

Conscious Health Network Back to the Future Tribe

Be Afraid. Be Very Afraid!

See no Evil So why does it appear that most humans - no matter how intelligent and consciously aware - ignore simple facts regarding their own mortality, and especially impending infirmity for most? The reasons are many, some quite obvious and others deeply rooted in the psyches, personal experiences and cultures of each individual. OK well, perhaps that helps explain why promising new models of care delivery, such as offered by Conscious Health Network, LLC are sometimes overlooked, and may even cause people to 'avert their eyes' rather than face their existential fears. Whatever the reasons, the good news is that soon elder and challenged people (and their loved ones) will no longer need fear the systems on which they depend, and may yet live enjoyable and meaningful lives regardless of mental or physical status.

Not Another Reality Show This willingness to disregard almost inevitable decline associated with the process of aging is particularly germane for the baby boom generation and their children at this time. Not only are the boomers themselves rapidly penetrating the long-term care industry (at statistically earlier stages than their parents) but they are already responsible for providing care for their parents. Millennials (many now entering their 40s) are also beginning to face their obligations for their boomer parents, and beginning to face their own transience as well.

Feminist Fallout Unfortunately for the parents of these millennials, most children today expect to either institutionalize their elders or have paid homecare until skilled nursing is essential. Even those who may wish to care for loved ones at home may not be in a financial position to forego job opportunities to do so, primarily due to the now ubiquitous prevalence of women in the workplace who have traditionally provided familial care. (Approximately 80% of people will need longterm care in their lifetimes.)

From Dream House to Poor House The skyrocketing expense of paid care (when caregivers can even be found) has created great hardship and heartbreak across the board, and has diluted or eliminated inheritances to many of the next generations. 70+% of Long-term Supports and Services (LTSS) recipients are dependent on federal and state funded public sources and many must relinquish all their accrued assets to make themselves "Medicaid eligible" and, indignant as it sounds, and often is, "indigent". (Caregiver turnover rates have long ranged from 100-200%, and even 300% due to Covid - NY Times.)

Rock and a Hard Place The very powerful corporate long-term care (LTC) "for profit" industry (non-profits are often profit driven as well), and its categorically corrupt (or in some cases misguided) participants, has always had a complex relationship to government regulation, reimbursement, quality of care, and life enrichment. LTC costs are astronomical and rise significantly year over year, and are currently exploding even further as boomers are soon to double the LTC and Homecare markets. Providers insist on more and more allocations for care delivery and they tie better care to these increases. The government is often held hostage by failing and/or non-regulation compliant entities as it costs much more to assume management (especially as trustees) or ownership of such sites.

Saul to Paul? It Can Happen Despite their poor performance and often lack of good faith, many LTC executives and owners will recognize and benefit from the lifelines provided by CHN, and other progressive organizations, that will ensure future solvency and sustainability. This will safeguard the stability of the LTC system as it undergoes needed reformation and more effective government oversight - all while protecting and improving the 3Rs "Revenue, Regulation, Reputation".

State of Play / State of the Art? Most Nursing Homes are rated as "Below Average' or "Much Below Average" according to the "Medicare 5 Star Rating System", yet despite being the second most regulated industry in the world (nuclear is #1) the day-to-day experience of residents has only worsened in the past 30 years, notwithstanding some medical improvements in treatments, and in aesthetics in high-end, mostly private pay, institutions

Assisted Living Façade Even the touted assisted living facilities (ALFs) provide very few engagement opportunities, little personal care, and extremely low caregiver/ high client ratios. They do often offer attractive private and congregate spaces that appeal to prospective residents and their children, especially as many are moving out of independent living or at-home settings for the first time. The walls may be pretty although "looking at the wall" is often the predominant experience for individuals, and although the commons areas are usually well-appointed, few feel comfortable in these spaces, and many seldom venture beyond their own quarters (except for meals, if that) because of various fears, confusion, and uneasiness. These mostly private pay ALFs often welcome high acuity residents who actually need skilled care or "keep" them beyond the point of appropriate care delivery. (See CHN Assisted Living - Promise vs Performance)

Better Business, Better Lives Not only will Conscious Health Network provide optimal care delivery and individually tailored, continuous lifestyle experience to residents and clients but will reduce the costs of care by more than 30% within 2 years of LTC facility or Homecare Agency implementation. (Strategic execution of CHN neighborhood and community participation/incentive programs will further reduce costs by significant margins.)

"CHN-Certified" In addition, CHN certification mandates by the Centers for Medicare and Medicaid (CMS) are expected for every tier and type of care delivery entity, and will be promoted by the Company, thus providing a means for government regulatory and compliance systems to hold LTC providers accountable for best practices and reduced expenditures. CHN tiered care models and programs will also improve the overall health of its clients and will slow rates of decline enabling them to remain independent of long-term care institutions, especially nursing homes, for much longer time periods.

"Holy Grail" of LTSS" Metric results, especially from the CMS Minimum Data Set (MDS) / Resident Assessment Instrument (RAI) will prove CHN claims, as will the reduced need for higher levels of care for clients and residents. CHN is fully committed to using new and rapidly advancing technologies, such as AI and Robotics, in virtually every aspect of its models which is crucial to achieving its very ambitious Quality-of-Life and Care goals, while substantially reducing the cost of healthcare, approximately 70+% of which is spent on elder and challenged populations.

Happy Day-O CHN programs and services ensure that every person's moment to moment experiences commensurate with their cognitive, physical, and emotional status, are fulfilling, enjoyable, comfortable, inspiring, and forward-looking, while providing person-centric and tailored opportunities to be (or at the minimum feel) productive day in and day out.

Fourth and Final Reprieve The end-of-life saga — or as Hinduism teaches, the 4th and most important stage — can and very much should be the calm and contented culmination of a well-lived and even in-progress life. Conscious Health Network, through its subsidiaries of CCS (Conscious Care Systems) and I-WELL (Integrative Wellness and Lifestyle System), pledges that every client will enjoy living to the fullest with every possible means of support, ensuring a gracious and affirming experience throughout all life phases.

Not Rocket Science Although a delicate comparison, it is apt to say that just as loved ones and societal constructs provide care and mostly happy, safe and engaging lifestyles to children throughout the continuum of infant to adult, so too can challenged populations be served, albeit most often in an opposing trajectory. CHN has designed, and will always strive to advance, its customized models to facilitate the most ideal lifestyles possible for every person, whatever his or her diminishing or even improving state of being.

Mortality Unplugged I, for one, can say categorically that the idea of becoming "hostage" to the current care infrastructure is the most frightening prospect imaginable, especially as I am so very familiar with its interwoven layers of ineptitude and greed. And I'm not the only one. How often do elders extract promises (typically unfulfilled) from their loved ones not to "put them in a nursing home" when the time comes, and how often have I heard: "I will commit suicide before going into a facility"? Often. Not only do most deteriorate beyond their capacities to carry out such a dread-based wish, or reconsider because of various religious tenets, but society is so myopic and puritanical on the subject that this is not even an option for any but the most determined, who also have the means (financial and otherwise), and devoted allies to "assist" them. For myself, such an assisted suicide scenario is not frightening, paradoxically perhaps because of my spiritual experience and beliefs. However, many of the masters whom I revere are unequivocal about the "aftereffects" of such a move. Nonetheless, I must admit it's still an open question for me personally. To be continued...

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