**SHIFTing artificial intelligence to be responsible in healthcare: A systematic review**

By synthesizing relevant knowledge from Artificial Intelligence (AI) governance and ethics, we propose a responsible AI initiative framework that encompasses five core themes for AI solution developers, healthcare professionals, and policy makers. These themes are summarized in the acronym SHIFT: Sustainability, Human centeredness, Inclusiveness, Fairness, and Transparency. In addition, we unravel the key issues and challenges concerning responsible AI use in healthcare, and outline avenues for future research.


**Driving digital health transformation in hospitals: a formative qualitative evaluation of the English Global Digital Exemplar programme**

The English Global Digital Exemplar (GDE) programme is a large-scale national health information technology change programme to promote digitally-enabled transformation in 2nd healthcare provider organisations by supporting digitally mature providers to become international centres of excellence. The GDE programme has been successful in accelerating digital transformation in participating provider organisations. Large-scale digital transformation programmes in healthcare can stimulate local progress through protected funding, putting in place governance structures and leveraging reputational benefits, around a coherent vision of transformation.


**What Policy Approaches Were Effective in Reducing Catastrophic Health Expenditure? A Systematic Review of Studies from Multiple Countries**

The United Nations set a goal for universal health coverage in all countries by 2030 and selected the catastrophic health expenditure (CHE) indicator as an assessment tool for this goal. The purpose of this systematic literature review is to find appropriate methods for measuring CHE that can help to analyze the impact of health policies and identify countries whose health policies are most effective in reducing CHE. This study determines effective policies by comparing CHE time series trends among countries. As a policy implication, it was found that because CHE is defined as the ratio of the ability to pay to medical expenses, a policy of differential medical expenses that is based on income level is effective.

*Jung H, Lee KS. Appl Health Econ Health Policy. 2022. In Press*