



### **Track n. 3 - Sustainable digitalization and innovation in healthcare, welfare and third sector**

The track invites to reflect on ongoing relevant changes in the healthcare system, welfare and third sector due to the implementation of Information and Communication Technology (ICT). ICT innovations have the potential to transform the delivery of care, to improve the quality and efficiency of the healthcare system, to enhance interactions between patients/caregivers and providers, to enable new forms of access to health and welfare services and cooperation in the third sector. However, having in mind the global sustainable goal of health and wellbeing is considered a prerequisite in this respect.

In the healthcare, welfare and third sector ICT has been heralded as cornerstones of change and has been considered a tool to create new and better service delivery, increase efficiency and transparency, improve the inter-intra coordination among public institutions and provide citizens or patients more choice and flexibility in their relations with service providers. In this context, public-private partnerships are becoming increasingly important. Traditional organizational boundaries are spanned raising new challenges in the implementation of ICT. For instance, issues of privacy and accountability lead to reconsider established design methodologies. The aim of the present track is thus to call not only for papers that address ICT innovation in eHealth and eGovernment contexts, but also to open to contributions on ICT and technological innovation that takes place at the interstices between public bodies and society. Information Systems, Design studies, Computer Supported Cooperative Work, and Organization Studies provide analytical lenses able to investigate this space created by the involvement of civil society planning, designing, and implementing ICT.

In this track, we also wish to focus on ICT and related infrastructural solutions that cross traditional institutional boundaries. The involvement of the third sector as well as of citizens and patients represents an opportunity for a deeper integration and an extension of information systems reach to the policy-making agencies. Further, due to the fast-increasing medical data aggregated from different medical systems and medical devices/sensors, the need of intelligent medical diagnosis systems with improved accuracy of diagnosis emerges specifically in rural areas. Therefore, we expect research studies on cost-effective medical data (both clinical and non-clinical) acquisition and integration, advancement of intelligent medical system (e.g. intelligence diagnosis systems) considering economic, social, cultural, and ethical aspects.

The track aims at gathering and promoting confrontation between engaged scholars investigating the role of ICT and technological innovation in general in healthcare, welfare, and third sector. Possible topics include, but are not limited to:

- Digitalization in the healthcare sector;
- Hospital Information System (HIS), Laboratory Information Management (LIS) System and Picture Archiving and Communication Systems (PACS)
- Data management, data modelling, data sharing and merging from different systems as well as its integration with medical devices/sensors
- Healthcare Intelligent Decision Support Systems using decision theories involving algorithmic, statistical methods and/or machine learning methods
- ICT in the Third Sector, welfare sector, and society at large;
- Patient-centered healthcare management;
- ICT for citizens' and patients' empowerment;
- Analysis of eGovernment and eHealth project outcomes;
- Transformational government and institutional change;
- ICT, social responsibility, sustainability, accountability and resilient society;
- Governance and architectural issues in information infrastructures;
- Information systems and public policy;
- Adoption, diffusion and implementation assimilation of health information systems and technologies more in general;



- Routines, practices, and technological innovation in healthcare;
- Organizational, operational, clinical, and financial implications of Health Information Systems use.

### Type of contributions invited:

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.

### Track Co-Chairs

Name – Surname	Miria Grisot
Title	Dr. – Associate Professor
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Affiliation	Kristiania University College(Norway)
Short bio	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.
Name – Surname	Cunjin Luo
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Short bio	Dr. Cunjin Luo is an Associate Professor in the Key Lab of Medical Electrophysiology, Ministry of Education, Southwest Medical University, China. He obtained his PhD in Computer Science from Harbin Institute of Technology, China. His research focuses on Intelligence Medical Diagnosis Systems, Cardiac Electrophysiology and Medical Data Analytics using Algorithms, Statistical Methods and Artificial Intelligence. He has obtained a National Science Foundation of China (NSFC) grant on computer modelling and healthcare diagnosis, and a science-technology collaborative grant funded by Luzhou Government in China to address the sustainability goal of health and wellbeing in rural places. He has published widely in key medical journals including British Journal of Pharmacology, PlosOne, Physiological Measurement as well as the international conferences such as IEEE CINC, IEEE EMBC, IEEE BIBM.
Name – Surname	Valentina Iacopino
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Short bio	Valentina Iacopino, PhD, is Postdoctoral Researcher in Organization Studies and Human Resource Management at the Università Cattolica del Sacro Cuore, Department of Management. Her research interests and publications focus on the adoption processes of innovations in health care at institutional, organizational and professional level. In her studies, she applies social network analysis techniques to understand the role of inter-organizational and professional networks in the process of adoption and diffusion of medical technologies and organizational learning.



Name – Surname	Tomas Lindroth
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Short bio	Tomas Lindroth is a postdoc at University of Gothenburg. He studied informationsystems at University West and received his Ph.D. From University of Gothenburg. Tomahas researched the hybrids assemblages of humans and mobile technology, experientialcomputing in higher education, the datafication of work and design processes ofplatforms. Tomas has published in journals and conferences within educationaltechnologies, human computer-interaction, cscw, health informatics as well asinformation systems.

### 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>



# itAIS & MCiS 2019

*Digital transformation and social innovation in the current era:  
organizing, managing and controlling*



Deadline for encouraged abstract submission: April 21, 2019

**Deadline for full paper submission: May 20, 2019**