

Healthcare strategic vision 2026-2036

Navigating the collision of
exponential technological
speed and operational
legacy inertia



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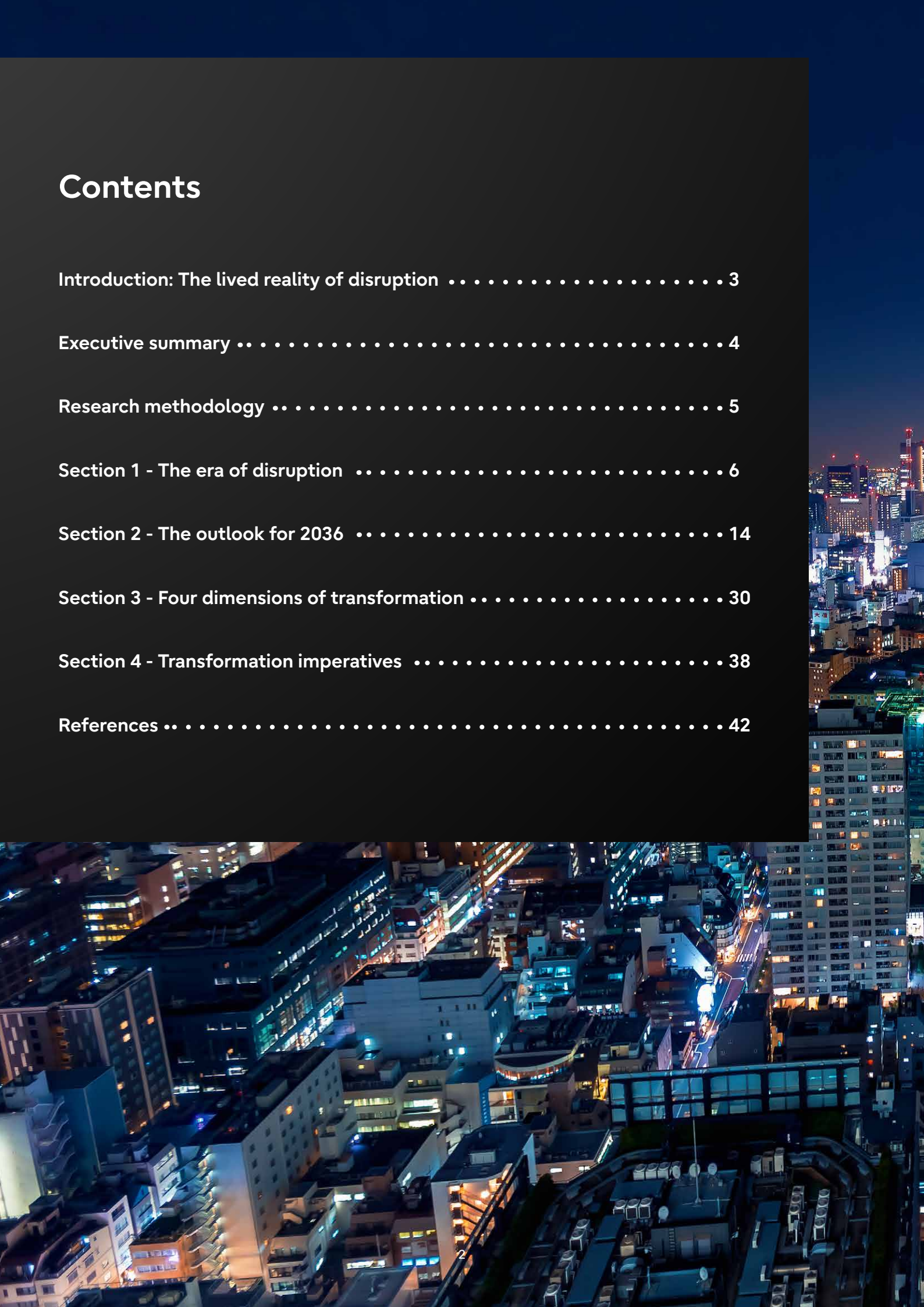
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Introduction: **The lived reality of disruption**

The Healthcare Sector is trapped in a fundamental collision between exponential technological acceleration and rigid operational exhaustion.

The global healthcare landscape is currently defined by a severe tension between the immediate operational crises of today and the transformative demands of tomorrow. Leaders are grappling with a paradox where the pace of change is exponential, yet their organizations are built for stability and safety, not for rapid reconfiguration. This report moves beyond abstract theory to capture the lived reality of executive decision makers who face relentless capacity constraints and affordability pressures.

As we map the journey from the immediate strategic landscape to the long-term vision of 2036, the sector is transitioning from a reactive, crisis driven model to a proactive era of wellness intelligence. To navigate this shift, organizations need to resolve the immediate workforce bottlenecks that threaten to stall digital initiatives, ensuring that technology acts as a vital capability multiplier rather than an additional administrative burden.

Furthermore, the risk environment has fundamentally shifted, elevating data integrity from a standard technology concern to a critical patient safety mandate. With the constant threat of operational paralysis due to cyber vulnerabilities, digitally mature healthcare providers are ironically finding themselves at higher risk, meaning leaders are forced to navigate these compounding daily disruptions while simultaneously funding their future transformation.

Healthcare leaders need to simultaneously solve the immediate human resource crisis while architecting the structural agility required for the next decade of intelligent automation.

Executive summary

Navigating the severe tension between immediate operational survival and future systemic transformation.

The strategic landscape for healthcare is fundamentally bifurcated into two distinct timeframes, requiring leaders to simultaneously extinguish immediate fires while architecting long-term resilience. The immediate operating environment is dominated by a severe crisis of human capital and affordability, forcing executives to prioritize operational continuity over experimental innovation. However, the long-term outlook demands a radical transition from reactive treatment models to proactive, predictive wellness systems powered by advanced data analytics. To survive this collision of legacy structures and exponential technological speed, organizations are forced to reinvent their core operating models, secure their vulnerable supply chains, and completely redefine how value is delivered to an increasingly empowered patient base.

The era of disruption

Establishes the current crisis, revealing that the severe health human resources shortage is the single most disruptive force today. It acts as a fundamental bottleneck preventing digital progress, forcing exhausted front-line staff to view new technology as an additional administrative burden rather than a solution.

The outlook for 2036

Projects the structural imperatives of the next decade across four varied macro scenarios. It outlines the inevitable shift towards wellness intelligence, where advanced analytics and highly interoperable data standards transition from being optional efficiency tools to non negotiable clinical safety requirements.

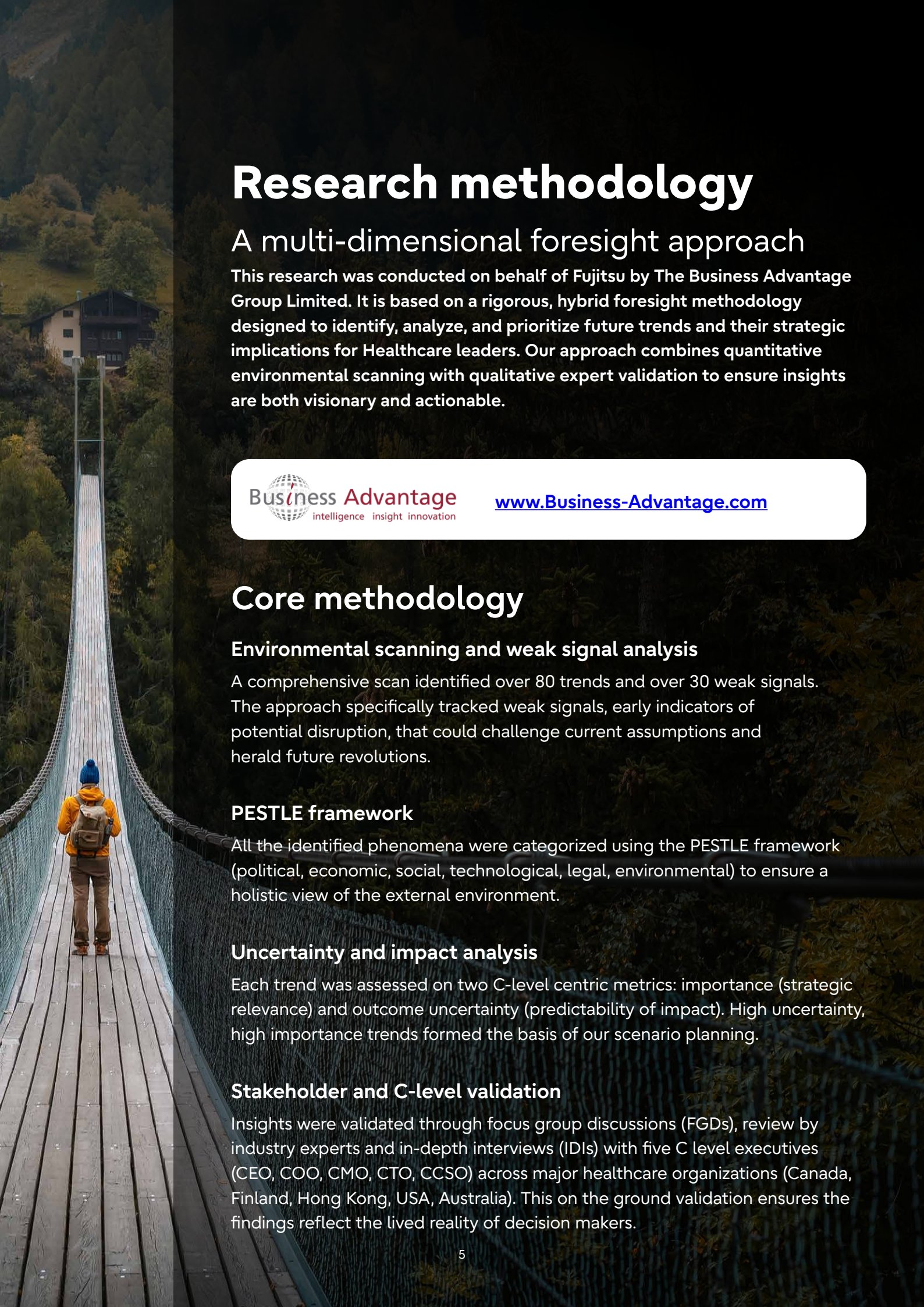
Four dimensions of transformation

Maps the internal battlegrounds required to build resilience. It highlights how geopolitical instability and the affordability crunch compel providers to abandon siloed operations in favor of predictive care models, highly resilient local supply chains, and unified digital ecosystems.

Transformation imperatives

Details the final actionable playbook, providing a concrete list of common denominator actions that empower executives to augment their depleted workforce, secure their vulnerable data networks against cyber threats, and transition sustainably toward outcome-based financial models regardless of which external scenario unfolds.





Research methodology

A multi-dimensional foresight approach

This research was conducted on behalf of Fujitsu by The Business Advantage Group Limited. It is based on a rigorous, hybrid foresight methodology designed to identify, analyze, and prioritize future trends and their strategic implications for Healthcare leaders. Our approach combines quantitative environmental scanning with qualitative expert validation to ensure insights are both visionary and actionable.



www.Business-Advantage.com

Core methodology

Environmental scanning and weak signal analysis

A comprehensive scan identified over 80 trends and over 30 weak signals. The approach specifically tracked weak signals, early indicators of potential disruption, that could challenge current assumptions and herald future revolutions.

PESTLE framework

All the identified phenomena were categorized using the PESTLE framework (political, economic, social, technological, legal, environmental) to ensure a holistic view of the external environment.

Uncertainty and impact analysis

Each trend was assessed on two C-level centric metrics: importance (strategic relevance) and outcome uncertainty (predictability of impact). High uncertainty, high importance trends formed the basis of our scenario planning.

Stakeholder and C-level validation

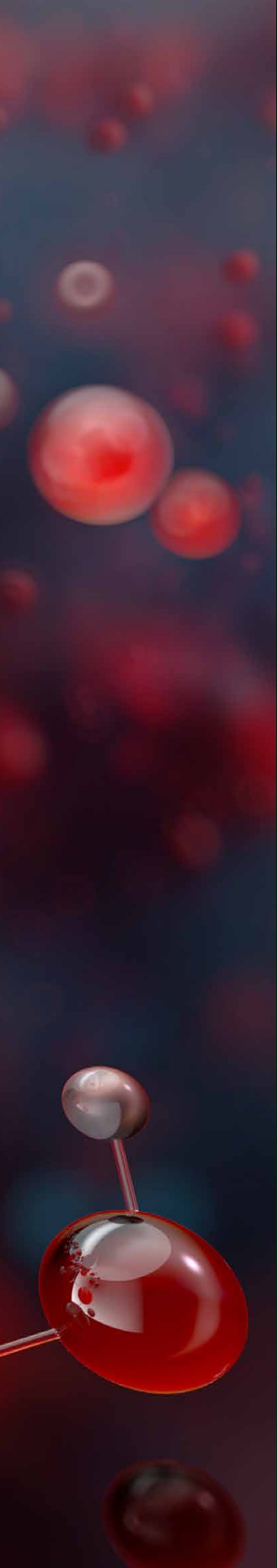
Insights were validated through focus group discussions (FGDs), review by industry experts and in-depth interviews (IDIs) with five C level executives (CEO, COO, CMO, CTO, CCSO) across major healthcare organizations (Canada, Finland, Hong Kong, USA, Australia). This on the ground validation ensures the findings reflect the lived reality of decision makers.

Section

1

The era of disruption

Navigating the fracture of operational stability in a resource constrained environment.



Overview: The current crisis

Assessing the immediate operational threats confronting healthcare providers in 2026.

The immediate strategic landscape is defined by forces that threaten the operational continuity of healthcare providers today. Moving beyond theoretical macro trends, leaders are facing a fundamental collision between the rapid acceleration of medical technology and the physical limits of their operational capacity. Demographic shifts are acting as a severe multiplier, creating a demand curve that significantly outstrips available human and financial resources.

Consequently, executives are forced to operate in a state of perpetual crisis management. The primary bottleneck preventing digital progress is not a lack of technology, but a lack of absorption capacity among exhausted front-line staff. Simultaneously, the risk environment has escalated, with cyber threats evolving from standard IT concerns into life threatening clinical vulnerabilities, trapping digitally mature organizations in a complex web of risk and resource scarcity.

Key findings:

- The health human resources crisis is the single most disruptive force, severely limiting systemic capacity.
- Data integrity breaches have elevated cybersecurity to a critical patient safety mandate.
- Geopolitical instability is driving a rapid retreat toward resilient, localized supply chains.
- The affordability crunch is forcing a transition from volume-based delivery to value-based care.

To survive this era of steady disruption, healthcare leaders need to stabilize their immediate operational foundations before attempting to scale advanced digital transformation.

External forces: The demographic multiplier

The growing and aging population is creating unsustainable demand that outstrips systemic capacity.

The most significant external force destabilizing the sector is the demographic reality of a rapidly aging global population. This shift creates a compounding burden of chronic disease that current operational models are simply not equipped to handle. Traditional approaches to managing this volume rely on expanding physical infrastructure and headcount, but these methods are failing in an environment of severe capital and labor constraints.

This demographic pressure acts as a multiplier for every other systemic challenge, exacerbating bed block and forcing organizations into a reactive posture. Executives are caught in a cycle where daily routine demands consume all available manpower, leaving little strategic space to implement the very innovations that could alleviate the pressure.

When identifying the trends most profoundly reshaping the industry landscape right now, what critical factor requires immediate attention?

"Population aging is definitely a trend that I would put into this list because it affects the public sector in so many ways, for example through the amount of skilled, educated staff that we will have."

Chief Medical Officer | Healthcare | Finland

Organizations should consider shifting their strategic focus from expanding physical capacity to deploying predictive care models aimed at keeping the aging population healthy, thereby reducing the capacity needed for acute care.



Market shifts: The affordability crisis

Healthcare providers are trapped between rising operational costs and tightly constrained public funding models.

The fundamental economic model of healthcare is fracturing under the weight of sustained inflation and resource scarcity. Leaders are facing a severe affordability crisis where the traditional fee for service model is no longer financially viable. The mandate has shifted entirely; healthcare providers are now expected to deliver the same amount of care for a significantly lower financial investment.

This market reality forces a critical pivot towards outcome-based services and value-based care executing this transition.¹ However, executing this transition is exceptionally difficult when financial sustainability acts as a hard brake on new investments. Leaders are increasingly scrutinizing vendor relationships, demanding quantifiable returns on investment that directly impact operational efficiency rather than investing in superficial digital improvements.

What makes insights and solutions from a technology firm feel truly actionable and ready for implementation in today's constrained market?

"Actionable insights are those that start from my reality, not the vendor's roadmap. Do not just tell me a trend exists; you need to show me how it moves a number that I care about quantify the business impact, not just describe the feature."

Chief Technology Officer | Healthcare | USA

¹ Value-based care and outcome-based services are care-delivery models that reward healthcare providers for patient health outcomes and the quality of care, rather than the volume of transactions or services delivered.

Financial sustainability dictates that new technology investments need to demonstrate immediate, quantifiable efficiency gains rather than long-term theoretical benefits.

Competitive landscape: The sovereign retreat

Geopolitical instability is forcing a rapid shift from global efficiency to resilient, localized supply chains. For hospitals, this translates into the availability of critical equipment; for pharmaceutical organizations, it centers on securing the sourcing of medicines and raw materials.

The competitive landscape is being aggressively redrawn by macro political forces rather than traditional market competition. The pursuit of globalized, cost optimized supply chains has been exposed as a critical vulnerability following recent global shocks. Consequently, leaders are deprioritizing global synergy in favor of sovereign resilience, fundamentally altering procurement strategies.

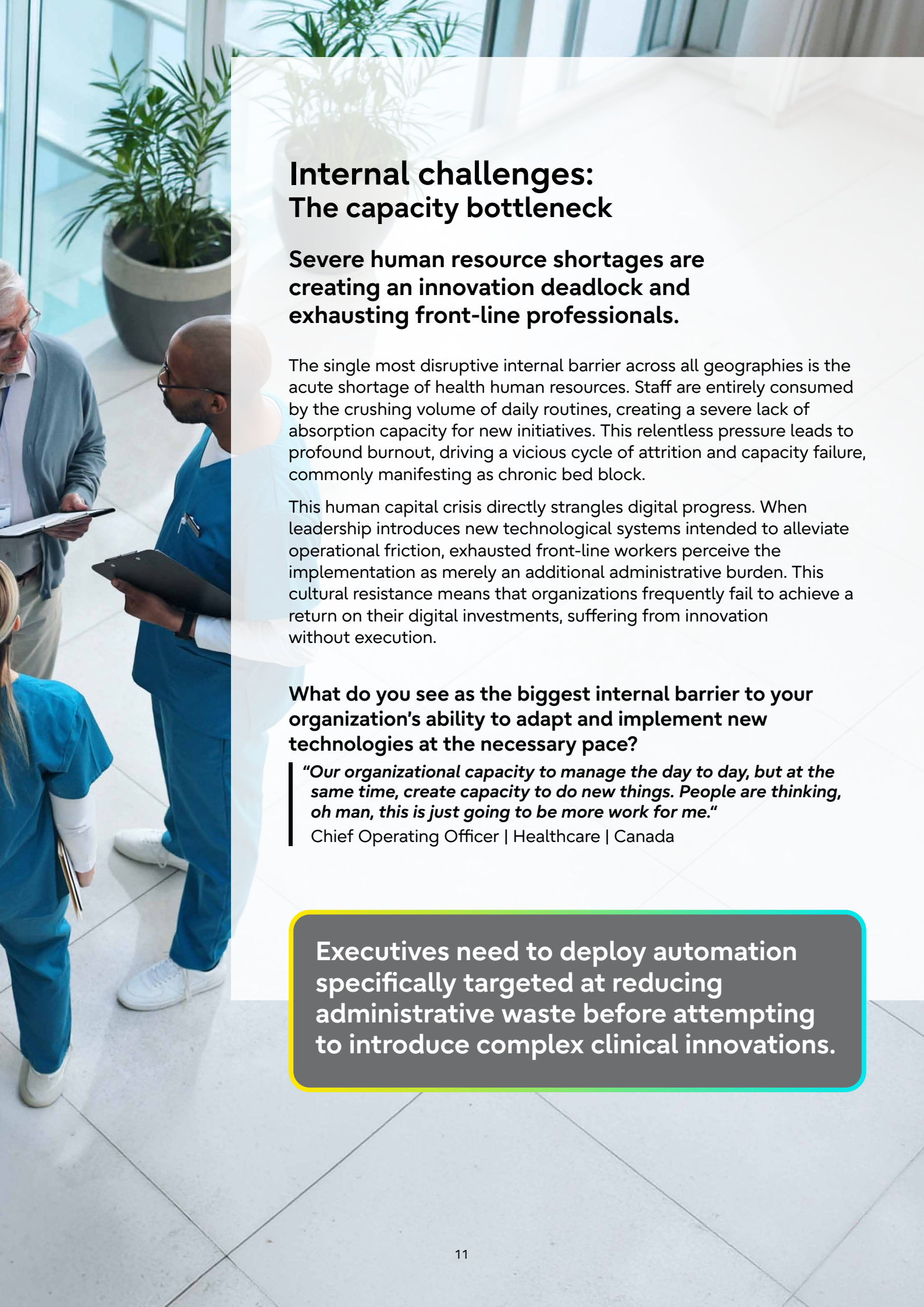
This retreat manifests in the active onshoring of critical medical manufacturing and the establishment of strict data borders. By adopting locally invented technologies, such as regional robotic surgery platforms, healthcare providers are attempting to insulate their operations from potential trade wars and supply interruptions. This protectionist approach secures operational continuity but significantly fragments the global innovation ecosystem.

What is the single boldest strategic move leaders need to consider to remain resilient in a fracturing competitive landscape?

"The boldest move would be to learn to look at the health system as a whole system rather than in a fragmented way. We must be more strategic in stakeholder management, forming partnerships with different operators and technological companies to manage outcomes and costs more efficiently."

Chief Medical Officer | Healthcare | Finland

To maintain a competitive advantage, healthcare networks should consider abandoning isolated operations to form highly integrated, regional collaborative systems.



Internal challenges: The capacity bottleneck

Severe human resource shortages are creating an innovation deadlock and exhausting front-line professionals.

The single most disruptive internal barrier across all geographies is the acute shortage of health human resources. Staff are entirely consumed by the crushing volume of daily routines, creating a severe lack of absorption capacity for new initiatives. This relentless pressure leads to profound burnout, driving a vicious cycle of attrition and capacity failure, commonly manifesting as chronic bed block.

This human capital crisis directly strangles digital progress. When leadership introduces new technological systems intended to alleviate operational friction, exhausted front-line workers perceive the implementation as merely an additional administrative burden. This cultural resistance means that organizations frequently fail to achieve a return on their digital investments, suffering from innovation without execution.

What do you see as the biggest internal barrier to your organization's ability to adapt and implement new technologies at the necessary pace?

"Our organizational capacity to manage the day to day, but at the same time, create capacity to do new things. People are thinking, oh man, this is just going to be more work for me."

Chief Operating Officer | Healthcare | Canada

Executives need to deploy automation specifically targeted at reducing administrative waste before attempting to introduce complex clinical innovations.

Technological barriers: The cyber safety nexus

Escalating cybersecurity threats have transitioned from standard IT issues to critical patient safety mandates.

The technological risk profile has fundamentally shifted as healthcare infrastructure becomes increasingly digitized. The primary concern is no longer just the theft of confidential records, but the absolute integrity of clinical data. If a bad actor alters diagnostic information or patient histories, it directly results in incorrect clinical decisions, elevating cyber threats to life threatening events.

Furthermore, fragmented legacy systems and isolated data silos compound this vulnerability. Decades of piecemeal technology investments have created a complex, incompatible architecture that is exceedingly difficult to secure. Paradoxically, this means that highly digitally mature organizations possess a vastly expanded attack surface, making systemic resilience and data integrity the foremost technological imperatives.

How has the nature of technological risk and cyber disruption shifted within the modern healthcare environment?

"For healthcare, integrity of the data is more important than confidentiality and availability. If someone goes in and disrupts your data, and nobody knows, we are using somebody else's data to make clinical decisions about your care."

Chief Cyber Security Officer | Healthcare | Australia

Security investments need to prioritize data integrity protocols above all else to ensure that digitization efforts do not compromise core patient safety.



Summary: The strategic outlook

To navigate the polycrisis, leaders are forced to solve immediate constraints before attempting to scale intelligent automation.

The current healthcare landscape is defined by a severe operational fracture, where the theoretical promise of advanced technology collides with the physical limits of an exhausted workforce. Leaders are navigating an environment where demographic pressures and compounding chronic diseases have created a demand curve that vastly outstrips available human and financial capital. Consequently, the primary barrier to digital transformation is no longer technological maturity, but rather a profound lack of organizational absorption capacity, leaving front-line professionals trapped in a cycle of reactive crisis management.

Compounding this systemic bottleneck is a volatile macro environment characterized by severe affordability constraints and escalating geopolitical risks. The traditional fee for service financial model is proving unsustainable, forcing a painful transition toward value-based models that tightly align institutional revenue with long-term patient recovery rates, while simultaneously defending against cybersecurity threats that now directly compromise patient safety. To prevent complete operational paralysis, executives need to aggressively resolve these immediate structural disablers, stabilizing their foundational core before attempting to deploy the advanced innovations required for future resilience.

Key findings:

The immediate crisis in workforce and affordability is now a permanent operating condition, not a temporary shock. Providers that fail to stabilize these disablers will be unable to fund the shift to value-based, predictive care explored in Section 2. Cybersecurity and data integrity have become board-level clinical risk issues, not IT issues. The remainder of this report addresses how these pressures reshape the next decade (Section 2) and what internal changes are required (Sections 3-4).

Stabilizing the exhausted workforce and securing legacy vulnerabilities are the essential prerequisites for surviving the current crisis and successfully transitioning into the intelligence era detailed in Section 2.

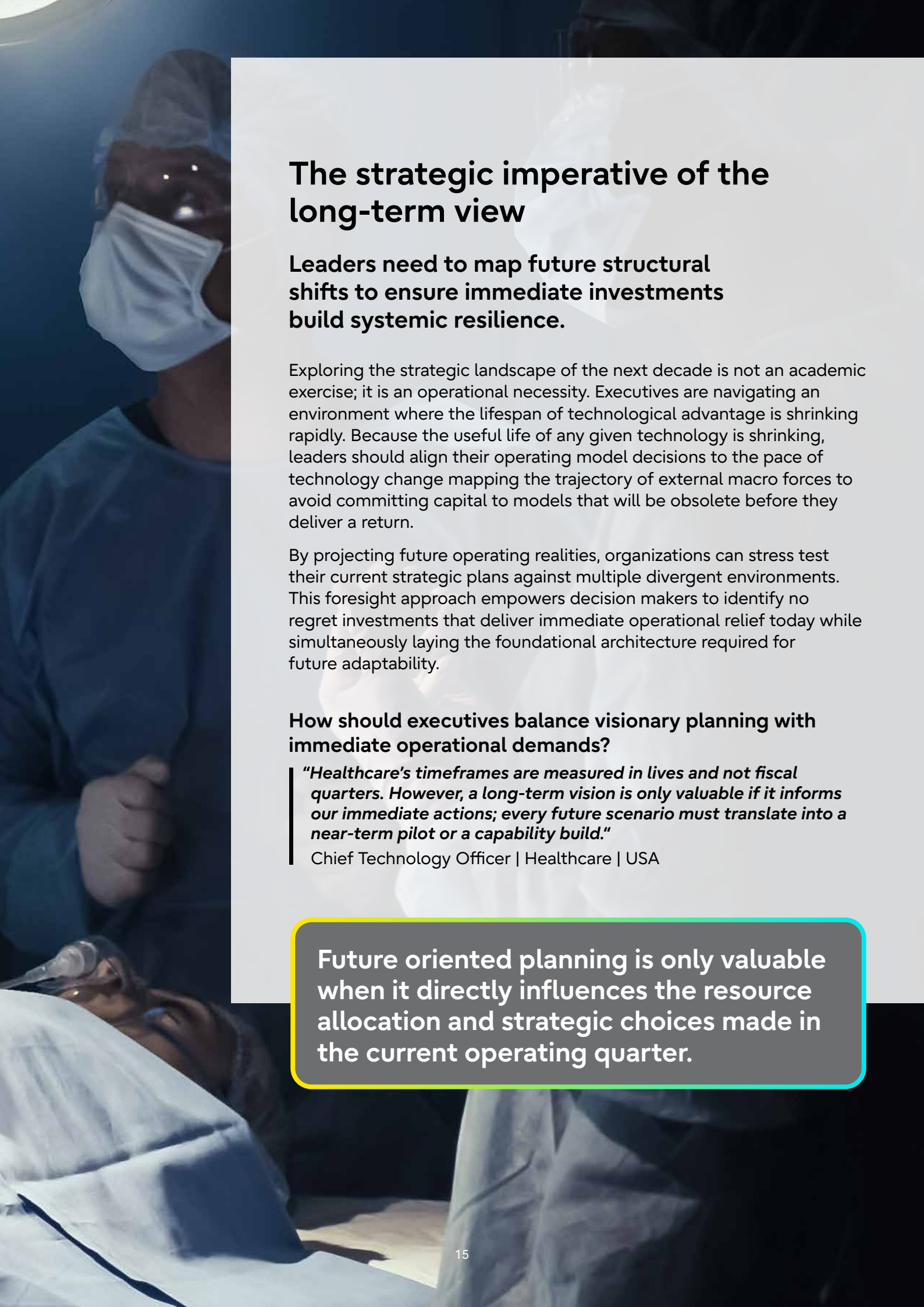
Section

2

The outlook for 2036

Projecting the future structural environments and technological imperatives for healthcare.





The strategic imperative of the long-term view

Leaders need to map future structural shifts to ensure immediate investments build systemic resilience.

Exploring the strategic landscape of the next decade is not an academic exercise; it is an operational necessity. Executives are navigating an environment where the lifespan of technological advantage is shrinking rapidly. Because the useful life of any given technology is shrinking, leaders should align their operating model decisions to the pace of technology change mapping the trajectory of external macro forces to avoid committing capital to models that will be obsolete before they deliver a return.

By projecting future operating realities, organizations can stress test their current strategic plans against multiple divergent environments. This foresight approach empowers decision makers to identify no regret investments that deliver immediate operational relief today while simultaneously laying the foundational architecture required for future adaptability.

How should executives balance visionary planning with immediate operational demands?

"Healthcare's timeframes are measured in lives and not fiscal quarters. However, a long-term vision is only valuable if it informs our immediate actions; every future scenario must translate into a near-term pilot or a capability build."

Chief Technology Officer | Healthcare | USA

Future oriented planning is only valuable when it directly influences the resource allocation and strategic choices made in the current operating quarter.

From market signals to strategic scenarios

Translating complex macro environmental data into actionable future operating environments.

To effectively map the future strategic landscape, over 70 macro trends and numerous weak signals have been filtered through a strict analytical framework. The structural forces that will genuinely reshape the operational reality of the sector have been isolated,, discarding temporary fads to focus on permanent systemic shifts.

These critical forces are then plotted against two primary axes of uncertainty, global collaboration versus national fragmentation, and reactive crisis management versus proactive, value-driven care (detailed in Figure 2) to generate four highly distinct, plausible future environments. This process transitions abstract data into concrete strategic narratives, allowing executives to clearly visualize the commercial realities, technological requirements, and competitive dynamics of each potential future state.

What is the most effective approach when attempting to solve complex, industry wide challenges?

"Trustworthy thought leadership requires the ability to think beyond the obvious, ask different questions to solve wicked problems, and look at the entire system rather than just the symptoms."

Chief Medical Officer | Healthcare | Finland

Strategic foresight requires moving beyond isolated technological trends to analyze the broader systemic shifts transforming the entire care delivery ecosystem.

The structural trends reshaping healthcare

Exponential technologies and changing societal expectations are fundamentally altering the delivery of care.

The trajectory of the industry is being dictated by several dominant structural forces that are entirely immune to short-term interventions. Foremost among these is the rapid integration of artificial intelligence and predictive analytics into clinical workflows. This transition from reactive medicine to proactive wellness intelligence is the use of continuous, AI-driven monitoring to anticipate health decline before symptoms escalate, going beyond one-off predictive analytics is no longer optional, but a foundational requirement to manage the escalating disease burden.

Concurrently, there is a systemic shift towards empowered health consumerism, where patients demand seamless, digitized access to their own medical data. This consumer expectation, coupled with the unstoppable shift towards value-based care reimbursement models tied to patient outcomes rather than volume of services, which several health systems are now piloting through outcome-based payer contracts care, forces healthcare providers to radically overhaul their legacy infrastructure to support continuous, ubiquitous care delivery outside the traditional hospital walls.

What specific role will artificial intelligence play in establishing future operational standards?

"Our primary goals are to increase patient safety and efficiency. After a past tragedy where a missed diagnosis led to a patient's death, a subsequent review with artificial intelligence clearly showed the bleeding. As a result, it is now mandated in the hospital's emergency department that all CAT scans must be run through AI."

Chief Executive Officer | Healthcare | China

Remote monitoring and home-based interventions are already reducing avoidable hospital admissions in early-adopter health systems, demonstrating that care delivered outside hospital walls is both clinically safe and operationally necessary. Organizations need to treat the integration of predictive analytics and decentralized care models as critical survival mechanisms rather than optional upgrades.

This macro-trend impact radar maps critical forces and weak signals across three distinct timelines - 2026 (immediate impact), 2027 (near-term shift), and 2036 (long-term structural reality) - visualizing exactly when these disruptive phenomena are projected to converge and reshape the healthcare industry landscape.

This radar chart shows that AI transformation, empowered health consumerism, and data nationalism are rising fastest, while trends dependent on global cooperation are becoming more volatile, signaling that the four scenarios ahead diverge primarily on geopolitics and resourcing, not on the direction of clinical technology.

Environmental

Political

Legal

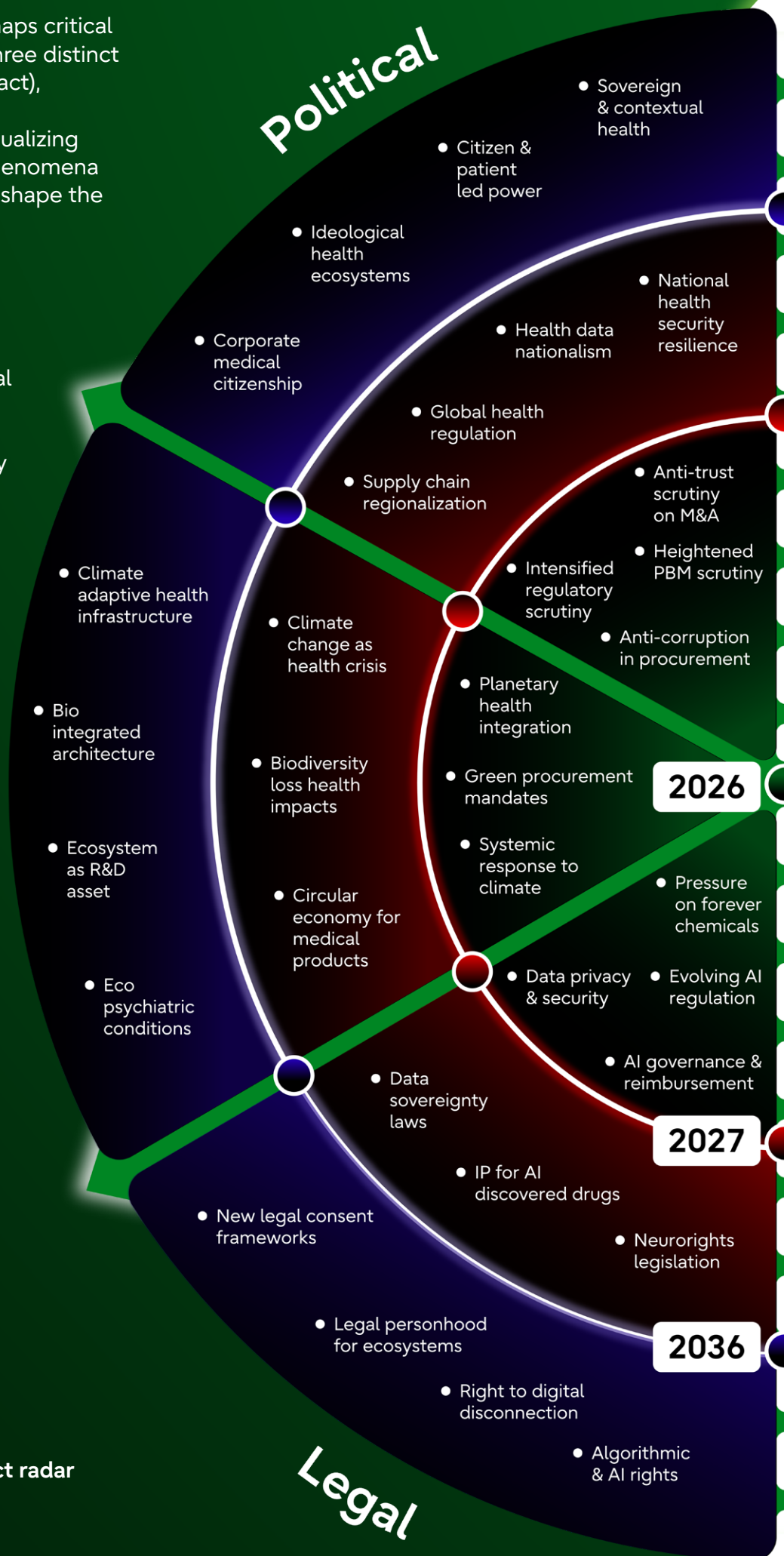
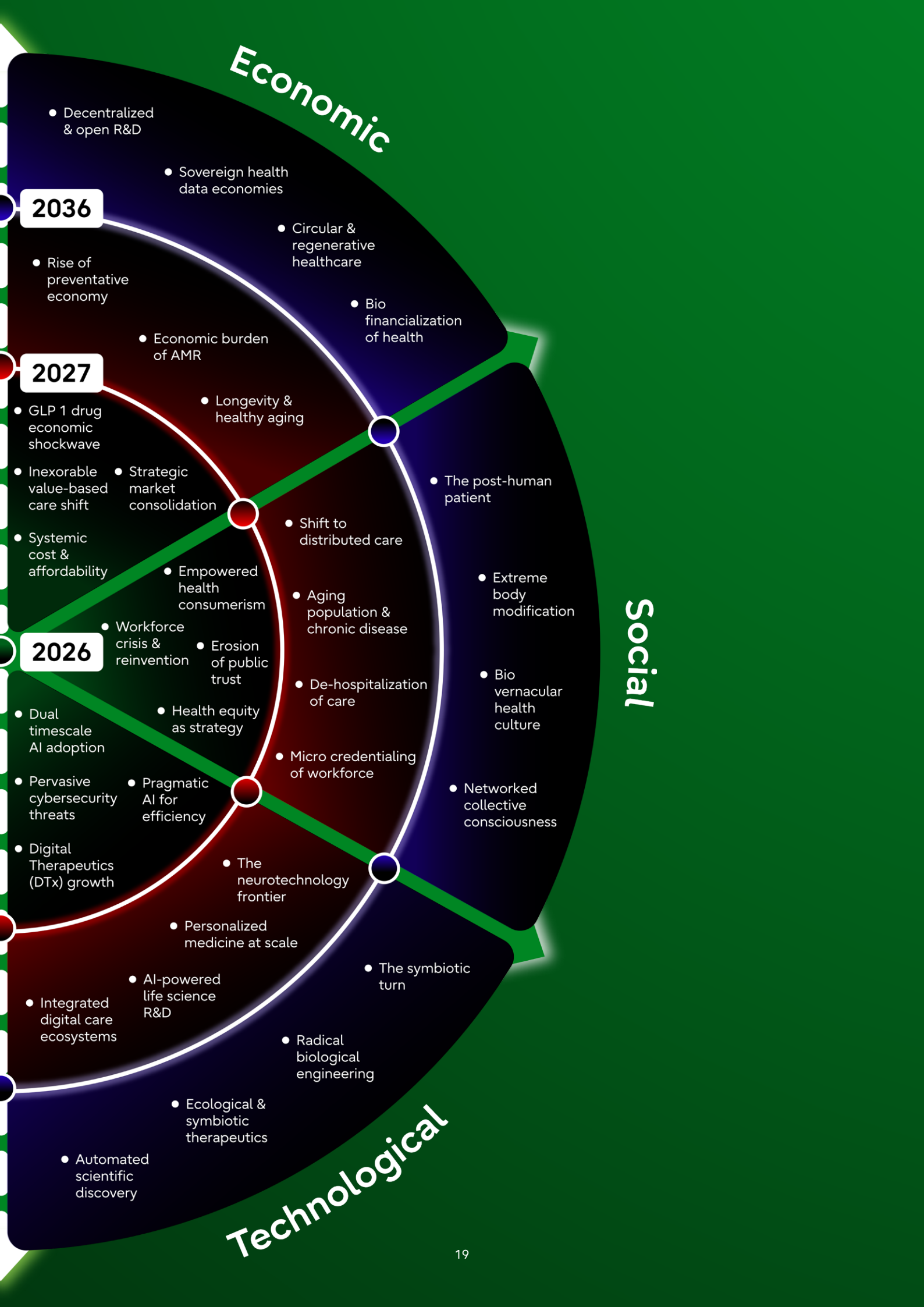


Figure 1: The macro-trend impact radar



Defining the critical axes of uncertainty

The future landscape will be determined by geopolitical collaboration and the availability of systemic resources.

While certain technological trends are inevitable, the ultimate operating environment will be shaped by two highly volatile macro-forces. The first axis of uncertainty maps the spectrum between global collaboration and national fragmentation. This dynamic will determine whether healthcare operates on a unified, cross-border digital ecosystem or fractures into isolated, sovereign data blocs protected by rigid digital borders.

The second axis measures the transition from a reactive, crisis-driven model to a proactive, value-driven architecture. This uncertainty hinges on whether global economies can generate the necessary capital and human resources to successfully transition to preventative wellness, or if systemic resource scarcity will permanently trap providers in a state of operational triage.

How is the value and risk profile of healthcare information evolving in the digital age?

“As healthcare data becomes more valuable than financial records, the risk of a major data breach or a ransomware attack that halts operations is extremely high, which is unacceptable when patient lives are on the line.”
Chief Technology Officer | Healthcare | USA

Leaders should build highly adaptable operating models capable of functioning across varying degrees of global data integration and financial stability.

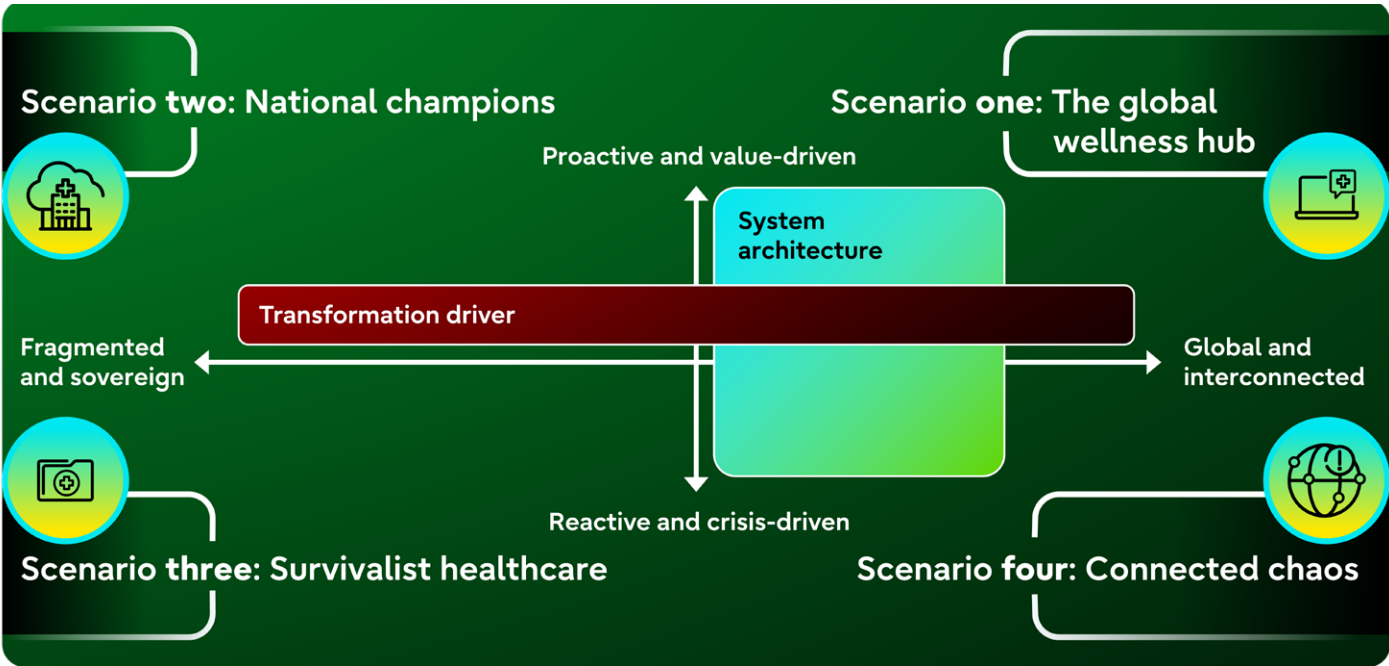


Figure 2: Healthcare strategic scenario matrix

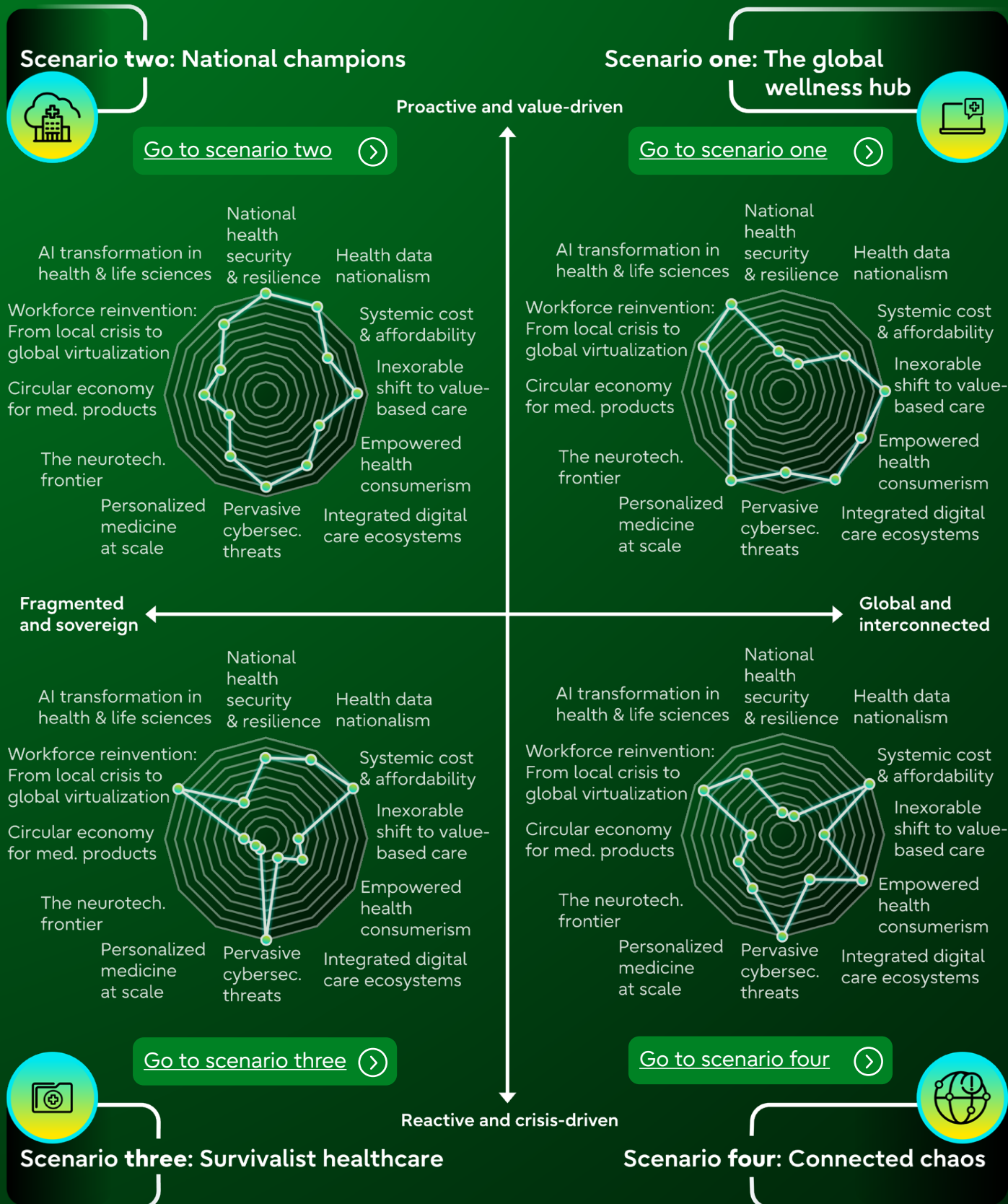


Figure 3: Comparative trend impact analysis

Scenario one: The global wellness web



A highly collaborative, well-resourced future defined by interconnected digital care ecosystems and preventative intelligence.

In this environment, international collaboration and abundant resources have successfully transitioned the industry from sickness management to proactive health optimization. Global data standards enable frictionless interoperability across borders, allowing artificial intelligence to rapidly accelerate genomics and personalized medicine at scale.

Healthcare providers operate within a deeply integrated digital ecosystem where wearable technologies and remote monitoring prevent acute hospital admissions. The health human resources crisis is largely resolved through global workforce virtualization, allowing specialists to deliver care seamlessly across different geographies.

What core ambition should guide the development of a fully integrated, future-state healthcare network?

"To be a provider, partner and an employer of choice by building the greatest healthcare community the world has ever seen."

Chief Technology Officer | Healthcare | USA

Strategic playbook:

- **Focus on:** Deploying highly interoperable cloud architectures that enable secure, cross-border data fluidity.
- **Focus on:** Scaling predictive analytics and wearable integrations to drive preventative, out-of-hospital interventions.
- **Move away from:** Investing in siloed, proprietary data systems that prevent seamless ecosystem integration.
- **Move away from:** Relying solely on physical hospital infrastructure to meet growing patient demand.

Success in the global wellness web requires executives to ruthlessly eliminate internal data silos and embrace open, collaborative health platforms.

What the radar diagram shows:

The emergence of this scenario is signaled by a massive spike in integrated digital care ecosystems and empowered health consumerism. We observe strong upward trajectories in AI transformation and personalized medicine, while national health security concerns and systemic cost crises retreat significantly.

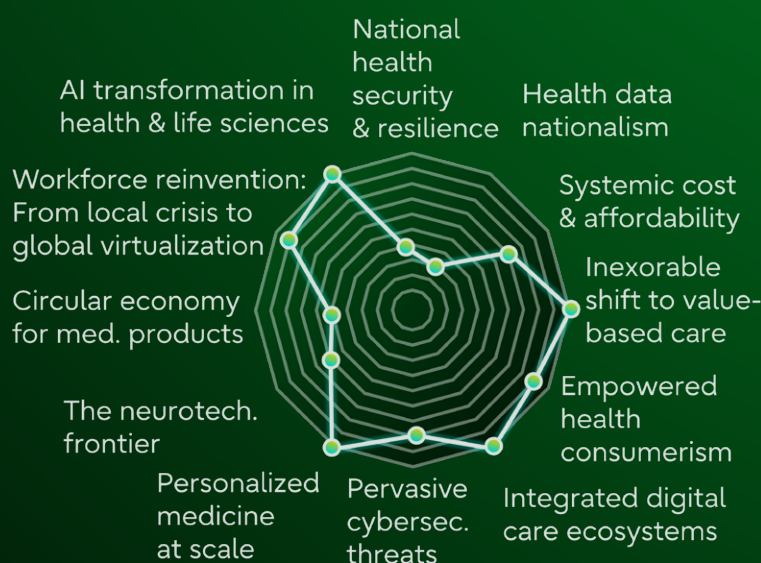


Figure 4: Scenario one

Scenario two: National champions



A fragmented but heavily resourced landscape where sovereign nations build powerful, localized healthcare architectures.

This scenario represents an environment rich in capital but fractured by intense geopolitical protectionism. Nations prioritize absolute health security and resilience, forcefully onshoring the manufacturing of critical medical supplies and establishing strict boundaries around population health data.

While funding for innovation remains high, it is directed entirely inward to build robust national health grids. Healthcare providers are forced to use sovereign cloud infrastructure and locally developed artificial intelligence models, severely restricting the flow of global medical knowledge but ensuring high levels of domestic operational continuity against external shocks.

Leaders operating in this scenario need to hyper-localize their supply chains and strictly adhere to sovereign data protection mandates to maintain market access.

What the radar diagram shows:

The emergence of this scenario is signaled by an overwhelming surge in national health security, health data nationalism, and pervasive cybersecurity threats. Conversely, trends relying on international cooperation, such as global workforce virtualization and integrated digital care ecosystems, collapse as nations retreat behind strict digital borders.

How do regional healthcare providers need to adapt their operational mindset when consolidating into a single national health system, even as international data-sharing remains restricted?

"You have got to give up doing things yourself and do it as part of a bigger connected system on a scale that they probably haven't contemplated."

Chief Cyber Security Officer |
Healthcare | Australia

Strategic playbook:

- **Focus on:** Securing sovereign cloud capabilities to ensure absolute compliance with localized data residency laws.
- **Focus on:** Building highly resilient, regionalized supply chains independent of international trade vulnerabilities.
- **Move away from:** Depending on single-source, international vendors for mission-critical medical hardware or software.
- **Move away from:** Designing digital services that rely on frictionless, cross-border data transfer.

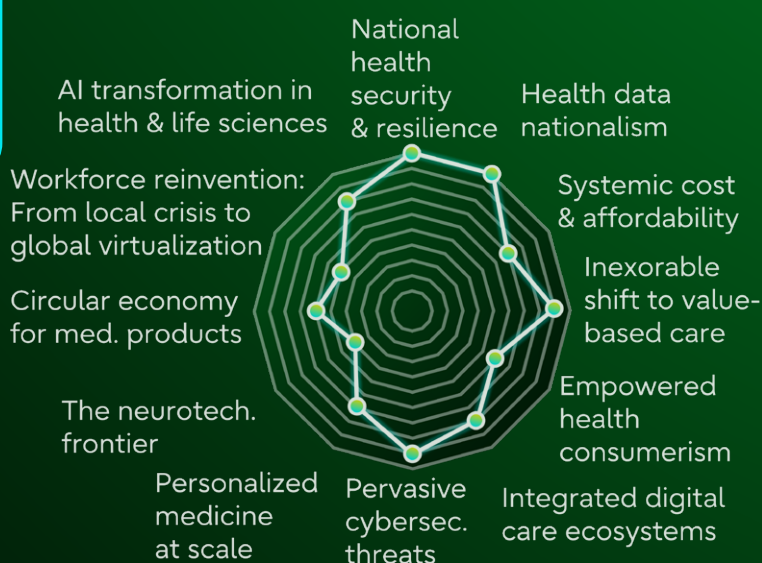


Figure 5: Scenario two

Scenario three: Survivalist healthcare



A reactive, highly fragmented environment defined by severe resource scarcity and defensive protectionism.

This is the most hostile operating environment, characterized by compounding geopolitical friction and an overwhelming affordability crisis. International supply chains are broken, and chronic underinvestment traps the sector in a permanent state of crisis management.

Organizations are forced into a defensive posture, rationing care and prioritizing basic operational survival over advanced digital innovation. The focus shifts entirely to extreme efficiency, attempting to maintain core clinical services amidst rampant cyber threats and a critically exhausted, depleted workforce.

Survival in a fragmented, resource-starved world demands a ruthless focus on core operational efficiency and absolute clinical data protection.

What the radar diagram shows:

The emergence of this scenario is signaled by a dominating spike in the systemic cost crisis and pervasive cybersecurity threats. All indicators for integrated digital ecosystems and personalized medicine fall flat, while reactive, health data nationalism acts as a strong defensive barrier.

What is the most critical strategic lesson to remember when navigating an incredibly hostile and resource-scarce environment?

"If we avoid those disasters then we are halfway success. I would say that that's a good lesson to learn, not to do it."

Chief Executive Officer | Healthcare | China

Strategic playbook:

- **Focus on:** Aggressively optimizing core administrative processes to strip out all non-essential operational costs.
- **Focus on:** Hardening legacy systems against severe cyber threats to protect essential clinical data integrity.
- **Move away from:** Funding experimental or highly complex digital initiatives that do not offer immediate financial return.
- **Move away from:** Expanding physical facility footprints without guaranteed, long-term operational funding.

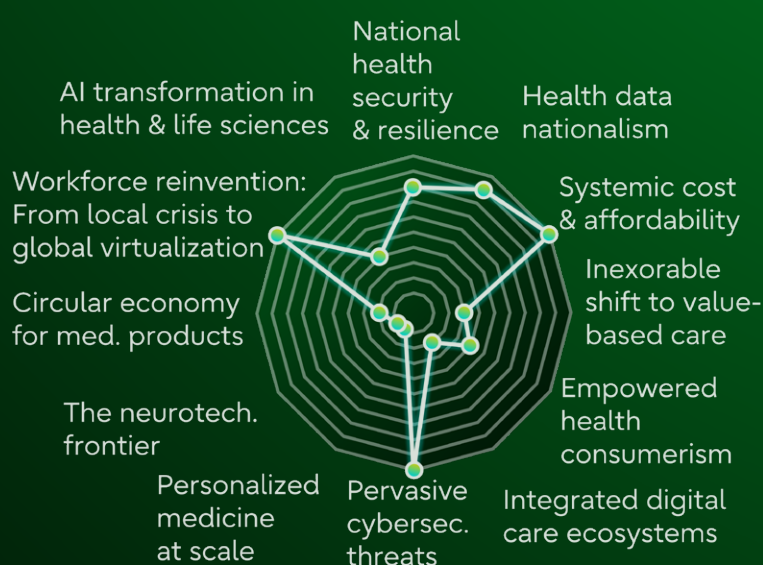


Figure 6: Scenario three

Scenario four: Connected chaos



A highly globalized but severely under-resourced system dominated by massive corporate care conglomerates.

In this future state, digital borders are open, but public funding has collapsed under the weight of demographic pressure. To fill the void, massive multinational corporate entities take over care delivery, creating a highly efficient but deeply inequitable two-tiered system.

While data flows freely across international borders, advanced treatments and predictive wellness are reserved only for those who can afford premium services. Public safety nets are reduced to providing basic, automated triage, forcing healthcare executives to rapidly adapt to a fiercely commercialized and highly consolidated market landscape.

Organizations should consider aggressive corporate partnerships and complete administrative automation to compete against massive, data-driven health conglomerates.

What the radar diagram shows:

The emergence of this scenario is signaled by strong indicators in global virtualization and the inexorable shift to value-based care, driven entirely by corporate efficiency metrics. Pervasive cybersecurity threats remain high due to massive, interconnected networks, while national health security takes a secondary role to corporate scale.

Despite the chaos of systemic change, what core objective should remain the priority for healthcare organizations?

"Our mission as a publicly funded healthcare organization is to first and foremost deliver high quality care to the people that we serve."

Chief Operating Officer | Healthcare | Canada

Strategic playbook:

- **Focus on:** Forming strategic partnerships with large technology and retail conglomerates to maintain market relevance.
- **Focus on:** Automating lower-tier triage and administrative functions to survive in a hyper-competitive, low-margin environment.
- **Move away from:** Relying exclusively on traditional public funding models for long-term capital investments.
- **Move away from:** Maintaining slow, legacy procurement cycles that prevent rapid commercial adaptation.

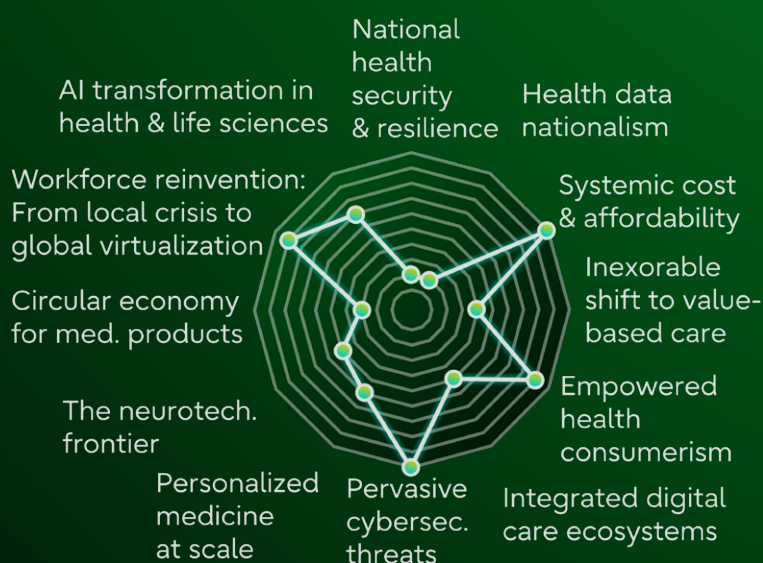


Figure 7: Scenario four

Monitoring the weak signals on the periphery

Tracking early indicators of disruption helps leaders anticipate fundamental shifts before they reach critical mass.

Beyond the dominant macro-trends, executives need to actively monitor weak signals occurring on the periphery of the industry. These are subtle, emerging shifts in technology, regulation, or consumer behavior that have the potential to rapidly accelerate and destabilize current operational assumptions.

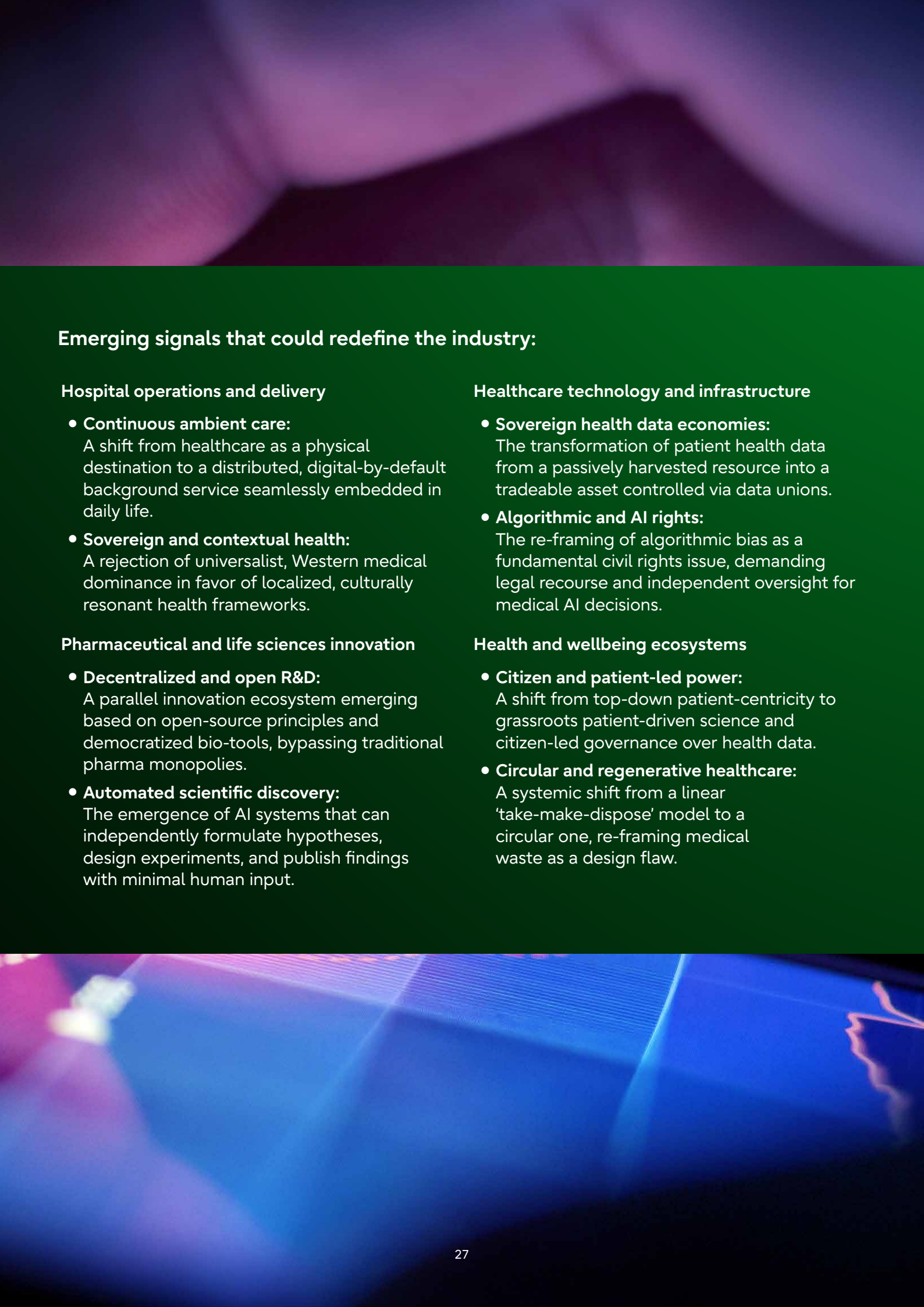
For example, the increasing viability of the neurotechnology frontier or the rapid development of a circular economy for medical products may currently seem distant. However, early detection of these signals allows organizations to build exploratory capabilities, ensuring they are not caught completely off guard when these nascent technologies mature and enter the mainstream clinical workflow.

Where should leaders look to identify the most authentic signals regarding systemic operational failures and emerging needs?

"The problem usually lives in the lower sectors of the organizations, it lives where the patients meet the professional, it doesn't live at the group level."

Chief Medical Officer | Healthcare | Finland

Executives need to establish feedback mechanisms that capture emerging disruptions directly from front-line clinical staff rather than relying solely on top-down strategic reports.



Emerging signals that could redefine the industry:

Hospital operations and delivery

- **Continuous ambient care:**
A shift from healthcare as a physical destination to a distributed, digital-by-default background service seamlessly embedded in daily life.
- **Sovereign and contextual health:**
A rejection of universalist, Western medical dominance in favor of localized, culturally resonant health frameworks.

Pharmaceutical and life sciences innovation

- **Decentralized and open R&D:**
A parallel innovation ecosystem emerging based on open-source principles and democratized bio-tools, bypassing traditional pharma monopolies.
- **Automated scientific discovery:**
The emergence of AI systems that can independently formulate hypotheses, design experiments, and publish findings with minimal human input.

Healthcare technology and infrastructure

- **Sovereign health data economies:**
The transformation of patient health data from a passively harvested resource into a tradeable asset controlled via data unions.
- **Algorithmic and AI rights:**
The re-framing of algorithmic bias as a fundamental civil rights issue, demanding legal recourse and independent oversight for medical AI decisions.

Health and wellbeing ecosystems

- **Citizen and patient-led power:**
A shift from top-down patient-centricity to grassroots patient-driven science and citizen-led governance over health data.
- **Circular and regenerative healthcare:**
A systemic shift from a linear 'take-make-dispose' model to a circular one, re-framing medical waste as a design flaw.

Designing the hybrid healthcare enterprise

Scenarios are unpredictable external realities, demanding a highly adaptable and resilient operational architecture.

It is critical to understand that the four projected scenarios are not strategic options that a management team can simply select. They represent volatile, external macro-environments dictated by forces entirely outside of an organization's control. Therefore, the strategic mandate is not to gamble on a single future, but to design a hybrid enterprise capable of thriving regardless of which reality unfolds.

This requires building a profoundly agile core architecture. Leaders should focus on developing interoperable data platforms, flexible workforce models, and resilient supply networks. By separating the rigid, underlying infrastructure from the agile, patient-facing services, organizations can pivot rapidly in response to sudden geopolitical shocks or sudden technological breakthroughs.

Why is it crucial to study past implementations, even those that failed, when designing resilient future architectures?

"The biggest learning you can get is from what didn't work. We spend too much time working in the system, rather than working on the system to prepare for the future."

Chief Cyber Security Officer | Healthcare | Australia

The ultimate strategic goal is to construct a modular operating model that can rapidly reconfigure itself to survive external disruptions.



Summary:

The foresight mandate

Successfully navigating the next decade requires building agility to withstand unpredictable external macro-forces.

The objective of this section is to project the external structural environments that will dictate the future commercial reality for healthcare providers. The analysis confirms that the sector is transitioning toward a highly data-driven future, but the exact nature of this landscape will be radically altered by the intersection of global geopolitics and the pace of the shift from reactive to proactive care.

Whether the industry evolves into a globally connected wellness web or fractures into survivalist, defensive postures, the technological imperatives remain strictly focused on predictive intelligence and structural resilience. Organizations can no longer rely on rigid, legacy operating models; they are forced to architect highly adaptable frameworks capable of absorbing sudden external shocks.

Key findings:

- The direction of travel toward proactive, predictive care is structurally inevitable; what remains uncertain is the pace and resourcing of that shift, which is precisely what the reactive-to-proactive axis captures.
- Data sovereignty and localized supply chains are becoming critical defensive requirements against global fragmentation.
- The true value of future healthcare lies in the absolute integrity and seamless interoperability of clinical data.
- Leaders need to build hybrid enterprises that can operate across varying degrees of resource scarcity and international cooperation.

Having mapped the external scenarios that will dictate the future, Section 3 will detail the four internal dimensions of transformation required to survive these shifts.

Section

3

Four dimensions of transformation

Navigating the internal battlegrounds required to survive the structural shifts of the next decade.

These four dimensions map directly onto the pressures introduced in Section 2: predictive care responds to the shift toward wellness intelligence, the integrated ecosystem responds to geopolitical fragmentation, resilient operations responds to sovereignty and supply-chain risk, and workforce augmentation responds to the health human resources crisis.

The transformation battlegrounds

Overcoming structural disablers to build a profoundly agile and resilient clinical operating model.

To survive the volatile external scenarios projected over the next decade, healthcare providers are forced to radically overhaul their internal operational architecture. The current crisis has exposed fundamental weaknesses in legacy systems, revealing that organizations are deeply constrained by fragmented data, an exhausted clinical workforce, and highly vulnerable international supply chains. These internal barriers act as severe structural disablers, preventing the rapid adaptation required to meet escalating demographic demand.

The following four dimensions represent the critical internal battlegrounds where this transformation will occur. By systematically dismantling these disablers and deploying advanced technological enablers, leaders can construct a highly modular and resilient enterprise. This internal rewiring is not merely an IT upgrade; it is a fundamental redesign of how clinical value is created, delivered, and protected in an era of perpetual disruption.

Executives need to simultaneously resolve immediate operational blockages while building the digital infrastructure required for long-term systemic agility.

Dimension one: The predictive care response

Shifting from reactive clinical treatment to proactive wellness intelligence to reduce acute systemic load.

Transformation response:

- Healthcare providers are forced to transition their operational focus away from episodic acute care and towards continuous health monitoring. This shift is essential to manage the escalating disease burden before patients require expensive and resource-intensive hospital admissions.

Managing the disablers:

- **Disabler (episodic funding models):** Current financial structures primarily reward reactive treatment rather than preventative intervention.
- **Response:** Leaders are actively negotiating with payers to establish outcome-based contracts (which pay providers for the health results achieved, rather than the volume of services delivered) that share the financial savings generated by keeping patients healthy at home.

Deploying the enablers:

- **Enabler (predictive clinical algorithms):** Integrating artificial intelligence to identify high-risk patients and intervene before critical health deterioration occurs.
- **Enabler (remote patient monitoring):** Utilizing wearable technology to maintain continuous clinical oversight outside the traditional hospital environment.

Organizations should consider redefining their core delivery model to prioritize the prevention of acute events rather than merely optimizing hospital throughput.

What is the primary operational focus when designing care models for an increasingly complex demographic?

"Our core operating statement is to be a provider, partner, and an employer of choice by building the greatest healthcare community the world has ever seen. Preventing avoidable acute events for our chronically ill patients is a central focus for the next decade and beyond, ensuring continuity of care outside the hospital."

Chief Technology Officer | Healthcare | USA

Dimension two: The integrated ecosystem response

Operating as a single connected system to eliminate data fragmentation and resolve structural bottlenecks.

Transformation response:

- To maximize the impact of a severely limited workforce, organizations need to dismantle isolated departments and form highly interoperable regional networks. This ensures that critical patient data flows seamlessly across the entire care continuum, eliminating redundant administrative work.

Managing the disablers:

- **Disabler (legacy data silos):** Decades of piecemeal technology investments have created incompatible systems that actively prevent clinical collaboration.
- **Response:** Executives are deploying unified cloud architectures that force standardization across all regional facilities and external clinical partners.

Deploying the enablers:

- **Enabler (open interoperability standards):** Implementing strict data exchange protocols to ensure immediate and secure sharing of electronic medical records.
- **Enabler (centralized command centers):** Using real-time regional data dashboards to dynamically route patients to facilities with available capacity.

Leaders are forced to abandon proprietary operational silos in favor of open data architectures that enable true regional clinical collaboration.

What is the primary systemic challenge that integrated digital platforms need to solve?

"True systemic integration requires a total shift in architecture. We must move away from guarding individual data silos and design unified platforms where patient records flow securely across institutional boundaries. An ecosystem approach is the only way to deliver continuous, coordinated care."

Chief Medical Officer | Healthcare | Finland

Dimension three: The resilient operations response

Securing supply chains and sovereign data infrastructure against geopolitical friction and severe cyber shocks.

Transformation response:

- The increasing frequency of global disruptions dictates that healthcare providers can no longer rely on highly optimized but fragile international networks. Leaders are forced to completely restructure their procurement and IT strategies to guarantee operational continuity during compounding global crises.

Managing the disablers:

- **Disabler (single-point global vulnerabilities):** Over-reliance on international vendors for critical medical supplies and cloud hosting creates severe operational risk.
- **Response:** Organizations are actively diversifying their vendor base and mandating the use of local manufacturing capabilities for essential clinical hardware.

Deploying the enablers:

- **Enabler (sovereign cloud infrastructure):** Designing localized data storage solutions that ensure absolute compliance with regional security mandates and protect against cross-border data outages.
- **Enabler (circular medical economies):** Establishing local recycling and re-manufacturing processes to reduce dependence on volatile international raw material markets.

Securing operational continuity requires a strategic retreat from global dependency towards highly resilient and localized supply networks.

How should executives approach the high risk of failure when building resilient new operational models?

"There is sometimes more to be learned from unsuccessful strategies, it is where you sometimes gain your greatest insight."

Chief Operating Officer | Healthcare | Canada

Dimension four: The workforce augmentation response

Deploying intelligent automation to close the capacity gap while transitioning to sustainable financial models.

Transformation response:

- To prevent total systemic failure, leaders need to fundamentally alter how clinical work is performed. This involves deploying advanced automation specifically to remove administrative burdens, thereby protecting the finite cognitive capacity of medical professionals.

Managing the disablers:

- **Disabler (change fatigue and burnout):** Exhausted front-line staff actively resist new digital implementations, viewing them as additional work rather than efficiency tools.
- **Response:** Executives are strictly prioritizing technologies that offer immediate, quantifiable reductions in daily administrative routines before introducing complex clinical innovations.

Deploying the enablers:

- **Enabler (generative administrative algorithms):** Implementing ambient listening and automated transcription tools to instantly generate clinical documentation during patient consultations.
- **Enabler (virtual nursing platforms):** Using remote specialists to handle routine monitoring and discharge planning, allowing physical staff to focus entirely on acute patient needs.

Digital transformation will only succeed if new tools are explicitly designed to reduce the daily cognitive load of the profoundly exhausted clinical workforce.

How would you describe the practical reality of integrating advanced technology into the clinical workflow?

"It is definitely characterized as a steady evolution rather than sharp disruptions because everything needs to be done in practice; talking about it is not enough, and the doing slows it down."

Chief Medical Officer | Healthcare | Finland

Summary:

The partner for the hybrid journey

Successfully executing internal transformation requires strategic alignment with an ecosystem of capable technology partners.

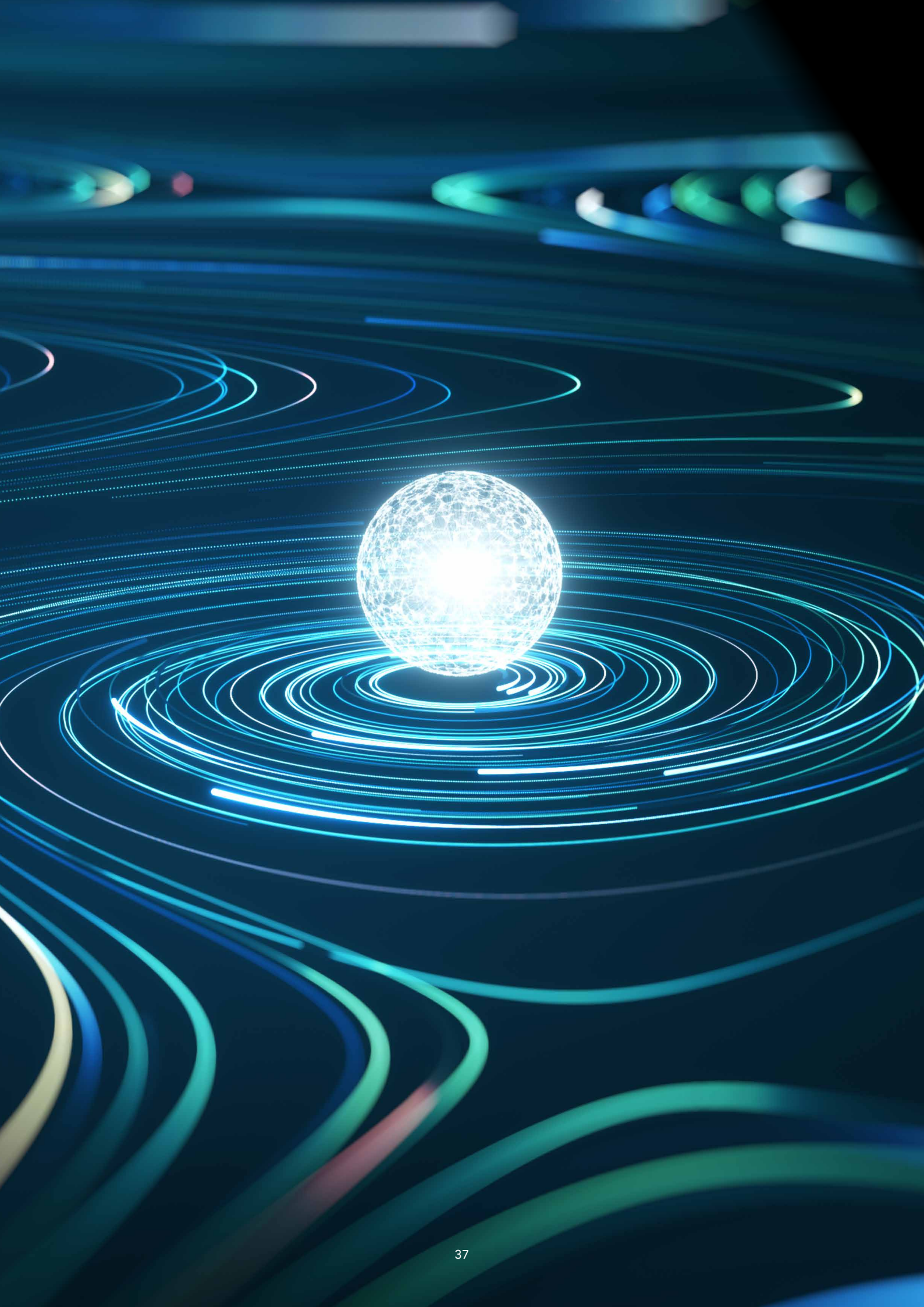
The objective of this section is to detail the four internal dimensions of transformation required to survive the external scenarios projected in the previous section. Navigating these critical battlegrounds is an exceptionally complex undertaking that healthcare providers cannot achieve in isolation. The shift towards predictive care, interoperable networks, resilient operations, and an augmented workforce requires a fundamental rewiring of legacy architecture.

To execute this profound internal shift, organizations need to form deep, strategic relationships with technology partners who understand the unique regulatory and clinical constraints of the sector. Leaders should seek partners capable of delivering secure, sovereign cloud solutions and actionable artificial intelligence that directly alleviates the severe human resource crisis without compromising patient safety or data integrity.

Key findings:

- Transitioning to predictive wellness requires overhauling episodic funding models or reimbursement structures that pay per treatment event rather than for sustained patient health outcomes
- True clinical interoperability demands the dismantling of legacy data silos and the adoption of open standards.
- Operational resilience dictates a shift toward sovereign cloud infrastructure and local supply chains.
- Workforce augmentation requires deploying automation strictly to reduce front-line administrative burnout.

Having defined the necessary internal structural shifts, Section 4 will provide the final strategic imperatives and the common denominator action plan required to initiate this transformation.



Transformation imperatives

Executing the critical strategic actions required to transition from operational survival to systemic supremacy.



Strategic recommendations

Transitioning from reactive survival to proactive systemic supremacy requires decisive and immediate executive action.

Leaders face a critical juncture: although resource constraints make transformation difficult, delaying it further will make the financial and operational costs of inaction even greater. The compounding pressures of demographic shifts and severe resource constraints dictate that organizations need to begin a phased move away from outdated, siloed operating models, recognizing that full transition will be constrained by available capital. To build genuine resilience, executives should consider prioritizing investments that directly alleviate front-line administrative burdens while simultaneously architecting the secure, interoperable data foundations required for future agility, the concrete first step in the action plan detailed below.

This transition demands a fundamental shift in executive mindset. Rather than viewing technology as a mere IT expenditure, leadership needs to position predictive analytics and secure digital platforms as the core engines of clinical delivery. By ruthlessly focusing on scalable, secure, and regionally integrated solutions, healthcare providers can stabilize their current workforce crisis and lay the groundwork for a highly adaptable hybrid enterprise.

How should organizations define their strategic ambition for the coming decade?

"The vision is to be a leader within the area that we operate in a number of key clinical areas and a leader in growth and innovation over the next 10 years."

Chief Operating Officer | Healthcare | Canada

Strategic execution needs to explicitly link immediate technological investments to long-term clinical outcomes and systemic resilience.



The common denominator action plan

A unified strategic playbook to build robust operational resilience for any future external scenario.

While the exact nature of the future operating environment remains highly volatile, specific strategic actions offer a guaranteed return on investment across all projected scenarios. These common denominator actions serve as the foundational building blocks for the hybrid enterprise, ensuring that healthcare providers can withstand sudden geopolitical shocks and rapidly scale digital innovations regardless of external resource constraints.

By executing these non-negotiable mandates, leaders can effectively manage the compounding daily disruptions while simultaneously funding their systemic transformation. The focus needs to remain strictly on securing data integrity, integrating isolated platforms, and fundamentally redesigning the clinical workflow to support an exhausted workforce.

This action plan converts the strategic analysis in Sections 1-3 into a prioritized, funded roadmap for the next 12-24 months.

What is essential to ensure that broad strategic visions translate into actual operational improvement?

"While there is a lot of work to be done in the big picture, the organization is moving in the right direction, though it requires concrete steps and actions to fully achieve this."

Chief Medical Officer |
Healthcare | Finland

Strategic playbook:

- **Focus on:** Integrating predictive artificial intelligence strictly to automate administrative routines and alleviate severe workforce burnout.
- **Focus on:** Establishing sovereign cloud architectures and highly localized supply chains to guarantee operational continuity against global disruptions.
- **Move away from:** Approving digital initiatives that fail to demonstrate an immediate and quantifiable reduction in daily clinical friction.
- **Move away from:** Relying on isolated, proprietary data networks that prevent seamless regional interoperability. Note: the appropriate degree of cross-border collaboration depends on the prevailing scenario, see Scenario Two (National Champions) for a sovereignty-first variant of this action."



How Fujitsu can help: Enabling the hybrid enterprise

Positioning Fujitsu Uvance as the critical strategic partner for comprehensive digital and operational transformation.

Successfully navigating the transition from a rigid legacy provider to an agile, data-driven hybrid enterprise requires a partner capable of executing complex systemic change. Fujitsu Uvance provides the comprehensive consulting expertise and advanced technological architecture required to stabilize immediate operational crises while simultaneously building long-term digital resilience.

By offering bespoke, secure cloud infrastructures and deploying practical artificial intelligence solutions, Fujitsu empowers healthcare leaders to seamlessly connect their isolated data silos. This partnership approach ensures that technology acts as a direct capability multiplier, enabling organizations to protect patient safety, optimize their severely constrained workforce, and confidently transition towards sustainable, value-based care models.

What defines an organization that is properly equipped to navigate future industry disruptions?

"We have the right people and culture, are committed to our sustainability and social responsibility initiatives, and are a leader in the US in terms of digital transformation and innovations."

Chief Technology Officer | Healthcare | USA

Fujitsu provides the holistic operational insight and secure technological ecosystem necessary to guide healthcare leaders through their most complex systemic challenges.



Fujitsu Technology and Service Vision (FT&SV)

The evolving story of Fujitsu insights into the future, updated annually and covering the Fujitsu approach to the main issues raised in the CxO survey.

global.fujitsu/en-global/about/vision



Profile of respondents:

The insights in this report are drawn from a diverse group of C-Level executives representing the full spectrum of the global healthcare ecosystem. From the massive scale of Hong Kong's public authority to specialized private care in the US, and public health services in Finland, Canada, and Australia, these leaders manage billions in revenue and tens of thousands of employees. Their collective voice represents a balanced view of the challenges and opportunities facing the sector.

Demographics of C-suite participants:

- **Canada:** Chief Operating Officer | Hospital / Health Network | \$1B - <\$5B Rev
- **Finland:** Chief Medical Officer | Public Sector Health | \$500M - <\$1B Rev
- **China (Hong Kong):** Chief Executive Officer | Hospital Authority | >\$20B Rev
- **USA:** Chief Technology Officer | Specialty Care / Dialysis | \$10B - <\$20B Rev
- **Australia:** Chief Cyber Security Officer | Public Health Service | \$1B - <\$5B Rev

This research was conducted on behalf of Fujitsu by The Business Advantage Group Limited.



www.Business-Advantage.com

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