High Quality Cancer Care: Workforce Considerations

Opportunities to Leverage Digital Innovation

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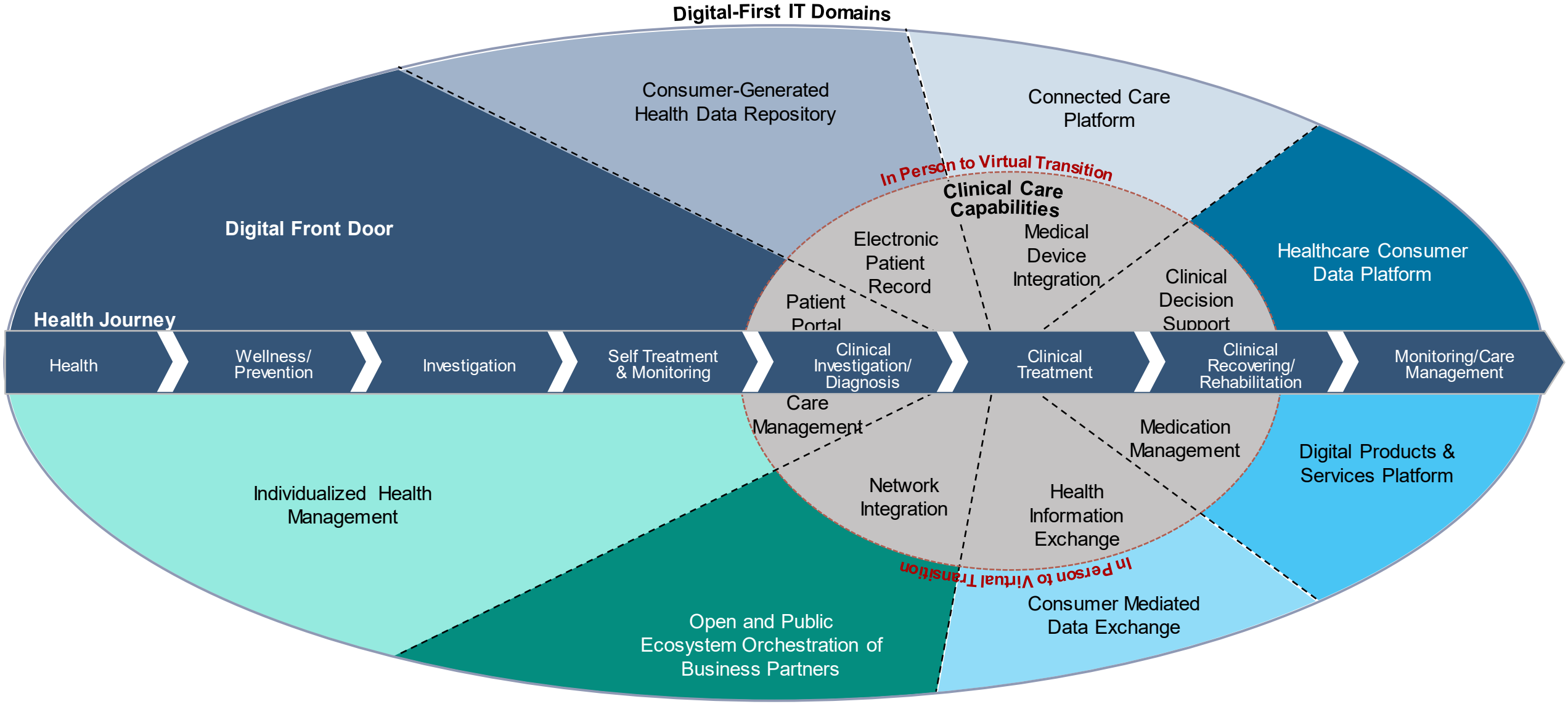
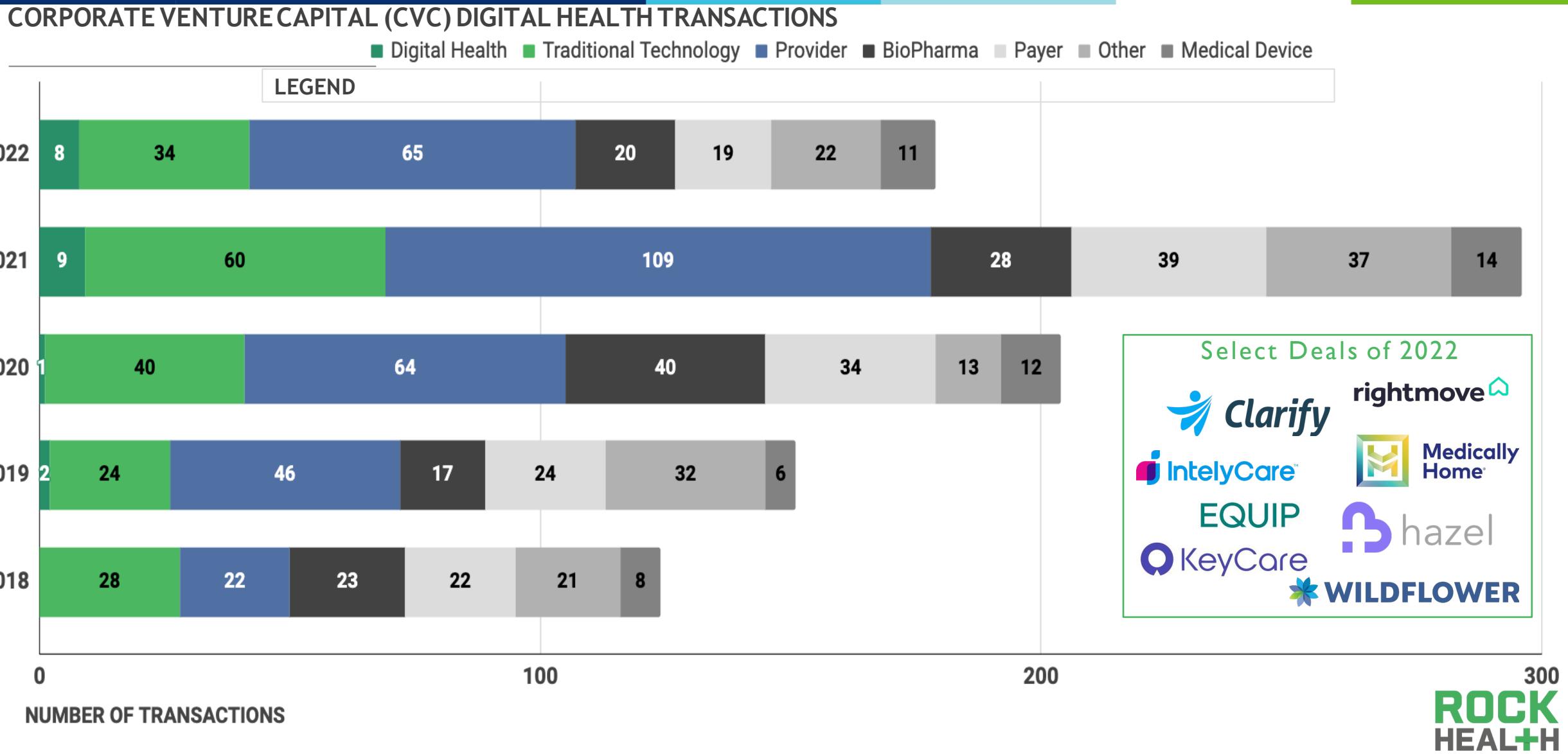
Digital in Healthcare



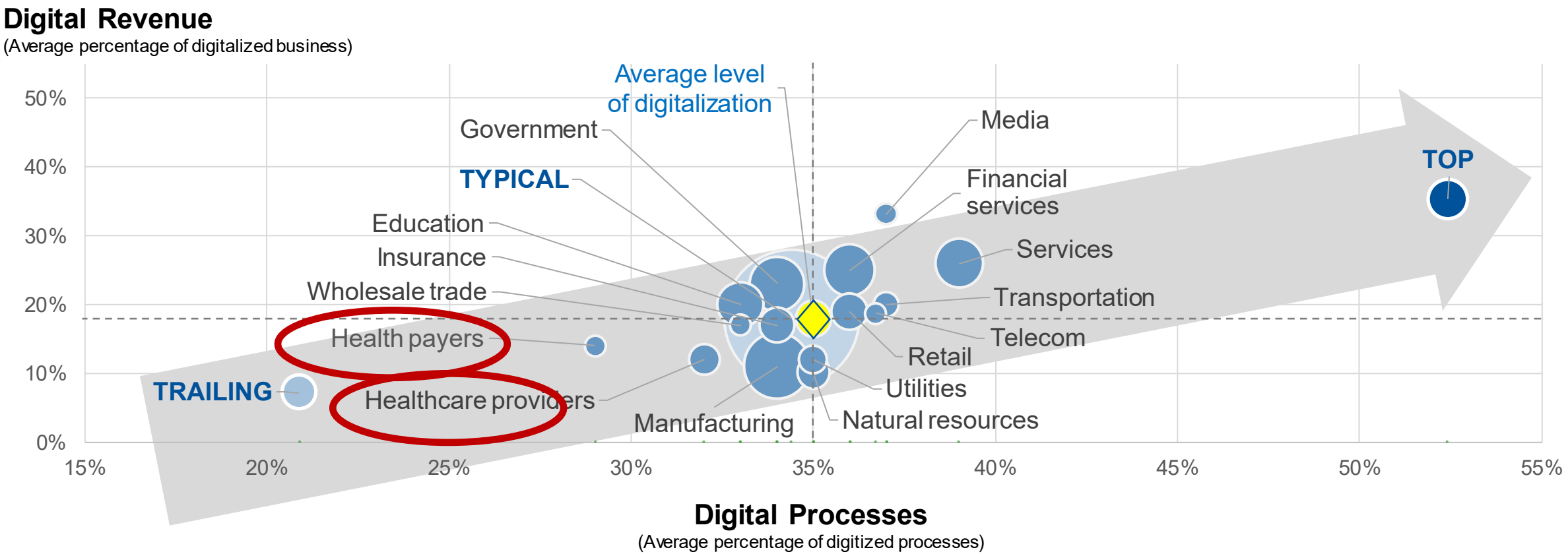
Gartner

Digital in Healthcare – Venture Investment



ROCK HEALTH

Healthcare Providers & Payers Lag in Digital Business



What percentage of your organization's total revenue would you attribute as digital sales revenue today?/How much of your organization's total turnover/budget can be attributed to fully digital services (or products) delivered to your external constituents (e.g., citizens, students, patients, other agencies)?
What percentage of your organization's processes (core and support) have been optimized (made more efficient) through digital means? Top (n = 91), Typical (n =1,180), Trailing (n = 60).
Base: All company types and have a digital initiative. Size of bubble represents size of sample.
Manufacturing (n = 560), natural resources (n = 128), media (n = 48), services (n = 290), government (n = 386), education (n = 255), retail (n = 161), wholesale trade (n = 47), financial services (n = 323), insurance (n = 138), health payers (n = 47), healthcare providers (n = 111), transportation (n = 106), utilities (n = 89), telecom (n = 51), Top (n = 182), Typical (n = 2433) Trailing (n = 134)

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DIGITAL MEDICINE SOCIETY

CancerX Approach

Pre-competitive Evidence Generation

A rolling series of multi-stakeholder initiatives will develop evidence, best practices, toolkits and value models to drive the success of the mission.

Equity and Financial Toxicity Project

Accelerator

This program will provide mentorship, education, and exposure to funding and clinical partnership opportunities to a start-up cohort aligned with the mission.

Demonstration Projects

These implementation projects will pilot novel, mission aligned approaches to demonstrate their value and sustainability for scale to drive broad adoption.

THE WHO

Advancing Cancer Treatment Through **DIGITAL INNOVATION**

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DIME DIGITAL MEDICINE SOCIETY

Project Partners

American Cancer Society · Biofourmis · Blue Note Therapeutics® · Cancer Support Community (Community is stronger than cancer)

City of Hope · current health | From BEST BUY Health · Family Reach · folia Health

Genomate · Kaiser Permanente · Leukemia & Lymphoma Society · Lightship

Memorial Sloan Kettering Cancer Center · ONC Office of the National Coordinator for Health Information Technology · ORACLE · pluto

Science 37 · sidekick · tdv · TEMPUS · tuch The Black Breast Cancer Alliance

VA | U.S. Department of Veterans Affairs

Members also include the National Cancer Institute

Overview of The Core Competencies

Objectives

01
Digitally Enabled Access

- ✓ Expedite Time to Diagnosis and Treatment
- ✓ Expand Care Footprint
- ✓ Extend Clinical Research Opportunities
- ✓ Bridge the Digital Divide

02
Tech Assisted Financial Navigation

- ✓ Digitize Financial Risk Screening
- ✓ Leverage Technology for Patient Engagement On Cost of Care
- ✓ Automate Connections To Financial Support

03
Personalized Patient Experience

- ✓ Tailor Digital Patient & Caregiver Education
- ✓ Integrate Technology & Culturally Sensitive Care
- ✓ Connect Patients to Psychosocial Support

04
Clinical and Operational Integration

- ✓ Adapt Existing Health System Technology Infrastructure
- ✓ Empower Cancer Care Providers
- ✓ Engage Health System Staff in Team-based Care

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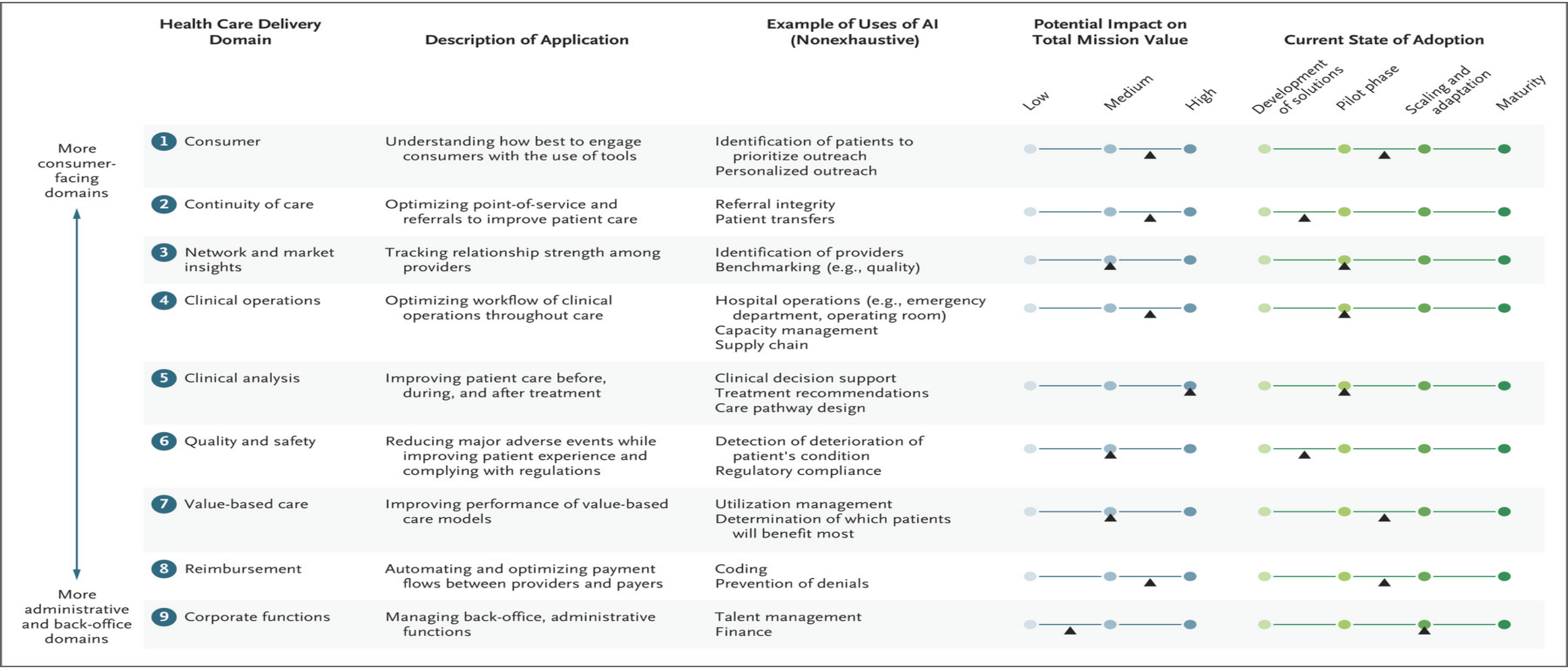
Is Artificial Intelligence the Answer?

Uses of AI in Healthcare



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Challenges to AI Adoption

	Categories of Successful AI Deployment	Goal	Challenges
Strategic Vision	1 Mission-led road map	Ensure a clear view of where the value is going to be and a road map to get there	**Part of the Solution:** Ongoing belief that AI is a "silver bullet" rather than part of a broader solution **Transformative Potential:** Focusing only on the "incremental" opportunity rather than reimagining for the "transformative" potential **Total Mission Value:** Focusing only on financial factors rather than accounting for nonfinancial factors such as quality improvement, patient safety, patient experience, clinician satisfaction, and increased access to care **Focus:** Pursuing many domains rather than 1 or 2 "priority" domains with multiple uses of AI **Timing to Impact:** Misconception that AI is a "quick win" rather than a process that is implemented over multiple years
Key Enabling Factors	2 Talent	Ensure that the correct skills and capabilities are available to execute and innovate	**Skills:** Missing skill sets in workforce to implement and manage AI **Talent Road Map:** Lack of long-term plan for workforce hiring, upskilling, and reskilling as AI use expands **Education**: Underinvestment in making workforce AI-literate
	3 Agile delivery	Increase the speed at which teams are able to deliver work	**Culture:** Negative attitude toward AI or lack of consensus **Funding:** Limited ongoing funding to deploy AI
	4 Technology and tooling	Allow the organization to move quickly, with flexibility and resiliency	**Technology Infrastructure:** Inability to integrate AI into legacy systems, secure AI, or provide necessary computing power **Data Preparation:** Underinvestment in tools to properly prepare data
	5 Data management	Use data intelligence to derive a competitive advantage	**Completeness:** Inability to address data gaps with the use of internal or external sources **Unbiased Data:** Lack of awareness of inherent biases in data, such as data that are limited to one health system site **Availability:** Missing scale in the number of data points to train AI **Data Governance:** Governance to manage data is not formalized
Implementation	6 Change in operating model of the organization	Develop business processes, employee skills, and structures to realize total mission value	**Change Management:** Lack of recognition that translating strategic vision requires different behavior changes for everyone in the workforce, as well as coaching **Workflow Integration:** Failure to integrate AI into clinical workflow to minimize the behavior change needed **Cross-functional Teams:** Not creating fully cross-functional teams, such as clinicians, technologists, and operations professionals **Transparency:** Inability to overcome "black box" nature of AI, such as quantification of assumptions **Interpretable Output:** Not providing easy-to-understand output with relevant information to enhance decision making **Operational Governance:** Not creating a formal governance structure to oversee all aspects of implementation and ongoing management

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INSTEAD OF RISKING ANYTHING NEW, LET'S PLAY IT SAFE BY CONTINUING OUR SLOW DECLINE INTO OBSOLESCENCE.
TOM FISH BURNE