The explosion of healthcare data, changing consumer expectations and rapid acceleration of digital health solutions present great opportunities for healthcare delivery enterprises. To realize the promise from these advancements, health systems’ IT business units must fundamentally change how they operate. As the industry’s evolution continues, IT will play an increasingly prominent role in strategy development and execution. As such, health systems require a deeper integration between IT, strategy, and clinical and business operations, increasing not only the opportunity but the responsibility and pressure on CIOs to actively help enable and drive transformation.

A strengthened partnership between the CIOs and other executive leadership is becoming a critical success factor for leading organizations, whereby CIOs are positioned as true thought partners.

Such repositioning necessitates expanding capabilities related to strategic planning, business relationship management and leadership.
Mounting Challenges Faced by Today’s CIOs

Within most healthcare delivery enterprises, CIOs have historically been positioned as operators, expected to build and maintain a failproof IT architecture to support 24/7 care delivery, manage a secure environment and implement new systems in accelerated timeframes to earn government-mandated incentives. Success was measured strictly by performance of IT such as system up-time, ticket resolution rates, adoption or CPOE use.

While this approach has worked in historical IT delivery models, it has inhibited collaboration between the CIO and the rest of the C-suite in many cases.

For these and other reasons, CIOs have often not been at the table for strategic decisions (many of which include technology implications or are centered on technology itself) nor fully leveraged as the change agents they are.

The organizational model of the past is no longer tenable. The digital industrialization of healthcare and its dependence on informatics and technology is placing increased pressure on today’s CIOs, as well as other executives such as the CSO. CIOs must now participate in strategic initiatives that historically have extended beyond their typical domain, while at the same time CSOs are scrambling to keep their health systems on the forefront of digital advancements, effectively creating a digital divide within the C-suite.

To complicate matters, IT staffing and operating models in many health systems are designed to support legacy processes. IT departments’ priorities continue to be keeping the lights on or supporting the informatics and technology aspects of the large strategic projects, leaving minimal time for the CIO and his/her direct reports to work on advancing their health system into a digital, consumer-centric model. Traditional IT governance models have also not been refreshed to support the innovation needs of the organization to prepare for the ever-evolving digital healthcare.

CIOs Should Seize the Opportunity of Digital to Drive Transformative Change

Leading healthcare CEOs are painting a future which promotes a single vision and endorsement of digital starting at the top. Healthcare delivery enterprises that truly embrace digital will transform all aspects of their business, from care models to business operations to consumer engagement. To do so, health systems require a clear vision around the role IT will play to inform and advance strategic imperatives in the near and long term, acknowledging that the bright-line distinction between strategy, operations and IT will converge in the coming years.

To support this convergence, the role of the CIO must be reframed within the C-suite.

CIOs must be viewed as a solution partner and an integral contributor to the executive council. For this reframing to work, CIOs must immerse themselves in the business and stay apprised of broader industry trends to connect the dots between their enterprise strategy, emerging tech and IT capabilities.

In partnership with other leaders, the CIO can help identify and define solutions that bring strategy, operations and IT together in new ways. This transformation has already occurred in industries outside of healthcare where the CIO has taken on the role of the digital officer, while delegating traditional lights-on activity to staff. These CIOs have embedded themselves into the business which naturally elevates their partnership with other executives. To help bring this contrast to life, consider how these CIO archetypes spend their days:
Bridging the Digital Divide in the Healthcare C-Suite: Positioning IT for Success in the New Health Economy

This may require deliberate changes to accountabilities across the executive team, but the results can be powerful.

In this transition, CIOs will continue to own their operational responsibilities and be held accountable to high levels of performance, but they will also take on new responsibilities as a thoughtful collaborator to help the organization realize the potential of new technologies to drive the strategic agenda.

Six Practical Considerations for Bridging the Digital Divide

To effectively contribute in bridging the digital divide with the executive team, CIOs need a delegated staffing model. The traditional IT organization structure is functional, with the CIO’s direct reports overseeing a specific IT department, such as clinical systems or infrastructure. This model constrains the CIO’s time, limiting his/her ability to engage with other business leaders or stay apprised of novel developments in the industry. Below are six tactics CIOs should consider when reframing their IT model:

**OPERATOR CIO**
- Spends average day attending meetings and resolving issues relevant to internal-facing issues such as infrastructure or the network.
- Facilitates IT prioritization discussions and resolves issues relevant to major IT programs or projects.

**STRATEGIC CIO**
- Allocates only a small portion of the day to resolving internal or project-related IT issues.
- Carves out time for rounding with various units in the hospital.
- Holds recurring work sessions with the CSO and COO to understand challenges or use cases.
- Partners with other IT staff to research industry trends or conduct options analysis to satisfy business-related use cases.

**SIX TACTICS CIOs SHOULD CONSIDER When Reframing Their IT Model**

1. Define new roles and recruit new capabilities to bridge the digital divide
2. Assign an Associate CIO, or comparable, responsible for all IT operations
3. Form a stronger relationship with the CSO, COO, Patient Engagement Officer and other executives
4. Outsource the non-strategic aspects of IT
5. Shift the organizational structure to align competencies
6. Develop an integrated governance model around innovation
Define new roles and recruit new capabilities to bridge the digital divide. Consider establishing new roles such as Chief Digital Officer (CDO) or Chief Innovation Officer (CInnO). Organizations have adopted different organizational models as it relates to these new roles. CDOs may report directly to the CSO or CEO, overseeing a separate business unit that incubates digital health capabilities, or CDOs may report to the CIO, working closely with him/her on non-traditional IT projects. Regardless of the reporting structure, strong linkages must exist across functional areas to ensure effective implementation of new solutions to realize ROI. Other new capabilities that leading provider organizations have begun to recruit include digital health industry research; technology evaluation and business case development; data science and machine learning; and human-centered design.

Assign an Associate CIO, or comparable, responsible for all IT operations. This model frees up the CIO to focus more on strategy and less on operations. The key point is establishing the right team to complement the legacy operating strengths that exist, while building the capabilities and requisite skills necessary to support digital change.

Form a stronger relationship with the CSO, COO, Patient Engagement Officer and other executives. This can be achieved through focused partnership models with key business stakeholders or deliberate and recurring IT strategic planning with an emphasis on what the future looks like.

Outsource the non-strategic aspects of IT such as infrastructure and network or increase user self-sufficiency through training and automation to reduce IT operator time. This will enable the CIO and his/her staff to focus more on the consumer and business-facing aspects of digital transformation vs. the traditional, internal-facing norm.

Shift the organizational structure to align competencies between operational (traditional delivery) and emerging strategies (innovation and architecture). This will balance capacity across IT with more of an emphasis on relationships and advisory services. This will help IT more thoughtfully manage a portfolio of traditional and digital technologies that will ultimately transform how health is managed, wellness is sustained, and care is accessed, delivered and received. Not only does this position the CIO to partner with other executives; it also instills innovative and relationship-focused behavior across IT. Note that some organizations have carved out the emerging strategies group within IT and then linked it to a broader digital health and innovation function within the organization.

Develop an integrated governance model around innovation that deploys technology as a differentiator rather than an enabler. Fulfilling the digital needs of the business, patients, consumers and families requires rapid decision making and delivery that traditional governance models lack. Carving out innovation into a separate portfolio with dedicated resources will promote faster decision-making cycles and reduce the need to prioritize against lights-on initiatives. A planning cycle that packages solutions within a quarter and leverages an Agile fail-fast/learn-fast approach will increase efficiency and produce tangible results faster. This technique requires disciplined outcomes management with an emphasis on realizing anticipated ROI.

Today’s CIOs are in a unique position to help reposition their organizations within this rapidly-changing landscape, but it is incumbent on all executive leadership to help bridge the digital divide. Executive leaders must work together to collectively embrace change, collaborating to establish novel models and processes that help shepherd their organizations and cultures toward a new norm where “digital health” will simply become “health.”

We recognize that this transition will be uncomfortable for many executives, but it is imperative for success in the new health economy.
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