

A cross-sector gathering for senior healthcare, pharma, and life sciences data and AI leaders focused on moving AI from pilot to production, scaling responsibly, and proving measurable value in highly regulated environments.

What the day covers

- What separates the AI pilots that scaled from the ones that stalled or quietly cost more than expected
- Where agentic AI is already reclaiming clinician hours and compressing trial timelines
- What it really takes to make data interoperable enough to deploy AI at scale
- Where digital twins and autonomous trials are changing how drugs get developed
- How leaders prove ROI and secure executive and board buy-in beyond experimentation
- What responsible AI looks like in practice under FDA, EMA, and EU AI Act scrutiny

Format

- **Keynotes & case studies** on what was built, validated, and scaled
- **Fireside chats** with senior clinical and pharma voices on the frontier of AI
- **Panels** on scaling without burnout, proving ROI, and responsible AI in regulated settings
- **Innovation showcases** on interoperability and enterprise governance in practice
- **Dual Healthcare & Pharma tracks** for targeted, role-specific deep dives, plus cross-sector plenaries

If this sits at the centre of your work, this is the conversation worth being in.

Confirmed Speakers

Adam Landman, Senior Vice President and Chief Digital Information Officer – **Brown Health**

John D. Halamka, MD – President – **Mayo Clinic Platform**

Diogo Rau, Executive Vice President and Chief Information and Digital Officer – **Eli Lilly and Company**

Shuja Mohammed, Head of Strategic Planning & Operations for AI & Data Science - **ASTRAZENECA**

Lance Bradshaw, Director of Workforce Transformation -**INTERMOUNTAIN HEALTH**

Sadiq Y. Patel, VP of Data Science & AI - **WAYMARK**

AI in Healthcare & Pharma DAY 1 17 th November	
08:00–09:00	Registration & Breakfast Networking in the Exhibition Area

09:00–09:10	CHAIRPERSON Opening Remarks & Setting the Scene for 2026	
09:10–09:40	OPENING KEYNOTE From Pilot Purgatory to Production: The AI Infrastructure Turning Point in Healthcare & Pharma - Why most 2023–2024 pilots stalled at scale, and what separated the organisations that broke through - The “clean sheet” mindset: asking whether a process should exist at all before applying AI - Treating AI fluency as foundational infrastructure rather than a bolt-on capability - What a credible, board-ready scaling roadmap looks like over the next 12–18 months	
09:40–10:10	KEYNOTE Agentic AI in the Clinical Workflow — From Static Tools to Autonomous Action - Where autonomous, think-plan-act agents are already delivering measurable time savings - Embedding agents into documentation, prior authorisation, and revenue cycle operations - Reclaiming clinician hours and easing the documentation burden behind burnout - Oversight models that keep humans accountable for agent-driven decisions	
INNOVATION SHOWCASE		
10:10–10:20	INNOVATION SHOWCASE 1 Interoperability as the Enabler of Scalable AI - Why fragmented EHR ecosystems remain the single biggest barrier to AI at scale - Building the data foundations before scaling advanced AI use cases - The CMS Interoperability & Prior Authorization rule as a 2026 compliance catalyst - Standardising and governing data sharing across providers, payers, and pharma	
10:20–10:30	INNOVATION SHOWCASE 2 AI Governance in Practice — What a Real Enterprise Playbook Looks Like - Moving governance from a compliance checkbox to a genuine strategic enabler - Cutting through the noise: separating real capability from vendor hype - Explainability, bias auditing, and audit trails built into the model lifecycle - Aligning internal playbooks with evolving FDA, EMA, and EU AI Act expectations	
10:30–11:00	Mid-Morning Coffee & Networking in the Exhibition Area	
PARALLEL TRACKS		
	TRACK A — HEALTHCARE (Main Stage) Clinical Innovation, Access & Outcomes	TRACK B — PHARMA (Interactive Room) Accelerating Drug Development & Personalised Medicine
11:00–11:30	Real-Time AI in Critical Care — From Alarm Fatigue to Actionable Intelligence - Using machine learning to separate urgent signals from clinical noise - Reducing cognitive overload and improving situational awareness at the bedside - Lessons from ICU decision support and sepsis surveillance deployments - Measuring clinical trust and adoption beyond the proof-of-concept	Autonomous Clinical Trial Operations — Compressing the Trial Timeline - Planning, executing, and monitoring trials with less linear human intervention - AI-driven protocol simulation and real-time enrolment optimisation - Realistic gains in study startup timelines and database lock - What operational readiness for autonomous trial ops actually requires

11:30–12:00	CASE STUDY Frameworks for Evaluating LLMs in Clinical Settings • A practical, validation-first approach to selecting clinical AI tools • Embedding LLM-powered tools directly and safely into EHR workflows • Guardrails for hallucination, accuracy, and specialty coverage • Evidencing real-world clinical performance, not benchmark scores	CASE STUDY Digital Twins: From Pipeline Simulation to Virtual Patients • Where virtual control arms are delivering credible efficiency gains today • High-data therapeutic areas where twins work, and where they don't • How evolving regulatory guidance is shaping confidence in adoption • Pairing operator experience with technology for a commercial-free view
12:00–12:30	Predictive AI for Proactive Population Health • Shifting from reactive treatment to anticipatory, data-driven care • Identifying at-risk populations earlier across diverse communities • Designing for equity so models serve underserved groups fairly • Connecting predictive insight to action across provider and payer workflows	Operationalising AI Across the Pharma Enterprise • Breaking silos and building cross-functional alignment at scale • Embedding governance without slowing scientific progress • Moving from efficiency gains to genuinely new decision-making capability • Translating enterprise AI investment into measurable patient outcomes
12:30–13:30	Lunch & Networking in the Exhibition Area	
PLENARY SESSIONS— CROSS-SECTOR SESSIONS		
13:30–14:00	PANEL Scaling AI Without Burning Out Your People • Why most AI programmes stall on people problems, not product problems • Managing cognitive load, alert fatigue, and change resistance • Building AI fluency across clinical, operational, and research roles • Sustaining trust and momentum after the initial pilot wins	
14:00–14:30	FIRESIDE CHAT What Does Physical AI Mean for the Future of Drug Design? • The emergence of AI that reasons about the physical world the way LLMs reason about language • Implications for preclinical molecule design and drug delivery • Manufacturing yield and materials science as new AI frontiers • Positioning R&D strategy ahead of an accelerating curve	
14:30–15:00	CASE STUDY AI-Enabled Patient Access — Personalising the Path to Care • Optimising prior authorisation, eligibility, and intake with AI • Balancing automation with empathetic, human patient support • Enabling real-time decision-making and navigation across care pathways • Maintaining equity while customising access at scale	
15:00–15:30	Afternoon Break & Networking in the Exhibition Area	

15:30–16:00	KEYNOTE The Clean Sheet Imperative — Redesigning Regulated Processes from First Principles • Questioning which regulated processes should exist at all • Moving beyond “AI for efficiency” to eliminating entire process layers • Where first-principles redesign creates the biggest returns • Managing risk and compliance when rebuilding core workflows
16:00–16:30	PANEL Proving ROI — Aligning Clinical Value, Cost & Executive Buy-In • Quantifying and communicating AI’s return to the C-suite and board • Building scalable infrastructure that meets regulatory expectations • Navigating budget constraints and cross-functional resistance • Defining the metrics that signal an AI programme is genuinely working
16:30–17:00	CLOSING ROUNDTABLE Future or Fiction? Multimodal AI, Agents & Digital Twins for Real-World Readiness • Separating what’s real, what’s hype, and what’s worth preparing for now • Whether multimodal models and digital twins deliver value today • Infrastructure and ethical considerations for scaling them responsibly • How leaders should prioritise AI R&D over the next three years
17:00–17:05	CLOSE Chairperson Closing Remarks
17:05–18:30	<i>Networking & Drinks Reception in the Exhibition Area</i>

	AI in Healthcare & Pharma DAY 2 18th November
08:00–09:00	<i>Registration & Breakfast Networking in the Exhibition Area</i>
09:00–09:10	CHAIRPERSON Opening Remarks
09:10–09:40	OPENING KEYNOTE Beyond Go-Live: Building AI That Performs When the Real World Changes • Why model deployment is the beginning of the risk cycle, not the end • Detecting drift, performance degradation, and unintended consequences in live environments • Establishing ownership across data science, clinical, regulatory, technology, and business teams • Designing monitoring systems that protect outcomes without slowing innovation
09:40–10:10	PANEL The New AI Workforce — Redesigning Roles, Decisions & Accountability • How AI is changing the division of work across clinicians, researchers, operations, and commercial teams • Deciding which activities should be automated, augmented, or kept fully human • Reskilling experienced teams without creating parallel AI organisations • Building clear accountability when decisions are shared between people and intelligent systems
INNOVATION SHOWCASE	
10:10–10:20	INNOVATION SHOWCASE 1

	AI Observability for Regulated Environments — Seeing Failure Before It Reaches the Patient • Bringing model performance, data quality, bias, and operational risk into one monitoring layer • Identifying silent failures across changing populations, workflows, and clinical settings • Creating escalation thresholds and evidence trails for high-risk AI systems • Turning observability into an operational capability rather than a technical dashboard	
10:20–10:30	INNOVATION SHOWCASE 2 Securing the AI Supply Chain — From Foundation Models to Connected Devices • Understanding new attack surfaces created by third-party models, APIs, and training data • Protecting sensitive health and research data from leakage, manipulation, and misuse • Assessing vendor security without relying solely on contractual assurances • Building resilience against model poisoning, prompt injection, and adversarial behaviour	
10:30–11:00	Mid-Morning Coffee & Networking in the Exhibition Area	
PARALLEL TRACKS		
	TRACK A — HEALTHCARE (Main Stage) <i>Safe Deployment, Workforce Transformation & Patient Outcomes</i>	TRACK B — PHARMA (Interactive Room) <i>Regulatory Readiness, Commercialisation & External Innovation</i>
11:00–11:30	FIRESIDE CHAT The Augmented Care Team — Redesigning Clinical Work Around AI • Identifying where AI can remove administrative friction without fragmenting care • Redesigning workflows so insight arrives at the right moment rather than creating another alert • Preserving professional judgement as recommendations become more automated • Measuring impact through capacity, care quality, staff experience, and patient trust	KEYNOTE Regulatory-Ready by Design — Building AI Evidence Before the Submission • Integrating regulatory strategy into AI development from the earliest design stages • Defining validation standards for models that continue learning or changing after deployment • Creating traceable evidence across data provenance, performance, and human oversight • Preparing globally scalable approaches across FDA, EMA, and emerging AI frameworks
11:30–12:00	CASE STUDY Closing the Loop: Turning Patient-Generated Data into Better Care Decisions • Integrating remote monitoring, wearable, and patient-reported data into clinical workflows • Separating meaningful signals from continuous streams of low-value information • Designing escalation pathways that lead to timely human intervention • Demonstrating improved outcomes without increasing pressure on clinical teams	CASE STUDY From Scientific Promise to Commercial Product — Scaling AI Across the Product Lifecycle • Translating experimental AI capability into a validated, supported business offering • Aligning medical, regulatory, market access, commercial, and technology teams • Building a credible value proposition for providers, payers, researchers, and patients • Avoiding the transition gap between successful prototype and sustainable product
12:00–12:30	ROUNDTABLE Who Owns the Algorithm? Accountability Across the Healthcare AI Ecosystem • Clarifying responsibility between providers, vendors, clinicians, and technology partners • Managing liability when models influence—but do not independently make—decisions • Establishing processes for incident response, remediation, and transparent communication • Building partnership agreements that remain workable as technology and regulation evolve	PANEL Partner, Build or Buy? Designing the Next Pharma AI Ecosystem • Choosing where proprietary capability creates genuine strategic advantage • Evaluating startups, technology providers, research institutions, and platform partners • Structuring partnerships around shared outcomes rather than isolated pilots • Protecting intellectual property while enabling data and capability exchange
12:30–13:30	Lunch & Networking in the Exhibition Area	
PLENARY SESSIONS — CROSS-SECTOR SESSIONS		
13:30–14:00	PANEL Trust at Scale — What Patients, Professionals & Regulators Need to See • Moving beyond broad principles to visible evidence of safety, fairness, and accountability • Communicating how AI is used without overwhelming patients or frontline professionals • Responding transparently when models underperform or produce unintended outcomes • Making trust a measurable operational asset rather than a communications exercise	

14:00–14:30	CLOSING ROUNDTABLE The 2030 AI Operating Model — What Leaders Must Build Next • Which capabilities healthcare and pharma organisations should own internally • How operating models must evolve as AI becomes embedded across every function • Preparing for increasingly autonomous systems without losing strategic or human control • The decisions leaders must make now to create durable advantage over the next five years
14:30–14:35	CLOSE Chairperson Closing Remarks