

Track n. 7 - The new era of digitalization in Healthcare and Public sector

The track chairs welcome papers dealing with information technologies change the public sector and the healthcare system. In particular, how Information Technology (IT) enabling the multiplicity of governance arrangements that prompt the public interest. In the past decades, there has been a shift from the traditional Weberian public administration to forms emulating business models to public governance hybrid solutions based on collaboration and co-production. In this context, Information Communication Technology (ICT) has been considered a tool to create new and better service delivery, increase efficiency and transparency and improve the coordination of public administration procedures with the aim of giving the citizens or patients more choice and flexibility in their relations with service providers (e-government, or e-health). However, due to the difficulties e-government and e-health encountered in delivering on its promise, new approaches have emerged that are centered on concepts like: government 2.0, open government/open data/open innovation, HIS and policy, Organizational, operational, clinical and financial implications of HIS use, and Workflow management in healthcare settings. Neither is the impact consistent across different stakeholders, such as patients, care providers, including hospitals, physicians, nurses and pharmacists, and payers. Finally, challenges still remain for data integration across multiple sources and the meaningful analysis of healthcare data. In particular, open data in participatory information systems changes the way public sectors operate, which is often denoted as 'open government'. Information systems in the public sector represent both traditional IS research perspectives in relation to implementation and use, as well as novel themes driven by the emergence of new technologies and behaviors of use of information and communication technologies (ICT) among citizens, businesses, and public sector organizations. In the past years, government agencies have also embarked on initiatives in making their data available to their customers. These data are made accessible online and in machine-readable format where citizens as well as businesses can access and re-use these data to create innovative value-added products and services. As digitization increases in society, many questions arise about what it means to develop and maintain an open and transparent government, to engage in participatory democracy, notions of governance through transparency initiatives, co-design of open and collaborative government, how democratic/governmental institutions might be influenced through open government and transparency efforts, and research that develops and explores open and transparent government frameworks, theories, and practice.

Track main topics

We solicit full papers but it is also possible to submit research-in-progress research, or short paper in related fields. Papers exploring new directions or areas are also welcome.

The track aims at gathering and promoting confrontation between engaged scholars investigating the role of ICT enabling public and healthcare for the pursuit of public interest aims.

Possible topics include, but are not limited to:

- Transformational government and institutional change
- Meta-analysis of e-government project outcomes
- ICT-enabled performance management
- ICT, social responsibility, sustainability, accountability and resilient society
- Public Sector Accounting, Financial Management and Business Intelligence

- (Big) Open data (e.g., business models, co-development, risks and opportunities)
- Participatory government, co-production and crowd-sourcing
- Social media & social networking and government
- Adoption, diffusion and assimilation of health information systems
- Organizational, operational, clinical and financial implications of HIS use
- Personalized medicine
- Clinical, administrative and operational workflow changes associated with HIS implementation
- Healthcare analytics focused on cost, quality and efficiency of care delivery
- HIS and health policy
- Governance of HIS
- Patient-centered healthcare management

Track Co-Chairs

Name – Surname (primary contact)	Alessandro Zardini
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Affiliation	University of Verona (Italy)
Short Biography	Alessandro Zardini is Assistant Professor at the Business Administration Department at the University of Verona, Italy. He was a visiting scholar in the Institute of Information Systems, University of Liechtenstein, Liechtenstein in 2008. He received his M.Sc. in 2007 and Ph.D. (2010) in Business Administration from University of Verona and pursues his research in Information Systems (Knowledge Management, Enterprise Content Management and Decision Support Systems) and in Public Management. He has published book and articles in international conferences and journals. His research interests are in Knowledge Management, e-Health, Outsourcing and Public Management.
Name – Surname	Andrea Resca
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Short Biography	Andrea Resca: I am collaborating with two research centres: CeRSI at Luiss Guido Carli University in Rome, where I obtained a PhD in Management Information Systems in March 2009, and the Research Institute on Judicial Systems at the National Research Council (CNR). I graduated at the school of Political Science at the University of Bologna and then I moved to South Korea where I obtained a Master of Arts in International Area Studies (Korean Studies). Back in Italy, I collaborated with IULM University in Milan as research assistant and teaching assistant

Name – Surname	in disciplines such as e-government and organization studies till 2005. Gianluca Veronesi
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Short Biography	Gianluca Veronesi is associate professor, and Programme Director of MSc Law and Finance Accounting and Finance Division in the University of Leeds. His research topics are: Corporate and Public Sector Governance, Healthcare Governance, Healthcare Management, and Social Enterprises in Healthcare. He has published books, and articles in international conferences and journals like: Public Management Review, Organization Studies, Policy and Politics, BMC Health Services Research, Public Money & Management, and Social Science & Medicine.
Name – Surname	Miria Grisot
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Short Biography	Maria Grisot: I am interested in understanding ICT-enabled processes of practice innovation and organisational change from a socio-technical perspective. I study technology through case study research using interpretive approaches and ethnographic methods; and theoretically I am interested in theories of technology, information infrastructures, institutional theory, and material semiotic approaches. I currently conduct research on the role of ICT in transforming information and communication practices in the healthcare context.

Track programme committee members

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Submission

Submissions will be evaluated through a standard blind review process. Track chairs will ensure anonymity of the review process.

Authors are highly encouraged to seek guidance from Track Chairs prior submitting the paper. We highly encourage authors to formalize this process by sending an abstract to the Track Chairs to receive feedback and guidance. Formal submission must specify the track that they are intended for. The page limit for contributions submitted in English is equal to 12 pages (maximum). Formatting rules (LNCS Springer format) are available at this link:

<http://www.springer.com/it/computer-science/lncs/conference-proceedings-guidelines>

Deadline for encouraged abstract submission: May 14, 2017

Deadline for full paper submission: June 11, 2017