

**NEW
FILE
BEGINS**

Doc #3

**B&B INFORMATION & IMAGE MANAGEMENT
300 PRINCE GEORGE'S BOULEVARD
UPPER MARLBORO, MARYLAND 20772 • USA • (301) 249-0110**

File

Through: Surgeon General, PHS
Director, NIN

March 21, 1968

Associate Director, NIN, and Director
Division of Regional Medical Programs

Reporting Highlights of the Eleventh Meeting of the National
Advisory Council on Regional Medical Programs, February 26-27, 1968

At the eleventh meeting of this Council, six planning supplements, four
new operationalis, and two operational supplements were reviewed. The
Council made the following recommendations:

PLANNING SUPPLEMENTS

3 G02 RM 00013-0252, Western New York (Buffalo)

The Council recommends approval in the amount of \$174,909 for one year,
as requested.

Council was cognizant of the immediate need to further augment current
program staff so as to assure maximum capability to meet present obligations,
as well as future requirements in the area of program development. It was
felt that adequate justification for additional staff was presented in the
application and that the results of the site visit on February 5-6, reinforced
this identified need.

3 G02 RM 00028-0251, Alabama

The Council recommends disapproval because this diffuse, poorly organized,
document failed to describe objectives or project an impact on regional health
care. Lack of approval by the Regional Advisory Group is a further major
drawback.

A major planning activity involves 10 sub-projects in veterans hospitals,
including a heavy investment in equipment. It is hoped that involvement of
the Veterans Administration Hospitals will continue, but in a way more in
keeping with health activities for the entire regional population.

Council agreed on the recommendation for disapproval after deciding that the
application is not suitable for revision. Disapproval, however, should be
construed as an encouragement to examine goals and priorities more closely,
and to present them more clearly in an entirely new proposal. (See attached
letter to Doctor Volker.)

3 G02 RM 00031-0251 and 3 G02 RM 00031-02 Metropolis, Washington, D.C.

The Council recommends approval in the time and amount requested of \$236,089 for one year, plus appropriate indirect costs.

The Council felt that experience during the first planning year has demonstrated that the original projection of staff needs was unrealistic. The Council believes that coordinators are needed in each of the participating universities, the Health Department of the District of Columbia, and the Hospital Council of the National Capital Area.

The Council also approved the staff recommendation that the second year planning grant be increased by \$35,163. These funds will support a stroke project director, coordinating personnel at the D.C. Health Department, and consultant services.

3 G02 RM 00044-0281, Maryland Regional Medical Program

The Council recommends approval in the time and amount requested, less funds for renovation.

The epidemiology and statistics center, as well as the stroke components of this application, were felt to hold particular promise as Regional Medical Program activities.

The amount requested is \$328,700 direct costs, plus appropriate indirect costs.

3 G02 RM 00045-0251, West Virginia Regional Medical Program

The Council recommends conditional approval subject to a site visit for purpose of clarification of issues and to assist and encourage the region in its transition to the operational phase.

Even though Council believed the proposals to be diffuse, they also felt that the objectives are desirable even though the methods proposed are somewhat unusual. Certainly there was no doubt that this region is making a sincere effort to come to grips with its many problems, and it needs encouragement and assistance.

The amounts requested are: \$127,632, first year and \$58,992, second year, plus appropriate indirect costs.

3 G02 RM 00046-0251, Georgia Regional Medical Program

The Council recommends conditional approval in the amount of \$208,031 for one year as requested. Request for additional personnel is reasonable and consistent with staffing requirements for an active region about to assume operational status. The Council conditioned its recommendation upon assurance from the Regional Medical Program that involvement of minority leaders and predominantly Negro institutions is taking place, and that

the program being planned will include projects to benefit minority groups.

The Council also approved the use of \$89,000 of funds unexpended in the first year for a further necessary supplement to the core staff. ✓

NEW OPERATIONAL

1 G03 RM 00006-01, North Carolina

The Council recommends approval in the time and amount requested, conditioned upon reduction of the amount of compensation to be allowed for physician trainees in the Continuation Education in Internal Medicine project to stipends of \$1,500 per month.

It was agreed that this was a well-conceived application which would consolidate planning activities and operational projects into one grant. Although several of the proposals are not directly related to the categorical diseases, they reflect regionwide cooperation in meeting locally developed priorities for health care resources.

The amounts requested are: \$1,200,916, first year; \$1,317,129, second year; and \$1,166,203, third year, plus appropriate indirect costs.

1 G03 RM 00012-01, Oregon

The Council recommends approval in the time and amount requested with advice to the Region that assistance be sought from the College of Education of the University of Oregon for designing better evaluation of the project.

The Oregon program has demonstrated impressive progress and is sufficiently developed to move into an operating program and the project is appropriate for support by Regional Medical Programs.

The amounts requested are: \$179,242, first year; \$166,706, second year; and \$174,204, third year, plus appropriate indirect costs.

1 G03 RM 00031-01, Washington, D.C.

The Council recommends conditional approval for approximately \$343,000. Projects one and two, are to be supported for the time and in the amount requested of \$276,098 for the first year; project three to be supported for two years only at a reduced level of approximately \$66,902. No funds to be calculated in the award for project four.

The projects included in the application are:

1. Frederick's Hospital Stroke Station

The Council recommended that funds earmarked for stroke detection and care be used to support this project.

2. Cardiovascular Disease Follow-up and Surveillance System

It is believed that this is research aimed at an important problem but designed in such a fashion that it is much more than just a registry.

3. Training Program for Cardiovascular Technicians

The Council shared the concerns of the earlier review groups regarding the excessive costs requested for the project, the doubts about educational competence on the project staff and the project staff's understanding of equipment requested. The hope was expressed that the project would serve as a pilot for further development of this kind of training as a regional resource, rather than for a single institution. Therefore, Council recommended that this project be supported for two years, after the equipment needs have been discussed by staff with the project personnel and a more realistic budget has been negotiated.

4. Home Telecasts of Medical-Surgical Conferences

The value of home telecasts as a tool for continuing education has not been established. This is an expensive project proposal, and the Council did not feel that it is developed to the point that it merits funding as "feasibility" as it is proposed.

The amounts requested are: \$599,476, first year; \$296,315, second year; and \$158,447, third year, plus appropriate indirect costs.

1 G03 RN 00032-01, WICHE Regional Medical Program

The Council recommends approval in the amount and time requested.

The region is well organized and eager to focus on the solution of their problems. The staffing of intensive coronary care centers in small hospitals was identified by the region as of first priority and the region has approached its development in a competent manner. The University of Washington Medical Center, through its consultants to the WICHE region, will continue to encourage and strengthen the program.

The amounts requested are: \$175,287, first year; \$150,666, second year; and \$133,306, third year, plus appropriate indirect costs.

OPERATIONAL EXPENSES

3 G03 EM 00002-0181, Kansas

The Council recommends conditional approval of all five components of this application subject to a Council site visit to obtain further clarification and determine the amount to be awarded.

The Council expressed interest in the over-all development of this program. The Council felt that this was a well planned group of projects which are worthy of support.

The amounts requested are: \$397,710, first year; \$270,923, second year; and \$248,887, third year, plus appropriate indirect costs.

3 G03 EM 00009-0183, Missouri

The Council recommends deferral, pending a site visit, with return to the Review Committee and Council for final recommendation.

Council members believe that both projects in this application need a site visit in order to clarify project objectives, local capability for accomplishing the proposals, and appropriateness of the requested budgets.

Project development has apparently been successful in fostering cooperation between M.D.'s and D.O.'s in the stroke project. It seems likely that the proposed Cooperative Tumor Registry would expand a registry already in operation. In that case, the present functioning and utility of the registry should be described.

The amounts requested are: \$841,155, first year; \$596,834, second year; and \$610,962, third year, plus appropriate indirect costs.

REPORT ON KAMARKED FUNDS

In the last session of Congress, the Appropriations Committee directed Regional Medical Programs to support programs in coronary care, community hypertension programs, community detection and treatment programs in stroke, chronic pediatric pulmonary disease centers and chronic pulmonary disease programs for adults (emphysema) to the extent possible. The appropriation included one million dollars for each, except \$750,000 for chronic pediatric pulmonary disease centers, and two million dollars for the emphysema programs. The regions were advised of the intent of Congress in a special communication forwarded to each region in December. The National Advisory Council on Regional Medical Programs appointed a sub-committee to make special plans so that programs submitted for these

-5-

earmarked funds could receive prompt and critical reviews. This sub-committee met on February 25, 1968, and submitted its recommendations to the total Council on February 26. The Council agreed with the recommendations of the sub-committee in approving programs in stroke and coronary care obligations totaling \$2.8 million.

The Council sub-committee has scheduled a second and final meeting for April 8, when commitments in all areas will be made. On the basis of proposals now available, the program anticipates expenditure of funds for Regional Medical Programs in the area of earmarks in excess of the amounts designated by Congress.

It is the intention of this Division to activate these grants.


Robert Q. Marston, M.D.

Attachment

cc: DRMP Staff

EHandal:sgb