



Memorandum

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
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Public Health Service - Region III

DATE: August 5, 1974

TO : Mr. Eugene Rubel
Director, Division of CHP

FROM : George C. Gardner, M.D.
Regional Health Administrator

SUBJECT: Proposed Task for Implementing HRP Legislation

Rubel

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Thank you for the opportunity to formally review the draft work program for implementation of the health resources planning legislation requested in your July 22, 1974 letter. I agree wholeheartedly with your desire to work together in the critical areas of program development. My staff has reviewed the proposals in detail and we have discussed what we feel are positive approaches to the entire proposed draft work program which you have given us.

While we note that in your letter you requested that we refrain from the we/they dichotomy we are concerned about the heavy centralization aspects that are not only suggested but are thoroughly implicit throughout the draft proposed. Such drafts make the issue of the dichotomy one that cannot be avoided in terms of our response. It is clearly obvious that your staff has not quite perceived that the role of the regional office is an integral part of the administration of the proposed program. We need to state some concern that the HRP legislation will raise the specter of recentralization fully. To avoid this we would like to state our concern about what sometimes is explicit and sometimes is implicit, in your description of the right hand most column in the work program describing the responsibilities as assigned either to Regional Office or Central Office. Taken as a whole it describes no clear regional office role throughout

the draft document. Only one assignment is solely in the purview of the regional office. I know that this is not a suggestion that you had either implied or explicitly wanted to relay in material that you have sent us.

At the same time, we find with a great deal of concern many if not most of the present role, relationships and duties of the regional staffs relegated either solely to central office or in conjunction with it.

We welcome a close cooperative programmatic relationship with DCHP Central Office. We would also welcome a better and more equitable allocation of responsibility and relationships to the resources we have. The staff of HRP is proposed to be approximately equally divided between central office and the regions. Yet we see no consonant distribution of the work load. To accomplish a more equitable distribution, we suggest a redrafting of the HRO -OPS objectives to reflect a better definition of the role of the regional offices.

Under separate cover we are giving specifics to that involvement which I trust your staff will take into consideration.

However, because individually they may be subject to discussion, we would volunteer 2-4 man days of staff time from this regional office to clarify the issues therein described on the role of the regional office vis-a-vis what needs to be done from our point of view. Should you accept our offer, we would be glad to serve as focal points for input from other regions and RHA's. If you do accept, please contact Dr. Z. E. Farag, Director of the Division of Health Resources Development.

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We feel keenly that the hypothesis under which we labored that what went wrong was due to mechanical flaws in the implementation of the CHP program is only partially correct. There is still a great need to define national policy issues on substantive concerns, on narrowing the focus of the agency's mission, of the need to aid the agencies as they develop methodologically sound means of assessing the area need and describe the nature and scope of the system's future, and the need to appropriately amalgamate those plans in state and subnational ways. We would like to be involved in these activities as well as those described in your work plan, and we hope that the nation's supply of staff can be so divided as to equitably and effectively marshal the resources to get the job done for this important program.


George C. Gardiner, H.D.