

1. In your own words, state your understanding of the question.

2. What did Derek mean when he stated: "This is in part because all communities are dissipative structures so the question of who/where the rules come from is theoretically an infinite regress problem (but I digress)."

3. What did Derek mean when he stated: "But if this rule were jettisoned, it would dynamically alter the desired emergent property of the system. So, we must look at how the rules play themselves out statistically in the collective dynamics. Not at the ant-to-ant level but at the global level of collective dynamics. Without rule 4, ants would not stay on pheromone trails, thereby decreasing the probability of non-random searching/finding, thereby decreasing the probability of stumbling into a pheromone trail, and thereby decreasing the probability of a surprising and intelligent emergent property."

4. What did Derek mean when he stated: "The point I'm making is that it's less important who generates the rules than that they are the "right" rules. And, "rightness" is determined by how the rules are coupled to the desired emergent properties. The other thing I would say is that simple rules in CASs should be thought of as quite different from the kinds of "Rules" we think of that "nobody likes." These are not "regulations that are meant to govern conduct" but "degrees of freedom available to agent interactions." The simple rules of a CAS are the thing that makes the CAS behave the way it does. They are essential properties of the system."

5. What is the difference between a "Rule" in your organization (i.e. regulation) and the "Rules" of a CAS?

1. My understanding of this question is limited. I can only imagine that the author wondered which was better to create guidelines for learning systems: those who have used them or those who have not. In many cases, experience wins. I am not sure what the goal of the question was and would need more clarity to pass an opinion.

2. I think Derek made a very interesting point when he noted that it does not really matter where the rules come from, but if they are "right." Of course, many of us struggle with authority or being told what to do. Many of us wonder where the rules come from, who makes the rules, and why they are there. People, by large, are never going to be happy. People will feel that whoever made the rule should not have, etc. This is human nature. Whoever makes the rule does not matter. What matters is that the rule is righteous.

3. The ant analogy is an interesting one and I applaud Derek for thinking of it. It is easy to think of all lifeforms as ants, because it seems that we all go about our tasks daily. We move quickly, always on to the next thing. Many of us work to support our idols, whether they are the queen ant, the president, a religious figure, or a role model. If the 4th rule did not apply, it would be interesting to see what would happen. Would havoc break loose? Would food be easier to find? This also occurs in the human world. Would life be easier if certain rules didn't exist?

4. I touched on this question some in my answer for #2 of this section. The remark regarding rules and their rightness stuck with me. Something I find myself struggling with constantly is if I am in the right position to pass a judgement against those who do not follow a rule. I like to think I am a religious person, but I do not like to enforce the rules upon others. If someone would like to break a rule or sin, I feel that it is not my position to condemn them. It is only my job to love them and let someone else sort out the rest. Simply stated: Many do not like to follow rules. Some of us do not like to enforce them. One can only wonder what kind of lawless society we would live in without rules. However, it could also bring peace. It is hard to know.

5. I would say that there are several similarities in rules at my organization and CAS, as both are flexible and personalized. My workplace is very casual and employees are able to make their jobs their own. However, I am working to enforce more rigid rules following documentation. For example, a CAREGIVER cannot let their creative juices flow and document whatever they want. They must follow the rule of staying objective. Opinions have no place in documentation.

1. Answers in previous sections.

2. Daniel was not alone. I, myself, know that I was fearful on the first day of this course. I opened it and immediately closed it. After some time, students accept their fate and attempt to try this new form of learning. As time passes, hopefully the learning method becomes easier to understand.

3. Desire paths are a quick and easy way to link two things together. Creating the path is part of the learning process. Students use the tools they have available to navigate freely. Freedom is something relatively new to many students, but will force them to consider different learning strategies.

4. You could apply the desire path in a healthcare organization to make something easy, fun, and convenient. One could link two alike things to one another in a way that makes them memorable. For example, in my organization, a CAREGIVER may be more likely to remember a client's routine tasks if they create a list or map themselves. This inspires them to think creatively and take a second look at their daily duties. A desire path could also be drawn between relationship and task. While relationship comes first, task must come closely second to ensure our clients are safe and healthy enough to practice independence at home.

1. What VMCL functions does your organization possess?

2. What VMCL functions does a healthcare organization have?

3. Does your organization or a healthcare organization learn (and/or receive feedback)?

4. Explain the connection between VMCL and an amoeba.

5. If you were to design the VMCL of a healthcare organization, what would it be?

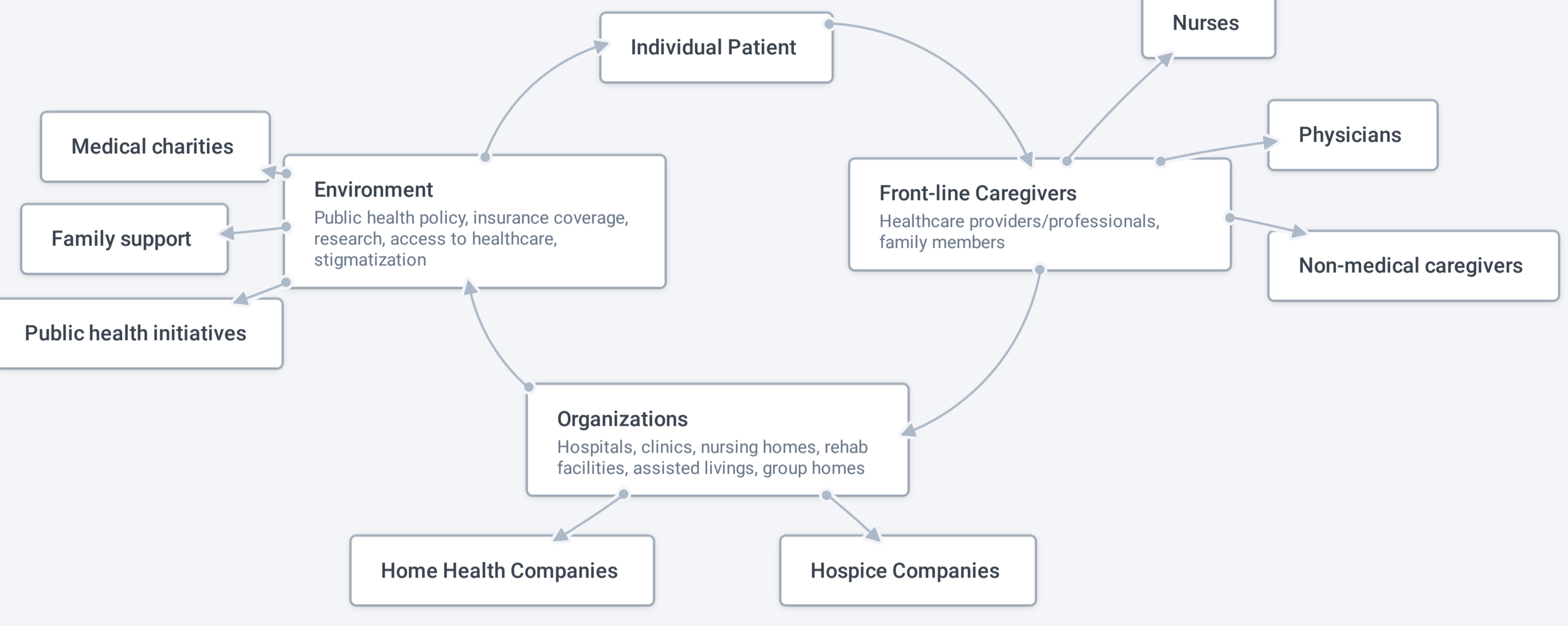
1. My organization is in home care for the geriatric population. I would have to agree with you, Professor, that the goal of most organizations is to supply and multiply. While our first goal is relationship over task and creating increased quality of life for our clients, we also focus on signing on more clients for revenue and sales purposes. We supply clients with care and we multiply our client base by creating and maintaining a positive reputation.

2. Many healthcare organizations strive for the things mentioned in the video and by the Professor. Organizations may want to grow their base, such as missionaries in the video, or clinics recruiting more patients. Healthcare organizations want to serve their purpose, help their populations, and continue to operate by earning revenue. As the video mentioned, the amoeba can change shape and move away from things not for it. Many healthcare systems constantly seek reviews and administer surveys. They attempt to adapt to their feedback and reinforce positive feelings.

3. In my opinion, if a healthcare organization is not learning, they are not growing. Change is inevitable in all walks of life and career paths. If organizations are not ready to change, they will become a thing of the past. My organization is rapidly changing and I was hired on to spearhead the switch to technology: virtual QAs/ online training/ electronic medical records. We receive feedback from a website called Listen365. Clients and CAREGivers are sent this survey about once every couple months and we closely monitor their feedback. Negative feedback enables us to know which relationships need extra nurturing.

4. I believe the connection between VMCL and an amoeba is the rapid change, elasticity, and freedom. The "blob" is free to move as it sees fit and may shy away from things that appear to be toxic. It can absorb good things, or it can absorb bad things. What we put in is what we will get out. We have the freedom to choose, and with VMCL, we are not enclosed with rigid rules.

5. I would design the Vision-Mission-Capacity-Learning (VMCL) of a healthcare organization loosely. I would start with our vision: our largest goal. Serve others. I would encourage employees to visualize this daily. I would put into practice things that are commonly used. For instance, a mission statement is something that many organizations already have. I would work to make my organization known for their mission statement and practice what we preach. I would further stress the freedom of the amoeba and the capacity our brains have to store and learn new information. I would constantly communicate with others in order to learn and share new things. I would encourage open dialogue. Most importantly, I would never let myself think that I know everything. I would foster an environment of learning.



Per your video, I decided to take a different route with my DSRP map. I found an online reference (<https://www.ncbi.nlm.nih.gov/books/NBK2287/>) containing a four-factor health system at a health administration level. The first level is the patient, leading to front-line caregivers, to organizations, to the environment as a whole. This is a simplified look at a DSRP map until one realizes the possibilities inside of each level of care. There are thousands of different situations, family dynamics, environments, and organizations that can affect a patient's decisions and quality of life.

Reference
National Academy of Engineering (US) and Institute of Medicine (US) Committee on Engineering and the Health Care System; Reid PP, Compton WD, Grossman JH, et al., editors. Washington (DC): National Academies Press (US); 2005.