

“Our Vision”. Connected • Fair • Human

Vision Statement

To create a healthcare system that is preventive, equitable, culturally grounded, and environmentally sustainable, where technology enhances human care and communities share responsibility for lifelong wellbeing.

Core Principles

Prevention First – shift from reactive sick care to proactive health promotion.

Equity and Access – no barriers due to geography, income, or background.

Human + Technology Partnership – AI and robotics augment, not replace, human connection.

Cultural Integration – embed First Nations knowledge and holistic practices in every level of care.

Sustainability – healthcare systems aligned with climate resilience and renewable energy.

System Structure

1. Community Health Hubs (CHHs)

- **Role:** First point of care. Provide prevention, primary care, mental health, cultural services, and health education.
- **Procedures:**
 - Walk-in access with no cost barrier.
 - Integrated digital records accessible across the system.
 - Staffed by multi-disciplinary teams (GPs, nurses, community health workers, cultural healers).
 - On-site renewable energy and community gardens.

2. Decentralised Care Networks (DCNs)

- **Role:** Deliver healthcare beyond fixed sites—homes, workplaces, schools, and mobile units.
- **Procedures:**
 - Mobile clinics dispatched to rural/remote communities.
 - Remote monitoring via wearables and AI dashboards.
 - Community members certified as “Wellbeing Facilitators” to provide first-line care.

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3. Hospitals of the Future (HoFs)

- **Role:** Specialised centres for emergencies and complex care. Smaller, calmer, patient-centred.
- **Procedures:**
 - Emergency response coordinated with AI triage.
 - 24/7 hybrid care teams: clinicians supported by robotics for surgery, monitoring, and logistics.
 - Patient environments designed with biophilic architecture (natural light, gardens, acoustic calm).

4. Digital Health Integration

- **Role:** Ensure seamless tech-enabled care.
- **Procedures:**
 - Universal digital health ID linked to secure, consent-based health records.
 - AI decision-support embedded in clinician tools; all recommendations transparent and auditable.
 - Telehealth platforms integrated with VR for remote specialist consultations.
 - Continuous privacy audits to safeguard dignity and consent.

5. Workforce & Training

- **Role:** Build an adaptive, compassionate, and skilled healthcare workforce.
- **Procedures:**
 - Curriculum includes cultural competency, AI literacy, climate health, and community engagement.
 - Ongoing professional development through digital platforms.
 - “Community Health Certification” programs for non-clinicians (teachers, local leaders, neighbours).

6. Cultural & Environmental Integration

- **Role:** Make healthcare holistic and sustainable.
- **Procedures:**
 - First Nations Elders embedded in governance boards.
 - Care planning includes cultural healing practices alongside Western medicine.
 - All facilities operate on 100% renewable energy by 2035.
 - Mandatory climate adaptation plans for every health region.

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Governance & Accountability

- **National Health Equity Commission (NHEC):** Monitors fairness, outcomes, and cultural safety.
- **Community Advisory Councils:** Each CHH and HoF has a local council with citizens, Elders, clinicians, and youth representatives.
- **Transparency Protocol:** Annual public health reports with AI-audited data for equity, sustainability, and effectiveness.\

Implementation Timeline (Procedural Rollout)

2025–2030 (Horizon 2 Initiation):

- Pilot CHHs in rural and First Nations communities.
- Introduce Community Health Certification programs.
- Begin renewable retrofits for hospitals.

2030–2035 (Scaling Up):

- National rollout of digital health IDs and AI decision-support.
- Expand DCNs with mobile units and wearables for preventive care
- Embed cultural healers in 50% of healthcare sites.

2035–2040 (Full Implementation):

- CHHs and DCNs cover 100% of population.
- All hospitals restructured into HoFs.
- Healthcare powered entirely by renewable energy.
- Universal equity in outcomes achieved across geography and communities.

Expected Outcomes by 2040

- 40% reduction in chronic disease prevalence.
- Equal health outcomes across rural, urban, and First Nations populations.
- 50% of hospital admissions replaced by preventive/community care.
- Net-zero carbon healthcare system.
- Increased trust and satisfaction, with healthcare ranked as the most human-centred public service.

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