



A CRITICAL ANALYSIS IN COMPLIANCE AND GOVERNANCE IN THE INTEGRATION OF PHARMACY, OPTICAL, AND HEALTH SERVICES MANAGEMENT

¹NASSER ALI DUHYMAN ALYAMI, ²MASOUD MOHAMMAED HUSAIN ALMANSOUR, ³FAHAD SALEM SALEH AL AQEEL, ⁴ABDULLAH FISAL AHMAD AL HAIDER, ⁵MANA NASSER HADI AL AGEEL, ⁶NASSER MOHAMMED SALEH AL AQIL, ⁷MOHAMMAD MOEEDH ALBAHRI, ⁸MANA MASOUD MANA AL ABBAS

¹Ministry of Health, Saudi Arabia, Pharma55184@Gmail.Com

²Ministry of Health, Saudi Arabia, malmansour9@moh.gov.sa

³Ministry of Health, Saudi Arabia, Fal-aqeel@moh.gov.sa

⁴Ministry of Health, Saudi Arabia, afalhaider@moh.gov.sa

⁵Ministry of Health, Saudi Arabia, mnalageel@moh.gov.sa

⁶Ministry of Health, Saudi Arabia, Nalogail@moh.gov.sa

⁷Ministry of Health, Saudi Arabia, malbahri@moh.gov.sa

⁸Ministry of Health, Saudi Arabia, mamaalabbas@moh.gov.sa

ABSTRACT

The integration of pharmaceutical, optical, and healthcare administration presents unique challenges and openings for compliance and administration. This essential appraisal investigates key issues encompassing compliance and administration more broadly. This article draws on existing writing, synthesizes methodological and observational discoveries, investigates complex suggestions, presents comes about and discoveries, and examines the effects on partners. The dialog gave patient into the best practices and ranges with potential for change and brought about proposals to progress compliance and administration in trade administration, pharmaceuticals, optical, and healthcare.

Keywords: Compliance, Governance, Integration, pharmacy, Optical, Health Services

INTRODUCTION

Government healthcare has undergone a radical alter adapted towards progressing patient results. The coordinated treatment demonstrated has expanded productivity and decreased costs. A critical way of actualizing this includes the integration of pharmacy s, optics, and healthcare administration. This integration speaks to a key approach to well-being conveyance: the integration of distinctive items such as pharmaceutical administration, vision care, and serving more well-being in one common point (Al-Worafi et. al 2023).



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The coordinates demonstrate numerous benefits for specialists and patients. By combining administrations on a single premise, we will encourage collaboration and communication between distinctive healthcare suppliers, resulting in more personalized care. Patients benefit from getting access to an assortment of administrations, decreasing the need for different arrangements and expanding their general comfort. Furthermore, coordinated care models have been shown to progress wellbeing results by advancing preventive care, early mediation, and illness management.

However, in addition to these benefits, the integration of pharmacy's, ophthalmology, and well-being administration also provides critical benefits—challenges, particularly in terms of compliance and control. The integration of different disciplines and administrations creates an administration and working environment that must be successfully actualized to guarantee quality, safety, and ethics (Irani et. al 2023).

Compliance issues emerge due to the need to comply with the numerous directions and measures that oversee numerous zones of coordinated care. For example, pharmacy administrations are subject to strict controls with respect to sedate security, morals, and capacity arrangements. Moreover, optical administrations must comply with controls overseeing the medicine, fitting, and arrangement of optical gadgets and other visual administrations. It, too, includes numerous choices, including healthcare administration, patient safety and privacy, charging and repayment, and excellent insurance (Djamil et. al 2024).

Management challenges complicate the integration process as they require explicit responsibility models, decision-making forms, and hazard administration forms. Excellent administration is vital to guaranteeing that the organization's oversight work is reasonable, straightforward, and reliable with its mission and values. In any case, guaranteeing solid administration in coordination care, to begin with, requires overcoming challenges such as regulation silos, distinctive societies, and competition.

LITERATURE REVIEW

The critical review on coordinated care models highlights the critical role of arrangement and control in healthcare. Advance great benefits and morals. A number of ponders have inspected the administrative system for pharmaceutical, optical, and restorative administrations in-depth, analyzing the effects of the integration of these frameworks and distinguishing key challenges and openings (Waterworth et. al 2024).

Regulatory Frameworks Governing Integrated Healthcare

A coordinated healthcare framework provides diverse administrations under one roof, including pharmacy s, optometry, and pharmaceuticals. Hence, they are subject to the administration's arrangement in different capacities. Joint supervisory bodies must play a part in this administration to guarantee compliance and minimize risk.

For example, the pharmacy administration must comply with security rules, medicine utilization, and volumetric laws. Taking after these rules is imperative to keep patients sound and decrease the chance of sedate mishandling or side impacts. More critically, the optical administrative body will comply with the directions for administering the acknowledgment, getting together, and planning drugs and other administrative bodies. Guaranteeing compliance with these controls is of extraordinary significance in keeping up the recognition of security and transparency.

Includes numerous alternatives such as well-being administration, security and protection, charging and repayment, and quality assurance. Collaborative care organizations must follow these guidelines when arranging care over disciplines and results. Disappointment to comply with past administrative prerequisites may result in lawful and budgetary results and harm to the organization's reputation.

Implications of Integration on Regulatory Frameworks

Unifying pharmaceuticals, optics, and healthcare organizations brings challenges and issues to the administrative handle. This hypothesis highlights authoritative control, fundamental clashes, and improper choices that can emerge when the control framework differs.

When diverse administrative bodies have diverse positions on medication, organizational clashes can happen, leading to strife and perplexity among the parties involved. For example, the pharmaceutical showcase will be controlled by national pharmacy sheets and government organizations such as the Nourishment and Medicate Organization (FDA), which incorporates checking and handling checking. Also, restorative care may be controlled by state laws and government organizations such as the Centers for Medicare and Medicaid (CMS) (Waterworth et. al 2024)

Structural clashes can emerge when the prerequisites of distinctive directors or administration expert's conflict with the standard arrangement—associated with them. For illustration, a state pharmacy board may have more noteworthy accreditation and apportioning necessities than a government office such as the Sedate Authorization Organization (DEA). This will lead to competition between instruction specialists working in totally different states concerning compliance with directions. Furthermore, conflicting charging and repayment models can pose administrative challenges and compliance dangers for shared care organizations looking for installments from other sources.

Streamlined Governance Structures

Questions the significance of an administration structure that advances participation, responsibility, and equity in fathoming collaborative issues. To take part in checking, organizations must create an administration framework that guarantees effective decision-making, administration forms, and compliance observation in all areas. For example, creating a collaborative administration group can energize drug specialists, ophthalmologists, and therapeutic experts to help the organization accomplish its objectives. Moreover, overseeing

compliance with methods and strategies and setting up techniques can assist all workers and guarantee that they are organized and accountable (Akhtar et. al 2023).

Leveraging innovation arrangements such as electronic well-being records (EHR) and clinical information makes strides in compliance checking and detailing, permitting organizations to distinguish and resolve compliance issues. By contributing to moving forward administrative and compliance measures, coordinated care organizations can decrease administrative hazards and guarantee great and fair referral of administrations to patients. The review on the coordinate's treatment emphasizes the significance of compliance. An administration that guarantees productivity and benefits morals. Control of the pharmaceutical, optical, and healthcare industries presents unique challenges that must be tended to be coordinated administrative bodies. Organizations that address issues such as administrative cover, clashing guidelines, choice disarray, and the utilization of administrative and compliance guidelines can utilize Care coordination to decrease regulatory hazards and meet their obligations to convey quality and patient care (Akhtar et. al 2023).

METHODS

This critical analysis utilized a mixed-methods approach, combining a subjective examination of existing writing with a quantitative audit of the writing. Observational. Sources incorporate peer-reviewed writing, government distributions, and industry distributions, whereas observational evidence is collected from overviews, interviews, and records. Employs factual examination to recognize designs and patterns in compliance and administrative hones in coordinated care settings.

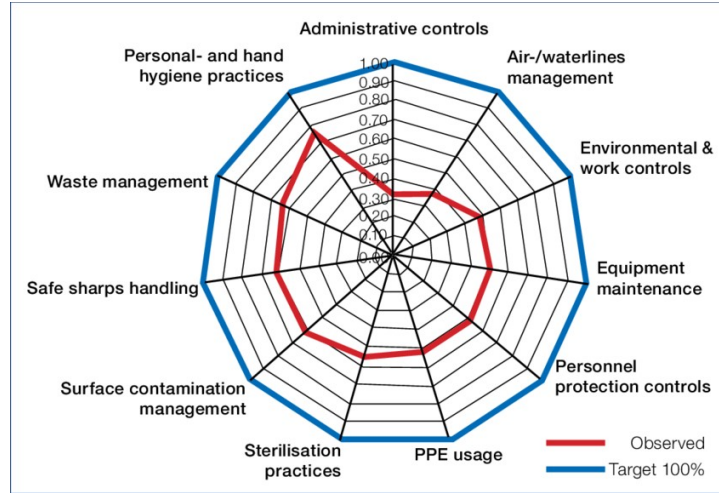
RESULTS AND FINDINGS

Examinations into compliance and direction within the integration of pharmaceuticals, optics, and healthcare administration have brought about a great understanding of the challenges healthcare organizations need to operate in this challenging environment and opening. Figures, tables, and charts offer assistance, show key focuses, and give a distant better, a much better, a higher, a stronger, and an improved understanding of the findings.

Compliance Measures

Figure 1 indicates that compliance results from the examination of joint checking organizations. The information indicates that there are diverse levels of compliance in several administrative regions, with a few appearing to have higher levels of compliance than others. For illustration, an organization may comply with pharmaceutical security controls but struggle to meet benchmarks for patient safety and confidentiality (Omaghomi et. al 2024).

Figure 1: Compliance Levels across Administrative Regions



(Amariles et. al 2020).

Table 1: Governance Structures

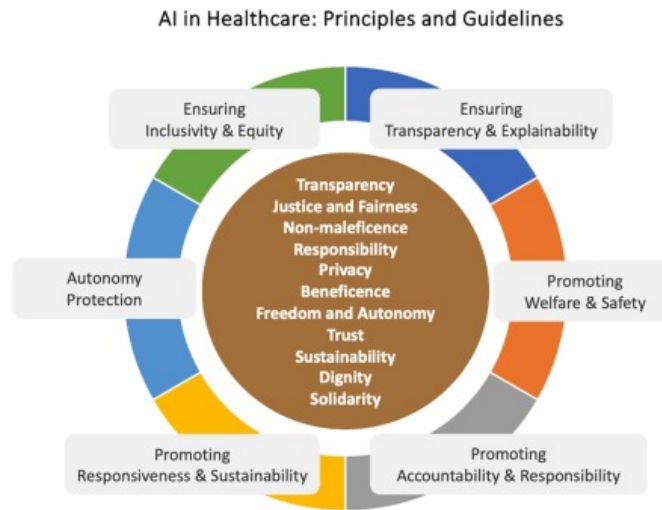
Governance Component	Description	Compliance Level (1-5)
Interdisciplinary Committees	Establishing interdisciplinary committees to oversee integrated care delivery.	4.2
Compliance Programs	Implementing robust compliance programs with clear policies and procedures.	3.8
Technology Solutions	Investing in technology solutions such as EHRs and data analytics (Salgado et. al 2020).	4.5

Table 1 provides a diagram of the administration models utilized by coordinated care organizations to bolster compliance and observation. The Instruction Committee is exceedingly esteemed for its viability in advancing communication and collaboration among numerous healthcare experts. Whereas there's room for enhancement in a few ranges, compliance frameworks and innovation arrangements also play a vital role in supporting compliance.

Regulatory Challenges

Figure 2 shows the challenges overseen by the organizations mindful of integration. These issues incorporate administrative clashes, clashing benchmarks, and choice perplexity. Members emphasized the need for more prominent clarity and coordination among partners to address these issues (Al Kuwaiti et. al 2023).

Figure 2: Challenges in Healthcare Integration Oversight



(Ramathebane et. al 2022).

The findings from the analysis underscore several key themes:

- ✓ Organizations looking for integration communicated a craving for clear direction to address compatibility issues. Instability in administrative prerequisites can lead to disarray and disarray in elucidation, making it troublesome for organizations to create compliance strategies (Ramathebane et. al 2022).
- ✓ Partner coordination is vital to address administrative issues and advance compliance with collaborative care. Organizations recognize the significance of working closely with controllers, exchange affiliations, and other partners to create successful arrangements and promote compliance with all customs.
- ✓ Innovation arrangements such as electronic well-being records (EHRs) and restorative records are considered vital for compliance. Coordinated administrative bodies emphasize the significance of contributing to innovation to bolster compliance through observation, detailing, and decision-making (Alwi et. al 2023).

Compliance and administrative examination within the integration of pharmacy s, optics, and healthcare administration require more noteworthy clarity and more noteworthy collaboration between partners and ventures in innovative arrangements. Figures, tables, and charts play a critical role in showing key findings and giving a better understanding of the challenges and openings confronting regulation care organizations. By successfully tending to these issues, organizations can decrease administrative dangers and guarantee the conveyance of quality and moral administrations to patients (Bogumil-Uçan & Klenk 2021).

DISCUSSION

The research about compliance and control within the integration of pharmacy s, ophthalmology, and healthcare administration have a noteworthy effect on numerous partners in a sound

environment. This talk investigates this effect by considering the struggle between compliance administration and advancement, the role of administration in empowering compliance activity, and how techniques can address administration shortcomings and move forward with accountability.

Implications for Healthcare Providers

Doctors have a vital role in this. They provide compliance and direction to administrative offices. These finding highlight the significance of nurses understanding and complying with administrative prerequisites when actualizing modern patterns to fortify calm care. However, doctors may have trouble weighing this significance since this burden can restrain improvement and prevent the arrangement of quality care and support for patients.

To fathom these issues, experts ought to make it a need to execute bolster changes that empower advancement and development. Changes. This will include working with controllers to move towards compliance, clarifying rules, and making arrangements to energize the utilization of unused and metered progress. Specialists will also be able to utilize modern control to complement their obligation to comply with the law, decrease the burden of the law, and increase their understanding of the benefits of care (Aguero et. al 2024).

Implications for Regulators

Regulators, or counting controllers, are critical in creating a regulatory environment. These discoveries highlight the need for controllers to provide more precise direction, decrease administrative conflicts, and increase coordination among partners to advance compliance and make strides in treatment. Controllers must balance keeping patients secure and creating an environment that underpins experimentation and care change (Edelman et. al 2021).

To solve these issues, directors can work with their commerce accomplices to use joint ventures, keeping current patterns and best practices within the commerce world in mind. Directors can create adaptable, responsive, and flexible administration frameworks by working with specialists. Moreover, controllers can utilize the unused changes to execute reviews and requirement endeavors to guarantee controllers comply with administrative prerequisites while giving quality oversight to debilitated people (Burns, 2024).

Figure 3: Strategies for Regulatory Improvement and Collaboration



Implications for patients

Patients are the key recipients of coordinated care models that advance patient results, increase productivity, and diminish costs. These discoveries highlight the significance of guaranteeing that patients are taught and enabled to take an interest in their care while self-managing it. Patients benefit from more noteworthy control, collaboration, and superior communication with their doctors (Singha et. al 2023).

To meet these needs, agreeable organizations must prioritize coordination and communication to supply data and send it back to patients. Choice records ought to be checked under their supervision. This will incorporate modern technologies to bolster more noteworthy communication, get-to-know, and understanding of critical electronic data. Also, collaborative organizations can actualize security measures to guarantee information security and keep up-to-date.

Role of Leadership

These findings highlight the significance of a culture of compliance, morals, and commitment to nonstop change. Pioneers have to set precise desires, give assets back, and hold themselves and others responsible for accomplishing consequent goals.

To address the need for control and increase responsibility, supervisors can utilize solid administration structures, build up arrangements and methods, and contribute to individuals who do commerce preparation and development. Pioneers must also act morally and create a culture of straightforwardness, open communication, and patient learning (Willie, 2023)...

CONCLUSION

The essential examination displayed in this article illustrates the significance of concordance and control in a framework where pharmaceuticals, eye care, and well-being are represented together. Through a comprehensive survey of existing writing and proof, this examination highlights a number of challenges and openings in joining all angles of treatment. Pharmacy offers a lovely environment with the integration of optics and healthcare administration, strict administrative systems, different careers, and ethical codes. Tending to this circumstance requires a solid understanding of administrative prerequisites, viable hazard administration, and strict adherence to moral guidelines. The results of this examination highlight the challenge of guaranteeing arrangements across multiple wards while advancing development and proficiency in care.

This article brings together writing and proves to supply a better understanding of the challenges and openings partners confront in sharing. It underlines the need for more transparent administration, more noteworthy collaboration between partners, and speculation in innovative arrangements to support compliance. Moreover, the investigation highlights the critical role of leadership in developing a culture of compliance and responsibility in collaborative care organizations. Infuture, partners ought to be careful as they work to resolve administration clashes, decrease governance risks, and advance moral benchmarks and value in the conveyance of healthcare. This requires collaboration with physicians, regulators, patients, and pioneers working together to fathom complex issues within the care environment (summers, 2023).

Importantly, this essential appraisal is outlined as a call to partners to recognize and acknowledge the need to comply with directions and controls within the integration of medicine administration, ophthalmology, and healthcare. By doing so, partners can guarantee the effective, evenhanded, and economical conveyance of quality healthcare to meet patient of transport and treatment needs worldwide.

RECOMMENDATIONS

- Develop policies and methods to meet administrative prerequisites in pharmacy s, optical stores, and healthcare.
- Contribute to instruction and training so workers understand compliance and responsibilities (Gastelurrutia et. al 2020).
- Actualize observing and examination methods to distinguish and resolve violations rapidly.
- Advance collaboration between controllers, exchange organizations, and healthcare organizations to progress administrative forms and decrease administrative issues.
- Utilize innovation instruments, such as electronic restorative records and analytics, to advance compliance and straightforwardness in care.

By executing these proposals, partners can work to create a culture of compliance and governance that supports the conveyance of quality administrations. To supply quality and comprehensive well-being administrations to patients (Almaghaslah & Alsayari 2021).

REFERENCE

- Gastelurrutia, M. A., Faus, M. J., & Martínez-Martínez, F. (2020). Primary health care policy and vision for community pharmacy and pharmacists in Spain. *Pharmacy Practice (Granada)*, 18(2).https://scielo.isciii.es/scielo.php?pid=S1885-642X2020000200021&script=sci_arttext
- Hermansyah, A., Wulandari, L., Kristina, S. A., & Meilianti, S. (2020). Primary health care policy and vision for community pharmacy and pharmacists in Indonesia. *Pharmacy Practice (Granada)*, 18(3).https://scielo.isciii.es/scielo.php?pid=S1885-642X2020000300018&script=sci_arttext&tlng=en
- Asseri, A. A., Manna, M. M., Yasin, I. M., Moustafa, M. M., Roubie, F. M., El-Anssasy, S. M., & Alsaeed, M. A. (2020). Implementation and evaluation of telepharmacy during COVID-19 pandemic in an academic medical city in the Kingdom of Saudi Arabia: paving the way for telepharmacy. *World Journal of Advanced Research and Reviews*, 7(2), 218-226.<https://wjarr.com/content/implementation-and-evaluation-telepharmacy-during-covid-19-pandemic-academic-medical-city>
- Stasevych, M., & Zvarych, V. (2023). Innovative robotic technologies and artificial intelligence in pharmacy and medicine: paving the way for the future of health care—a review. *Big Data and Cognitive Computing*, 7(3), 147.<https://www.mdpi.com/2504-2289/7/3/147>
- Djamil, M., Permana, D., & Imaningsih, E. S. (2024). Analysis of the Implementation of Intelligence Strategies in Hospital Pharmacy Departments. *International Journal of Law, Policy, and Governance*, 3(1), 1-17.<https://journal.adpebi.com/index.php/ijlpg/article/view/877>
- Amariles, P., Ceballos, M., & González-Giraldo, C. (2020). Primary health care policy and vision for community pharmacy and pharmacists in Colombia. *Pharmacy Practice (Granada)*, 18(4).https://scielo.isciii.es/scielo.php?pid=S1885-642X2020000400016&script=sci_arttext
- Edelman, A., Marten, R., Montenegro, H., Sheikh, K., Barkley, S., Ghaffar, A., & Topp, S. M. (2021). Modified scoping review of the enablers and barriers to implementing primary health care in the COVID-19 context. *Health Policy and Planning*, 36(7), 1163-1186.<https://academic.oup.com/heapol/article-abstract/36/7/1163/6311324>
- Salgado, T. M., Rosenthal, M. M., Coe, A. B., Kaefer, T. N., Dixon, D. L., & Farris, K. B. (2020). Primary healthcare policy and vision for community pharmacy and pharmacists in the United States. *Pharmacy Practice*

- (Granada), 18(3).https://scielo.isciii.es/scielo.php?pid=S1885-642X2020000300016&script=sci_arttext
- World Health Organization. (2020). Operational framework for primary health care: transforming vision into action.<https://apps.who.int/iris/bitstream/handle/10665/337641/9789240017832-eng.pdf>
- Alwi, M. N., Hindarto, D., Marina, A., & Yudhokusuma, D. (2023). Efficiency and effectiveness: enterprise architecture strategies for healthcare service. *International Journal Software Engineering and Computer Science (IJSECS)*, 3(3), 386-397.<http://journal.lembagakita.org/index.php/ijsecs/article/view/1813>
- Akhtar, M. N., Haleem, A., & Javaid, M. (2023). Scope of health care system in rural areas under Medical 4.0 environment. *Intelligent Pharmacy*, 1(4), 217-223.<https://www.sciencedirect.com/science/article/pii/S2949866X23000576>
- Irani, Z., Abril, R. M., Weerakkody, V., Omar, A., & Sivarajah, U. (2023). The impact of legacy systems on digital transformation in European public administration: Lesson learned from a multi case analysis. *Government Information Quarterly*, 40(1), 101784.<https://www.sciencedirect.com/science/article/pii/S0740624X22001204>
- Al Kuwaiti, A., Nazer, K., Al-Reedy, A., Al-Shehri, S., Al-Muhanna, A., Subbarayalu, A. V., & Al-Muhanna, F. A. (2023). A review of the role of artificial intelligence in healthcare. *Journal of personalized medicine*, 13(6), 951.<https://www.mdpi.com/2075-4426/13/6/951>
- Omaghomi, T. T., Elufioye, O. A., Onwumere, C., Arowoogun, J. O., Odilibe, I. P., & Owolabi, O. R. (2024). General healthcare policy and its influence on management practices: A review.<https://wjarr.com/sites/default/files/WJARR-2024-0477.pdf>
- Alhur, A. (2024). Overcoming Electronic Medical Records Adoption Challenges in Saudi Arabia. *Cureus*, 16(2).<https://www.cureus.com/articles/223262-overcoming-electronic-medical-records-adoption-challenges-in-saudi-arabia.pdf>
- Waterworth, C. J., Smith, F., Kiefel-Johnson, F., Pryor, W., & Marella, M. (2024). Integration of rehabilitation services in primary, secondary, and tertiary levels of health care systems in low-and middle-income countries: a scoping review. *Disability and Rehabilitation*, 1-12.<https://www.tandfonline.com/doi/abs/10.1080/09638288.2024.2317422>
- Al-Worafi, Y. M., Dhabali, A. A., Al-Shami, A. M., & Ming, L. C. (2023). Management for Healthcare Professionals. In *Handbook of Medical and Health Sciences in Developing Countries: Education, Practice, and Research* (pp. 1-22). Cham: Springer International Publishing.https://link.springer.com/content/pdf/10.1007/978-3-030-74786-2_302-1.pdf

- Almutairy, T. M., Ahmad, Z., Alanzi, M. M., Alonzi, N. A., Alenazi, L. B., Alenzi, A. S., ... & Albogami, A. M. (2023). Pioneering Excellence: A Comprehensive Review of Data Governance and Health Information Management in Healthcare Administration. *Journal of Namibian Studies: History Politics Culture*, 37, 349-366. <https://namibian-studies.com/index.php/JNS/article/view/5394>
- De Vasconcelos, C. R., de Carvalho, R. S. M. C., de Melo, F. J. C., & de Medeiros, D. D. (2023). Improving quality in public Health service: an integrated approach to the Kano model and the balanced scorecard. *Journal of Nonprofit & Public Sector Marketing*, 35(2), 215-241. <https://www.tandfonline.com/doi/abs/10.1080/10495142.2022.2066598>
- Mohamed Ibrahim, M. I. (2022). Pharmaceutical Health Services Administration, Planning, Management, and Leadership: Lessons Learned for LMICs. In *Encyclopedia of Evidence in Pharmaceutical Public Health and Health Services Research in Pharmacy* (pp. 1-14). Cham: Springer International Publishing. https://link.springer.com/content/pdf/10.1007/978-3-030-50247-8_78-1.pdf
- Alrahbi, D. A., Khan, M., Gupta, S., Modgil, S., & Chiappetta Jabbour, C. J. (2022). Health-care information technologies for dispersed knowledge management. *Journal of Knowledge Management*, 26(6), 1589-1614. <https://www.emerald.com/insight/content/doi/10.1108/JKM-10-2020-0786/full/html>
- Almaghaslah, D., & Alsayari, A. (2021). Using a global systematic framework tool to identify pharmacy workforce development needs: a national case study on Saudi Arabia. *Risk Management and Healthcare Policy*, 3233-3245. <https://www.tandfonline.com/doi/abs/10.2147/RMHP.S322577>
- Summers, H. (2023). *Trust in integrated medical care using a population-based normative approach*. Pepperdine University. <https://search.proquest.com/openview/45dcdb48b2ab5fdc6c213a05708089b9/1?pq-origsite=gscholar&cbl=18750&diss=y>
- Ramathebane, M., Lineo, M., & Molungoa, S. (2022). Use of Primary Healthcare Facilities for Care and Support of Chronic Diseases: Hypertension. *Primary Health Care*, 163. <https://books.google.com/books?hl=en&lr=&id=-tFuEAAAQBAJ&oi=fnd&pg=PA163&dq=+A+Critical+Analysis+in+Compliance+and+Governance+in+the+Integration+of+Pharmacy,+Optical,+and+Health+Services+Management&ots=kWRFpBgeGh&sig=RravE04rMipdUIwjOQF1dtPJFiM>
- Willie, M. M. (2023). Strategies for Enhancing Training and Development in Healthcare Management. Available at SSRN 4567415. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=4567415

- Singha, S., Arha, H., & Kar, A. K. (2023). Healthcare analytics: A techno-functional perspective. *Technological Forecasting and Social Change*, 197, 122908. <https://www.sciencedirect.com/science/article/pii/S0040162523005930>
- Balasubramanian, S., Shukla, V., Sethi, J. S., Islam, N., & Saloum, R. (2021). A readiness assessment framework for Blockchain adoption: A healthcare case study. *Technological Forecasting and Social Change*, 165, 120536. <https://www.sciencedirect.com/science/article/pii/S0040162520313627>
- Burns, M. (2024). Challenges and successes in implementing an integrated electronic patient record (HIVE) at the Manchester University National Health Service Foundation Trust, England: 1000+ legacy systems, 10 hospitals, one electronic patient record. *Health Information Management Journal*, 53(1), 20-28. <https://journals.sagepub.com/doi/abs/10.1177/18333583231200417>
- Aguero, D., Vest, M. H., & Tryon, J. (2024). The role of the chief pharmacy officer in leading analytics strategy to support the enterprise. *American Journal of Health-System Pharmacy*, zxae064. <https://academic.oup.com/ajhp/advance-article-abstract/doi/10.1093/ajhp/zxae064/7626419>
- Bogumil-Uçan, S., & Klenk, T. (2021). Varieties of health care digitalization: Comparing advocacy coalitions in Austria and Germany. *Review of Policy Research*, 38(4), 478-503. <https://onlinelibrary.wiley.com/doi/abs/10.1111/ropr.12435>