Physics and Digital Innovation

Co-chair of ENoLL Health & Wellbeing Working Group

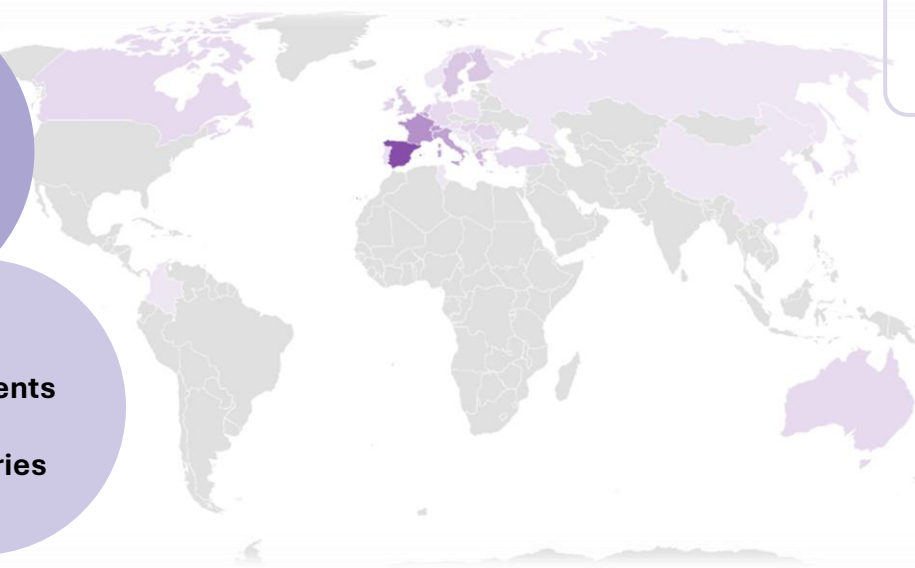
www.enoll.org

About ENoLL: the international non-profit association of certified Living Labs

European
Network of
Living Labs

~600
historically
certified
Living Labs

5
continents
43
countries



200 Active ENoLL Members

Dec 2025

27 Effective members

158 Adherent members

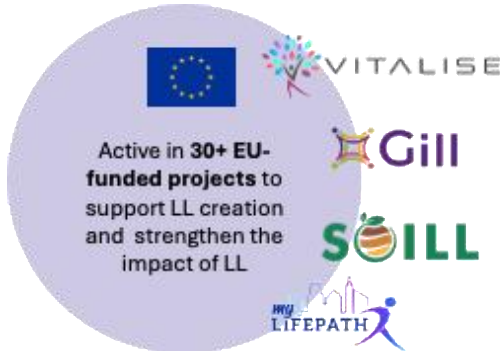
11 Accepted to Grow

4 Innovation Partners

20 year anniversary: Founded in 2006 under the Finnish European Presidency

Vision: to be the leading organisation empowering the global development of Living Labs

Motto: Empower anyone to innovate



Certification & Labelling

Quality evaluation procedure, formal certification



Capacity Building

Learning programmes for LL creation and ENoLL certification



Working Groups & networking

Knowledge exchange & collaboration among Members & key stakeholders



Projects & proposals

Supporting matchmaking and participation to R&I projects at EU and international scale



Research

Strengthening evidence-based LL methodologies, interdisciplinary research, and scientific impact



OLLD & Events

Organisation of events for showcasing LLs, offering guidance, and reflecting on best practices.



What are Living Labs

“Living Labs are user-centred, open innovation ecosystems based on a **systematic user co-creation approach**, integrating research and innovation processes in real-life communities and settings”.

ENoLL 2025, Living Lab origins, developments and future perspectives. <https://doi.org/10.5281/zenodo.14764597>



Opening innovation beyond organisations, actively involving users throughout the process



Modern tool for research and provision of R&I services across different stages of innovation



Not operating in simulated or recreated environments



Systematic collaboration from idea to validation across all actors of the quadruple helix

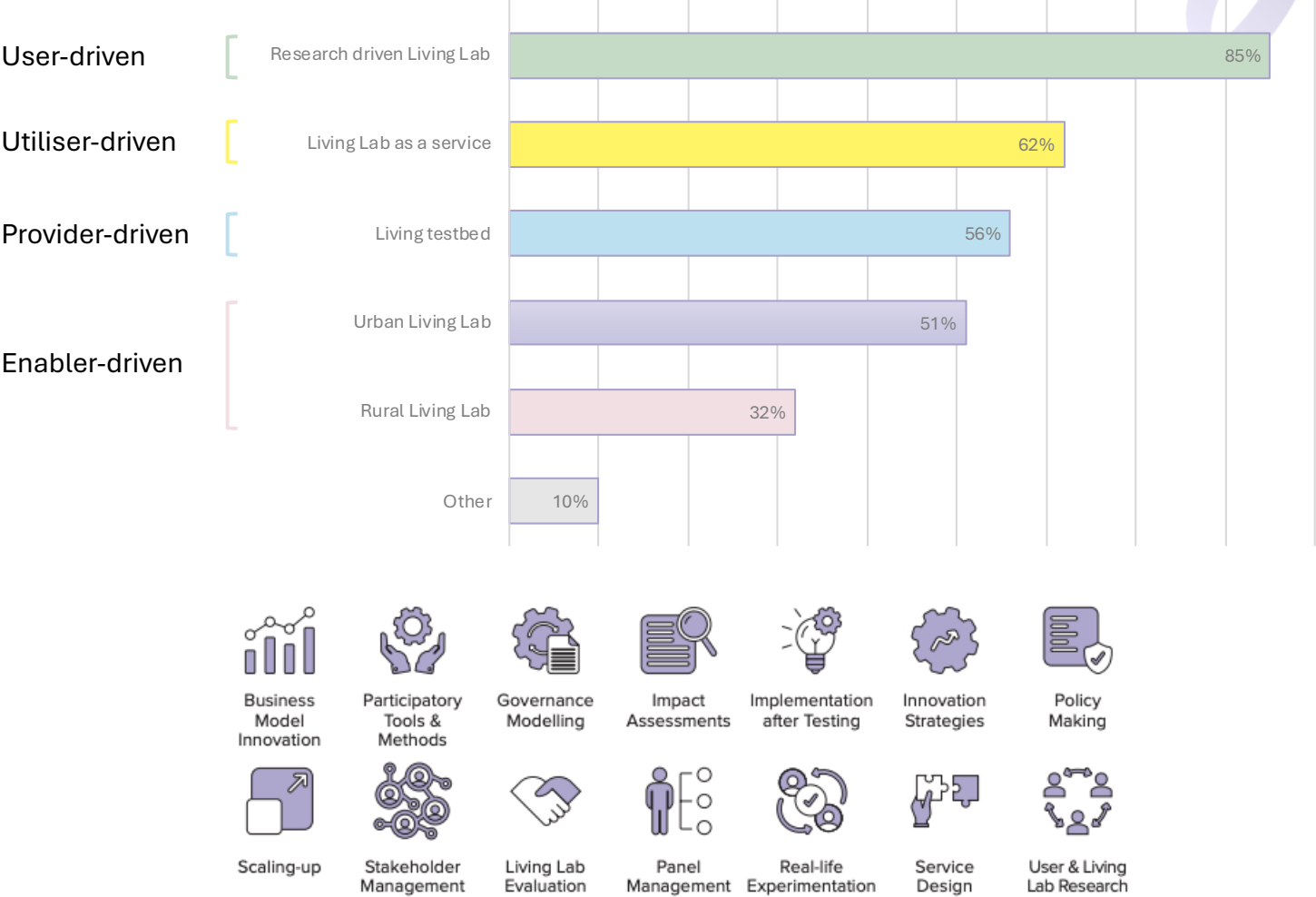


Different types of Living Labs

Living Labs objectives & ambitions



Living Labs offer & services





Living Labs are not (only)...

Not only a **test-bed**



Operating in recreated or controlled environments, with users mainly represented by researchers

-

BUT not real-life experimentation environments with direct user involvement

Not only a **fablab**



Focused on prototyping and fabrication in dedicated spaces, often limited to specific tools and communities

-

BUT open, multi-actor innovation ecosystems across contexts

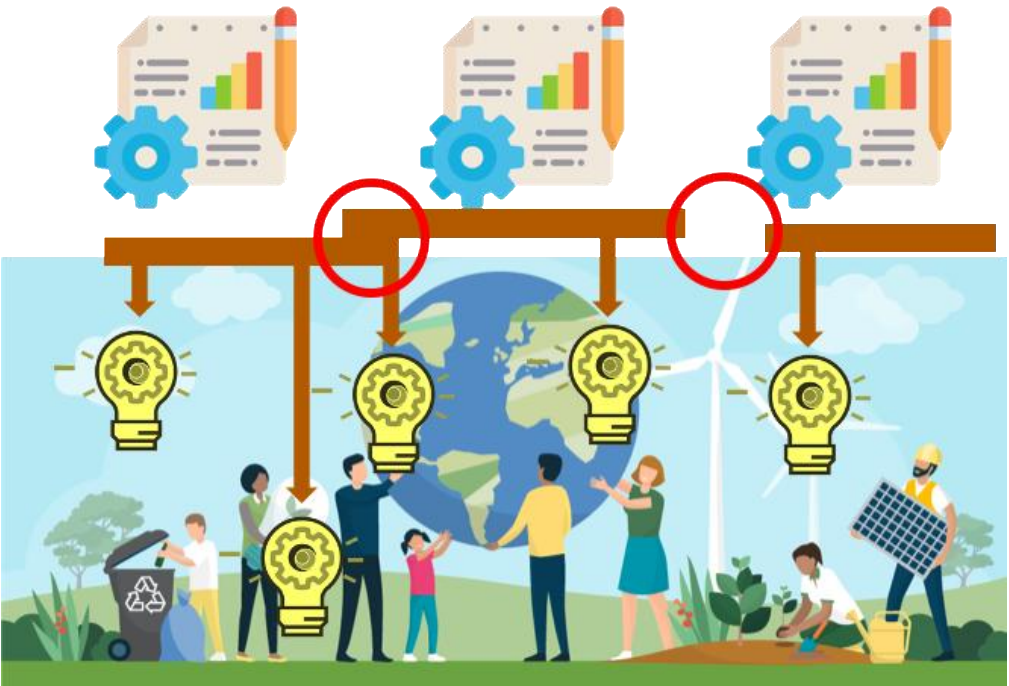


Not only a **project**

with defined scope and duration, focused on specific outputs and usually not lasting beyond the funding

-

BUT long-term structures with long-term stability beyond single initiatives





Benefits

Living Labs provide a flexible and adaptable approach to address wicked problems, such as ecosystem restoration, through collaborative and participatory processes



Operating in real-life environments for testing and validating innovations means working outside controlled settings, enabling direct experimentation and continuous iteration



Faster innovation cycles

Involving users throughout the innovation process ensures solutions reflect real needs, transform clients into developers and provides insights into adoption



Derisk innovation

Bringing together actors within the quadruple helix connects actors across the innovation process, ensuring solutions move from research into real-world application

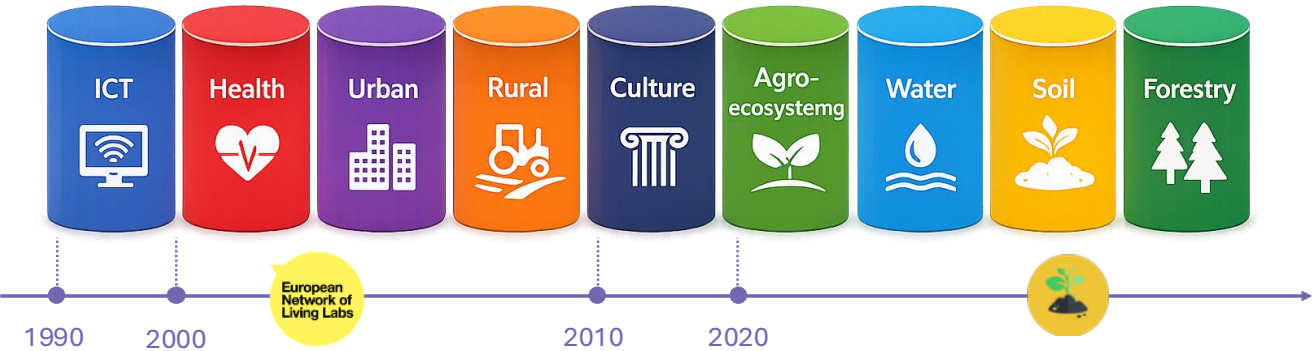


Bridge the research-market gap

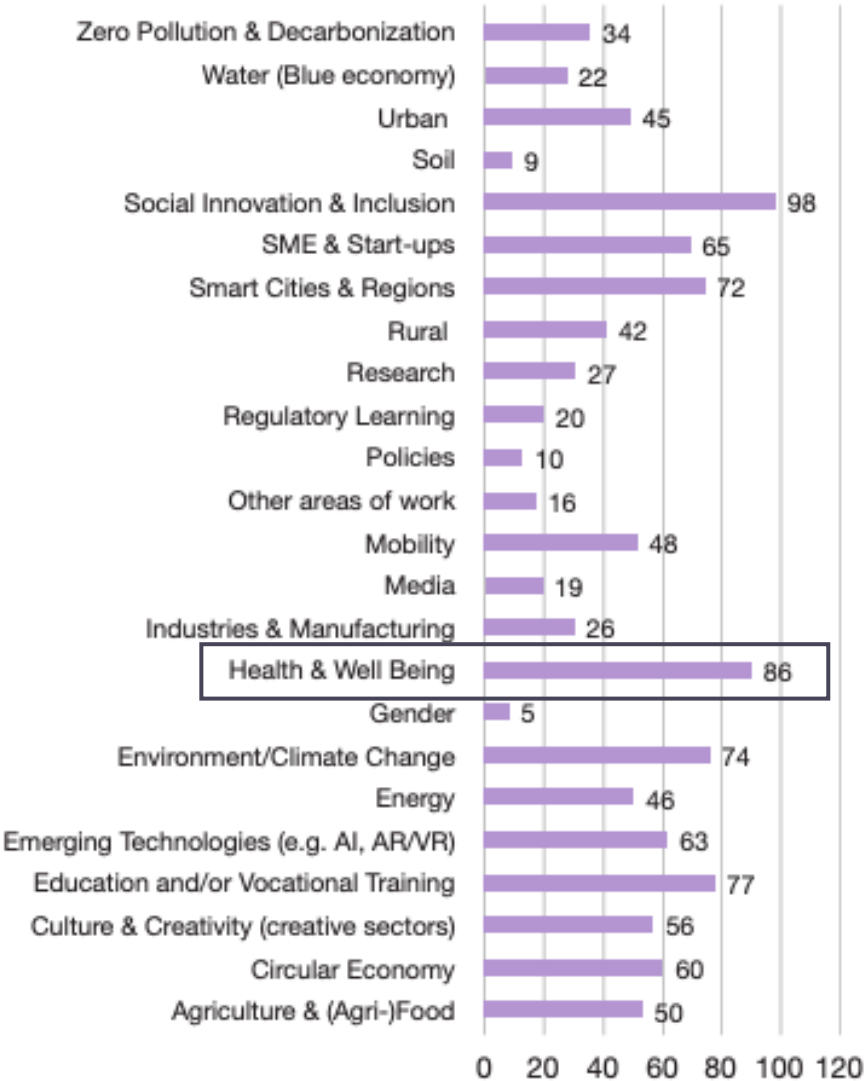
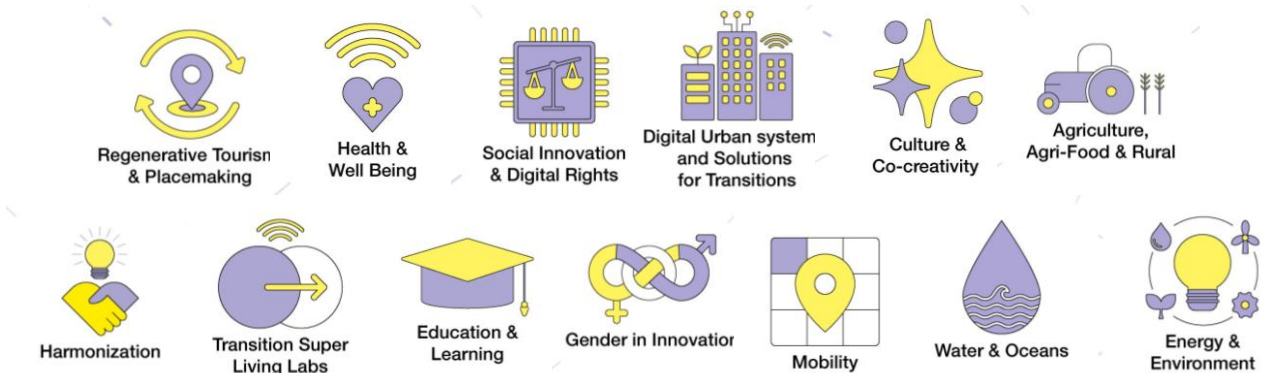


Sectors

Living Labs adoption has evolved over time and now LL operate across a wide range of sectors



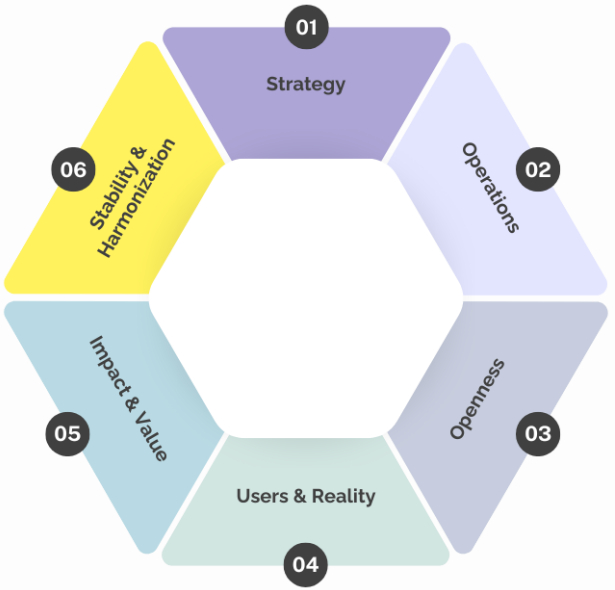
ENoLL Working Groups



ENoLL members areas of work, ENoLL catalogue 2025



Certification & Labelling



The **ENoLL Labelling and Certification** process, which serves as a **seal of quality** reserved exclusively for Living Labs that demonstrate a **consistent use of the Living Lab approach**, and undergo a comprehensive **structural and methodological quality assessment** – based on [a harmonized evaluation framework](#)

The **ENoLL Self-Assessment tool**, always available, free of charge. This tool is part of the harmonized Living Lab evaluation framework developed by ENoLL. It allows you to assess the maturity and sustainability of your Living Lab at any time.

15 evaluation criteria – 6 chapters

The European Commission logo, featuring the European flag and the text "European Commission".

A purple icon of a trophy with a star.

ENoLL Harmonised Framework

Recognised as **EU Best Practice for R&I**

Research and Innovation

Home > ... > Repository of Best Practices > Living Labs Harmonization Framework and Mapping Canvas: a scalable approach to collaborative Open Innovation

Living Labs Harmonization Framework and Mapping Canvas: a scalable approach to collaborative Open Innovation



Certification & Labelling

38

new LL labelled in 2025

200

Members milestone

Transnational Access



113 External Researchers

54 Studies from externals

360 Request for services

>200 Externals trained

>10 Publications from externals

5 MoU and Lols for following VITALISE signed

1 Spin-off company with license agreement in-progress

3 | Open Calls March 2022,
December 2022 & May 2023

17 | Virtual & Transnational
Access Infrastructures

>€400k | Provided to external
researchers for
conducting studies



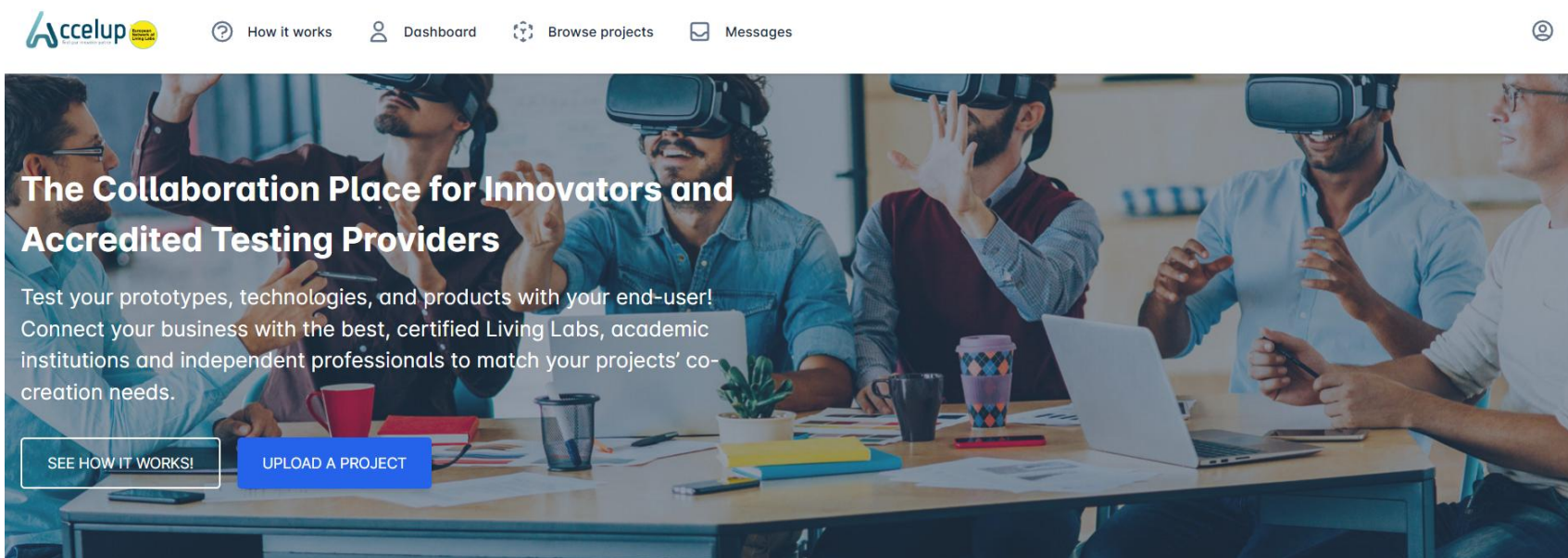
This project has received funding from European
Union's Horizon 2020 Research and Innovation
Programme under Grant Agreement No 101007990.

"ASSURE" project (ID34)

Automatic dysphagia Screening through artificial intelligence," a revolutionary non-invasive tool designed to screen Dysphagia among older adults



Accelup – Offering LL services



The Collaboration Place for Innovators and Accredited Testing Providers

Test your prototypes, technologies, and products with your end-user! Connect your business with the best, certified Living Labs, academic institutions and independent professionals to match your projects' co-creation needs.

[SEE HOW IT WORKS!](#) [UPLOAD A PROJECT](#)



<https://accelup.eu/home>



Accelup Vouchers for companies



Engaging the Value of Living Labs to Innovate Care and Regulatory Environments

To be redeem for services from Certified Living Lab Research Infrastructures

10 vouchers of €5K to external **companies** to use certified living labs' services for testing their products





Project requests
from companies

44



Bids from
LLs

32



Matched
Co-LLs

18

EVOLVE²CARE





Open calls for engaging external

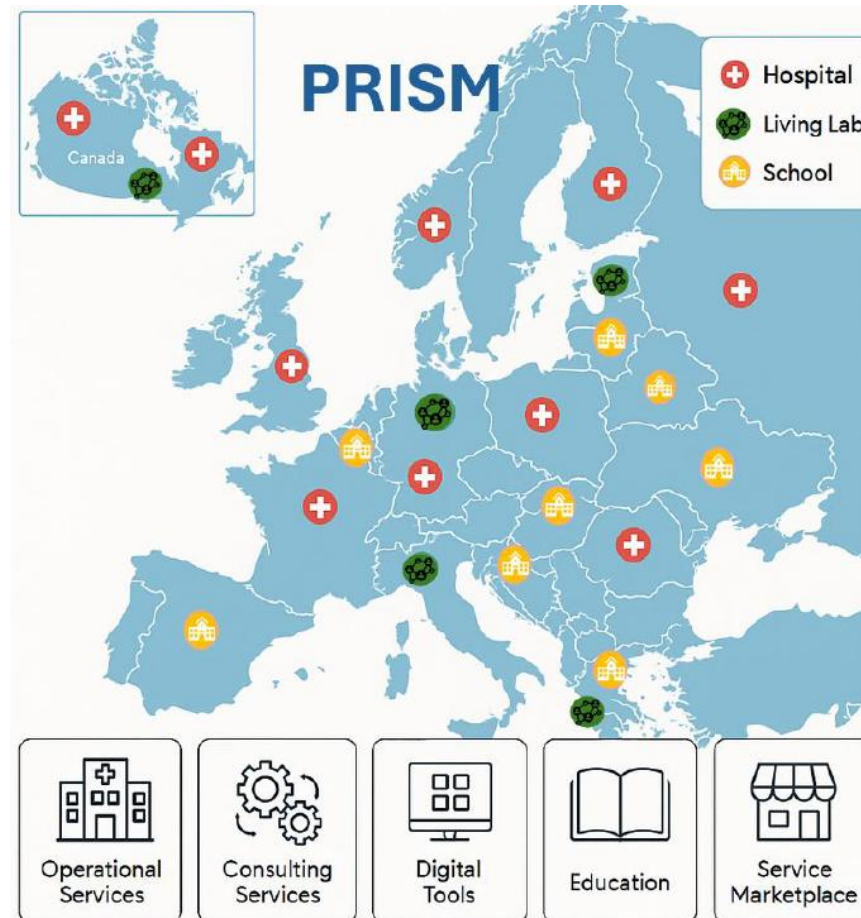


- Data collection technology providers (sensors, etc)
- Certified Living Lab Research Infrastructures
- 8 vouchers of €10K to external researchers to integrate the RAISE Suite SDK in their data collection instrument and access existing Research Infrastructures to pilot data collection in real-settings



Learn more: raise-suite.eu

Paediatric clinical Research Infrastructure Service Model




PRISM
Sept 2026 – Aug 2030
€10M

 **Funded by
the European Union**



Conclusions

Living Labs support Innovators to:

- Validate human-centered digital health solutions across all technological maturity levels.
- Overcome shared regulatory, business model, and user validation hurdles.
- Perform crucial real-world testing to accelerate market readiness.

What's next?



- 29 September (Brussels): Policy Event & Learning Lab Day 0
- 30 September – 1 October: OLLD26 Conference days (Antwerp)
- 2 October: Field visits (Belgium)



BRUSSELS

Tuesday
29 September

Policy Event





**European
Network of
Living Labs**

Thanks for your attention



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