

Summaries

Auto-referentiality, Networks and Personalization of Health Care

(Mauro Moruzzi)

The high level of auto-referentiality is the biggest factor of the slowing of neo-reformist politics of Western governments. In internet-age, the Luhmannian theory, which sees auto-referentiality as a point of *auto-reflexivity* and systemic *efficiency*, must be reconsidered. The *personalization* and *customerization* of the product-service that – in a Net-Based Scenario of organization – can be reached through high levels of *communication* and *integration* in health care/community care, might be the socio-techno answer to auto-referentiality. The Net is not a new technological infrastructure but a new socio-techno organization. An example is the original experience of the *leadership governance* in Emilia-Romagna Region. A new *environmental subjectivity* can lead to health care services the more and more personalized. The world of internet, through *Google*, has given us a brilliant lesson of how ideas and dreams can become real. The e-Care could be a dream of a new Welfare which becomes real.

e-Care: The New Communication through the Network

(Lella Mazzoli)

Thinking about social relations as networks let us better understand all the contradictions and the complexity of modern, advanced society where natural/social and artificial/technological networks can not be considered separately, because of their strictly interdependence even in the field of health. The article underlines how social relations and everyday experiences are mediated by technology in European and Italian e-Care experiences, regarding to easier access to health information through internet or to interactive systems improving communication between patient and health care system or, finally, developing *user friendly* technology.

e-Care System for a Citizen's Welfare

(Gerardo Lupi e Walther Orsi)

e-Care Project in Bologna wants to provide to the elderly and to their families a communicative support and a better knowledge about the ways of approaching

social and health services through technology. The two main areas of intervention of e-Care Project are: supporting disabled people and prevention/promotion of the quality of life. The experience of e-Care Project shows the important role of citizens as main experts of quality of life and his/her role for the promotion of a new welfare development.

Networks for the Integration between Health care and Community Care: Some Opportunities for General Practitioners

(Giandomenico Savorani)

Today, the General Practitioner must be able to integrate his/her professional skills, his/her personal self-confidence, the responsibility for the community he/she belongs to, and the respect for every person without any reference to age, gender and kind of disease.

The definition of his/her role is the premise for the thesaurization of his/her specific professionalism and for the creation of the basis on which develop the life-long learning for physicians and a common code among colleagues. Therefore, it is important to give, through new technological tools, new answers to the needs of the patient/user/citizen in order to help him/her in the therapy and in the development of his/her health literacy.

Health care and web surfing. From Anomic Use to Hon Code

(Maurizio Esposito)

Information Technology is an important source to improve medical practice and in particular it can be useful to facilitate the relationship between patients and health care system, even if some problems can occur.

For instance, answering doctor's multiple needs for training and information, can also produce confusion in them. To avoid that problem, *Health On the Net Foundation* [www.hon.ch] has created a code, the so-called "HON Code", about the right use of Internet on health field. Maurizio Esposito pays particular attention on the second point of the code (*Complementarity*), that underlines the importance of interactive perspective between doctor and patient.

e-Care as a Tool of Clinical Governance

(Fausto Marchetta and Sabrina Raspanti)

In the health care system inefficiency is a consequence of a low degree of integration between theory (scientific evidences) and clinical practice; of a low intensity of communication and of an insufficient collaboration among professionals. Moreover, the high number of top/down models of organization instead of network-models plays also a role in lowering efficiency. The e-Care network model might stimulate an increase in participation among professionals. In health care, e-Clinical Governance is the technological infrastructure that can improve the diffusion of information, the "intensification" of communication and the development of interactions.

Caring systems*(Mike Martins)*

The programme called *Connecting for Health* in the UK is a public sector IT procurements. In the article the author describes it, focusing on the concept of a shared record and trying to explain that it is not a simple issue of data aggregation and integration in the delivery of complex multi-agency care. As the author sustains, with such an approach, there is the risk of delivering information overload on the one hand or provoking resistance, abuse and misuse on the other on the grounds of confidentiality and proportionality on the other. At the contrary, shared record should not be considered as a shared information artefact but as the outcome of a service-oriented infrastructure which is able to differentiate contents across the spectrum of general and shared responsibilities and specific and specialised responsibilities.