

FEH UK

**PROJECT
FOR THE
NEW BRITISH
CENTURY**

Guy Incognito

Part of

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**The future is...
not looking
great, but we
can change
that**

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FEH UK CONDENSED POSITIONAL REVIEW AND LONG-TERM STRATEGIES FOR THE NEW CENTURY

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I. GENERAL OUTLINE

FEH has long been recognised for its work in providing healthcare to over fifty countries spanning four continents for decades whilst averaging a 30% annual return since its inception. It hitherto seemed FEH was bound to continue at this rate of growth but research from the United Kingdom branch FEH UK (FEH international headquarters) suggests a company-wide evaluation is required to initiate a strategic overhaul, to adapt to a new and changing world and geopolitics. This report summarises the issues necessitating such an extreme conclusion, and suggests various approaches which could if fully realised utilise the events which triggered this shift to company advantage. It subsequently touches upon, in *Section IIIc*, and explores, in the corresponding document “*DIRECTINJECTION.media*”, attached, a

best-case timeline which claims the startling outcome of total healthcare dominance worldwide, ratified by renowned futurologist Dr Albert Binks, professor of social sciences at Miami State University and popular science fiction writer.

II. A BRIEF HISTORY AND CONTEXTUALISATION

In order to illustrate the extent of the changes this report suggests must be made it is necessary to give a brief company and global history. We regret this clumsy exposition no doubt familiar to you all.

As the NHS began the slow but inevitable transformation into a fully private company during the mid-1980s it was clear not only to giant companies but attentive individuals that some sort of opportunity lay unclaimed. The founder of FEH, the eponymous Frederick Engels of Frederick Engels Health United Kingdom¹, began a data analytics and algorithmic development research company, FE, in 2011, after obtaining a Computer Science PhD from Balliol College, Oxford.

Quietly he became known amongst elite corporations as a master of optimisation. Wealthy companies of all kinds multiplied their profits by

¹ Born of Marxist parents Engels nonetheless refused to change his name in order to spite them with his eventual career path.

staggering percentages within years of employing FE's advisory services. Engels built a reputation as a wunderkind, befriending many powerful people, and contrived throughout to ensure he and his company were known only to those who could afford their services. This low profile meant that despite an ever-growing pool of assets his presence was only revealed to the world at large when in 2043 FE made a number of calculated and aggressive moves culminating in the acquisition of the United Kingdom's National Health Service. This had come seemingly from nowhere. In fact it transpired that this had been Engel's ultimate goal since his time as undergraduate. In the only public statement he ever made, one that blared from every news station for weeks, he announced:

We shall finally tame the bloated beast of the NHS and drag its body into the future.

The totality of success in the acquisition was no less striking and inflammatory than his rhetoric. From nowhere an unknown data analytics company had bought the government out of a nationally loved institution almost a century old. The NHS, was indeed, by the time of its takeover, a bloated and sorry coagulation of crippled, underfunded public services and uncooperative private companies whose refusal to compromise with the government had caused near total collapse of crucial function in public health

services, under the pressures of the UK's population growing by over 20 million people in the past half-century, an ageing population, and the geopolitical climate of the time. Anyone financially able to access private healthcare did so.

Despite this Engels was met with quasi-religious hatred and opposition from all quarters, continuing until five years later when it became apparent that he had, for all intents and purposes, “solved” the NHS. He turned its critical state around with apparent effortlessness. The machinations and processes he underwent are still not fully understood², and slowly he spread his tendrils into the private companies who were for the most part actively trying to destroy his work. Year on year he monopolised a country's health, starting with private clinics and hospitals in the early 50s. By 2070 all pharmaceuticals in the UK bore the characteristic FE logo.

His relentless work ethic, determined style and genius single-handedly made this company into the trillion dollar multinational it is today, and thus his tragic and senseless death in 2071, when he was viciously stabbed by a shard of plastic in an attempted mugging in West Brompton (passing soon after from massive infection), struck a huge blow to the company.

² For further reading on this, please consult “Healing the Blind – A Data Science Miracle” by Prof. Anna Carmen of UCL.

Upon his death instructions he had left ordered the immediate expansion of FE to other countries, naming the newly formed multinational Frederick Engels Healthcare. Such was his foresight that through typed instruction and batches of code he continued his duties as CEO for three years after his death.

I include this information only to draw attention to fact that FEH was for the majority of its lifespan a multibillion dollar man. Engels' leadership style has been described as a dictatorial; the corporate structure granted zero power to anyone outside of Engels and his monstrously complex AI. In 2074 he decreed posthumously that a board of directors should be formed, and appointed them. The board have since done a spectacular job at continuing the expansion and growth Engels envisioned, at maintaining his systems and algorithms, and by all accounts FEH has been remarkably successful since his death. However it is undeniable that only Engels' singular mind allowed him to enter such a hostile environment and dominate. We propose in the remainder of this paper that the world itself is soon to enter historically unprecedented turbulence, and that we should, in the spirit of FE, not recoil in horror, not cling onto our previous structures, but rather, seize upon this as an opportunity to build.

III. THE WORLD TODAY

The world has changed since Engels' death. This change has been precipitated directly from mass migration which has been growing at an increasing rate for the last hundred years. Besides the warfare and collapse of fragile autocracy that we are accustomed to (in large part resulting from the recently declassified, and widely condemned, destabilisation activity that formed the bulk of big state power play of the era), a new cause of instability has surfaced: the oceans have risen approximately four feet since FEH was founded and projections suggest this could triple over the next century. While many coastal and low-lying areas have been submerged, London flooding as a matter of routine, our team believes the full extent of the ramifications of another eight feet of sea level rise has been underestimated by the majority of international healthcare companies. FEH has a window of opportunity to capitalise on this underexploited market. This point is expanded upon in *Section IIIa* below.

Thinking locally, representing now the United Kingdom branch of FEH, the UK and particularly London itself have changed in new and exciting ways yet to be properly acted upon. Much of this is due to the fifty million people who have needed relocating in the last two decades. Of particular interest is the manner in which the influx of migrants and immigrants

have been distributed around London. The altered geography whenever the city floods informs the movements of every socioeconomic class. Higher ground is desirable and thus expensive. Economic contours trace their topographical cousins; the standard pattern about a high point in London is a series of concentric circles whose wealth diminishes inversely with radius.

Suggestions on how best to synergise with this unique and challenging market can be found in the attached “*Tour D’Ivoire*” pamphlet. Thanks to our Securities & Marketing branch of FEH UK for this work. I would like personally to mention Thomas Martin, Head Developer of S&M for his elegant solution there detailed, combining a geometric approach to a notoriously difficult shape optimisation problem with a glamorous and salable new healthcare solution for business-minded professionals and high-flying lifestyles.

The flooding itself presents an opportunity: analysis suggests the city, increasingly separated by the measure of quantity of personal asset flow, has developed discrete ecosystems within the loosely defined borders distinguishing more and less economically successful citizens. The ten richest men in the city never come closer than a couple of miles to a Band D citizen, and hence would never in usual circumstances contract a disease that such an individual might be carrying. The lower bands of citizens have so far been neglected in

their healthcare in part due to their number and location. Fortunately this presents FEH UK with an opportunity to assist those in this situation. In *Section IIIb* we explore how best to address and serve customers across a highly dynamic economic spectrum of affluence in order to best address their needs.

As a consequence of this unusual distribution of population, the immune systems of the different categories of Londoners are highly variable. Consider massive flooding, in which large volumes of unsterilised water and indeed classes of citizens from different areas of the city are spread to areas they would never otherwise reach. The potential for infection is enormous: more wealthy members of society risk exposure to pathogens their bodies have never before encountered. Coupled with this is an astonishing growth of population that has exceeded estimates – twelve billion people now live on this planet. In our final section we discuss implications of this that have only recently been discovered.

FE began a biometric collection policy immediately after the acquisition of the NHS, and has continued to gather and analyse these data. From this we have encountered information that seems concerning. In *Section IIIc* we argue that the collection program must be pushed as aggressively as possible with a view of reaching 90% uptake in the next 10 years (currently at 45%).

IIIa. MAKE CLIMATE CHANGE A FRIEND NOT AN ENEMY

Climate change has changed the business world. In our view, at least in healthcare, the standard approach of many heavyweight firms (PfizerHelm, GSKQR etc.), and, regrettably, FEH, has been reactive and thus passive. When FEH property floods, is attacked by criminal rioters, or is evacuated, the company suffers: this should not be permitted. FEH should anticipate and take advantage of structural disorder, not bend to its whims.

FEH needs a new approach to business in times of climate change.

Build offices on high ground. This is a simple point. I regret to report that more than ten offices in the last year have had to perform restorative work due to water damage. One has had to be evacuated entirely. It is crucial for our physical grounding to be as strong as our strategic one.

Develop water rise prediction models. The framework is already in place using the Engels flagship AI. A new program which can calculate short and long term predictions of large-scale water movement is being trained. This will serve us doubly: in a defensive capacity, protecting our properties from water; and foreseeing civil unrest which, in previous times, has caused destruction of property and in a few

tragic cases loss of FEH employee life. By monitoring perturbations in the water we can monitor indirectly the stability of the world.

Secondly it awards us tactical opportunities. Were a competitor's operational base compromised due to unexpected flooding, we could move rapidly into the area and take advantage of the newly-created demand.

Similarly, were we were to learn that, say, a large area of housing was to be demolished in a tidal wave of diseased water, FEH could, with warning from our models, prepare an appropriate number of "survival packs" to assist the pitiable people unfortunate enough to be caught up in the disaster. With sufficient warning FEH could make movements to ensure these people would have some means of funding this purchase, thereby reducing risk of bad loans. Anticipating these disasters has potential for both profit³, and the opportunity to help.

Further details are listed in the attached paper "**FLUID MODELLING – A TECHNICAL AND POLITICAL CASE FOR DEVELOPMENT**".

³ Historically disasters have always been a worthy cause not only to help people in difficult times but also to take a justified percentage. Over 150 years ago, the Red Cross sold doughnuts and coffee at the Battle of the Bulge to grateful soldiers. It has been clear historically that this kind of aid can help both victim and helper.

IIIb. NEW CLIENTS

While the *Tours D'Ivoire* series will accommodate the top percentile of our customer base there is a large market in other financial bands. The middle classes have for the most part been accommodated for in this respect – while there is room for improvement in these areas the analysis of this audience has been delegated to a sub-department. Our primary focus is on what we view as the most undervalued market currently accessible: migrants escaping war, flooding and various other complaints in dangerous parts of the world.

Migrants tend to live in communities together in poorer parts of cities, arranging their own primitive healthcare formed within their own home cultures. It is a national disgrace that they have not been supplied with humane healthcare and living conditions. With evermore millions of migrants moving into the UK there exists an unparalleled market density. The reason this has not been yet exploited is the misconception that because they individually do not have much money, they cannot be sold things. This is patently nonsense; it is remarkable so many companies have been so naive about this.

FEH PR must develop an emotional campaign to engage the UK and world at large. The empathy of the British people will induce a swell of support if

confronted with the reality of these poor souls living in such squalid and verminous conditions. Initiating an advertising and awareness program, enlisting the help of NGOs, our models predict substantial returns within the decade. FEH's record would then ensure these funds would be distributed through our infrastructure.

Given the scale of current and projected migration, significant growth seems inevitable assuming the success of this program. Consult the attached confidential document, codenamed CHARITYSTREAM.

IIIc. AN URGENT CONCERN

Data collection has long fuelled the success of FEH, even from Engels' days at Balliol. Over the years we have upgraded and enhanced our methods, most recently with the BodyChip, a non-intrusive implant which collects all known data the body outputs, offering inherent health benefits and encouraged by free BodyChip upgrades at all hospitals and consultations. Market saturation reached 45% thirty years since first insertion of the implant. This has provided us with massive intake of data on which we train our AI, the keystone that FEH is built upon.

Analysis of this data in research commissioned by acting CEO Lloyd Fenway has revealed some disturbing results. While action must be taken to

resolve the issues that have been located, it should not be a cause for alarm – if our path is chosen carefully it has the potential to propel FEH into dominance of the healthcare market worldwide.

Studying patterns amongst the biometrics we have collected, it appears as though due to the segregation of different wealth classes, and the resulting disparity in strength of immune systems, a disease is currently being incubated in the migrant classes which has the potential power to kill millions – namely, the rich. Constant mutation on the virus's part combined with a brutal form of modern natural selection in the flooded slums of London, where, during the *Persephone* floods of 2083–2084, the death rates reached almost 10,000 per 100,000 in some areas (compared to around 500 per 100,000 in the Weald Common Skyscraper complex), have combined to form a deadly weapon, one that can kill only those wealthy enough to have not developed immunity.

To study this further it is imperative that we encourage mandatory BodyChip implantation for UK citizens. We suggest a stick-and-carrot approach towards the government, using the risk of pandemic while emphasising the benefit that higher uptake would grant, for instance, their surveillance capacities. This combined with heavier incentives for the public themselves to get an implant (such as raising premiums for unchipped citizens) during the legal

transition process seems a plausible strategy. Once this has taken place the exchange of data can be favourably adjusted in order to encourage cooperation from the government and, ideally, assistance from military and secret services.

With this information we can learn about the disease as it grows stronger and more contagious, protecting ourselves and the nation from its disastrous consequences. But this need not be a purely defensive manoeuvre. Needless to say, what follows is maximally classified information.

Ideas yet proposed include arranging with a migrant (perhaps by inviting their family to join Engels Sheltered Accommodation Project initiative) that they enact some sort of spatial infiltration into the more wealthy quarters of a designated major city, carrying with them a suitably aggressive microorganism common only in less economically developed areas local to the region – a sort of vector transmission. Its ensuing spread across the higher classes will force the government into immediate action, this action primarily manifesting as massively increased financial support of its most trusted healthcare intermediary, Frederick Engels Healthcare United Kingdom.

Rather grander and more elaborate suggestions are detailed in “*DIRECTINJECTION.media*”, attached below. Be warned that it is a self-deleting file and

will be destroyed after it has been read once. The flagship Engels AI claims that FEH stock could more than quadruple in a decade if these plans are properly enacted, but their long term consequences are potentially far more exciting. For further discussion on this matter do not hesitate to contact me; I will come straight to your office.

J.O. 30/01/2100

Enclosed documents:

“FLUID MODELLING – A TECHNICAL AND POLITICAL CASE FOR DEVELOPMENT.textual”. 30 Mb.

“Tour D’Ivoire.pamph”. 100 Mb.

“CHARITYSTREAM.textual”. 13 Mb.

“DIRECTINJECTION.media”. 4 Gb [self-deleting file].

About the author

The NHS is one of the greatest things about Britain, and it's at real risk of being completely dismantled and privatised. As someone with severe mental health problems I've experienced the effects of budget cuts first-hand, with never-ending waiting lists and constant shortages of psychiatrists and appointment times. Fundamental to good healthcare is a healthy society. Killing millions in illegal wars like in Yemen, where the UK supplies Saudi Arabia with arms and training; economic inequality increasing year on year; these things are incompatible with healthy society. The idea that health and politics cannot be separated motivated my competition entry.

Inspiration

US- and UK-backed Saudi Arabia bombed a Doctors Without Borders cholera treatment centre in Yemen on 11/06/18. The UN says 18.4 million Yemenis are at risk of starving to death by December 2018. Our society must change completely if we're to have hope for our future, in healthcare or otherwise.

Writing the future

kaleidoscope.healthcare/health2100