

Can you balance commercial and clinical excellence? Case studies in process, investment, culture and governance.

SPEAKERS

Chair: Thomas Hagemeijer

Founder HGM Advisory

Ivo Piest

Group CDO, Exec. Board Member Bergman Clinics

Emmanuel de Geuser

CEO

Vivalto Sante

Sofia Palmquist

CEO

Aleris

Balancing clinical excellence with commercial reality demands fundamental changes to operations, leadership and governance, according to CEOs from three leading European healthcare groups at HBI 2025, in a session packed with useful case studies.

When managing innovation amid tight budgets, leaders must prioritise process redesign before technology investment. Ivo Piest, Group CDO at Bergman Clinics, demonstrated how a "factory approach" to hip surgery optimisation increased patient volume by 10% while reducing staff by 10%, without any new technology, simply by restructuring processes and creating data feedback loops.

The need for change, but change managed in a way sympathetic to the culture of the sector, is pressing.

"Don't forget, it's a very emotional sector [and it isn't always] very analytically run, it's very ad hoc at the moment. That's also how doctors and nurses have been trained in the past. But a result of that is that on efforts, I think in healthcare, 30% of all the money is spent on things that don't add value, which is a huge waste." said Piest.

Aleris CEO Sofia Palmquist showcased dramatic results from process redesign in sleep apnea care, reducing waiting times from 18 months to zero while cutting costs dramatically and multiplying physician productivity.

"We thought through the process, who needs to do this? Is it a doctor? Is it a nurse? Is it an assistant nurse who can do this? The quality is great, there's no waiting times. The cost takeout is around 70%, and a doctor now can treat between eight and 10 times as many patients as before."

Aleris has structured their business to encourage clinical innovation:

"Our CMOs are also our COOs," explained Palmquist. "We work integrated with our medical and operational teams to look at outcome measures."





Emmanuel de Geuser, CEO of Vivalto Santé, emphasised governance innovation through their "third way" model where doctors own 30% of capital (€450m) and control key decision-making.

This stakeholder approach created significant advantages when evaluating orthopedic robots, according to de Geuser, with doctors testing equipment at multiple sites before making recommendations based on clinical experience rather than management dictates.

All three leaders agreed Al represents transformative potential, particularly in administrative automation and clinical documentation.

Aleris has, for example, implemented Al scribes across its network, saving "tens of millions" while freeing physicians to focus on patients rather than screens.

The panellists concluded that operational excellence isn't opposed to clinical excellence — it enables it by removing waste and inefficiency that frustrates clinicians and restricts patient access.

Session takeaways

Process optimisation beats technology

Bergman Clinics achieved 10% more revenue with 10% less staff by restructuring scheduling without new tech, demonstrating fundamentals must precede digital retooling.

Leadership culture drives change

Aleris built a unified culture through focused leadership development, enabling medical and operational staff to collaborate on patient-centric process improvements.

Co-governance unlocks innovation

Vivalto Santé's "third way" model gives doctors board seats and 30% of ownership, creating a framework where clinicians lead investment decisions based on data.