



# KPMG Global tech report 2026: Healthcare





# Foreword

Healthcare stands at a pivotal moment. Despite complexity, constrained budgets and workforce pressures, technology and AI now offer a clear opportunity to reshape delivery of care, improve outcomes and build more resilient, future-ready health systems.

This year's Healthcare Global Technology Report, based on interviews with 128 senior healthcare executives globally, shows that organizations now sit in one of three technology modes. Some are working to stabilize, fixing core platforms and improving data integrity. Others are focused on synchronizing, connecting systems, standardizing processes and aligning governance. A growing number are beginning to scale, embedding AI across workflows to improve productivity, experience and care models at enterprise level.

Most organizations are investing cautiously but consistently. Core systems such as EHRs and cloud-based back-office platforms continue to be implemented and optimized, providing the foundations needed for automation and AI. Productivity gains enabled by solutions are starting to move from promise to practice.

As these foundations mature, attention is shifting to what matters most: the patient experience. A simple, connected digital front door, supported by automation and AI, enables more personalized, predictive care and better experiences for patients and staff alike.

At the same time, rising cyber risk makes resilience essential. Strong cybersecurity and regularly refreshed business continuity planning are now critical to ensuring care can continue, even when systems fail.

While most digital value today still comes from getting the basics right, momentum is building. Organizations that successfully stabilize, synchronize and then scale can be best placed to accelerate change and unlock significantly greater benefits in the years ahead.



## Beccy Fenton

Global Head of Healthcare,  
KPMG International,  
Partner, Head of Infrastructure,  
Government and Healthcare,  
KPMG in the UK



# Key Findings

## Significant technology investment.

Healthcare organizations are investing significantly in digital technologies, with **40%** committing

**\$50-100 million** a year.

ROI is also on the low side:

**30%** exceed their investment, **57%** at breakeven

## AI is beginning to scale.

**66%** are actively deploying, up from **32%** a year ago

**76%** expect to be deploying AI at scale in the next months — the highest proportion of any sector surveyed

**86%** are embedding AI into workflows, services and value streams

## Cybersecurity, unreliable data and regulatory/compliance risks

are seen as the biggest barriers to AI

## Cautious and steady approaches.

The majority of healthcare organizations are

**fast followers (55%),**

while only 35 percent are early adopters **90 percent** take a long-term investment approach

Data is recognized as key — with predictive capabilities such as

## data-powered forecasting

the top priority, although **data security** is close behind

The most significant challenge cited by **42 percent** of respondents, is weak governance and limited expertise, which leads to fragmented decision-making and slow execution. For healthcare organizations, this results in difficulty aligning resources and priorities.

# 29%

of respondents plan to hire more onshore technology talent, signaling a shift toward localizing critical skills to reduce offshore dependency and mitigate geopolitical risk.

## Future on the horizon.

Healthcare engagement is shifting from digital touchpoints to

**integrated, predictive care systems Remote monitoring, patient peer networks, digital twins and robotic surgery**

are all predicted to rise.



# Healthcare under pressure — but poised for accelerated change

Healthcare services around the world are coming under increasing pressure as lengthening life expectancies and aging populations drive patient demand ever higher. At the same time, funding increases may not keep pace while workforce challenges are also acute through a combination of skills shortages and restrictions in some countries on migrant talent.

The volatility of the external environment is keenly felt by healthcare executives, with 58 percent saying that they are often or frequently impacted by market, regulatory and/or technology shifts. Regulation is a key barrier to technology transformation for many, given the complexities of data privacy rules, data sovereignty issues and the still-emerging regimes around the regulation of AI.

These factors may help explain why the majority posture in healthcare is to be a ‘fast follower’ of new technology (55 percent) rather than an early adopter (35 percent) — one of the lowest early adopter percentages among any of the sectors surveyed. Nine in ten (90 percent) executives also say they take a long-term rather than reactive investment approach.

However, nine in ten agree that tech leadership roles are evolving at an accelerating rate and 78 percent are confident in their ability to navigate this change. With growing numbers of healthcare services and providers having modernized their foundational systems, the opportunity is upon them to drive more radical progress. What once felt aspirational in healthcare — predictive care, intelligent operations, truly connected patient experiences — is now technically achievable; the differentiator is leadership intent and execution discipline.

With the Intelligence Age of agentic AI now upon us, healthcare has arguably reached an inflection point, as Beccy Fenton, Global Head of Healthcare, KPMG International, reflects:

“

**Many healthcare organizations are focusing on steady, incremental improvements to their technology. But while other sectors are modernizing at speed, this approach risks leaving healthcare behind. What’s needed now is controlled acceleration: align data, governance and operating models so digital investment translates into real clinical and financial benefits. Technology belongs at the heart of care — the question is how quickly we can build trust, scale it safely and govern it well to improve equity, access and outcomes. This is the opportunity in front of healthcare leaders today.”**

**Beccy Fenton**  
**Global Head of Healthcare**  
**KPMG International**



# Investment rising fast — but value realization remains a challenge

This year's data shows that the bulk of healthcare organizations are making substantial investments in technology — 40 percent of respondents spending between \$50–100 million per annum.

Nevertheless, given the financial constraints that most healthcare systems globally are operating under, this level of financial commitment shows players are serious about modernizing and upgrading their technology systems and capabilities. And, as Jonathan Di Michiel, Partner, Digital Health Practice, KPMG Australia observes, the quantum of spend is increasing fast:

“

**Although technology in healthcare is coming from behind relative to other sectors, we are seeing many organizations making up ground rapidly through the sheer scale of the funds they are committing,”** he says. **“In Australia, investment is growing in the order of 25 percent a year. In other countries there is a similar pattern. These are remarkable uplifts.”**

**Jonathan Di Michiel**  
Partner, Digital Health Practice  
KPMG Australia

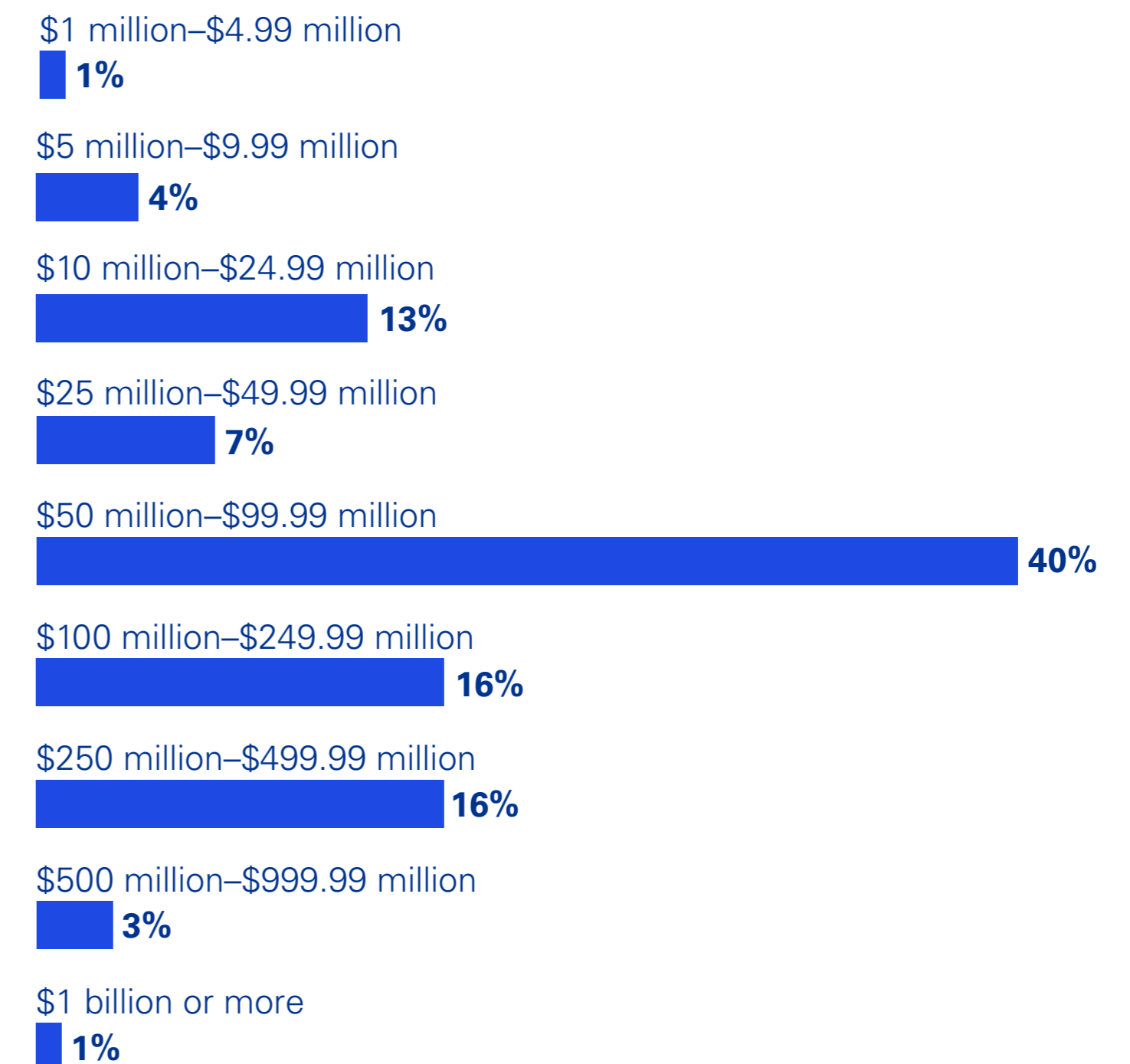
Much of this investment remains focused on foundational platforms such as electronic health records (EHRs), ERP and cloud. The survey finds that healthcare leaders believe this is where the value of tech modernization lies — with foundational platforms delivering half of digital value.

Examples of this include in the UK, where the NHS in England has been implementing EHRs. KPMG UK is supporting this through Tiger Teams approach which is providing time bound specialist support targeting organizations across the EHR lifecycle. Meanwhile in the US, KPMG US supported AdventHealth with back-office transformation. AdventHealth implemented their new cloud-based ERP system, using Workday, successfully transitioning several legacy back-office systems into one connected system, significantly improving reporting and end user experiences.

However, AI and intelligent technologies are also proving impactful, with 45 percent of executives reporting that these are making a significant financial contribution (31–40 percent of the total value gained).

The level of spend is an important dimension — but more crucially still, what ROI is being achieved? Here, the data suggests that healthcare organizations could be doing better: the majority (57 percent) report ROI of 91–100%, meaning less than breakeven. On the positive side, however, most are achieving breakeven after around 12 months, and 30 percent are exceeding their initial investment.

## Typical annual investment in digital technologies





# Overcoming the obstacles through a whole system approach

For Jonathan Di Michiel, the barriers to achieving greater ROI are twofold: legacy systems, and the need for a system-wide operating model approach.

“

He says: **Public healthcare operators run large and complex systems with high levels of legacy tech. This creates challenges because to really take advantage of new technologies, you need interoperability and connectedness between systems. Breaking down the divisions caused by legacy tech is therefore the first obstacle. Secondly, we often see that modernization takes the form of a lot of small POCs — many of these produce amazing results, but it’s hard to scale them up to apply across whole systems. A more coordinated approach is needed. Modernize your core platforms and connect them through the data layer so that you’re AI-ready. ROI will likely leap markedly when upgrades are focused on whole of system change.”**

**Jonathan Di Michiel**  
Partner, Digital Health Practice,  
KPMG Australia

This means that it’s key to stand back from tech modernization and create a vision and roadmap for the technology system, articulated in the target operating model (TOM) for the desired state. The foundations for a modern platform architecture can then be created — after which experimentation and new AI-led solutions and tools can be overlaid.

Technology is still too often deployed as an extension of existing structures, rather than as a catalyst for fundamental change. Healthcare organizations have invested in digital capabilities, but many have not yet reshaped their data foundations, operating models, governance, or workforce practices to unlock full value at scale.

In KPMG’s view, healthcare leaders now face a clear choice: to continue incremental transformation that delivers localized gains, or to make deliberate, enterprise-level shifts that allow technology to reshape care delivery, workforce models, and system sustainability in a measurable and lasting way. Deriving a TOM fit for the digital and AI-enabled future is a key step to achieving this.

Healthcare organizations have invested in digital capabilities but many have not yet reshaped their data foundations, operating models, governance, or workforce practices to unlock full value at scale.



# The search for the optimal technology operating model

With the maturity of core technology platforms advancing, healthcare organizations have the foundations needed to push digital transformation further, faster.

But who should lead the effort — and to what extent should this be controlled from the center versus being more dispersed through a federated model? Our research finds that there is an almost even split between centralized and federated approaches across different aspects of technology decision-making and processes:

Federated governance provides a blended approach by maintaining central oversight within the IT function while allowing decentralized execution across functions or business units. Centralized governance puts much more control directly in the hands of the CIO and IT team.

This is an area where there is no single ‘right’ answer, as Jaz Dhaliwal, Global Digital Healthcare Lead, KPMG International and Partner, KPMG in the UK comments: *“In practice, successful organizations adopt a combination of both approaches. A degree of local autonomy and ownership is necessary to enable effective delivery; however, the critical factor is achieving the right balance. Excessive autonomy can*

*result in fragmented initiatives that generate activity, but fail to realize the intended benefits or productivity improvements. By contrast, whole-system transformation typically requires greater centralization to drive standardization, repeatability, and scalable change.”*

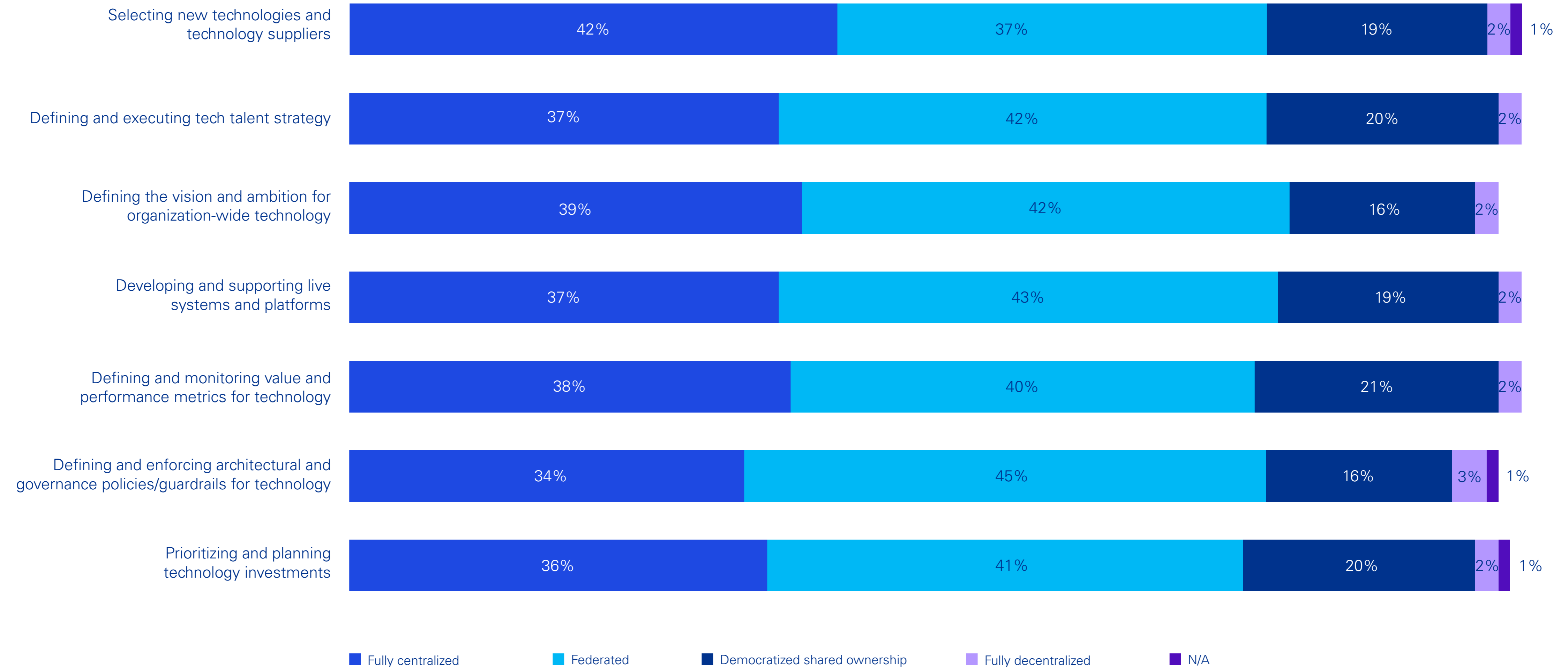
In line with the ‘fast follower’ pattern, most survey respondents (44 percent) say that they prefer to wait for proven technology before adopting, while a third (33 percent) will selectively adopt and only 23 percent are willing to embrace disruptive technologies at scale.

It’s another reflection of a cautious approach that could slow some healthcare organizations down. *“In today’s cost-constrained environment, CIOs and technology leaders are under increasing pressure to demonstrate measurable business value from every technology investment before securing additional funding or scaling transformation initiatives. While this often drives a cautious, ‘wait-and-see’ approach to disruptive technologies, organizations that foster a disciplined ‘fail fast’ culture are typically better positioned to accelerate innovation, reduce long-term risk, and realize value more quickly than their competitors.”* Jaz Dhaliwal, Global Digital Healthcare Lead, KPMG International and Partner, KPMG in the UK.

**Forty-four percent say that they prefer to wait for proven technology before adopting, while a third (33 percent) will selectively adopt and only 23 percent are willing to embrace disruptive technologies at scale.**



## Structure of technology decision-making responsibilities





# AI moving from experimentation to enterprise scale

This year's research uncovers huge growth in AI activity — 66 percent of executives say they are actively deploying AI use cases, up from 32 percent the year before. Over three-quarters (76 percent) expect to be deploying AI at scale in the next 12 months, the highest percentage of any sector surveyed. Nearly nine in ten (86 percent) are embedding AI into workflows, services and value streams.

This bold AI ambition is perhaps fuelled by the sheer breadth of potential applications of AI across healthcare functions and pathways. The easiest and lowest risk use cases are in patient administration or back-office areas where AI can automate manual work. Areas such as HR, finance and procurement are ripe for efficiency gains.

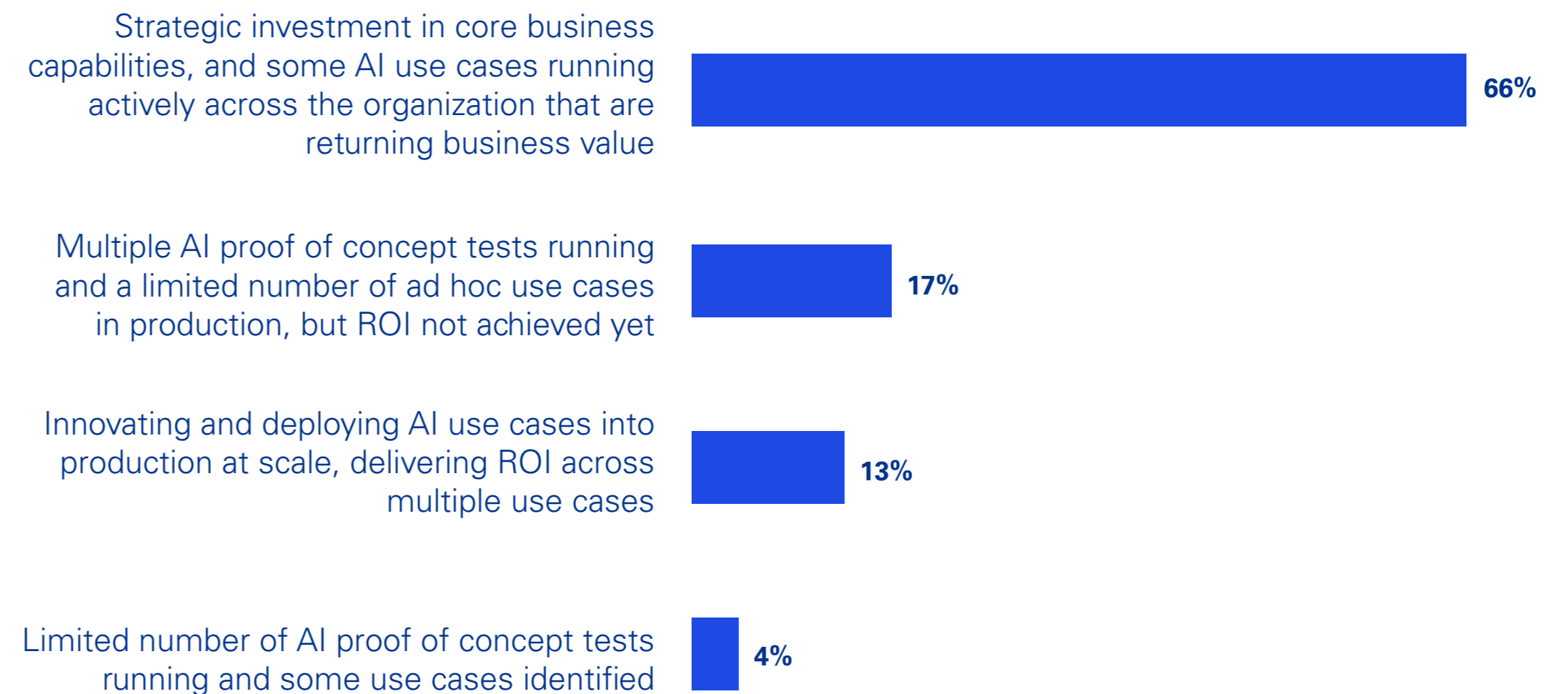
Chris Gibbons, Digital Health Solutions and AI Lead, Partner, KPMG in the UK gives the example of the onboarding of staff in the NHS in England:

“

**Onboarding staff can be a complex and time-consuming process, but with AI this could be massively improved. The current average length of time to onboard staff from point of offer can be up to 64 days, due to a combination of pre-employment checks, repetitive mandatory learning and other administrative tasks. There are huge gains that could be realized through greater AI-enabled automation; getting staff in front of patients more quickly whilst improving the experience for the workforce.”**

**Chris Gibbons**  
Partner, Digital Health Solutions and AI Lead  
KPMG in the UK

## Current level of AI adoption within the organization





But while the benefits on offer are significant across the back office, the potential is perhaps even more exciting at the front end of patient care. With increasing demand coming into health services that are already capacity-constrained, finding ways to leverage AI for better and faster patient outcomes has become mission-critical.

This stretches right from initial diagnostics through to the treatment table and post-operative recovery and care. AI can be embedded into telephone and online services to enable patients to better assess their own symptoms so that they can then be directed to the right care at the right time, rather than clogging up first points of contact such as urgent and emergency care departments. With elective care, where there are often sizeable waiting lists, AI can be implemented to prioritize lists with more dynamic scheduling as well as providing nudges to patients to manage their symptoms while they wait. Pre-operative assessments, which are usually conducted by nurses or other qualified clinical staff, could be conducted remotely through AI-enabled technology — freeing up staff time to care for other patients.

We have seen an example of this in KPMG Netherlands, where Zuyderland Medical Center moved from fragmented AI pilots to a clear, organization-wide data and AI strategy, building staff engagement, strengthening data foundations, and creating the conditions to scale AI into everyday clinical and operational practice.

With so many possible applications, Chris echoes Jonathan Di Michiel's observation earlier that a defined vision, strategy and then operating model is essential to bring activity together and ensure it becomes a coherent whole.

“

**Start with your bold ambition, then define your operating model, Understand how you will build maturity over time and, from that, which use cases you can most effectively deploy today. Fundamental elements of an AI strategy are your operating model, your governance model (regulatory, safety and accountability frameworks), and your data model as AI can't succeed without mature data practices and quality.”**

**Chris Gibbons**  
**Partner, Digital Health Solutions and AI Lead**  
**KPMG in the UK**

In summary, the constraint on AI in healthcare is no longer algorithms, but the lack of operating models designed to deploy, govern, and sustain AI at scale. AI will deliver meaningful impact only where it is embedded across workflows and governed with intent — not where it remains confined to pilots or isolated use cases.

But while the benefits on offer are significant across the back office, the potential is perhaps even more exciting at the front end of patient care.



# Surmounting the barriers

---

Access to data is often a key barrier, especially given the disconnected legacy systems that still abound across healthcare organizations. This includes worries concerning unreliable data or hallucinations by the AI — the second most widely cited concern in our survey, behind cybersecurity fears. Here, Chris makes the recommendation that healthcare organizations should not only look to use AI platforms from the big providers but also smaller, more ‘vertical’ platforms developed by niche AI solution providers focused on specific high-value use cases (diagnostics, triage, etc). This makes it easier to ensure that AI stays contained to the purpose it was meant to fulfil.

Regulation and compliance features as another prominent barrier in executives’ minds. Adhering to data sovereignty rules — a major preoccupation in the Europe and the Middle East, for example — adds complexity. And although the market is full of AI solution providers, the license requirements to supply to healthcare can be a deterrent.

Another obstacle is the difficulty of tracking AI performance, with 69 percent of executives agreeing that traditional KPIs are not sufficient. This is likely because conventional KPIs tend to be binary and linear — but outcomes from AI can be more distributed, showing up in different places at different times.

“

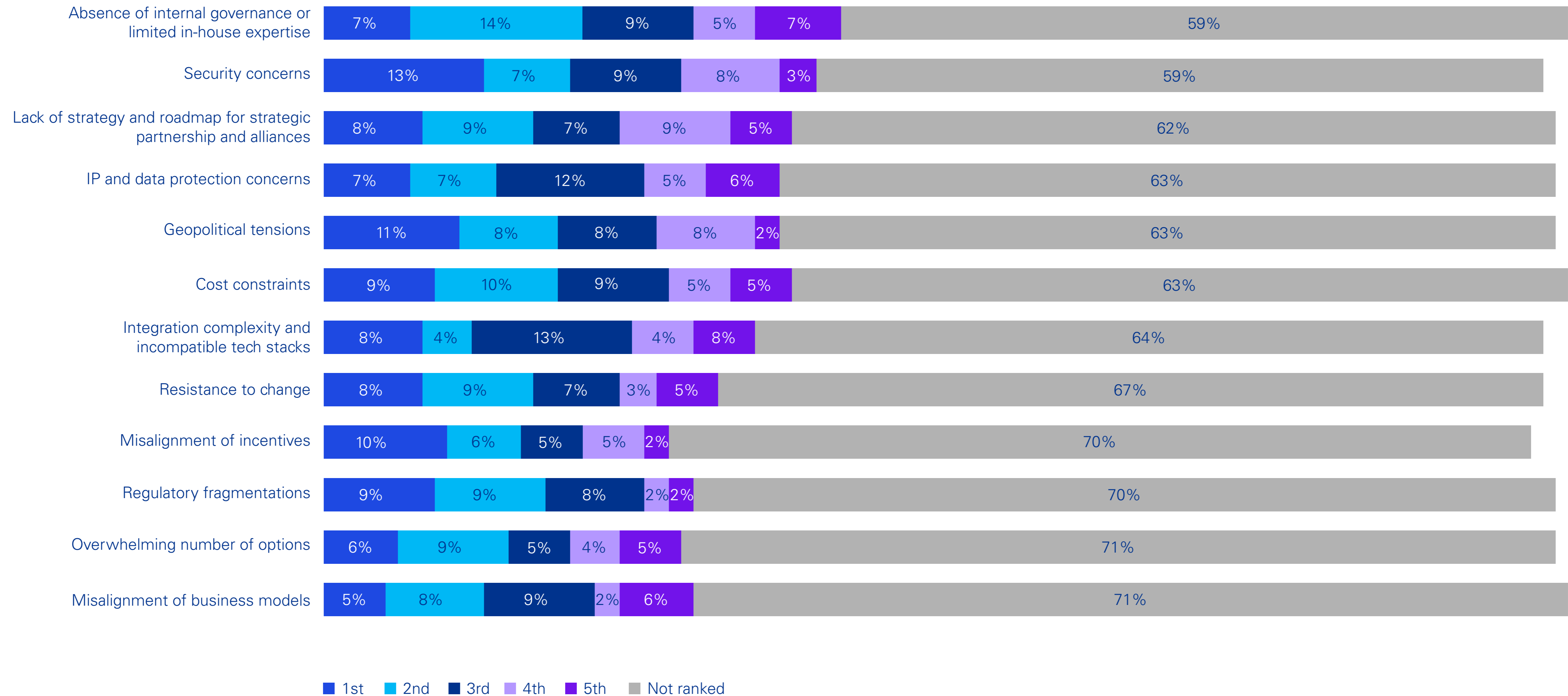
**Different countries have different regulatory requirements. We have seen examples of tech companies with healthcare-oriented AI solutions turning away from markets like the UK and EU due to the high regulatory bar.”**

**Beccy Fenton**  
**Global Head of Healthcare**  
**KPMG International**

---



## Barriers to collaboration on emerging tech





# From data silos to predictive insight

As we have observed, data management is a critical factor in achieving value through technology. While enterprise data management overall was rated in the mid-range of maturity by healthcare executives, some clear areas of focus for improvement emerged. Data analytics was rated relatively poorly by respondents in terms of being fully optimized. Better data analysis was therefore ranked as one of the key data-related priorities in order to achieve organizational goals, along with data-powered forecasting (predictive analytics), better data accessibility across the enterprise, and data security.

Improving in these areas by implementing or optimizing core systems would help to address the data reliability issues that we have already seen are one of the chief concerns in relation to effectively deploying AI. As Chris Gibbons observes, this also needs to be accompanied by a wider shift:

Digitization is an enabler of both cost reduction and productivity, as well as the facilitator of better patient experiences and outcomes. While upfront investment is needed, and overall technology costs may increase, the returns more than justify the outlays.

“

**Healthcare data teams are often built around quite static BI, rather than functioning as genuine insight-based functions. Healthcare accounts for roughly one-seventh of all data globally, yet only a tiny fraction is actively used. There is real value in the unstructured data captured through healthcare interactions. At the same time, it is about driving greater data ownership across all areas of the organization, with clear operational accountability about how data is managed.”**

**Chris Gibbons**  
Partner, Digital Health Solutions and AI Lead  
KPMG in the UK



# Building resilience that protects patient care

---

With security a key concern as cyber risks rise, maintaining strong cybersecurity protocols, reinforced by regular reminders and communication to staff, remains essential. Business continuity planning must also be actively on the agenda, reviewed and refreshed on a regular basis. It is critically important that, even if some systems go down, staff are able to access a minimum level of patient information.

Underlining the key strategic importance of cybersecurity, over four in ten healthcare leaders (41 percent) are expecting to increase spending in this area by over 10 percent in the coming year — putting it ahead of both AI (34 percent) and data & analytics (34 percent).

As digitization becomes more widespread, instilling security as a mindset across the workforce is also key. Appropriate cybersecurity training, reminders and refreshers should be available to staff at all levels. In a digital first healthcare system, resilience is clinical as much as technical — and must be embedded into design, governance, and operating models from the outset.

There is another risk that constantly overhangs healthcare technology leaders: budget cuts. In the squeezed financial environment in which most public healthcare systems operate, the danger of having planned technology spend reduced is always there. While this is less of a factor for private healthcare providers, the ongoing volatility of the global economy due to geopolitical vicissitudes and uncertainties means that it can't be entirely discounted here either.

Perhaps the best defense against this is by focusing the minds of executive leaders on the outcomes that technology produces, rather than the costs.



# The future of care delivery

The way that care is administered to patients is changing — with the pace of change set to accelerate in the coming years.

When asked about future care models and methods, executive responses highlighted several key trends. In particular, the use of digital twins, remote monitoring, patient peer networks and robotic surgery is set to surge.

**Digital twins** are already prevalent in hospital facility programs for new builds, renovations and relocations, including being used to simulate space planning and operations in the new physical environments (technology placement, staff workflow, supply management, throughput, etc.) to support clinical service planning before construction. DTs are also extremely popular in medical/health sciences environments and medical device training for hospitals.

**Remote monitoring and virtual services** will become a standard of care for most hospitals, enabled by AI agents where health workforce shortages are prevalent. Reinforced by wearables that help patients (and staff remotely) track key indicators, the advantage of remote monitoring is that it can become a continuous process, whereas the older notion of telemedicine is more static, dependent on conversations and diagnoses at a point in time.

**Command centers** are another emerging trend amongst health services, being used to coordinate operations in real time. In Canada, hospitals and health authorities are moving to enterprise or regional command centers. This facilitates resource sharing (bed management), more appropriate and timely patient transfers (including emergency admissions, ambulance capacity) and health workforce optimization.

Meanwhile, **patient peer networks** that connect patients with similar conditions for mutual support, morale and advice, are expected to grow, while more conventional and static mechanisms such as website-based guidance platforms may decline.

Unsurprisingly, **robotic surgery** is also expected to continue to increase as technology develops and capabilities are refined. With its incredible levels of precision and accuracy, and its 100 percent regularity of performance, robotic surgery is seen as an invaluable aid by human surgeons, rather than a threat. It is also a powerful and effective training tool, including as a way of helping surgeons in developing economies learn surgical techniques — with examples of international training becoming more common as surgeons in a developed economy link up with their peers in a developing one to help them learn via robotic simulations.

However, there is an important caveat to the potential of robotic surgery — and that is the necessity for uninterrupted connectivity. As Lydia Lee comments, *“This underlines the imperative of having strong IT infrastructure, robust cybersecurity defenses and effective business continuity planning to ensure there are back-up measures that can immediately be put in place.”*

“

**Virtual-first is already becoming the standard. It eases pressure on physical staffing, while patients like it too as they can be monitored at home and have more control over their care.”**

**Lydia Lee**  
Partner, National Digital Health Leader  
KPMG Canada



# The pathway ahead: Actions for success

To build on momentum and accelerate operational enhancements and care outcomes through technology, think about the following key principles:

## Define your target operating model

Create your vision and roadmap to connect systems and align technology platforms. Move from isolated pockets of innovation to a coordinated, whole system approach.

## Strengthen your data foundations

Structure and optimize data flows, with clear governance processes and protections, as this is a fundamental pre-requisite for the deployment of AI. Take the time to ensure your data flows are AI-ready, then track progress rigorously through output metrics and KPIs.

## Build a future-ready, agent-empowered workforce

Redesign a talent strategy that is focused on upskilling, building AI fluency and empowering the workforce to deliver better patient experiences and outcomes through AI.

## Put security at the heart

AI and other new technologies raise new risks. Co-opt a security workstream — together with a trust and ethics lens — into AI development so that efforts are inherently joined up. Rigorously test solutions before go-live and keep humans in the loop to critically assess.

## Drive strategic ecosystem partnerships

Select ecosystem partners with purpose. Move from transactional relationships to strategic co-creation that enhances flexibility, fosters interoperability, accelerates innovation, and delivers better outcomes.

In KPMG's view, it is time to lead, not follow. Senior clinicians are uniquely placed to design systems that safely combine the great attributes of clinicians with technology. Senior executives need to see the financial opportunity and prioritize much greater investment, driving that investment to a return.

Those that act decisively — aligning data, technology, governance, and operating models around patient outcomes and workforce resilience — will be positioned not only to adapt to change, but to lead the future of healthcare.



# How KPMG can help

---

KPMG professionals from firms across the globe bring deep experience in technology-enabled transformation for the healthcare sector. We support healthcare organizations as they navigate a complex and rapidly evolving environment shaped by rising expectations, regulatory change, workforce pressures and accelerating digital innovation. Transforming at pace requires more than implementing new technologies — it depends on building the right foundations, governance and culture to sustain change. KPMG’s global, multidisciplinary teams combine deep healthcare and regulatory insight with market-leading capabilities in cloud, AI and data, supported by a strong network of alliances with leading technology and life sciences organizations. Through practical, collaborative execution and insight-driven, fact-based services across Audit, Tax and Advisory, we help healthcare organizations enhance performance, improve outcomes and deliver sustainable value for patients, providers and communities.

# Methodology

---

*Survey respondents represented organizations with annual revenues above US\$1 billion and included a diverse group of technology leaders, such as Chief Data Officers, Chief Digital Officers, CIOs, CTOs, CISOs, Chief AI Officers, and others. The healthcare perspective of the KPMG global tech report 2026 draws on the views of 128 healthcare leaders from across the globe.*

*Note: Some figures may not add up to 100 percent due to rounding.*



# Authors



## Beccy Fenton

Global Head of Healthcare, KPMG International and Head of Infrastructure, Government and Healthcare KPMG in the UK

Beccy leads KPMG's global healthcare network of professionals across 70 countries and jurisdictions around the world. She also serves as Head of Infrastructure, Government and Healthcare (IGH) for KPMG in the UK. With more than 25 years of experience in the healthcare industry, Beccy has significant experience leading large complex healthcare transformation projects, working with government, regulatory, payor and provider organizations to transform the way care is provided and paid for to deliver improved performance and clinical outcomes.



## Jaz Dhaliwal

Global Digital Healthcare Lead, KPMG International and Partner, KPMG in the UK

Jaz is the Global and UK Digital Healthcare Lead at KPMG. With a background as a qualified medical doctor and over 15 years in professional services, she has developed a deep specialization in clinically led technology transformation in the healthcare sector. Throughout her career, Jaz has led a range of technology-enabled transformation programs across healthcare organizations. Notably, her portfolio includes the Frontline Digitalization programme for NHS England, where she plays a pivotal role in driving innovation and digital transformation. Jaz's dual expertise as a clinician and technology strategist enables her to bridge the gap between frontline healthcare needs and cutting-edge digital solutions, ensuring technology adoption is both practical and patient-centred. Leveraging an ecosystem approach with market suppliers, technology partners, and small and medium-sized enterprises, she delivers measurable client outcomes, tackles health inequalities, and enables broader societal benefits. Jaz is an elected member of the Tech UK Health and Social Care Board. In this capacity, she applies her extensive expertise to shape health technology policy in the UK, influencing digital health advancements across the sector.



## Lydia Lee

Partner, National Digital Health Leader KPMG Canada

Lydia leads KPMG Canada's Digital Health practice and is a global leader for KPMG's Care Model Redesign practice. Lydia supports healthcare clients with their digital and data strategies, technology modernization programs and development of IT shared service arrangements. She collaborates with a global network that supports customer-centric digital transformation in health systems aimed at providing exceptional experiences, creating organizational value and driving sustainability. Lydia is a former academic hospital network CIO with more than 30 years of experience in health technology, operational performance management, regional and provincial digital strategy and clinical services transformation.



### **Jonathan Di Michiel**

Partner, Digital Health Practice,  
KPMG Australia

Jonathan leads KPMG Australia's Digital Health practice and is the global leader for KPMG's Healthcare front and back-office transformation practice. He works closely with clients within the health, ageing and human services sectors to develop platform-based technology solutions to address challenges in delivering high quality, safe care.

A program, project and IT professional, Jonathan has more than 24 years of experience. His background is in global health where he served some of the world's largest organizations in an advisory, transformational program management, and technology capacity.



### **Chris Gibbons**

Digital Health Solutions and AI Lead, Partner,  
KPMG in the UK

Chris is a Partner at KPMG in the UK and Global Lead for Digital Healthcare Solutions and AI with 15 years of experience in large-scale digital transformation. He specializes in delivering resilient, AI-enabled healthcare organizations by bridging the gap between strategy and frontline needs. Chris leads global AI enablement services and has led large transformation programs across electronic health records, enterprise resource planning, modern work, and cyber and infrastructure.

Beyond his consultancy work, Chris holds pivotal leadership roles that provide a unique 360-degree view of the health ecosystem. He serves as Vice Chair of Everyturn Mental Health, a leading VCSE provider, and is an Executive in Residence at the UCL Global Business School for Health. Dedicated to person-centered design, Chris focuses on reimagining services that empower both the workforce and patients.



Some or all of the services described herein may not be permissible for KPMG audit clients and their affiliates or related entities.

**kpmg.com**



The information contained herein is of a general nature and is not intended to address the circumstances of any particular individual or entity. Although we endeavor to provide accurate and timely information, there can be no guarantee that such information is accurate as of the date it is received or that it will continue to be accurate in the future. No one should act on such information without appropriate professional advice after a thorough examination of the particular situation.

© 2026 Copyright owned by one or more of the KPMG International entities. KPMG International entities provide no services to clients. All rights reserved.

KPMG refers to the global organization or to one or more of the member firms of KPMG International Limited ("KPMG International"), each of which is a separate legal entity.

KPMG International Limited is a private English company limited by guarantee and does not provide services to clients. For more details about our structure please visit [kpmg.com/governance](https://kpmg.com/governance).

The KPMG name and logo are trademarks used under license by the independent member firms of the KPMG global organization.

Throughout this document, "we", "KPMG", "us" and "our" refers to the KPMG global organization, to KPMG International Limited ("KPMG International"), and/or to one or more of the member firms of KPMG International, each of which is a separate legal entity.

Designed by Evalueserve.

Publication name: KPMG Global tech report 2026: Healthcare | Publication number: 140325-G | Publication date: May 2026