SPEAKER PROFILE

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Syed Kashif K. Haqqi is a privatisation and infrastructure finance leader, chartered accountant and former chief financial officer with 25 years' experience across the UK and the Gulf. He is a privatisation adviser at the Saudi National Water Company, the Public Investment Fund utility serving more than 25mn people, and leads the concession programme taking the kingdom's water distribution sector to market. He spent seven years at the Saudi Ministry of Health, advising at deputy minister level and leading the national health finance transformation under Vision 2030 that corporatised a $32bn system, and was earlier chief financial officer of Aspen Healthcare and Fakeeh Healthcare.

SELECTED WRITING

TITLE	PUBLISHER
Why $3.4 Trillion In Biotech Is Flooding The Middle East	Forbes Middle East
Evolving Healthcare Systems And The Path To Privatization	Forbes Middle East
Saudi's Healthcare Revolution Through Accountable Care	Forbes Middle East
Saudi overhauls healthcare financing	Accounting and Business (ACCA)
Water joins the project-finance asset class	The Executive Dispatch
The Gulf's Longevity Economy	MedEdge MEA

Columnist for Forbes Middle East, with 12 columns on health economics, capital and reform. Editor of The Executive Dispatch, a monthly briefing on governance and reform.

SPEAKING TOPICS

TOPIC	DESCRIPTION	BEST FOR
Financing the unfinanceable	What capital needs before it will price a GCC government counterparty. Concession structures, Private Sector Participation law and commercial stage gates decide whether state water assets become investable, and programmes that design them in the wrong order pay for it at financial close. From inside the kingdom's distribution sector concession programme, and from the other side of the table on a 25-year, $300mn sale-leaseback.	Infrastructure investors, PPP and project finance forums, development finance institutions.
Your AI is only as good as your chart of accounts	Why AI in the finance function stalls on architecture, not algorithms. Most finance AI pilots fail on data lineage, controls and accountability rather than on the model, and boards are approving deployments they cannot audit. What a finance function must fix first, and the questions an audit committee should ask before AI touches the close, the forecast or the budget.	CFO forums, audit committee and board programmes, public sector finance.
Why reform dies in the finance department	Seven years inside a national transformation. National transformation fails at the interface between strategy and financial plumbing, usually long after the launch. The sequence, the resistance points and the playbook that held across a $32bn health system and a $40bn utility: rebuild the finance function, fix the governance, then let capital strategy work.	Government and sovereign audiences, Vision 2030 and reform forums, advisory firms.

TOPIC	DESCRIPTION	BEST FOR
Before the board knows	The CFO as the institution's early warning system. Finance catches institutional failure before the board does, but only if the function is built to see it. Accountability architecture, audit committee readiness and rebuilding finance to a standard investors can bank on.	CFO and audit committee forums, private equity portfolio events, non-executive director programmes.
Paying for value	The financial architecture behind value-based care. Value-based healthcare fails without benefit packages, payer-provider separation and service-level agreements that actually drive payment. What it took to build that architecture for a $32bn system, and what it means for providers negotiating with payers now.	Health finance and payer-provider conferences, hospital boards, health investors.
Two rooms, one set of numbers	Governing across Western boardrooms and Gulf institutions. The same numbers read differently in a US boardroom, a Saudi ministry, a private equity investment committee and a sovereign-owned executive committee. What international investors misread about Gulf institutions, what Gulf institutions misread about international capital, and how to make each side's constraints legible to the other.	International investors entering the GCC, non-executive director and board programmes, law and advisory firms.
Who pays for the longevity economy	The financing gap behind the Gulf's health ambition. Gulf capital is flowing into biotech and longevity faster than health systems are building the payment models to absorb what it produces. Why the binding constraint is reimbursement rather than research, and what payers, sovereign funds and providers must settle before longevity becomes an investable market rather than a promise.	Health and life sciences investors, sovereign fund and family office forums, health innovation conferences.