OPENING THE CLOSED HEALTHCARE SYSTEMS

Putting Together the Pieces

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VISIONS OF THE FUTURE

Introduction

The worst of a closed system of healthcare is:

- Hierarchical, with authority going in one direction down in the pyramid
- A focus predominately on rectifying health failures
- Exclusivity that includes a restrictiveness to medical care only — which is at proscribed norms and limited treatment options, usually dictated by health insurance companies

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As global population growth and longevity of life increases, such closed healthcare systems are increasingly failing. Where healthcare is a business, dictated bottom lines limit what treatments and therapies are allowed and when; thus overburdening the system with patients who do not respond to what is provided, get what is provided too late, and/or have complicating side effects from prescribed treatment/therapies. Closed systems of healthcare have only a downward authority power pyramid which cuts off vital collaboration and types of leadership between healthcare professionals. Patients are denied what these collaborations could provide in better care and treatment. Finally, the exclusivity of treating only the "physical," with extremely limited, to no, psychological treatments; and almost no spiritual care is in direct opposition to the reality that people are holistic integrations of body/mind/spirit; thus rendering a drastic ineffectiveness.

An example of the exclusivity that flaws the system is the exclusion of Complementary Alternative Medical Treatment/Therapy (CAMs). Such treatment/therapies are most often ignored, even after the person has not responded to the limited proscribed range of treatments/therapies. The exclusiveness of this closed system shuts out treatment/therapies that could reverse conditions and/or provide relief. Healthcare companies and government programs can, and often do, deny coverage for viable options. This can prolong suffering as well as increase the overall burdening of the system and increased expensiveness.

The majority of people, because of the expense of medical insurance, need to be employed in order to have health insurance. Even then, they are bound by what is provided. For the unemployed, without government assistance healthcare and healthcare insurance plans are financially completely out of reach. Given the stresses of being unemployed, stress related conditions can increase just as healthcare gets further out of reach. This is a tragic and deplorable quality of life. Where governments do control healthcare, the quality of care still may not be very good because the closed system itself is terribly flawed.

The powerlessness, and thus often, passivity of the lowest members of this system — the recipients — is an enormous flaw in closed systems. Even with physician admonitions, people become passive in a system that neither empowers nor equips them to be proactive in their healthcare. They do not receive enough ongoing healthcare education, so they do not have a good basis for being proactive about their health. Physicians most often discourage individuals from taking initiative in finding out about their medical conditions which increases a passiveness.
When people’s health fails in some physical area, they are then given specific responsibilities during healthcare treatment. However, they often fail to take these on because they have not been prepared, educated, and empowered. Physicians may fail to tell patients how serious their conditions are, with the rationale that keeping them positive may help their condition. This also deprives patients from responding to their situation. Too many people are passive about their health because the system indicates you are basically are fine until you approach diagnostic concern levels. Then, you are treated by those above you in the power pyramid.

The first shift needed is in the hierarchical and exclusive structure: power is replaced by leadership going in both directions. Recipients who have been placed essentially totally passive positions are empowered. Leadership within the pyramid flows up and down, creating a collaborative atmosphere.

Such a shift is urgently needed. But, even more so, this closed system must be opened because the existing closed system no longer is effective, and, what is needed is now possible. Here are a few major shifts in terms of opening the closed system:

- Quality of life is the basis for decision-making, and collaboration is the process of decision-making

- Quality of life is holistic – body/mind/spirit integration

- Inclusiveness begins with wellness, then when problems are identified, personal healthcare, and when necessary, all medical treatment and therapies that have credibility through historic and empirical evidence. Psychological and spiritual care are included in treatment/therapy plans.

- Empowering recipients, through education and technologies, to be proactive

- Open business models with full collaboration across all areas involved in wellness and personal healthcare.

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At first glance, these shifts may seem to increase the overburdening of an overburdened system. However, these shifts will substantially reduce medical treatment/therapy costs, and reduce the number of people in need of medical care. The Quality of All Life and Environment (QUALLE) basis of decision-making takes an emphasized inclusive dimension in healthcare systems. The quality of life of those who work in the system deserves special attention. For instance, those who work in healthcare face the anxiety, trauma, and suffering of others and their loved ones. They face trying to reduce suffering and restore health. They face having those they have cared for die. Their quality of life in their work environment requires special attention. In terms of the quality of life of other life forms, biowaste and the like are perhaps the greatest cause of damage to all other life.

The process of decision-making being collaborative in this open system is especially imperative. The collaborations increasing expand. Here are examples of collaborations:

- The individual with a team of physical, psychological, spiritual, and medical specialists
- Physicians, with nurses, clinicians, therapists who work specifically with medical care
- Medical care specialists with CAMs (complementary and alternative medical treatment/therapies) professionals
- Medical technologists with all healthcare professionals to produce devices contribute to maintaining wellness, and monitor health conditions.
- Medical, physical, psychological, and spiritual specialists collaborations
- All of the above extending globally
Long before medical diagnostics are necessary, a person, beginning as early as childhood, needs to collaborate with healthcare professionals and create a personal holistic (body/mind/spirit) wellness plan. When certain potential health risks are identified, this collaboration would extend to medical care specialists to produce preventive healthcare plans. The last collaboration would be when health conditions require more intensive medical treatment and/or therapies. As Morse remarked, “most health care is designed to treat you when you’re sick. But — and this might sound crazy — imagine an organization whose job was to keep you healthy and out of the hospital, and actually rewarded its doctors and hospitals when they did.” (Morse 2010)

The primary focus needs to be developing strong holistic wellness/personal healthcare commitments by the person. Providing them with education and access to body/mind/spirit integration is requisite for holistic wellness. Psychological problems and spiritual lostness can take a great toll on a person’s wellness, and eventually physical and medical problems can occur. This primary focus is already being addressed by Centers for Integrative Medicine. They are an excellent precedent for this shift to open systems in healthcare.

Integrative Medicine not only uses an inclusive definition of human nature as inseparable body/mind/spirit, but also provides an inclusiveness of wellness and personal healthcare modalities. These centers often provide individuals with informative classes, offer wellness promoting activities, and provide a collaborative environment in which individuals can become responsible and proactive in their wellness and personal healthcare.

Other precedents include health insurance companies that provide their members with free access to fitness centers (unfortunately these centers are almost strictly oriented to physical fitness for healthy individuals). Employers who offer wellness environments and programs and personal healthcare programs are another precedent. These are good precedents, but so much more is needed, beginning with a holistic definition of a person as an integration of body/mind/spirit.

**Defining “Person” for Person-Centered Healthcare**

- **(Holistic) Definition of the Person**

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“Energies surge and shift, blending into newness” — this could be a holistic description of a person. The description is scientifically based in that science has identified both metabolic and electrical/magnetic energy in humans. The description is rather psychological, in that psychology studies indicate that each moment our experiences affect, and thus change, us to some degree. (Piaget 2001) Finally, the description is somewhat spiritual, in that spirituality often identifies, beyond the temporal energies, an eternal energy — softly pulsating within the person. These three aspects, body, mind, and spirit form, in reality, an inseparable integration.

Dividing aspects of a person is still only focusing on what is never truly separate. Knowledge areas focusing on aspects of the body/physical include health science, medical science, and health/physical education etc. Knowledge areas for the mind/psychological, include psychology and philosophy. Knowledge areas for the spiritual include philosophy, mysticism, and spirituality.

What is most needed is a standardized holistic definition of a person that emphasizes the inseparable integration of body/mind/spirit. Thus,

Anyone who focuses on specialized aspects of a person, do so with acknowledgment of the inseparable integration, factoring this in as much as possible. Those who focus on the inseparable integration of a person must do so with as much knowledge of these specialized areas as possible. Collaborations of such specialists benefit both.

The more different specialized knowledge areas begin collaborating, the more knowledge of integrated human nature will be generated. These collaborations can lead to a commonly accepted holistic definition of the person will be important to the field of Wellness. An example of such a definition that needs to be globally accepted is:

“A person is an integration of physiological, psychological, and spiritual dimensions that constantly interact with one another.”
(Holistic) Wellness

Building on that definition, a definition of Wellness would be:

“Our physiological, psychological, and spiritual states directly affect one another. Wellness is when all three states are individually optimized and integrated."

Opening the healthcare system must include a holistic approach that begins with Wellness.

What is wrong with what this image infers?

Our health is so much more than the physical aspect. To use an analogy, as eyesight is the normally dominant sense of the recognized five senses, physical activity often is the dominant wellness activity. However, just as a person needs to develop each sense for the fullest integration of all their senses, Wellness must provide optimal development of body, mind, and spirit. As each dimension of the person is developed, inherent integrating occurs. There are intentional integrative experiences, such as Hatha and Pranayama Yoga, Tai Chi. “Movement Meditations” are the general classifications for such integrative activities.

(Holistic) Personal Healthcare

Proactive personal monitoring in collaboration with holistic healthcare professionals may produce, conditions and/or symptoms arise that require specific individual attention, I refer to this as “personal healthcare.” A person’s health, whether from specific physical, psychological, or spiritual factors, requires a holistic plan of response.

What is wrong with what this image infers?

Just as wellness is so much more than physical activity, personal healthcare cannot be under sole authority of a physician. Present healthcare systems are essentially physician-centered with a person, and other healthcare professionals under a physician’s authority. Many insurance plans and almost all HMOs mandate that non primary physician healthcare be under primary physician’s approval. Medical technology and pharmaceuticals are developed almost solely to provide physicians’ with more and better medical diagnostic and treatment tools. Besides putting too much responsibility on any one individual, the exclusive physician authority denies the best of collaborative
healthcare efforts; and leaves people with a sense that only a physician can be in charge of their healthcare. Other wellness and healthcare professionals, as well as the recipient are not empowered through such a system.

If a person is not empowered to be the central force in their wellness and personal healthcare, whatever healthcare professionals propose on their behalf can fail. The greatest problem in a closed system of healthcare is people do not care enough for themselves. The closed system is problem/failure based, and people live that out. They typically do very little for themselves before there are problems and/or failure, and tragically, sometimes even afterwards. There is little wonder that people have often disregarded doctor’s orders — just being told what to do and not to do often does not go well with people, let alone the unattended fear and denial that can be a factor. A holistic response is necessary in personal healthcare.

Tools for Proactive Wellness and Personal Healthcare

One of the greatest boosts to empowering individuals is to provide them with self-monitoring “tools.” Medical Technology, especially when combined with internet access, can become a great contributor to person-centered wellness and healthcare. A person learns what needs to be monitored, and monitors themselves; and then shares this information with their collaborative wellness and healthcare team. Physiological information needs to be examined from a holistic perspective of what is occurring in a person’s life. Then, decisions of a holistic response can be made. Much of the following technology was designed for existing patients. These are precedents for Wellness technology. For instance:

“… a remote healthcare monitoring system that comes in the form of a wearable wristwatch. As it has a built-in generator, it’s not necessary to charge the batteries. The paper-thin OLED display shows real-time readings of a patient. It even has a panic button which, in case of an emergency, can be used by the wearer to call assistance by triggering an alarm and messaging doctors along with their latest medical records.” (Guadarrama 2011)

Here is an even more elaborate monitoring device:

“HealthPals is a remote health monitoring system that analyses patients with chronic diseases and postoperative patients. The built-in micro generator of this device harnesses the energy from warmth and vibrations of the human body and converts them into electricity. After analysis is done, the collected data are then sent to the user’s smartphone or computer and from there, to the doctor’s computers via Wi-Fi.” (Epikhina 2011)

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There are many possible Wellness technologies for daily use: A personal water purifier is one of the most needed wellness technologies:

“Pura takes on a difficult problem, providing clean water to impoverished people. Rather than transporting in clean water, and wasting gas, Pura makes it possible to filter and clean any water source, anywhere.” (Calabrese, 2011)

“Stress Watch can keep time just as other hand-watches, but it also can track certain body functions and give us feedback with necessary guidelines for relaxation.” (Gavari 2011)

There are some amazing technologies that need to be marketed through social businesses so that all people can have access to these:

“Already, futuristic health-care devices are leaping off the drafting boards. Among the new inventions currently in circulation that could improve your well-being: the LifeShirt, a vest that monitors cardiac, pulmonary and respiratory activity as well as posture; the M2A capsule, a pill that when ingested reports on the functioning of your intestines; a nurse bot named Pearl that will take your vital signs and retrieve basic items; and the Health Dashboard, inspired by the dashboard in your car, which displays everything from environmental metrics like the pollen index and flu trends to personal data like blood pressure, cholesterol levels, exercise patterns and drug compliance.” (Web 2004)

Integrating wellness/healthcare technology into home and office environments is also possible:

“The main conceptual idea is to make ecological clear interior devices that can help person relax after a difficult day, and breath clear, full, ions of air. This lamp is made from glass. The major part is made from mat glass; but the central part is transparent, that creates interesting light effect. Plastic form lets light flow. Switch is a sensor. Ionizer is in the base of the lamp and makes a home atmosphere full of ions.” (Kalugina 2011)

These personal, home, and office, technologies need to be available and affordable. They provide a tremendous boost to an individual’s self empowerment of maintaining their wellness or working with a personal healthcare issue. Please notice that this collaboration of medical technologists with interior designers shows the type of open expanded collaboration this is possible even now.
The thought of people being given monitoring devices and programs, to identify the earliest signs of Alzheimer’s onset, stokes, heart attacks, etc. symptoms, and quickly receiving holistic responses opens the system, reduces suffering and costs, and enhances inclusive collaboration.

**WELLNESS and PERSONAL HEALTHCARE**

- Wellness and Personal Healthcare 2.0
- CAMs –Complementary and Alternative Medicine Therapies
- Centers for Integrated Medicine

**Wellness and Personal Healthcare 2.0**

Empowering the person to be proactive about their wellness and personal healthcare is essential for wellness and personal healthcare “2.0.” This sets up the primary collaborations between individuals and wellness/healthcare professionals. The primary collaboration, 2.0, is the individual with their physical, psychological, and spiritual team.

An expanded level of collaboration can occur at Integrative Wellness/Healthcare Centers as individuals engage in *educational classes, support groups, and wellness activities*. A person can participate in groups available through the center or via social media — especially if a person is dealing with a somewhat rare healthcare issue. They can cyber connect with similar individuals from around the world.

When health conditions are beyond the level of wellness, the collaboration can increases to include medical professionals. For instance, if type B diabetes is detected, through collaboration the decision may be made for the individual to have increased forms of feedback, use CAMs, be in groups with other diabetics, and possibly have medication prescribed.

Another expanded level of wellness/personal healthcare 2.0 collaboration can occur if businesses include wellness/personal healthcare as an employment benefit. This should begin with businesses interacting with employees regarding optimizing their work environments, looking at flex scheduling possibilities, telecommuting a certain amount a week, etc. The businesses may also offer wellness/personal healthcare programs on the premises. There are precedents that indicate that businesses have increased productivity as well as loyal employees when this collaboration has been established.

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Boeing conducted a very successful 30 month program to be more involved in their employees’ wellness/personal healthcare:

Teams of clinicians from local multispecialty groups gave the employees health risk assessments; helped them form goals; and gave them new prescriptions, health improvement plans, coaching, classes—whatever it would take to lose the weight, bring the blood pressure under control, deal with the back pain, whatever the problems were. After 30 months, this “medical home” team model and intensive focus showed results: The experimental group not only showed marked improvement in health metrics, but even counting the cost of all the extra work and attention, its medical costs were 20 percent lower than those of the control group. Twenty percent savings on your “frequent fliers”—that’s a big number. (Flower 2010)

Far more could be written about those businesses already setting precedents with increased involvement. These precedents are important contributions to increasingly broadening collaborations in wellness/personal healthcare 2.0.

Insurance Plans and HMOs also need to be part of these collaborations. Some insurance plans and HMOs (health maintenance organizations) are using the internet to get people more involved in their wellness/personal healthcare, such as “patient portals” in which a person can access their medical records, check lab results, and communicate asynchronously with medical providers. (Morse 2010)

Hello Health places a strong emphasis on empowering individuals:

“Hello Health is a breakthrough in web-based healthcare delivery that enables you to engage in your own healthcare with your provider, online. By using modern communication tools and an easy-to-use Patient Portal, you are in control of your healthcare experience to obtain a higher standard of care while giving you more time to focus on what's important in your life.” (Hello Health 2011)

Far more can be provided than this through such portals. A person could click on individual concerns, such as overweight, addictions, depression, etc. and find:

- Relevant information from body/mind/spirit perspectives
- Sign up for groups with others in this area of concern
- Sign up for one on one information sessions regarding a newly diagnosed problem.
- Sign up for what is provided at the Integrative Healthcare Centers that the Insurance covers
- Sign up for the provided medical technology devices they can be used
- Receive recommendations for what home and work environments should have.

CAMs — Complementary and Alternative Medicine Therapies/Treatments

Another level of Collaboration is between physicians, and “alternative” healthcare professionals. These collaborations have produced the availability of CAMs for individuals; and, the CAMs have greatly benefited many people already. Ananth reported that the National Institutes of Health found that acupuncture has been almost twice as effective as conventional methods for treating pain. (Ananth 2010) She goes on to state the importance, not only of CAMs, but also of collaboration produced integrative healthcare approaches:

As we make conscientious efforts to test new structures, design more proactive patient-centered care models and create more cohesive care coordination, we will miss a great opportunity if we don't make
efforts to incorporate proven complementary therapies and expertise from integrative health care approaches. As the health care delivery game changes, so must the team of players—and integrative health holds the promise of significant additional bench strength (Ananth 2010)

Biofeedback devices not only provide information, but also are a complementary therapy/treatment because the person uses the feedback to lessen or increase what is needed. Music therapy and art therapy are complementary therapies. Many relaxation techniques can help people stay within their range of wellness. Meditation and contemplation are not only necessary for developing holistic consciousness; but also, through the practice of these, physiological and psychological symptoms can be reduced, warding off more serious problems. Ananth points out the healthcare 2.0 aspect of CAMS, in stating that those CAMs provided as a collaborative and integrated approach hold much potential, especially if they give a person greater involvement in their healthcare. (Ananth 2010). There are very good CAMs, and then there are scams. CAMs associated with Centers for Integrated Medicine provide safe and reliable therapies/treatments. In the future, CAMs will simply become part of the recognized collaborative options, rather than alternatives.

**Centers for Integrated Medicine**

Centers for Integrated Medicine associated with “traditional” medical centers offer a precedent for open wellness/healthcare systems. Wake Forest Baptist Health Center for Integrative Medicine provides this definition of the work of such centers:

> “Integrative Medicine is relationship-based care, informed by evidence and experience. It is a system of comprehensive care that emphasizes wellness and healing of the whole person, with special emphasis on patient participation, and attention to mental and spiritual health. The knowledge and use of Complementary and Alternative Medicine (CAM) is an important aspect of Integrative Medicine.” (Wakehealth 2011)

What is significant in these centers and the use of CAMs is that they empower individuals with choices and options for personally doing more for their health. The narrow boundary of the doctor’s office and/or hospital bed is greatly expanded by the Centers of Integrative Wellness and Personal Healthcare.

Future Centers will offer:

- a variety of physical activities, from play, dance, and synergistic sport, to fitness, Yoga, Tai Chi, Pilates, Musido, and more.
- indoor gardens and special ambient rooms for relaxation
- areas for aroma, art, and music therapy, and other CAMs
- meditation/contemplation areas
- quiet rooms with health promoting furniture for reading, study, and research
- rooms for group sessions, as well as one on one sessions
- kitchens will have nutritionists showing how to prepare healthy meals, and hold culinary “fests” so people can share with each other
- cafes with healthy snacks and beverages will be provided to introduce these to people’s diets.
- creative studios for a variety of the arts — dance, sculpture, writing, etc. will be provided giving people necessary holistic and creative outlets.
All this will easily be affordable when off-setting the high expense of medical care. (These must be standard in all global wellness/healthcare.)

The key in this is empowering the individuals to do more for their health and well being:

Duke Integrative Medical Center emphases providing the finest medical advances as well as the healing powers within the individual: “You hold the power to optimize and restore your health. Duke Integrative Medicine guides you through the complexity of modern medicine to unleash this power. Our experts partner with you--providing treatments, resources, time, and support--so you can address and plan for all of your health needs and goals.” (Duke 2009)

The technologies, the expanded range of treatments and therapies, the holistic approach of body/mind/spirit, and the advocacy for person centered healthcare are all in place. Open and inclusive healthcare systems now need to promote and support these.

**An Open Healthcare System**

- Open Collaborations

- Healthcare Social Entrepreneurships and Businesses

**Open Collaborations**

Open Collaborations in healthcare include, like business, collaborations between inventors and innovators and larger businesses. In healthcare, the situation is complicated by the “risk-averse” management styles. Taking just one example in the Medical Technology area, Goldsmith points out that the risk-averse management in medical technology businesses has undermined the potential development of medical technologies:

“Managements have succumbed to a lawyerly, risk-averse management style. Firms that used to be run by scientists and engineers are now run by attorneys and marketing executives. Decisions large and small take forever, and resource allocation — people and capital — has become less strategic and more formula driven. Medical technology firms have lost the ability to take "game changing" risks: acquiring promising ideas has proven a lot easier than growing them.” (Goldsmith 2010)

Here is an area in which social entrepreneurships by medical technologists seeking to create innovative new technologies could collaborate with larger businesses through the same licensing that
businesses are using (see Business Chapter). Goldsmith points out that the US firms are in jeopardy of losing and failing to attract the brightest minds to other countries that give this creative freedom (Goldsmith 2010).

Large corporations and businesses are setting precedents for open collaborations by creating their own internal healthcare systems that can focus on wellness and personal healthcare innovations. General Electric Corporation’s healthcare division has brought about medical advances that show medical technology innovation at large corporations still can be productive. (The advances also contribute to their corporate social responsibility). They have developed a pocket-size Vscan, ultra-mobile ECG machines, and an electronic medical record system (EMR) (Borden 2010).

As collaborations expand, they ultimately become global. “We believe that what is good for the public at large and what is good for the world is also good business.” (Borden 2010) GE’s collaboration with others to produce the EMR database in itself is in the direction of open collaborations. Added to this, is the creation of a database that gives physicians around the world access to data that can help them with diagnosis and treatment. (Borden 2010) Sharing knowledge, collaborating to improve treatments, and building on a large database of successes and failures will improve healthcare globally.

Another aspect of open collaborations are competitors who collaborate to speed the best solutions to societal problems and issues. In healthcare, Merck is collaborating with “rival” AstraZeneca Plc to improve cancer drugs. Their collaboration has promoted collaborations among other drug makers:

“At least eight drug makers have joined forces to share treatments since Merck, of Whitehouse Station, New Jersey, and London-based AstraZeneca began their effort…. Now, they are increasingly reaching out to competitors to boost the attack on cancer and speed time to market.” (Langreth 2011)

There are information and communications technology companies that are collaborating to increase the quality of global collaborations. Cisco has produced an impressive 61 technologies — all to improve, and take a strong place in, collaboration improvement:

“…collaboration is a $34 billion market, and "by far the most exciting thing we're working on. The world is bigger than an office and a bunch of cubes." Among the new offerings: a social video system called Cisco Show and Share (YouTube for your office); Collaboration in Motion (WebEx for your iPhone); and, coming next year, the Cisco Enterprise Collaboration Platform (Facebook/Twitter meets WebEx for your business), which will help far-flung employees share a chat window, videos, wikis, docs, even a company-wide news feed.” (Kamenetz 2010)

In terms of collaboration, even more impressive is the OVCC (Open Visual Collaboration Consortium) mentioned in the business chapter that will provide open standard and interoperability visual services for more accessible high quality video internet collaborations. Hopefully networks of healthcare professionals will be able to benefit from such efforts.

In 2010, Sermo provided the world’s largest collaboration network for physicians. No longer limited to reference books and close associates, Sermo facilitates online sharing of medical questions and knowledge. Ethical and professional discussions are also facilitated. Westly noted that 10,000 physicians gathered through Sermo to petition their opposition to the American Medical Associations acceptance of the US House health-care reform bill. (Westly 2010) Though not as big as Sermo, uCern also is a free collaborative website for healthcare professionals. (uCern.com 2010)
Provider networks are open collaborations that can lead to optimal treatments, which then reduce healthcare costs:

“The idea is to motivate providers to work together in more collegial, coordinated and cost-effective ways to improve the quality of health care services while reducing the overall cost of care for a defined patient population. Delivering accountable care requires better communication between providers, more attention to anticipative care coordination, and higher levels of patient engagement and self-care. Providers must ensure that all required services are delivered without duplicative or unnecessary services.” (Ananth 2010)

Global open collaborations to improve medical technologies, wellness and personal healthcare programs, and medical (including CAMs) treatment/therapies are needed. Networks of professionals collaborating on strategies of optimum care while lowering costs is needed. The other push that is needed is the prominence of social healthcare businesses and entrepreneurship. These will have social objectives, not profitability, as their bottom line.

**Healthcare Social Businesses and Entrepreneurships, and Corporate Social Responsibility in Healthcare**

As of 2010, healthcare social businesses and entrepreneurship have primarily focused on poverty populations, but they are also setting precedents. The healthcare social entrepreneurship, “Project Health,” has become so successful that the name was changed in 2010 to “Health Leads,” with the following stated reasons:

- It affirms our core belief that **HEALTH**, not disease, should **LEAD** the design of America’s health care system. *Health comes first.*
- It reflects the critical work our volunteers do every day: to provide **LEADS** to the community of the resources that will help patients get **HEALTHIER**. And,
- It embodies our commitment to creating the next generation of **HEALTH LEADERS**: our volunteers and alumni who, having seen the problems and solutions first-hand, will have the conviction and ability to truly transform health care in America. (HealthLeads 2011)

The Yunus Centre which has focused on reducing poverty by microfinancing sustainable, socially and environmentally responsible businesses (see Business Chapter), also has developed Grameen Healthcare. This includes health clinics that are part of the Health Management system. The range of services is for a broad population segment, but focuses especially on those in poverty. (YunusCentre.Org 2009) Not surprisingly, their microfinancing socially and environmentally responsible healthcare entrepreneurship include:

“Within the Grameen Healthcare system, young women within the villages will be encouraged to become entrepreneurs who will go house-to-house and operate and sell the use of this equipment for the detection of lumps in the breast, incorrect positioning of foetus (sic) and other problems which can be detected with simple imaging device.

These young women will operate a self sustaining business of their own based on this equipment but will be linked closely to the Grameen Health Management Centers for referral purposes, which in turn will be linked to specialist doctors at the city level.” (YunusCentre.Org 2009)
Grameen Healthcare is collaborating with other international businesses such as Danone (nutrition for health); and, has created a joint business effort with Veolia that also follows social business principles. (YunusCentre.Org 2009).

Novartis, a Swiss pharmaceutical company, has helped create “Arogya Parivar,” a rural healthcare social business targeting the poor in rural India. Novartis still gets its profits from its price for drugs, but rural India has gotten clinics, health education, and “health camps.” (Novartis 2011) 4bHealthcare is another social healthcare entrepreneurship in India. (4bhealthcare.org 2011)

SonoSite is a company produces portable ultrasound units. They also have a humanitarian outreach, SoundCaring, to provide these tremendously helpful units — that can easily be moved from site to site — to countries that cannot afford such needed medical technology. “Our SoundCaring program makes SonoSite hand-carried systems available to non-profit healthcare providers operating in austere environments throughout the world.” (SonoSite 2011)

Social businesses and entrepreneurships that are focusing on healthcare, companies that include healthcare as part of their social responsibility efforts, and companies that are collaborating in an open system are all important catalysts for opening the closed systems of healthcare. The future healthcare will look very different from the past.

VISIONS FOR THE FUTURE

A 21st century hypothetical scene for working adults:

_The individuals awake in the morning, and the solar powered health monitoring system provides information from the hours of sleep regarding blood pressure, oxygen exchange efficiency, if they slipped into sleep apnea, how many cycles of needed REM sleep they had, if they had excessive TM activity (“grinding teeth”), etc. Their weight, balance and posture will be measured for them, with recommendations._

_If their oxygen exchange readings have dropped, they will use biofeedback to improve their diaphragm breathing throughout the day. If they show high stress levels, they will slip on their muscular tension biofeedback device to consciously release muscular tension. They will be able to record all the stressors they can think of in their headset diary as they prepare for work or relaxing in their Full Spectrum Light room._
Then, at work, they can relax through their favorite techniques during their morning break; and, if this level of stress is showing indications of becoming chronic, they can check in with their holistic self healthcare team.

Once in the kitchen, using their weight, vitamin, and mineral levels; they can order their day’s basic nutrition which will be ready for them to pick up close by, on their way to work, or even at work. (They will have already programmed in their favorite and least damaging comfort foods for each meal and snacks.) They may even decide to stop by their Integrative Healthcare Center and learn how to prepare at home new recipes to optimize their health and weight. Their workplace will provide nutritious food and drink as a healthcare benefit.

Exercise/meditation facilities along with health breaks will be provided at work locations so that employees can stay more productive while working, and maintain strong wellness. Portable health monitoring apps and digital devices will provide the person options in what they personally want to optimize after work at the Integrative Healthcare Center or at home. Their healthcare benefits include a variety of options. A few days before they had rearranged their work schedule so they could attend a social function with a loved one, get in work hours, and still have time for their wellness/personal healthcare.

Back home, they rearrange their Tetris chair blocks to fit their mood. Monitors will adjust the lighting to enhance the person’s state. Music that has been chosen for various states will be available to play. If there are other household members, as they come in they can decide if they want their own space for what they need.

For some, they may awake, or discover through the day, that an addiction level has spiked. By the end of the work day, they may be irritable and tense as their fatigue reduces their self-discipline. Like phobias, they do not see addictions as abnormal as much as a part of a normal personality that deserves and requires attention. They have numerous resources through social media, healthcare help lines, and a treasury of techniques and visualizations.

To help sleep, they may use a variety of modalities to relax and release the strains of the day; and may have read to them some recorded ageless wisdom to regain perspective after the day’s pressures. Others may need to process the day with conversations with others in the household or through digital devices. What is most important is that they can have knowledge throughout the day and upon waking from sleep that increases their self awareness and wellness, and when necessary, healthcare.

Aches, pains, strains, anxieties, pressures, arguments, anger, grief, losses, etc. are not ignored or denied, but lived through by having technologies, support, and places where these can be resolved.

When they have concerns beyond what they can handle, they have as a first response their (integrative) healthcare center, and can set up virtual or face-to-face conversations. Their log of their monitoring devices records can be instantly shared. This may lead to suggestions of other self-care possibilities, or a trip to the appropriate healthcare specialist. They may need counseling to augment their use of biofeedback for reducing anxiety that will not release. Their blood pressure readings may indicate they need further testing to see why the levels are too high or too low. The person knows they have ongoing technological feedback, people who can help them, peers who they can share with, and access to numerous professionals. Healthcare 2.0 is working well.
Meanwhile, wellness and healthcare professionals are openly collaborating through amazing ICTs (Information and Communication Technologies). Innovative ideas are shared, research is entered into, treatment plans are enhanced, dialogues about experiences and questions occur. Businesses have responded to their concerns about their particular work environments and employee wellness. Students of all ages have ideas and questions that are part of the collaboration, which keeps them involved, and, invigorates the professionals. Networks of collaborations increase the quality of wellness, personal healthcare, and medical treatments and therapies.

Businesses not only collaborate on healthcare, but also offer virtual offices and flexible work hours so that employees can do work from home as much as possible if they choose. If manual labor is the primary emphasis, businesses have shifts, schedules, workloads, and equipment designed to optimize performance while reducing dangers and injuries. Wellness/personal healthcare is not just a fiscal issue, but a social responsibility issue. Businesses in the same communities collaborate with one another, community leaders, and the government so that all the community has access to the same wellness/personal healthcare opportunities and facilities.

People will have a holistic sense of self and personal feedback devices, to monitor and tend to unhealthy spikes. These 21st century people will know themselves, care for themselves, and realize this care of is a personal responsibility.

To end, here are some visuals of possible 21st century wellness/personal healthcare environments:

Entryway display (O Neill 2011)

Health Info on Display

The kitchen display tracks personal health information like the decorative tray in the entryway, but with more information on a larger screen. This system provides a visual of your entire health history, the potential effects of new treatments and ways to find medical experts. (O Neill 2011)
Possible exercise fitness area (Holahan 2007)

Possible lounging furniture for bedrooms or dens (Holahan 2007)

Recipes on the Counter

Using sensor technology, a kitchen countertop can assemble a grocery list, suggest recipes based on available items in the pantry and refrigerator, and then read aloud step-by-step directions. Here, directions for how to make focaccia bread are displayed on the counter. (O Neill 2011)
Possible stores with your order ready (Holahan 2007)
Healthcare Bibliography
(Please Note: Bibliographies are to be provided in a manner that the reader can access the reference. Because all of the provided references are easily accessed by using the provided links, using a particular style of Bibliography was not used.)


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