



E000479

PILOT ARTHRITIS PROGRAM

Distribution of Continuation & New Funds Requested

<u>Region</u>	<u>Base: 1975 \leq 1974</u>	<u>1975 Incr. in 1974 Projects</u>	<u>1975 Project Add-on</u>
Alabama	148,529	-	-
Albany	0	-	-
Arizona	214,155	-	-
Arkansas	100,000	+ 25,261	-
California	289,146	-	-
Central New York	40,000	-	-
Colorado-Wyoming	174,290	+ 24,604	-
Georgia	173,377	-	-
Greater Delaware Valley	247,500	-	-
Hawaii	216,000	+ 3,383	-
Intermountain	84,123	-	-
Iowa	0	-	-
Kansas	226,400	-	-
Metropolitan Washington	94,920	-	-
Michigan	194,700	+ 16,300 -204,104 + 30,000	49,224
Mississippi	58,000	-	-
Mountain States	-	-	+ 14,090
New Mexico	101,110	-	-
North Carolina	211,500	+ 100,000 -143,306	-
North Dakota	111,000	+ 9,000	-
Ohio Valley	35,225	-	-
Oklahoma	40,867	-	-
Puerto Rico	92,160	+ 38,000 -48,474	-
Susquehanna Valley	-	-	+ 139,500
Tennessee Mid-South <u>1/</u>	(107,484)	(124,838)	232,322 <u>1/</u>
Texas	105,200	-	+ 53,000
Tri-State	145,260	-	453,822
Virginia	40,000	-	-
Washington/Alaska <u>2/</u>	(35,622)	-	+42,995 <u>2/</u>
Western Pennsylvania	133,330	-	-
Wisconsin	62,000	+ 25,000 49,225 <u>X/</u>	-
Totals:	3,338,792	507,357	931,953
Cumulative Totals:	3,338,792	3,846,149	4,778,102

1/ Funds for Tennessee Mid-South 1974 arthritis program were made available from non-earmarked funds available to the RMP. Grant request for 1975 treated as new.

2/ Washington/Alaska: Same circumstances as Tennessee Mid-South.

3,338,792
 242,000 1974 expansion
 280,000 "new" program (much of it
 is continuation)
3,860,792
 "Reasonable" level \rightarrow

PILOT ARTHRITIS PROGRAM

Region: Alabama

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	95	7/74-9/75	228,400
	1975		10/75-6/76	148,529
	<u>1/</u> (1975		1/76-6/76	65,617) <u>1/</u>

1/ Request of \$65,617 was included in regular May application, and is made up of balances of RMP funds which RMP determined to apply to this program. This request will be dropped if the supplemental request of \$148,529 is approved.

The continuation request covers 9 month's continued efforts to develop arthritis clinics at Huntsville, Mobile, and Tuscaloosa, as well as arthritis laboratory services expanded as a central service at the University of Alabama in Birmingham. Inclusion of arthritis information of the MIST telephone system is projected. Emphasis will be placed on increased use of laboratory services, and increased practicing physician and allied health personnel in monthly clinics. UAB has assisted the establishment of the University of Southern Alabama's (Mobile) teaching curriculum, and is continuing to provide teaching services there until the rheumatology facilities are developed.

PILOT ARTHRITIS PROGRAM

Region: Albany

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	51	7/74-6/75	130,940
	1975			0

Albany Medical College has developed a multidisciplinary arthritis clinic in conjunction with arthritis laboratory services. From this base, out-reach clinics were established at Glen Falls in October 1974, and Oneonta, in January 1975. The program has achieved sustaining support through participating hospitals, and third party payments.

PILOT ARTHRITIS PROGRAM

Region: Arizona

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	30	7/74-6/75	215,000
	1975		7/75-6/76	214,155

The continuation proposal projects continued development and demonstration activities in the 6 southern counties centered on Tucson. Expansion of services to selected counties to the North is planned. In the first year, 17 communities were selected as the sites of developmental activities; 28 consultation clinics were conducted in rural communities, and 21 home modifications were completed. Physical therapy services were provided regularly at 6 rural sites, and additionally in homes to groups and individuals. A weekly clinic has been presented at a local hospital, and 13 physicians have received arthritis training. In the coming year, emphasis will be placed on continued rural outreach, and development of information services to Indian, and Spanish speaking populations. Additional home modifications are planned for demonstration purposes, and some vehicular modifications.

PILOT ARTHRITIS PROGRAM

Region: Arkansas

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	95	7/74-6/75	100,000
	1975		7/75-6/76	125,261

Ten (10) physical therapy clinics are being established, and 2 rounds of 3 planned rheumatology consulting clinics have been conducted for 164 physicians, and 147 health professionals. A statewide patient education program has been mounted, as well as WATS telephone services to physicians, and public education. Diagnostic and therapeutic criteria for arthritis diseases are being presented in clinics. Continuation activities will provide development of education and consultation for juvenile rheumatoid arthritis. Home care physical therapy services will be expanded through workshops for therapists and others in outlying areas. Arthritis consultation clinics will be expanded by 50 percent, and increased activities will be developed with respect to patient education through County volunteer action committees, and public seminars.

PILOT ARTHRITIS PROGRAM

Region: California

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	7/74-8/75	397,250
	1975		9/75-6/76	289,146
U.C. Davis	1974	154C	9/74-8/75	52,751
	1975		7/75-6/76	43,000
U.C. San Francisco	1974	154D	9/74-8/75	122,078
	1975		9/75-6/76	70,000
St. Mary's Hospital, S.F.	1974	154E	9/74-8/75	40,586
	1975		9/75-6/76	33,821
UCLA	1974	154I	8/74-7/75	45,049
	1975		8/75-6/76	47,805
Orange County Med. Center	1974	154J	8/74-8/75	39,225
	1975		9/75-6/76	35,956
Loma Linda University	1974	154K	9/74-8/75	25,456
	1975		9/75-6/76	21,213
U.C., San Diego	1974	154M	9/74-8/75	45,783
	1975		9/75-6/76	38,000

The CCRMP arthritis program is provided policy and priority direction by a 17 member State Arthritis Council. Project 154C serves a juvenile clientele by establishing a referral system for JRA's in northern California. 700 physicians have been contacted about the service, and 40 physicians are presently referring children to twice-monthly clinics. In 1975, emphasis will be on increased outreach to family physicians, professional training, and inventory of the JRA patient load in northern California.

Project 154D is developing arthritis diagnosis and treatment teams in the San Francisco area. A multidisciplinary staff has instituted training and clinics in 9 hospitals. A wide variety of clinics, rounds, lectures, and conferences have been employed to catch the interest of personnel, and obtain involvement. In 1975, teaching services will be taken to 6 additional hospital staffs, and standardized diagnostic tests will be established. The teaching program will be evaluated with uniform audit criteria in 4 hospitals.

Project 154E utilizes two teams to (a) provide multidisciplinary evaluation and diagnosis for clinic and private arthritis patients, and (b) an allied health professions team to develop nursing and patient assessment, and ultimately to produce teaching outlines. Of 26 patients reviewed by the 1st team, 18 were accompanied by private physicians. In 1975 clinics and con-

ferences will be scheduled weekly, and increased patient followup will be performed. Arthritis treatment resources will be inventoried, and patient evaluation criteria will be tested.

Project 154I is cooperating with a Los Angeles County Department of Health survey of means to establish decentralized health clinics. Data has been collected on 90% of the area's known arthritis patients, and is now being analyzed. A high missed-appointment rate has been identified. In 1975, data collection will be continued and indicators refined, and a bilingual clinic will be demonstrated in an established neighborhood health unit.

Project 154J is developing outpatient and home services by increased utilization of professional allied health personnel. The objectives are to identify the needs for arthritis outpatient services, reduce physician patient overloads, and improve services for patients unable to come to clinics. The need for home services has been identified as less than had been anticipated. Services have increased by 40 additional patients monthly, and 180 additional treatments. In 1975, the demonstration will be continued, and public education and support resources will be developed. Patient evaluation criteria will be tested.

Project 154K emphasizes training and service outreach from Loma Linda University hospital. Professional and public education services are provided by a multidisciplinary team which conducts clinics, conferences, and seminars. In 1975, in-house physician conferences for practicing physicians will be conducted weekly, as well as monthly allied health seminars.

Project 154M has resulted in the establishment of comprehensive arthritis services at University Hospital, in San Diego. Allied health personnel have been added to existing research, training, and surgical services. A rehabilitation grant has added significant rehabilitation capacity, and an active return-to-work program is developing with enthusiastic employer support. A strong patient counseling and outreach program is operational. A cost analysis system has been instituted to provide cost breakout for billing and reimbursement purposes. The scope of coordinated services permits assessment of care screening, care input quantification, and definition of allied health roles in comprehensive care delivery. In 1975, training, treatment, counseling, and rehabilitation services will be continued, with emphasis on patient evaluation, and development of allied health cost effectiveness data (re. reimbursements).

PILOT ARTHRITIS PROGRAM

Region: Central New York

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	61	9/74-8/75	70,200
	1975		12/75-6/76	40,000

The Department of Rehabilitation Medicine, Upstate Medical Center in Syracuse, is the center for arthritis activities comprising 4 clinics each week at UMC, and provision of consulting team assistance for clinics at Utica, Binghamton, and Ithaca. The latter two clinics have focussed on professional education, while at Utica, emphasis has been on patient diagnosis and evaluation.

In 1975, increased numbers of trained personnel, and additional clinics at St. Camillus, and Watertown, will increase the number of patients seen by 30%, and the number of practicing physicians assisted in dealing with arthritis.

PILOT ARTHRITIS PROGRAM

Region: Colorado-Wyoming

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	7/74-6/75	174,290
	1975		7/75-6/76	198,894
General Rose Hospital	1974	51	same	
	1975			23,418
Rocky Mtn. Chapter, Arthritis Fnd.	1974	52	same	
	1975			77,160
Denver General Hospital	1974	53	same	
	1975			20,518
Community clinics	1974	54	same	
	1975			34,000
Univ. of Colorado Medical Center	1974	58	same	
	1975			43,798

Project 52 is the management office of the C/W RMP pilot arthritis program, and operates with an advisory committee of 9 members appointed from the membership of the Rocky Mountain Arthritis Foundation. The office organizes the services of health professionals to staff regional clinics, and coordinates outreach clinics with co-sponsoring, or cooperating State and County agencies, and professional organizations. General Rose Memorial Hospital (51) has 22 arthritis beds, and services a teaching center in a new facility constructed as a model unit for arthritis care and rehabilitation. Denver General Hospital (53) has 5 arthritis beds, and provides professional resources for multidisciplinary consulting and teaching clinics. University of Colorado Medical Center, and Denver General Hospital jointly operate an arthritis "walk-in" clinic, and have conducted 9 workshops and clinics in Colorado and Wyoming communities, attended by 363 physicians, and 379 nurses and other allied health personnel. Regional clinics (54) were established in Colorado at Sterling, Pueblo, Grand Junction, and Durango, and in Wyoming at Sheridan, Thermopolis, Casper and Laramie. These centers serve regional population groups and provide a base for consulting outreach clinics.

In 1975, the program will continue development of the multistructure arthritis center for continued teaching and development of improved arthritis diagnostic, treatment, and rehabilitation methods.

PILOT ARTHRITIS PROGRAM

Region: Georgia

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	76A	8/74-6/75	200,000
	1975		7/75-6/76	173,377

The GRMP program is organized under the regional "umbrella" plan with 2 regional, and 2 area focal facilities. The Medical College of Georgia is a regional center, cooperating with an area facility at Memorial Medical Center, Savannah. MCG is presenting 4 clinics weekly, and participates monthly in clinics at Savannah. Emory University School of Medicine is a regional center cooperating with the Arthritis Area Facility at the Columbus Medical Center. EUSM holds 2 arthritis clinics weekly, and provides multidisciplinary consulting services to AAF staff. AAF staff are receiving specialized training at Grady Memorial Hospital.

1975 funding is requested to continue program development, including necessary specialized recruitment, and extension of services to community levels.

PILOT ARTHRITIS PROGRAM

Region: Greater Delaware Valley

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	7/74-6/75	247,500
	1975		7/75-6/76	247,500
Jefferson Med. College	1974	60.	7/74-6/75	4,000
	1975		7/75-6/76	4,000
Arthritis Foundation of East Pennsylvania	1974	60A	same	18,000
	1975			18,000
Hahneman Medical Center	1974	61	same	64,326
	1975			64,326
Temple University	1974	62	same	72,956
	1975			72,956
Medical College of Penn.	1974	63	same	17,000
	1975			17,000
Einstein Medical Center	1974	64	same	38,219
	1975			38,219
Children's Seashore House	1974	65	same	32,999
	1975			32,999

GDV-RMP's arthritis program has operated under a regional Arthritis Control Council to establish a cooperative effort to link 5 Philadelphia medical schools with non-profit hospitals, and the Arthritis Foundation. Projects 60, and 60A, are program-wide activities directed to (a) development of a physician self-assessment examination form, and (b) public and patient/family education, and referral assistance. Project 61: patient workshops and forums are closely related to Arthritis Demonstration Clinics (ADC) sponsored by Hahneman Medical Center. Patients and their families meet in groups with physicians and allied health personnel to explore the nature and impact of their disease. Project 62: Temple University School of Medicine sponsors ADC's (7 to date) in, and outside of Philadelphia (e.g., Allentown, Scranton, Camden, East Stroudsburg, Wilkes-Barre, Millville) on a weekly basis. ADC's provide access to multidisciplinary diagnosis and consultation, and preceptorship/group training of physicians and allied health personnel. Project 63: Medical College of Pennsylvania specifically provides professional training in conjunction with ADC's. An hour's lecture is

arranged at each ADC, plus special lectures and seminars, regionally. Specific coordination has been achieved with respect to allied health team training, and pediatric services. Project 64: Albert Einstein Medical Center has focussed on adding arthritis capability to existing allied health resources. Training has been offered through seminars and symposia, and in conjunction with ADC's. Various hospitals, State and County agencies, professional organizations and the Arthritis Foundation are providing community support to the program. Project 65: Children's Seashore House has emphasized cooperative and collaborative approaches to pediatric arthritis problems among Philadelphia hospitals. Pediatric consultation is provided other ODV/RMP arthritis components, as well as participation in the ADC's. Regular pediatric clinics are held twice monthly.

In 1975, program continuation financing will be sought, along with improvement in program development throughout the 24 County Region.

PILOT ARTHRITIS PROGRAM

Region: Hawaii

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	69	9/74-8/75	216,000
	1975		7/75-6/76	219,383

The HRMP arthritis program is based on a Center (Kuakini Hospital), with support from the University of Hawaii School of Medicine, and the Hawaii Arthritis Foundation. Three (3) objectives are: develop a center with a multidisciplinary approach to diagnosis, and treatment; extension of services in Honolulu, and to outlying islands in the Pacific Basin; and, professional training. These objectives were achieved. 115 patients have completed multidisciplinary diagnosis and evaluation at the Center. General and specialty clinics have been conducted, and conferences, clinics, and teaching consultations have been presented at Ponape, Saipan, Guam, Palau, and Yap.

In 1975, emphasis will be placed on further education of health professionals in arthritis, assessment of service needs, increased utilization of allied health personnel, and increased consulting services and backup to Pacific Basin areas.

PILOT ARTHRITIS PROGRAM

Region: Iowa

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	63	9/74-6/75	87,550
	1975		-	0

University of Iowa College of Medicine expanded multidisciplinary professional education, and therapy, and supported the establishment of arthritis clinics in Des Moines, and Muscatine. The program is self-supporting through financing by participating hospitals, and third party payments.

PILOT ARTHRITIS PROGRAM

Region: Intermountain

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	123	7/74-6/75	169,500
	1975		7/75-6/76	84,123

The Intermountain Arthritis Center has been established as a non-treatment center to coordinate and develop the program. The center has applied for a Provider number, and has instituted cost reporting procedures required by Medicare/Medicaid. With only 2 practicing rheumatologists in the 3-State area served, considerable education and use of family physicians and allied health personnel is needed. Clinics were scheduled and conducted with family physicians and their patients in (Idaho) Boise and Pocatello, (Nevada) Las Vegas and Reno, and (Utah) Ogden and St. George. Clinics in 2 additional communities are scheduled.

In 1975, community clinics will be continued, and diagnostic and treatment standards will be developed for practicing physicians. Patient/family education will be developed, and increased support including service reimbursements will be sought.

PILOT ARTHRITIS PROGRAM

Region: Kansas

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	88	7/74-6/75	242,400
	1975		7/75-6/76	226,400

KRMP, Kansas Arthritis Chapter, KU School of Medicine, and the K.C. Veteran's Administration Hospital collaborated to establish Information and Education Unites (IEU's) at Kansas City, Topeka, Salina, and Wichita, to improve arthritis patient information, education, diagnosis, and treatment. The units are sponsored and staffed by local hospitals (physicians and allied health personnel). Physicians were recruited to make patient referrals to the Unites. Program sponsors provided Unit siting, and start-up assistance. Multidisciplinary consultation and followup services are provided each Unit twice monthly. The IEU's individually present demonstrations for the other IEU's, and local health professionals. Special training support is provided by KUMC, which with the Arthritis Chapter, provides a standard patient record to accumulate a data base. The IEU's are responsible for training, and for lending assistance to community physicians in arthritis patient assessment, diagnosis, and treatment.

In 1975, efforts will be made to expand IEU capacities through participation of increased numbers of physicians, nurses, and therapists.

PILOT ARTHRITIS PROGRAM

Region: Metropolitan Washington

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	7/74-8/75	176,900
	1975		9/75-6/76	94,920
Freedman's Hospital	1974	58.	10/74-8/75	95,400
	1975		-	0
Washington Hosp. Center	1974	59	10/74-8/75	81,500
	1975		9/75-6/76	94,920

Washington Hospital Center (WHC) and Shaw Community Health Center, where 12% of all clinic visits are arthritis-related, have collaborated to provide improved arthritis care to inner city residents. An Arthritis Technical Review and Advisory Committee comprised of consumer and provider members assists the project. WHC provides a multidisciplinary team, diagnosis and treatment, and other services at its own, and the Shaw center. Freedman's Hospital has focussed on professional and patient/family education, including home services. The program has been delayed by inability to recruit, and the move to new quarters.

In 1975, both institutions will expand treatment capabilities, and intensify referral and education activities.

PILOT ARTHRITIS PROGRAM

Region: Michigan

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	125	9/74-9/75	194,700
	1975		9/75-9/76	448,028
Geriatric Program	1974	125	same	194,700
	1975		same	398,804
Evaluation (Univ. Mich)	1974	(MRMP Eval. Funds)		(25,000)
	1975	149	9/75-8/76	49,224

The MRMP pilot arthritis program is primarily a study project to define effective treatment which will delay, prevent, or reduce hospitalization of geriatric patients (+55). The program has 3 components: health services delivery; patient education; and, family, provider and program evaluation. Representatives from 4 UM departments provide an Advisory Board; there is an 18 member (consumers and providers) Community Advisory Board (CAB), and an Executive Committee of senior project staff, whose policies are reviewed by CAB. The demonstration is centered on Washtenaw County, and the County Health Department, Arthritis Foundation, and the Council on Aging are cooperating. Multidisciplinary staff resources assure a comprehensive approach to patient problems and needs, and a detection program and intensive followup activities have been conducted. There are 214 patients enrolled in the program. Public, patient, and professional education activities have been intensively developed, including special visual aid, and other materials.

In 1975, utilizing experience and data accumulated in 1974, it is planned to develop a referral clinic, intensify demonstration of the roles of clinical and public health nurses, and to define criteria for geriatric arthritis care, emphasizing home care. Increased attention will be provided to professional education needs outside of Washtenaw County, and replication of the existing system will be pursued.

The program evaluation project was initiated in 1974, with DRMP concurrence, with MRMP evaluation funds. The study is a special project of the Michigan University School of Public Health, and \$25,000 was provided by MRMP through a contract. The project was not eligible for direct grant support under 1974 program guidelines. It may, however, provide useful geriatric data for use under the provisions of the National Arthritis Act of 1974 (P.L. 93-640) in view of the NIH Commission on Arthritis current seeking of arthritis disease and patient information.

PILOT ARTHRITIS PROGRAM

Region: Mississippi

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	40	9/74-6/75	58,000
	1975		7/75-6/76	58,000

The Mississippi pilot arthritis program was initiated by, and in conjunction with the newly-completed Mississippi Methodist Rehabilitation Center in Jackson. Two (2) outlying satellite clinics have been established at Belzoni (north), and Centerville (south). These clinics are staffed with paid specialists who conduct screening, referrals, and physician consultations. A fire at the new Jackson Hospital has delayed development of referral and consultation services from the center resource.

In 1975, the RMP proposes to develop the program as initially planned. The outlying clinics will provide out-State resources for patient assessments, and referrals, and centers for communication with community health workers. (Note: MRMP project #C176 includes arthritis, providing further operational latitude for the pilot program.)

PILOT ARTHRITIS PROGRAM

Region: Mountain States

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
Idaho	1974	-	-	0
	1975	32	7/75 - 6/76	6,180
Montana	1974	-	-	0
	1975	32	7/75 - 6/76	<u>7,910</u>
				14,090

Mountain States RMP arthritis program represents participation in allied health training provided at the Virginia Mason Medical Center, Seattle, through the Washington/Alaska arthritis program. That training center was financed by non-earmarked funds, and thus required that Idaho and Montana reimburse training provided their allied health personnel (physical, and orthopedic therapy). During 1974, these two States each sent 6 therapists for training, The 1975 request is for support of specialized training for 12 therapists from Idaho, and 20 from Montana. This activity will contribute to regionalization of the Washington/Alaska arthritis program, and provide urgently needed therapists for services in the sponsoring states.

PILOT ARTHRITIS PROGRAM

Region: New Mexico

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	37	7/74-6/75	163,600
	1975		7/75-6/76	101,110

Outreach clinics have been established at Taos, Albuquerque, and Las Cruces, for physician and allied health education, patient and public education, and patient referral. The program has wide local participation. 8 physician education, and 8 allied health education seminars, and 1 joint education session have been held. 14 patient education programs have been conducted. A traveling consulting team has received 48 referrals by practicing physicians, and these clinics have been attended by 114 physicians, and 32 allied health personnel. 2 family nurse practitioners have received extensive training, and will be key resources for statewide patient education services. A trained family nurse practitioner will be a full-time member of the traveling team. Clinical followup training will be provided for 23 family nurse practitioners, physician assistants, and community health medics who have completed initial clinical training in rheumatology. Additional nurses and medica will be entered into the program in 1975.

PILOT ARTHRITIS PROGRAM

Region: North Carolina

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	7/74-6/75	211,500
	1975		7/75-6/76	354,806
Orthopedic Hospital & Rehabilitation Center	1974	75A	same	30,000
	1975			69,715
N.C. Arthritis Fndn.	1974	75B	same	51,500
	1975			52,378
Univ. North Carolina	1974	75C	same	90,100
	1975			140,000
Bowman-Gray School of Medicina	1974	75F	same	39,900
	1975			92,713

The NC Arthritis Foundation provides overall program administration, and supports training and information services. An arthritis seminar for 90 nurses in industrial plants was conducted, and several other professional symposia were presented. The Orthopedic Hospital in Asheville has expanded to treat 4-times the number of patients handled before the grant by development of highly routinized administrative procedures, and extensive utilization of allied health personnel. University of NC rheumatologists are conducting weekly clinics in Greensboro, Raleigh, Pinehurst, and Wilson, and the number of patients seen at UNC medical center has been doubled to 60/week. Bowman-Gray has established 3 outlying clinics, and new outreach clinical services are extended to these sites 22 days of the month.

In 1975, OHRC plans to again double the output capacity of the patient treatment and followup system. Nurses, therapists, and paramedics are being trained to be trainers, and to backup practicing physicians (70 now participating) in performing drug toxicity monitoring, patient education, and followup services, particularly to remote patients. Allied health personnel will also staff an outlying station for evaluation of retinal function for potential toxicity of antimalarial drugs.

UNC, and the NC Arthritis Foundation have cooperatively developed a screening, counseling, treatment, and rehabilitation program in the facilities of Burlington Industries. NCAF will continue overall program administration and monitoring. UNC will expand its clinic by 50% through standardized intake procedures, and increased employment of allied health staff.

A travelling team approach will be intensified for the conduct of clinics at AHEC and orthopedic units at Greensboro, and Raleigh, and two new clinic units will be developed.

Bowman-Gray will continue clinical visits of a travelling team to 3 established clinics, expand its clinic at Babtist Hospital, and extend new services to Farmington Nurse Practitioner Clinic in Davis County.

PILOT ARTHRITIS PROGRAM

Region: North Dakota

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	103A	7/74-6/75	111,000
	1975		7/75-6/76	120,000

In 1974, comprehensive arthritis clinics were established at Fargo, as a central coordination site, and Grand Forks, and Bismark. A patient evaluation process was developed, in concert with patient followup, and data accumulation. A multidisciplinary team provides services to Grand Forks, and Bismark, and assures uniform performance of patient diagnosis, evaluation, treatment, followup, and data collection and reporting under published ARA procedures. Appropriate referrals are made when other ailments are discovered at the clinics. The program is increasing utilization of allied health personnel.

In 1975, it is planned to extend professional consulting services, home services, and professional and patient/family education into more outlying areas. A study will be conducted on patient compliance with prescribed therapy. A "patient contract" enunciating physician, nurse, patient responsibilities will be tested with 100 patients. A biochemical study on load analysis of lower extremities with load will be continued. The program involves ND medical schools, State Vocational Rehabilitation, ND arthritis foundation, PH nurses, the USDA Human Nutrition Laboratory, and "area" medical and paramedical consultants.

PILOT ARTHRITIS PROGRAM

Region: Ohio Valley

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	49	11/74-10/75	46,500
	1975		11/75-6/76	35,225

The arthritis clinic of the Louisville General Hospital, which is the teaching facility for the University of Louisville School of Medicine, had been able to see and give adequate attention weekly to approximately 25-30 followup patients, and 2 - 3 new patients. A coordinator of patient services has been appointed to evaluate each arthritis patient, with professional assistance, and develop a comprehensive management program. The management program will, as appropriate, involve existing community resources such as social service agencies, vocational education and rehabilitation centers, home care centers, and other appropriate organizations. These services should expedite the disassociation of followup services from clinic premises, permitting a larger intake of new patients. Patients are referred to the program through the arthritis clinics at Louisville General Hospital, St. Josephs Infirmary, and the Louisville VA Hospital. Patient information is being accumulated to assist program assessment, and to aid development of patient education services.

In 1975, development of the program will continue, and special efforts will be extended to develop service reimbursement sources.

PILOT ARTHRITIS PROGRAM

Region: Oklahoma

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	47	7/74-6/75	66,050
	1975		7/75-6/76	40,867

Oklahoma University Health Science Center (OUHSC), and Oklahoma City VA hospital (OCVA) have cooperatively developed an arthritis program for medical education, and are seeking through the RMP grant to establish a pilot arthritis referral, treatment, and training resource, working through the 10-County Regional Health Development Area Program, centered at Ada. Initial efforts have been directed public and patient education, improved patient scheduling for clinic, family physician counseling, and increased utilization of the Physical Therapy Department at Valley View Hospital, at Ada. A critical need for a second rheumatologist has not been met, and recruiting efforts are continuing; this additional professional is critical for expansion of the referral, therapy, and follow-up system being developed.

The 1975 request is to cover the salary of the second rheumatologist, whose recruitment has been reported as imminent.

PILOT ARTHRITIS PROGRAM

Region: Puerto Rico

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	20	7/74-6/75	92,160
	1975		7/75-6/76	140,634

The considerable rheumatologic resources at the central arthritis clinic at the University of Puerto Rico School of Medicine serve as the major support and coordinating force for patient diagnosis and assessment, management procedures, professional education, and extension of services into outlying areas. Initial outreach has been achieved with a regional arthritis clinic at Bayamón Hospital, serving northeastern Puerto Rico. It is planned to establish 3 additional clinics over time until all regional areas are being served. Over 100 professional personnel received training in arthritis at UPRMS, and in northeastern communities, and the new and followup patient load is being increased. UPRMS provides central laboratory services.

In 1975, the weekly clinic at PR medical center will be continued with multidisciplinary participants, and clinics at Bayamón will be increased from twice monthly, to weekly. It is anticipated that the new patient load will increase by 60%, and patient followup visits will increase proportionately.

PILOT ARTHRITIS PROGRAM

Region: Susquehanna Valley

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	42	7/74-6/75	0
	1975	42	7/75-6/76	139,500

Susquehanna Valley RMP was approved in 1974 for pilot arthritis activities up to 139,500, but was not allocated earmarked funds. The region was unable to provide arthritis funding from other funds. The 1975 request is a repeat of the 1974 proposal, with the request reduced to last year's approved level.

A new clinic will be started up with monthly sessions at Williamsport Hospital (WH) by contracting for a fellow in rheumatology, and training a nurse for support services. The 1974 request indicated that WH possesses "an 80 bed rehabilitation unit staffed by 13 physical therapists, 3 board certified physiatrists, and 3 occupational therapists, and provides psychological, audiology, speech pathology, social services and vocational rehabilitation services." WH will provide the nurse resource for patient referral at Lock Haven Hospital, and the Blossberg Family Health Center.

The Geisinger Medical Center (GMC) reported in 1974 that in addition to the rheumatologist, it had 2 board certified internists with special training in rheumatology, 6 orthopaedic surgeons, and "significant practice in neurology, neurosurgery, pediatric rehabilitation, physical medicine and rehabilitation, and all appropriate ancillary services." "Current patient load includes an average of 90 patients seen weekly in the Rheumatology Section of the Medical Center. The earlier application indicated an intent to employ a clinical nurse in expanded patient care responsibilities, but otherwise, "The resources of the Geisinger Medical Center continue to be dedicated to the provision of and access to quality care to the region. In cooperation with the Arthritis Foundation of Central Pennsylvania and the other participating components of this program, the Medical Center continues to commit its full support and services."

Both institutions propose to provide professional education at unnamed outlying sites. The Central Pennsylvania Arthritis Foundation will undertake an extensive program of patient, professional, and allied health education. All training activities of the proposal will be related to ongoing activities of the Northcentral Pennsylvania Area Health Education System.

PILOT ARTHRITIS PROGRAM

Region: Tennessee Mid-South

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	9/74-6/75	107,484
	1975		7/75-6/76	232,322
East Tenn. Children's Hospital	1974	107	9/74-6/75	34,463
	1975		7/75-6/76	54,480
Reg'l Arthritis Center Foundation (Appalachian)	1974	108	same	33,566
	1975			94,900
Vanderbilt School of Medicine	1974	109	same	39,455
	1975			82,942

The TMS-RMP pilot arthritis program was one of 2 programs funded with non-earmarked funds. Program approval for up to 138,500 was approved by the Council. Three activities fitted to different local capabilities were initiated. In Knoxville (107) a juvenile arthritis clinic was opened on a twice-weekly basis at the Arthritis Center, East Tennessee Children's Hospital. In Chattanooga (108), the Appalachian Regional Arthritis Center was established as a non-profit organization under the aegis of the Baroness Erlanger Hospital. In Nashville (109), combined arthritis clinics were established at the VA Hospital (½ da./wk), and Nashville General Hospital (½ da./wk). A clinic at Vanderbilt University Hospital was delayed until May, when a ½ da./wk. clinic began operations. The Knoxville and Chattanooga clinics began operations in December 1974, ETCH has provided 2 clinics monthly. Significant accumulation of senior adult patients has developed, and home services are being provided. In Chattanooga, 6 clinics were held in a 4-month period, with 23 patients seen, and 77 registered for clinical evaluation. An outlying clinic at Crossville is planned in August 1975. Third-party reimbursements are beginning to be collected. At Nashville, 85 patients were under care by March.

In 1975, efforts will focus on broadening and extending services, and linking up these, and additional clinics. In Nashville, clinical care, patient education, and social services will be organized with cooperative activities of the 3 established clinics, the Metropolitan Public Health Department, the Arthritis Foundation, and new Immunology and Arthritis Divisions at Vanderbilt. Patient education, outreach, and social services will be expanded. About 2,000 patients will be seen by the combined clinics. ARAC will extend services to outlying community chronic disease

clinics, and will expand training for physicians, and nurses. A patient load of 2,500 is projected in 1976. In Knoxville, improved and increased followup services will be developed for both juvenile and adult patients. Biomedical engineering services have been, and will continue to develop patient aids for meeting environmental needs. Out-patient services will include case finding, home care and home modifications, education, and patient referral. It is estimated that in one year, 25 patients will be restored, and patient load will be 100.

PILOT ARTHRITIS PROGRAM

Region: Texas

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	113	7/74-6/75	244,200
	1975		7/75-3/76	105,200

The 1974 pilot arthritis program was comprised of 6 component activities for the development of improved and increased patient care services, and extensive professional, and patient/family education. The program linked university centers in Galveston, San Antonio, Lubbock, El Paso, and Dallas with practicing health professionals to improve arthritis care, and increase community involvement. Conferences, clinical consultations, seminars, and public forums were widely presented. Arthritis patient education materials are being translated into Spanish. A model minimal care facility, which attracted much interest among technical program reviewers in Rockville, was operated at Galveston. The minimal care program simulates the home environment while patients undergo physical and occupational therapy. The unit also provided an excellent self-contained classroom for therapy, nursing, and social service education.

The program is proposed to be supported for an additional 6 months.

PILOT ARTHRITIS PROGRAM

Region: Tri-State

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	9/74- 6/75	213,370
	1975		7/75-6/76	599,082
Boston City Hospital	1974	55	11/74-10/75	78,600
	1975		11/75-6/76	78,600
Tufts-New England Medical Center	1974	56	9/74-12/75	134,770
	1975		1/76-6/76	66,660
Robert Breck Brigham Hospital	1974	54	-	0
	1975		7/75-6/76	74,808
Mass. General Hosp.	1974	57	-	0
	1975		7/75-6/76	163,297
Medical Care & Educa- tion Foundation, Inc.	1974	58	-	0
	1975		7/75-6/76	215,717

In 1974, projects were funded at Boston City Hospital for an urban-based program, and Tufts-New England Medical Center for an outreach program involving 3 Maine, and 5 Massachusetts community hospitals. At Boston CH, 2 RN nurses have received intensive rheumatological training preparatory to initiation of outreach (home followup) activities. At Tufts, arthritis clinics have been opened in Maine at Bangor, Presque Island, and Rockland. In Massachusetts, a clinic is operational at New Bedford, are planned to become operational in May at Everett, and Chelsea, and are under development for later startup at Springfield, Waltham, Nantucket, and Beverly. Tufts provides a multidisciplinary resource for arthritis diagnosis, and treatment, and provides teams to open up outlying clinics.

In 1975, both projects plan to expand outreach activities. Projects Nos. 54, 57, and 58, are resubmittals of applications not approved in 1974. Nos. 54, and 57, are verbatim restatements of the previous application, and No. 58 provides verbatim extracts of the prior submittal. Reviewers considered the projects poorly organized, and not well thought out, particularly in view of the extensive arthritis expertise represented by each of the institutions. The Medical Care and Education Foundation, Inc., plans to contract with the New England Rehabilitation Hospital, Inc., a for-profit corporation.

PILOT ARTHRITIS PROGRAM

Region: Virginia

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	46	7/74-6/75	80,000
	1975		7/75-6/76	40,000

Virginia was divided into four areas for program development: Tidewater, Richmond, Central Virginia, and Northern Virginia. Each area has designated one or two physician coordinators of program. The Family Practice Units of the 2 Universities are the sources of special professional arthritis expertise, and the central coordination points for scheduling visiting multidisciplinary teams. It was recently reported that over 20 clinic and physician colloquia sites will be visited during the first year by arthritis specialists from the university, and area centers; many of the sites visited are quite isolated, but have responded enthusiastically to these training opportunities. Emphasis is on provision of physician specialist and allied health services to economically disadvantaged populations.

In 1975, outreach training will be continued, and increased patient follow-up with increasingly trained allied health personnel will be sought.

PILOT ARTHRITIS PROGRAM

Region: Washington-Alaska

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	89	9/74-6/75	35,622
	1975		7/75-6/76	42,995

W/ARMP's pilot arthritis activities were funded by non-earmarked funds. A larger program of \$75,000 was approved by Council, but Regional planners felt that the approved level was too restrictive to undertake the full program approved. Unfunded was a travelling therapist team modelled after the widely-recognized Canadian program. The funded program is therapist training at the Virginia Mason Medical Center in Seattle, and the Home Care Program operated by the Western Washington Arthritis Foundation. Idaho, and Montana were invited to utilize the training program on a service-reimbursement basis. Trainees enrolled total 55, and 35 have completed the training course. All major arthritis disciplines are presented in the training program, and graduates receive an assessment visit by a Supervisory Therapist several months after course completion.

In 1975, it is proposed to provide therapist training "to the remaining untrained physical and occupational therapists in this four state region desiring this type of instruction." An inventory of arthritis services will be completed, and lay organizations will be solicited to assist with referral and patient transport problems in outlying areas.

PILOT ARTHRITIS PROGRAM

Region: Western Pennsylvania

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	45	7/74-6/75	140,400
	1975		7/75-6/76	133,330

In 1974, an inventory of educational needs, and arthritis resources was conducted in the Region. Five (5) sites were identified for establishment of clinics, and 3 are functioning. The remaining 2 will be operational in June 1975. Each of the 5 participating hospitals were required to commit 8 physicians and allied health personnel to the clinic project. On the basis of the needs inventory, a training curriculum was developed, and 1/wk training sessions of 6 week's duration was begun for each of the center staffs. Training was presented at both the centers, and at St. Margaret's Hospital. Training participants include personnel from Red Cross, United Fund, and planning commissions, as well as community physicians and allied health personnel. A program evaluation process is being developed by training professional program participants in outcome assessment.

In 1975, two (2) additional centers will be activated. Professional and lay education sessions will be continued, and a periodic schedule of multidisciplinary specialist clinic visits will be instituted. Specialized training will be provided for teams from non-center communities to expand available arthritis resources, and improve patient referral. A model patient education center will be developed to demonstrate and assess patient instruction methods. An individual professional study course will be developed for personnel without access to classroom training.

PILOT ARTHRITIS PROGRAM

Region: Wisconsin

<u>Location</u>	<u>Year</u>	<u>Project</u>	<u>Period</u>	<u>Funds</u>
	1974	all	7/74-6/75	62,000
	1975		7/75-6/76	111,225
Sacred Heart, & Columbia Hospitals	1974	123	7/74-6/75	55,000
	1975		7/75-6/76	71,225
Consulting Teams	1974	C010	same	7,000
	1975			40,000

Approved 1974 program provided modest support for travel costs of professional consulting teams from UWMC and affiliated hospitals, and support for a combined patient/family - nursing care study at two hospitals. The study is operated under a Statewide nurse advisory group, and seek improved nursing practice through development of arthritis nursing criteria, and concomitant development of patient education materials. A nominal group process is employed in writing nursing criteria by the participating nurse staffs. Projected criteria are tested against outcomes of actual practice with 2 identified patient groups, and modified as experience dictates. Increased capability to quantify patient responses to nursing care has been reported, as well as much more nurse sensitivity to patient needs.

In 1975, the nursing studies will be continued, and proven patient educational materials will be developed. Workshops will be organized and presented to professional staff, and increased emphasis will be placed on out-patient care. In connection with the travelling consulting teams, improved referral, and institutional intercommunication will be sought.