



NORWEGIAN
BUSINESS SCHOOL

The role of deals and business
networks in innovation processes

Implications for public procurement?

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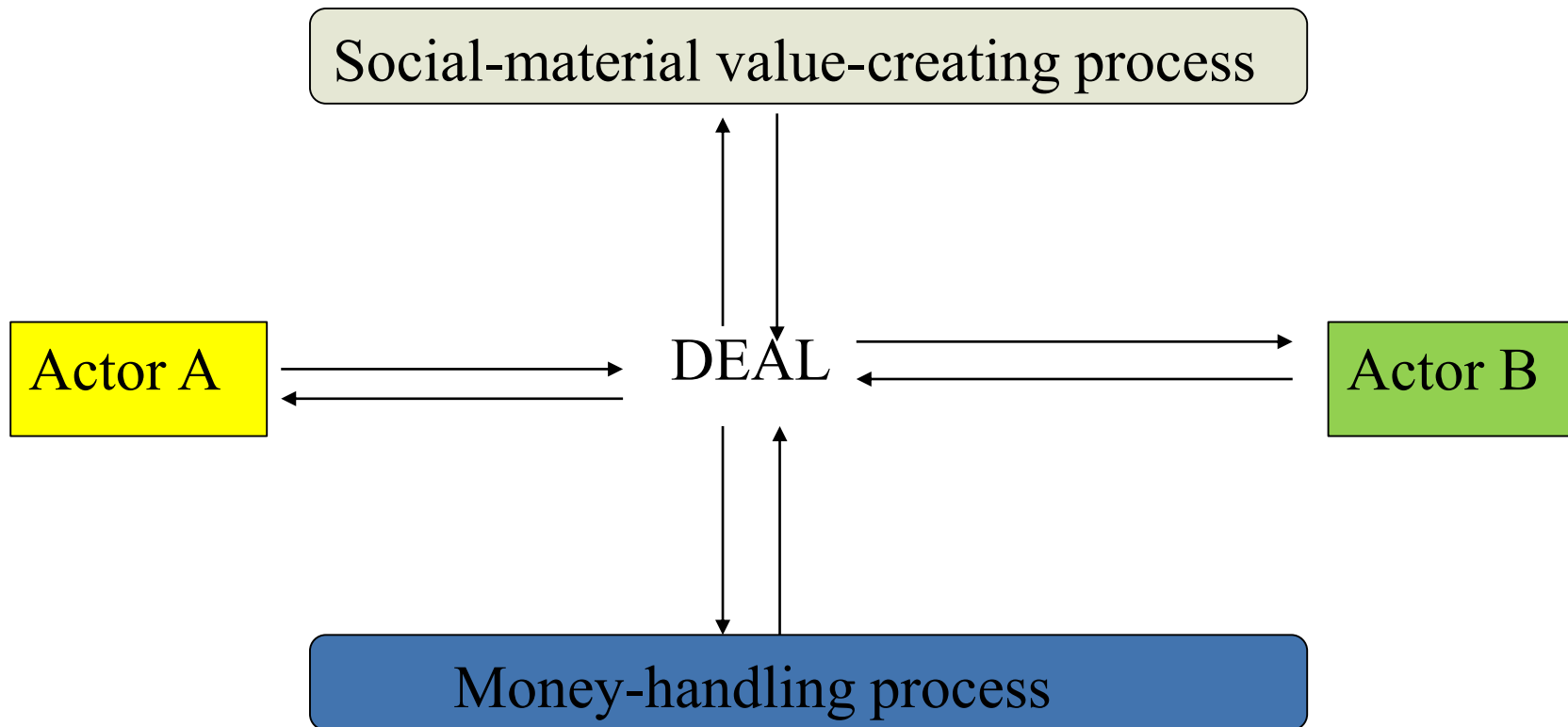
The study

- The adoption of Transcatheter Aortic Valve Implants (TAVI) at 9 different hospitals in Scandinavia (2008 – 2016)
 - Within Oslo University Hospital, Intervention Center
 - Interviews at 8 other hospitals (heart clinics)
 - Two global suppliers of TAVI valves (Edwards Lifesciences and Corevalve/Medtronic)
 - The need to understand the roles of the suppliers in adoption processes
 - The TAVI innovation journey (1989 – 2014)
 - 2 Phd candidates and senior researchers
- Presentation based on two published articles – so far...

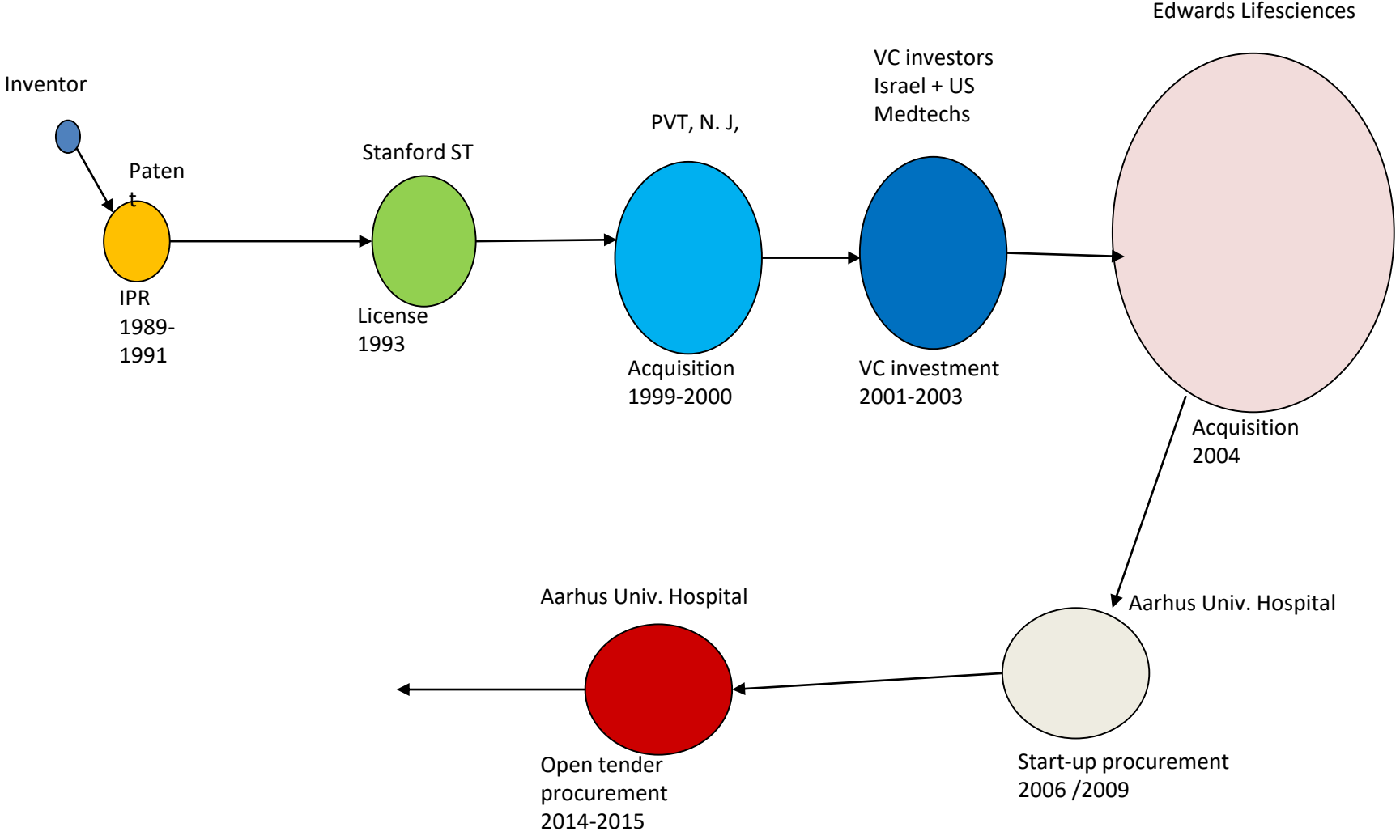
The roles of money and financing in Industrial marketing and purchasing theory?

- How can we integrate these more «productively» into IMP studies?
 - How does money and financing relate to, say, the ARA-model of business networks and network interaction?
- What would be a distinct IMP approach to studying the roles of money and financing?
- First attempt: Håkansson & Olsen (2015): «The roles of money and business deals in network structures», *Industrial Marketing Management*, 46: 207-217
- This study: Application of analytical model to empirical case study of international innovation process: The case of TAVI

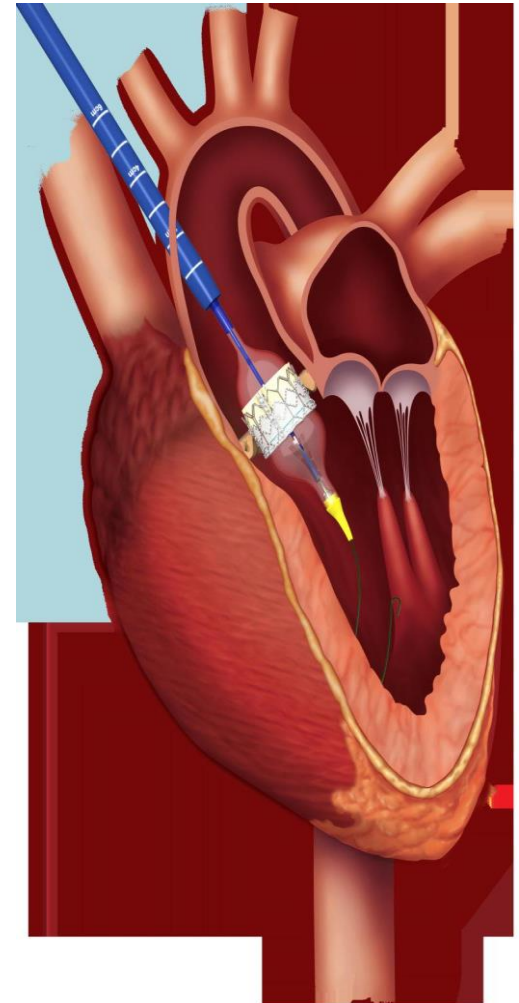
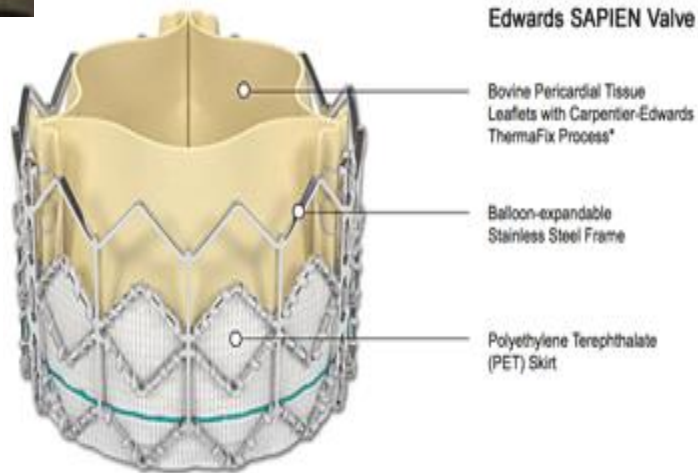
What is a deal?



7 major deals:



TAVI: Trans-Aortic Valve Implantation



The TAVI innovation process:

- Invention: Dr. Med Henning Rud Andersen, Århus University, 1988-89
- First European CE: 2007, First US FDA: 2011
- 2014: More than 100 000 procedures world wide (aggregated)
- Dominant market players: Edwards Lifesciences and Medtronic Corevalve (Both HQ in Irvine, CA). Now 7-8 competitors
- Our study: The Edwards case: Follows the innovation from invention through Edwards' acquisition of TAVI to mature practice: 1989 – 2014
 - Identifying and analyzing 7 major deals

Research questions

- How did «TAVI» move from Århus to Edwards/Irvine California?
- Which deals can be identified along the process?
- What were the particular roles of these deals in the process?
- What can we say about the general characteristics of innovation processes if we have a better understanding of the roles of deals?
- What are the roles of the relatively stable business networks we observe in numerous IMP studies, in relation to global innovation processes?

Analyzing deals

- Who were involved in the deal?
- Who was taking the initiative?
- What was the deal about? (What were the specific challenges faced by the project?)
- What characterized the money-handling process?
- Were there clear relationships to other deals?
- Were there particular consequences for the involved actors with respect to future participation in the project?

«Kinds» of deals:

- Deal 1: Patenting/establishing of IPR as a tradeable commodity (1989-1991)
- Deal 2: World exclusive licence agreement by SST (1993)
- Deal 3: Coordinated acquisitions of licence by PVT and of SST by J&J (2000)
- Deal 4: Staged financing by VC funds and industrial investors (2001-2003)
- Deal 5: Acquisition of PVT by Edwards (2004)
- Deal 6: Industrial marketing-purchasing of practice start-up package by Århus UH (2006/2009)
- Deal 7: Public tender procurement by Århus UH (2014-2015)

TAVI Innovation Journey

- From idea to global business: the expansion of an international new medical technology venture through successive science-business networks (*Mikhailova and Olsen, Journal of International Entrepreneurship*)
- Medical innovations in public healthcare: the problem of adoption and implementation (*Mikhailova and Olsen, book chapter, forthcoming*)

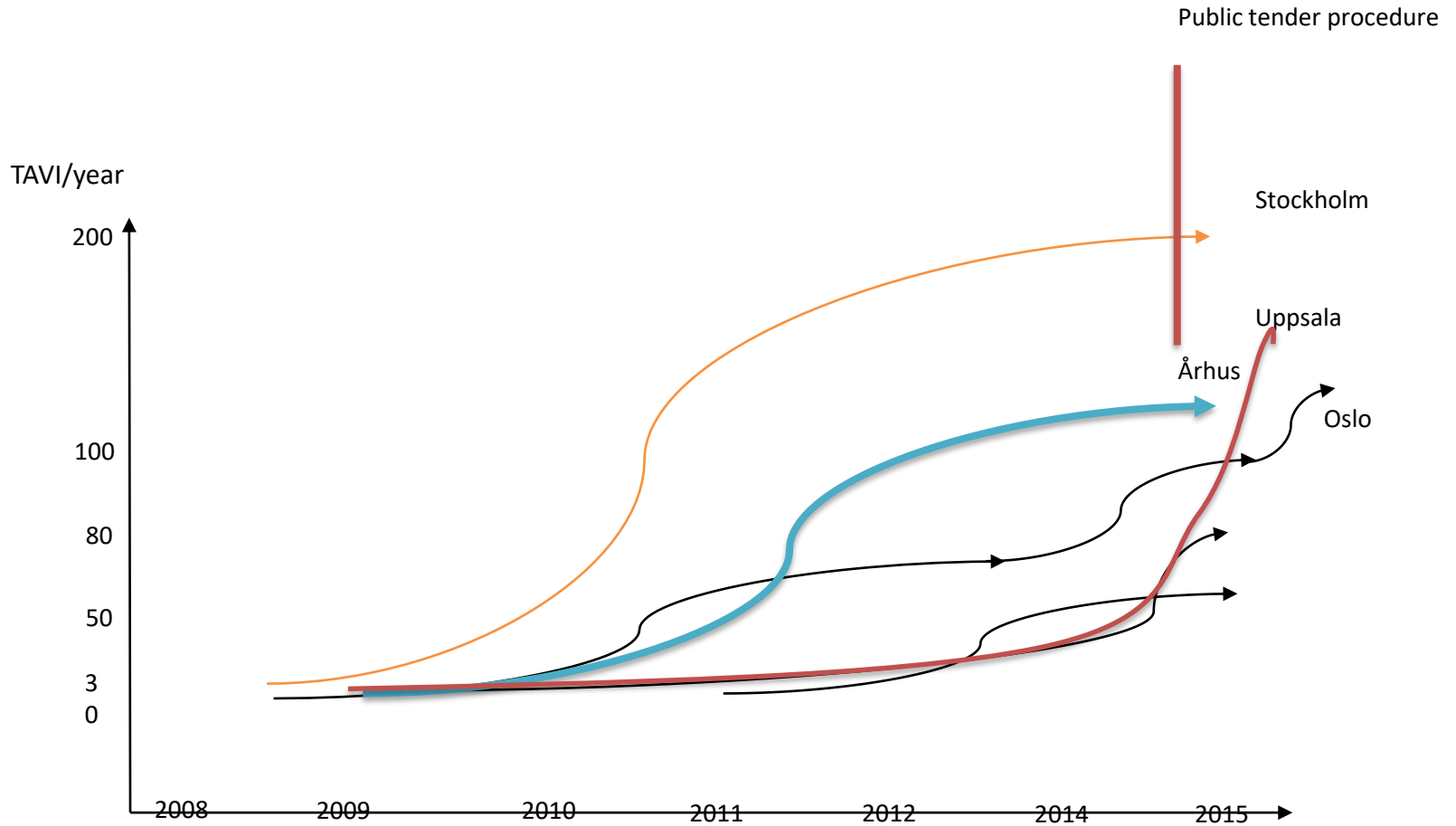
The adoption process

- CE approval and role of the European market
- National regulations
- FDA regulations
- Marketing and sales, early phase
- The expansion and scaling problem
- From novice to expertise in new area of practice
- The content of supplier products and services
- The local resource mobilization and investment process

The dynamics of supplier – user interaction

- The controversy: Interventional cardiology enter area of cardiac surgery
 - The Team approach (uniting cardiology and cardiac surgery approach)
 - The Lean approach (Cardiology approach (Corevalve 2007 – 2010))
- Supplier strategies and network effects
 - FDA process and FDA requirements for doing TAVI
 - Education, training, technology, support services, international network, research, etc.
- Heart clinic strategies and network effects
 - Entry strategy
 - «being in the game» and/or scaling the activity?

Timing and adoption profiles



Collaboration agreements and procurement practices

- Initial collaboration agreement: 2008-2009...
 - Formative phase
- Adoption periode: 5-6 years
- Scaling
 - Based on lean organizing model (cardiology)
 - Team organization model for special og complex cases
- Different scaling profiles
 - Lean cardiology approach
 - Complex technology exploration appraoch
 - Team (cardiology-surgery) approach

Open tender procurement?

- Collaboration agreement: Euro 20.000 per valve. >100 a year
- Open tender procurement: Stochholm and Århus, 2014
 - After 6 years of procurement practices (> 2 mill Euro/year)
 - At level of proficient expertise and routine based practice
 - When scaling to <100 TAVI/year
- Outcomes of tender process:
 - Lower prices from established supplier(s), high volume, limited support
 - Additional competitive supplier (low volume)
 - Additional complementary supplier (low volume)

Discussion

- Procurement of innovation challenges
 - Selecting the «right» first supplier?
 - Dependency on supplier for support, learning, etc.?
 - Lock-in effects?
 - Short term adoption politics (controversies) vs. long term efficiency?
- How to regulate procurement in demanding adoption and learning processes?
- When to introduce open tender procurement?
- Procurement strategies through the entire process?