Dear Friends and Colleagues,

We established our organization in 2011 to connect innovators, corporations, foundations, funders, governments, academics, and others to collaboratively scale and replicate innovations with the potential to improve access to affordable healthcare around the world.

Our mission has not changed, but as of this year, our name has. In June 2015 we officially changed our name from the International Partnership for Innovative Healthcare Delivery (IPIHD) to Innovations in Healthcare, to more clearly and simply communicate our work in scaling healthcare innovations worldwide. We also launched a new logo and website this year, further strengthening our communications outreach to amplify our impact.

We have accomplished a great many other things this year. Some highlights of our work include:

- **Expanded innovator network and support offerings:** We welcomed 12 new innovators into our network this year through a highly competitive selection process. We provided innovators in our network with support services such as intensive in-person training workshops, strategic guidance and staffing support, and targeted connections to potential partners and funders. 90% of the organizations in our network reported this year that they have scaled their impact since joining.

- **Growing supporter community:** This year we welcomed Bupa, the Pfizer Foundation, and the Commonwealth Fund as new supporters, each bringing unique expertise to strengthen our efforts and our community.

- **New regional office:** We launched an office in Nairobi, Kenya, with two staff members based there to deepen our work in East Africa, including the support we provide to our innovators and other stakeholders in the region.

- **New insights and initiatives:** We published several in-depth case studies and reports, including pieces on “smart failure,” anti-counterfeiting innovations, emerging market strategies for multinational healthcare companies, and impact investing in global health. We also launched several new initiatives including ones focused on reverse innovation, innovations in Latin America, and new approaches for diabetes care and management.

This year also saw several new collaborations form among organizations within our community, spurred through meetings at events we hosted, learning groups we convened, or connections we made. These new linkages between individuals and organizations focused on nurturing innovative healthcare solutions are core to our thriving community and key to helping these innovations scale.

We are proud of our new name and our now four years’ worth of accomplishments and look forward to all that the future will bring. As always, we are enormously thankful to our innovators, supporters, and partners who have helped make this work possible and who work tirelessly to improve health and healthcare around the world.

Warmly,
Krishna Udayakumar
Executive Director, Innovations in Healthcare

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About Innovations in Healthcare

Innovations in Healthcare is a nonprofit organization hosted at Duke University and founded in 2011 by Duke Medicine, McKinsey & Company, and the World Economic Forum. We believe that great ideas are often already out there. By finding those great ideas, strengthening them, and scaling their impact, we believe we can help contribute to better health and healthcare for everyone.

- **Source smart innovations:** We identify promising innovators by scanning the market regularly and vetting potential innovators against a set of core criteria. A limited number of organizations are invited to join the network each year.

- **Strengthen organizations:** We provide our innovators with the opportunities, information, and contacts they need to strengthen their work.

- **Scale and spread impact:** We help assess and promote the adoption and adaptation of our innovators’ models in new contexts and geographies.

- **Study what works:** We develop and disseminate insights and new evidence about our innovators and their strategies to scale and replicate.
New Cohort Illustrates Democratization of Healthcare

Scanning the market regularly for the most exciting new healthcare solutions allows us to consistently bring the latest approaches into our network and spot emerging trends in global healthcare innovation more broadly.

Each year we ask our diverse community of partners from around the world to help us identify the very best healthcare organizations. In 2015, we welcomed 12 new innovators to our network which brings our network up to 55 innovators operating in 47 different countries. From Vietnam to Kenya to Brazil, these organizations are delivering new healthcare services and products that increase access to affordable, quality care in the countries where they operate and have the potential to impact health worldwide.

Chosen from a pool of more than 120 candidates, our newest cohort of innovators reflects three themes we saw this year in global healthcare delivery:

**Solutions that empower individuals**

There is a democratization of healthcare going on around the world. Entrepreneurs are increasingly realizing that when the populations they serve are empowered with the information, tools, and resources they need, health outcomes can improve, even in the absence of formal settings, systems, and providers.

For example, in India, Noora Health, the brainchild of a group of students working at Stanford University, is leveraging the latest in digital education technology to deliver personalized, disease-specific education to family members of hospitalized patients. Also in India, Bodhi Health is pioneering web-based learning management systems that provide quality medical education to low-literacy community health workers.

Similarly, in Mexico, PACE MD is offering emergency health training to health workers in underserved communities throughout the country who are typically seen as working outside the established healthcare system but who attend to many emergency needs in the communities they serve.

The Safe Water and AIDS Project (SWAP), an NGO in Western Kenya, engages local women to promote and sell health and hygiene products such as pediatric iron supplements and water purification products door to door, empowering women to earn a living and giving the communities they serve the tools they need for good health. ZanaAfrica is working to give girls in Kenya access to menstruation supplies and related educational materials they need but that are often financially out of reach.

Use the right tool for the job

Entrepreneurs working in places with limited resources have a talent for finding the right tool for the job. Looking at lower-tech, lower-cost solutions often expands access without sacrificing quality and ultimately saves lives.

In the area of maternal and child health, MTTS is a for-profit company designing safe, simple, effective, and low-cost medical equipment for neonatal intensive care units in low-resource hospitals. ayzh is a for-profit company developing low-cost, appropriate technology such as safe birthing kits designed for women in resource-poor settings.

In Africa, MicroClinic Technologies developed ZDi, a mobile application that helps clinics and hospitals in Africa monitor and evaluate their services and improve primary care.
Meet people where they are
Healthcare systems are too often built around providers and equipment and not the needs of patients. Entrepreneurs in emerging economies are flipping this thinking and building their services around the way people live their lives – taking healthcare to the places where they live, work, and play.

In India, SevaMob provides primary healthcare and insurance via mobile clinics to groups on a monthly subscription model. Dr. Consulta in Brazil integrates primary and secondary health services in one location, providing patients with access to services 25 times faster than public options. Bive in Colombia offers a healthcare membership network providing individuals with services at up to 70 percent lower prices than regular health insurance rates. In Kenya, Afya Research is operating kiosks located in rural villages, making it easier for community members to access services such as well-baby and antenatal visits.

Dr. Moka Lantum, Managing Partner, MicroClinic Technologies, with a member of the "Blue Angel" salesforce team in Kenya.

Bive staff members in Colombia. Photo taken by Innovations in Healthcare intern Felipe Magofke Rodriguez.

Our innovators offer solutions for every part of a healthcare system. The most common offerings are products and technologies.
The Social Entrepreneurship Accelerator at Duke (SEAD)

Launched in 2012, the Social Entrepreneurship Accelerator at Duke (SEAD) is a USAID-funded global health program led by partners within and outside Duke University, including Innovations in Healthcare. SEAD mobilizes a community of practitioners, investors, policymakers, faculty, staff, and students to identify, assess, and strengthen the capacity of health and healthcare enterprises around the world (focused now on India and East Africa). Twenty-five innovators in our network participate in SEAD, which offers a robust suite of support services to them. Other key partners in SEAD include the Center for the Advancement of Social Entrepreneurship (CASE), Investors’ Circle, and the Duke Global Health Institute (DGHI).

A key benefit of the SEAD program is the SEAD Summit, an intensive 3-day program at Duke University that helps innovators think through challenges to growth. Summit activities included workshops about strategic planning, accessing capital (impact investment and grant funding), and measuring impact. This year’s event had record attendance with over 150 participants.

Key highlights included:

- Presentations from the newest cohort of 12 innovators
- Pitch sessions to expert judges by three leading for-profit innovators, and three non-profit innovators with cash prizes for winning pitches, thanks to support from the Pfizer Foundation
- Panel discussions on topics such as replicating new models of care across regions and countries, harmonizing public and private sector efforts, empowering women and strengthening health systems, and health innovation ecosystems in East Africa and Latin America

Creating Unique Learning and Networking Opportunities

The Innovations in Healthcare Annual Forum

In March 2015, we hosted our 4th Annual Forum, our flagship event focused on highlighting healthcare innovation and building and sustaining partnerships. The event brought together a diverse audience of innovators and supporters from our network, investors, and other global collaborators. This year’s event had record attendance with over 150 participants.

Key highlights included:

- Presentations from the newest cohort of 12 innovators
- Pitch sessions to expert judges by three leading for-profit innovators, and three non-profit innovators with cash prizes for winning pitches, thanks to support from the Pfizer Foundation
- Panel discussions on topics such as replicating new models of care across regions and countries, harmonizing public and private sector efforts, empowering women and strengthening health systems, and health innovation ecosystems in East Africa and Latin America

Once we source the most promising examples of healthcare innovation, we then work to provide these organizations with the opportunities, information, and contacts they need to strengthen their work. 90% of the organizations in our network reported in 2015 that their organizations have grown since joining – the highest percentage since we launched.

This year we provided a range of support services to our innovators including intensive in-person training workshops, strategic guidance and staffing support, and targeted connections to potential partners and funders. We’ve strengthened organizations this year in four key ways:

The Social Entrepreneurship Accelerator at Duke (SEAD)

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A key benefit of the SEAD program is the SEAD Summit, an intensive 3-day program at Duke University that helps innovators think through challenges to growth. Summit activities included workshops about strategic planning, accessing capital (impact investment and grant funding), and measuring impact. This year’s event also featured New York Times Best Selling Author Dan Heath and Ann Mei Chang, Executive Director of USAID’s Global Development Lab, as well as speed networking sessions with healthcare technology and marketing experts.

“"The SEAD Summit provided an opportunity to step back and do some big picture thinking that is not possible or difficult in the day-to-day work."” —SEAD Innovator

In addition to the Annual Forum and SEAD Summit, we hosted five other events in India, Kenya, Mexico, and Qatar and attended 18 externally hosted events (with a speaking presence at 10 of these events). All of these opportunities provide us with the chance to amplify both the stories of our individual innovators as well as facilitate collaborations among diverse organizations to drive scaling of healthcare innovations.

Maria Salmon, Professor of Nursing and Global Health at the University of Washington, leading a panel discussion at the Innovations in Healthcare Annual Forum: “Empowering Women and Strengthening Health Systems — Moving Toward the Triple Win.”
Deepening our Regional Presence

East Africa Engagement
With additional funding from USAID East Africa through the SEAD program, we opened our first regional office in Nairobi, Kenya in early 2015 with the aim of deepening engagement with innovators in the region and supporting East Africa’s health innovation ecosystem.

We now have two team members based full-time in Nairobi: Dr. Patricia Odero, our East Africa Regional Director, and Sylvia Sable (a former Innovations in Healthcare intern and research assistant), our East Africa Project Associate.

Establishing a presence in the region has allowed us to provide the innovators in our network, and specifically in the SEAD program, with greater and more relevant support services.

We have also had the opportunity to contribute to the dialogue about how to improve healthcare in the region and form new partnerships with organizations in the region, such as the African Capacity Alliance and Strathmore Business School.

Facilitating Strategic Partnerships
As a result of connections facilitated by our team, several new partnerships were formed this year between innovators and funders, academics, and corporations from our broader community. Some specific examples include:

- **Innovators and funders.** The Segal Family Foundation is partnering with LifeNet International, We Care Solar, Penda Health, and North Star Alliance. Each organization is in the vanguard of strengthening clinical care across Sub-Saharan Africa with a focus on traditionally marginalized groups.

- **Multiple innovators.** Sevamob, which delivers primary care services in India via mobile vans, has partnered with Vaatsalya, an Indian hospital chain, to support Vaatsalya’s customer outreach and awareness efforts.

- **Innovators and academics.** Pro Mujer, a provider of financial and healthcare services to women across Latin America, has partnered with the Duke Global Digital Health Science Center to evaluate the effectiveness of their Facebook app for encouraging adoption of healthy behaviors among their clients with diabetes.

- **Innovators and corporations.** Baxter has partnered with Operation ASHA, which provides a platform for monitoring adherence to tuberculosis treatment, to detect cases of hemophilia among the population they support. Medtronic has partnered with Sevamob, ClickMedix, Bodhi Health Education, and Operation ASHA.

Sub-Saharan Africa NETWORK

Many of our innovators in Sub-Saharan Africa are operating in multiple countries.

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<th>number of OFFERINGS per country</th>
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Our innovators offer a mix of services and technologies throughout Sub-Saharan Africa, with care delivery as the most common type of service.
SEAD Funds for Strategic Partnerships

Thanks to funding from USAID East Africa, we invited select East African innovators in the SEAD Program to submit proposals outlining strategic projects that would benefit from outside expertise. Innovators applied for funds to hire consulting firms to assist them with high impact capacity building projects. SEAD team members reviewed the proposals, and selected five projects for funding. Three firms – Open Capital Advisors, Excelsior Group, and On Frontiers – were matched with innovators. Some $250K in SEAD funds will be provided directly to the firms to complete the project activities with innovators.


The types of projects supported include:

- Assessing financial models and business plans for new service lines
- Identifying potential funders and investors to finance roll-outs of new service offerings
- Preparing detailed investor materials and full financial projection models
- Developing new scalable training programs
- Improving tracking and reporting on financial and clinical performance

Student Intern Support

With support from the SEAD program, Innovations in Healthcare expanded its summer internship program in 2015 to include Duke University graduate students in policy as well as business. Innovations in Healthcare selected, trained, and matched six talented students with innovator organizations to work on 10-week strategic projects over the summer. Interns were located on-site with the hosting organization for most of the internship and produced professional-quality deliverables.

Each of the interns describes their summer projects and experiences on the Innovations in Healthcare blog: http://www.innovationsinhealthcare.org/blog/

“Involvement of Innovations in Healthcare staff in our fundraising gives confidence to potential investors.”

– Changamka

Innovations in Healthcare Senior Program Manager Anne Katharine Wales and members of the Sevamob team review data showing health impact in India.

Innovations in Healthcare intern Betty Tushabe (center) with Stanley Irungu (front) and Itumbi Lewin (back) who work with Gatundu Self Help Hospital in Kenya that uses the MicroClinic Technologies app.
In addition to sourcing promising innovations and strengthening their efforts to scale and replicate, Innovations in Healthcare has also been working to evaluate, and promote the adoption of these innovations in new settings, with an emphasis this year on evaluating those innovations that have the potential to address challenges faced by developed healthcare systems, including in the US.

Many of our innovators and supporters this year benefited from participation in working and learning groups. Our Reverse Innovation Learning Group – comprised of 25 members working in policy, funding, research, and healthcare delivery from the US, UK, Canada, and the Netherlands – facilitates coordination and collaboration among those who are actively working on projects in which innovations developed in lower-income settings are adapted to higher-income settings. Members of this group meet regularly to share learning across countries and contribute to thought leadership in this relatively new field.

As the rate of type 2 diabetes skyrockets in countries throughout the world, a new Innovations in Healthcare community of practice—the Diabetes Working Group—emerged this year. This group held its first meeting in Mexico City in November 2014. Thirty-five staff, innovators, supporters, and government officials spent the day discussing the challenges to and opportunities for preventing, diagnosing, and treating diabetes.

Attendees included representatives from the Mexican government and organizations such as McKinsey & Company, Medtronic, Bupa, Becton Dickinson, as well as several innovators including SughaVazhvu, ClickMedix, Clínicas del Azúcar, Pro Mujer, and Médica Santa Carmen. The workshop gave participants an opportunity to present their models, share best practices and challenges, facilitate learning, and explore potential partnerships. Through continued efforts with the working group and strategic partners, we have been able to provide opportunities for these organizations to make connections and acquire needed information to support the growth and scale of their diabetes focused innovations.

As a result of the Mexico City meeting:


• Innovations in Healthcare network innovators were featured at a Brookings Institution event “Disruptive Innovations in Diabetes Care from Around the World” in April 2015.

• We presented high-level results to a breakout session of the McKinsey & Company Latin America Forum for Health held in Mexico City.

Other examples of how we are working to scale and spread include:

• Innovations in Healthcare is providing access to global learning, international examples of excellence, and resources to support the NHS Innovation Accelerator—a fellowship program that is being delivered collaboratively by NHS England, UCLPartners, The Health Foundation, and with the Academic Health Science Networks (AHSNs).

• Thanks to funding from the Commonwealth Fund, our team has been busy working on three Frugal Innovation Case Studies. These case studies examine the business models of three of our innovators—MedicallHome (and the US adaptation ConsejoSano), Narayana Health (and the Caribbean adaptation Health City Cayman Islands), and BasicNeeds—and explore how their models could be adopted in the US to help reduce healthcare spending.

• Innovations in Healthcare is working with BasicNeeds and the Robert Wood Johnson Foundation to explore the feasibility of adapting the BasicNeeds’ mental health model to the US, including identifying potential implementation sites and developing program design and business models for US adaptation.
Smart Failure:
When people attend conferences, they are eager to hear from leaders and organizations who share their success stories. But at our 2014 Annual Forum, a group of panelists challenged the prevailing opinion of what creates success. Panelists spoke about how they used failure as an opportunity to learn and grow as individuals and improve their institutions.

In our “Innovation Insights Series: Smart Failure,” we summarize the discussion from our Smart Failure panel and breakout sessions in which organizations openly shared how they have used failures as stepping stones to success. The paper offers four strategies that innovators and supporters within our network have deployed. “Learning to embrace failure may be one of the most useful strategies that entrepreneurs in any field can adopt,” the authors write. “It can seem counter-intuitive, but a willingness to fail is a key component of success.”

Global Healthcare Supply Chains:
Though developed to address the need for product authentication, anti-counterfeit technology also offers new solutions for improving medical supply chain challenges faced by emerging market health systems. Sproxil’s Mobile Product Authentication is presented as a case study in “How Anti-Counterfeit Innovations Can Improve Global Healthcare Supply Chains,” to explore the barriers and benefits to applying anti-counterfeit technology to improve developing health systems.

All of these research reports are available at: http://www.innovationsinhealthcare.org/resources/
On the Horizon for 2015-2016

Moving forward into our fifth year, the Innovations in Healthcare team is poised to continue to grow our efforts and our collective impact. Building upon a strong foundation and leveraging a passionate and diverse community, we are excited to continue to strengthen our current efforts while also launching new initiatives. Some key efforts and priorities are highlighted below:

- **Recruiting a new cohort of innovators.** Over the coming months we will be searching globally to find the best 10-12 healthcare innovators to join the current network of 55 organizations.
- **Continuing to support the innovator network.** We will continue multiple efforts to strengthen innovators’ capabilities and support scaling of impact, providing direct capacity-building, leveraging our growing community of supporters and collaborators, and holding events globally.
- **Deepening our engagement with Latin America and the Caribbean.** After several months of research, multiple site visits, and many expert interviews, we will be launching a new report describing the state of healthcare innovation in the Latin America and Caribbean region as well as opportunities to scale innovations in Mexico, Colombia, and Brazil.
- **Growing our East Africa activities.** Building from our ongoing innovation ecosystem landscaping efforts in East Africa, we are launching several programs to address key gaps, with a focus on impacting local and regional policies, engaging the technology sector to develop and scale health solutions, and strengthening collaborations with other global efforts supporting healthcare innovation such as the Amsterdam Health and Technology Institute (ahti).
- **Advancing our reverse innovation efforts.** We will be completing three global case studies of frugal innovation that analyze the potential US impact of implementing models from our network, and will also be developing an implementation plan for US introduction of the BasicNeeds model for mental health and development. Building from this work we hope to contribute toward pilot testing and other implementation efforts for reverse innovation.
- **Adding focus on Southeast Asia.** Learning from other regional efforts, we will evaluate the innovation ecosystem and identify promising healthcare innovations across Southeast Asia over the next several years, and will host an event in 2016 in Singapore to highlight this work.
- **Contributing to stronger innovation evaluation efforts.** Working with the Duke Global Health Institute Evidence Lab, and through the SEAD program, we will continue to strengthen efforts to identify key metrics to evaluate the effectiveness and impact of healthcare innovations globally, releasing new practitioner-friendly toolkits over the next year.

Supporters

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