





# forum

Lakes Area Regional Medical Program

VOL. VIII, NO. 1

JULY-SEPTEMBER, 1975

## HSA's - What's It All About?

FROM THE DIRECTOR'S DESK  
John R.F. Ingall, M.D.

This newsletter is distributed to a particularly devoted constituency who have in many ways contributed to the program as we have known it since 1967. The way we have worked is less appreciated than the outcome of this industry.

Brief anecdotes of achievement and illustrations thereof can be satisfying and are simple to prepare. More difficult, however, than showing impact of efforts is to portray these efforts in succinct and attractive dimensions. We are all familiar with the newspaper as printed, but the mechanism that underlies its production and distribution efforts that enable its appearance are seldom considered.

One is still asked, what is RMP? The brief answer is "an enabler," a mechanism comparable to that which puts the printed word before the reader — the essential vehicle between the author and his target.

The list of projects which come to fruition in heart disease, cancer, emergency medical services, tele-education and many others are the result of two things: the Regional Medical Program **enabling** function and money.

Some have described this as the "greasing factor and the coercive component." Shortly the question will be asked, "what is an HSA?" — and concomitantly where is the RMP? All these acronyms are irritating to the uninitiated. They are used with arrogance by many to imply their own vast comprehension of a difficult subject. Knowledge of the HSA and its potential power and impact is preferable now than when it is a fait accompli. It will affect everyone nationwide.

HSA or Health Systems Agency is a difficult subject. It is also a confusing acronym for it also stands for the geographic area that has to be administered by a Health Systems Agency — namely a Health Service Area.

The Health Systems Agency of Western New York is intended, by Public Law 93-641, to assume the functions of the Regional Medical Program currently known as the Lakes Area Regional Medical Program and Comprehensive Health Planning, respectively known (or heard of) as LARMP and CHP. Both these agencies have specific functions to discharge. The intent of the new law is to enclose the functions of both LARMP and CHP into the new super agency known as the Health Systems Agency.

Once constructed, the power of the HSA extends to the approval or disapproval of all federal monies applied for under the Public Health Service Act, the Community Mental Health Center Act and the Comprehensive Alcohol Abuse Act. The dimensions of this power have yet to be appreciated fully. To list the areas subject to the HSA authority would require a detailed listing of the Acts listed above. In brief, monies for heart, cancer, stroke, sickle cell, manpower training, family planning, alcoholism, narcotic addiction, construction and expansion of medical service facilities, training of retarded children and many other purposes will be subject to HSA approval or disapproval. The potential authority for the HSA is therefore great.

How will it come into existence?

(Cont'd on Page 2)

## \$855,928 Grant Awarded to LARMP

A grant of \$855,928 was awarded to the Lakes Area Regional Medical Program, Inc. on June 24 by the U.S. Department of Health, Education and Welfare to continue its operation.

In a meeting of the LARMP Regional Advisory Group on June 26, the Board provisionally approved a budget of \$1,035,532 to continue operation of eight health related projects and program staff from July 1, 1975 to June 30, 1976.

The budget includes the \$855,928 award plus carryover funds of \$179,594 from the 1975 budget. The budget is subject to re-evaluation. The Board also recommended that project directors be advised that all project budgets will be reviewed on a monthly basis and may be subject to revision, expansion or reduction, based on the overall availability of funds.

(Cont'd on Page 4)

## Media Campaign Launched To Explain HSA

The Lakes Area Regional Medical Program, Inc. has initiated an information campaign designed to provide information to the public about what a Health Systems Agency is and how it is expected to work.

Utilizing the communication media the LARMP Department of Communications has arranged for newspaper stories and radio and television interviews which attempt to explain in understandable terms how the HSA is being developed and structured and the tremendous effect it will have on the health care systems of the region. Another reason for bringing this information to the public is to dispel any rumors that the HSA development in this area is being done "undercover" with no attempt made to inform the public about its existence or composition.

Dr. John Ingall, Executive Director, LARMP, appeared on WGR-TV's interview program "Magazine" on June 27 and spoke on HSA's; WBEN-TV's "By the People" on August 3, again on WBEN-TV on August 15 for a short news interview, and on September 21 appeared on WKBW-TV's "Here and Now" along with Erie County Executive Edward Regan and Eugene Wilczewski, Director, Comprehensive Health Planning Council of Western New York, Inc. Dr. Ingall was also interviewed on August 17 by radio station WADV-FM for its community service program "Issues and Views."

He has appeared on all major television stations in the region explaining what HSA's are and provisions in the law that established it.

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## Lakes Area Regional Medical Program Continuing Education Programs—1975

DATE	LOCATION	TOPIC
September 17	Ramada Inn Niagara Falls, New York	Emergency Care Course for Physicians
September 18	Holiday Inn Olean, New York	Emergency Care Course for Physicians
September 24	Treadway Inn Niagara Falls, New York	Emergency Care Course for Physicians
September 25	Holiday Inn Olean, New York	Emergency Care Course for Physicians
September 30	Sheraton East Buffalo, New York	Cancer Teaching Day "Current Status of Cancer Therapy"
October 2	Holiday Inn Olean, New York	Interpersonal Relationships
October 9	Moonwinks Restaurant Cuba, New York	Cancer Teaching Day
October 16	Holiday Inn Fredonia, New York	Cancer Teaching Day "Lumphomas and Hodgkin's Disease"
October 22	Ramda Inn Niagara Falls, New York	Emergency Care Course for Physicians
October 23	Holiday Inn Olean, New York	Emergency Care Course for Physicians
October 29	Ramada Inn Niagara Falls, New York	Emergency Care Course for Physicians
October 30	Holiday Inn Olean, New York	Emergency Care Course for Physicians
November 4	Holiday Inn Batavia, New York	Medical Genetics Program
December 4	Sheraton East Buffalo, New York	Program On Aging

If interested in attending any of these programs call  
Mrs. Patricia Hoff, R.N. at 835-0728.

### HSA's...

(Cont'd from Page 1)

Currently the agencies that it is designed to take over are studying options available and recommendations as to structure. The provider-dominated Regional Medical Program, CHP and the legislators of the eight counties of Western New York are exploring structures possible for the HSA. In other words, the provider agency, the elected officials and the consumer-dominated agency are working in concert to interpret the law and its portents. These efforts are being made preparatory to a review by the advisory bodies that currently exist and direct policy in this area as they relate to RMP and CHP. This being done, the law directs that a series of public meetings must be held to explain the law and to record recommendations on the options feasible for the HSA Board of Directors in this area. Those responsible for the administration of his law have to produce regulations and interpretations that will answer questions relating to the HSA. These were due August 15th but are delayed in their development by the complexity of the law itself.

The structure of the Board of the HSA has to respond to regional requirements. The commitment required of HSA board members will have to take precedence

over any others. The onerous decision-making will require a measure of study and familiarity with regional concepts dictated by population needs. A position on the board will be no sinecure nor will it be tenable if used to perpetuate the status quo.

There's a great amount of work to be done. The staffs of both agencies designated for assimilation are available to explain and present the substance of the law. *Please Ask.*

### EMS Project Gets \$375,000 Grant

The Emergency Medical Services System, a project of the Lakes Area Regional Medical Program, Inc., received a grant of \$375,000 from the U.S. Public Health Service on July 1, 1975. The grant covers the period July 1, 1975 to June 30, 1975.

The original Section 1203 Grant request submitted on April 1, 1975 sought \$1,053,594 from the PHS for the purchase of communications equipment and systems, hospital and ambulance equipment and training programs for Emergency Medical Technicians, firemen, police, rescuers, and others in Western New York and Northwestern Pennsylvania counties.

## Plant A Seed— Watch It Grow

It is always gratifying to LARMP officials to learn about LARMP funded projects that are able to generate additional funds on their own based on the strength of the project's success.

One project director, Sara Marie Ciccarelli, recently reported that her project received a special improvement grant for allied health professions amounting to \$85,946 from the U.S. Public Health Service, Department of Health, Education and Welfare. These funds will augment the project "Improving Medical Laboratory Services in Rural and Small Hospital," which LARMP initially provided with a \$30,556 grant in 1973. Ms. Ciccarelli is Associate Chairman, Department of Medical Technology, State University of New York at Buffalo.

A sused grant of \$13,744 made to the SUNYAB School of Nursing in 1974 by LARMP set the stage for a \$282,110 award from the PHS, Dept. HEW, for the project "Faculty Development Program in the Enhancement of Expanded Role Skills." This project involved participation by nurse faculty from three regional university schools of nursing whose purpose is to implement and evaluate a faculty development program to prepare nurse faculty members in the expanded role of the nurse with emphasis on the enhancement of assessment and intervention skills.

Project Director is Rita Boucher, Ed.D., of the SUNYAB School of Nursing.

The "Cattaraugus County Household Survey of the Elderly" received a one year grant of \$18,168 from LARMP to determine the health needs of the county's rural, elderly population.

Project Director, Marilyn Gibbin, reported that the survey prompted the Cattaraugus County Legislature to establish a County Department for the Aging.

Other LARMP projects are finding their way into additional support from a variety of sources as they continue to develop and produce positive results.

### Free Health Tests

Free testing for hypertension, sickle cell anemia, hearing problems, lead poisoning, and diabetes was provided for residents of all ages during a special Community Health Day held September 4th at the North Jefferson Public Library, 332 East Utica Street, Buffalo, New York.

Buffalo radio station WUFO helped get the word to the people by broadcasting live from the library during the day's testing program. The event was sponsored by the Lakes Area Regional Medical Program, Inc., Erie County Health Department and the North Jefferson Public Library as a public service.

## Where Has All the LARMP Money Gone?

Since its inception in 1966, the Lakes Area Regional Medical Program, Inc. had dispensed over \$6,941,228 in federal tax dollars for a variety of health related projects designed to improve the quality and accessibility of good health care for all the residents of the nine counties it serves throughout Western New York and Northwestern Pennsylvania.

Every county within the LARMP region has received some benefit from project activities and staff involvement. The **Rural Externship Program**, for example, has over the past five years placed 244 health science students in the rural areas of all nine counties for a summer experience. The purpose is to encourage these students to live and set up practice in these areas after they graduate. These are areas where health manpower is usually in short supply, and where there is a need for these new health professionals. Although it may be too early to determine its success, it is working. Some of the participating "externs" have already settled in rural parts of this and other regions.

The **Allegany County Mobile Health Unit**, funded in 1972, was in response to the county's documented health needs to provide access to medical care for many people who live in this rural county of 46,400 people. The unit makes weekly visits to the rural towns and provides health assessments for those desiring them. In 1974, project officials reported that over 445 new adults sought the services of the unit. A referral rate of 90.3% for further treatment was reported. The increase in referral rate was attributed to the fact that oral examinations produced many referrals to dentists for treatment of dental caries. In addition, several more electrocardiograms were taken than before. Well-child Conferences accounted for 113 new child examinations producing a referral rate of 19%. County residents are thankful for this much needed health service.

A \$25,000 grant to conduct a **Survey of the Needs of Elderly Persons in Cattaraugus County** uncovered the fact that the county is in desperate need of a county department for the aging. This project generated enough interest in the Cattaraugus County Legislature to enable the establishment, by law, of a county department for the aging. Additional funding was obtained from the New York State Office for the Aging.

**Continuing education programs**, are provided on a "circuit rider" approach and have attracted thousands of interested health professionals throughout the region. Program topics have included cancer, hypertension, stroke, nutrition, problems of the elderly, and a number of other health subjects. Bringing the program complete with speakers, sound equipment, registration personnel

and provisions for a meal, right to each county has provided an easier and less costly access to continuing education for many appreciative persons.

The **Telephone Lecture Network**, which became self-supporting on July 1, 1975, is another project that has successfully gone from LARMP support to paying its own way. Over 40 hospitals and other institutions are connected in a network similar to an old fashioned party-line. Lectures by prominent experts in their field are presented over the TLN to its listening posts. A two-way communication, whereby anyone on the system can ask a question and the answer is heard by everyone on the hookup, is a unique feature of this network. It provides access to high quality education programs for all health professions, and other groups, without the high cost of travel, lodging and time spent going to and from a distant city for this educational material. The network has provided this service to all counties in the region and has enjoyed great success in the rural areas where in many cases, they provide the only continuing education programs available.

The **sharing of a nutritionist by two counties**, Chautauqua and Cattaraugus, proved so successful that upon termination of LARMP funding, the nutritionist was retained and the funding of her services shared by both counties.

The **Information Dissemination Service**, funded initially by the LARMP, provided health professionals throughout the region with a number of library services such as photocopies of journals, articles, loan of books, preparation of subject bibliographies in the user's area of interest, current awareness system for those engaged in long-term research, and medical reference service. The project has, since termination of LARMP funding, been taken over by the Health Sciences Library, State University of New York at Buffalo.

Among the first projects supported by LARMP funding was the **Coronary Care Training Program for nurses**. Nurses from throughout the region who participated in the courses brought back to their hospital Coronary Care Units new expertise in caring for coronary patients. The concentrated course provides classroom instruction and clinical experience in a number of Buffalo area hospitals. The program has been absorbed by the School of Nursing, State University of New York at Buffalo since LARMP funding ceased.

The **Lakes Area Emergency Medical Services** project was designed to research the need and activate solutions for an improved and expanded system of emergency medical services within the nine county region. Over 5000 Emergency Medical Technicians or "first

responders" for emergency care have been trained through this project. About \$150,000 in radio communication equipment for hospitals and ambulances and emergency vehicles in Erie County, New York, was purchased with funds from this project.

### OTHER PROJECTS

A number of other projects initiated in the early days of LARMP and since completed or funded through other sources upon termination of LARMP funding include — **Health Manpower Survey**, which determined the number and distribution of regional health care personnel in the region; **Stroke Survey**, which was intended to describe the epidemiology and patterns of medical care of stroke patients as they occur in the region as a whole; **Chronic Respiratory Disease Program**, a many faceted comprehensive project featuring screening, training of hospital personnel, a home care program, and an Associate Arts Degree program in Inhalation Therapy; **Nuclear Medicine Center In A Rural Hospital**, a Gamma Camera was purchased for Wyoming County Community Hospital, Warsaw, to be used as a model for diagnostic procedures in a rural community; **Immunofluorescent Diagnostic Procedures Project**, a service to assist hospital laboratories in the development of their own fluorescent antibody testing program, plus the offering of a cost-free testing service for regional physicians; **Tumor Service Registry**, a centralized, computerized registry that supplies physicians with confidential cumulative data on cancer patients (to date the registry's data base includes 13,500 cases and serves 24 hospitals throughout the region. The Registry is now funded by Roswell Park Memorial Institute; **Topical Chemotherapy Treatment for Precancerous Lesions and Cancer of the Skin**, this project involved the use of an anti-cancer drug, 5-fluorouracil for patients with skin cancer or lesions.

All LARMP funded projects provided direct benefits to residents of all the nine county LARMP region at one point or another. The cooperative contributions made in terms of time and effort expended by the many people who are involved with LARMP demonstrates the significant role they play in the successful progress of the program. If the contributions made by volunteers in time and effort were expressed in dollars and cents we would find that their financial contributions would match approximately 45 cents for every tax dollar received, perhaps even more considering today's rate of inflation.

The role of an "enabler" has been one well played by LARMP. On many occasions LARMP has acted as a catalyst to help the community realize its own powerful resources.

# Aphasia Center Aids Stroke, Other Victims

Stroke victims and others who may have suffered a traumatic injury to the brain causing impairment or loss of speech can take heart in a locally based service that can possibly help you to regain that valuable gift of speech and hearing.

The service is being provided by the Aphasia Center, located within the Department of Speech and Hearing, W.C.A. Hospital, Jamestown, New York. Generally, the facility deals with communication disorders caused by hearing, mental retardation, cerebral palsy, cleft palate, brain damage, laryngectomy, and stuttering.

In October, 1974 the Aphasia Program obtained a grant of \$31,000 from the Lakes Area Regional Medical Program, Inc. which was used to purchase new equipment for the center and to hire additional staff to provide expanded services.

R. James Buck, a graduate of Ohio University at Athens and a certified professional in Speech and Audiology, became the first director of the W.C.A. Hospital's Department of Speech and Hearing in December, 1967.

During a recent site visit, it was pointed out to the Regional Medical Program Staff that although the Program is in full swing and some individuals are receiving excellent benefit, there are many other stroke victims who are not even aware such help is available. "Perhaps our biggest problem," says Mr. Buck, "is that we have these valuable resources and services available, yet many people who could utilize them don't know about it."

"Another problem is that of patient lodging and transportation. Many potential users of our service are deterred because they lack the money for lodging and transportation. If we can't get them here, we can't help them." Mr. Buck said.

"A referral to the center by a physician is not necessary. Anyone can refer a patient to us," Mr. Buck notes. "Even members of the family or the patients themselves can contact us for an appointment. Once the referral is made, however, the physician will be contacted by us and some form of communication and reporting established."

"As longevity increases," Mr. Buck continued, "so do the problems associated with aphasia. Treating aphasia is one of our newer frontiers, and nationally very little has been done to pursue it compared with some other disorders. Older people get set in a slot called "maturity" and don't push for anything better." Mr. Buck added that aphasia treatment someday will become a field of its own rather than a part of speech and hearing.

### Services Offered

The Aphasia Center operates from 9:00 a.m.-1:00 p.m. daily and provides an average of six weeks of intensive therapy for the stroke or injured victim. This can include individual, group, or occupational therapy plus drill time in the language laboratory. This consists of ear training, which involves learning to distinguish one sound from another sound, and correct production of the sound in syllables, words and phrases. The type of therapy varies according to the needs of each individual person.

Currently, records show that more men than women are using the services. This may be because more men suffer strokes than women according to center officials.

The new approach in the treatment of aphasics at W.C.A. Hospital is patterned after the Highland View Hospital program in Cleveland, Ohio which pioneered the new therapy plan under the direction of William Pitts. The W.C.A. Hospital unit becomes the second one in

the country to use this mode of therapy.

Aphasia patients receiving treatment and rehabilitation at the unit have an average age of 58-60. However, persons of any age group having communication problems are treated by the Speech and Hearing Clinic. A breakdown of services offered shows that the patient load consists of one-third children and two-thirds adults. In order to get an appointment simply telephone the Hospital at 487-0141 and ask for the Speech and Hearing Center. Mr. Buck notes that aphasia treatment is covered by health insurance, Medicare and Medicaid.

The services of the center are available to anyone wishing to utilize them from throughout Western New York and Pennsylvania.

## Emergency Care Course

Twenty-two nurses from Western New York and Northwestern Pennsylvania completed a special Emergency Care Program for Nurses on June 26, 1975.

Sponsored by the Lakes Area Emergency Medical Services Program, a project of the Lakes Area Regional Medical Program, Inc., in cooperation with the School of Nursing, State University of New York at Buffalo, the five week course included three weeks of classroom instruction plus two weeks of clinical experience in five Buffalo hospitals. These include the E.J. Meyer Memorial, Deaconess, South Buffalo Mercy, Sisters of Charity and Kenmore Mercy hospitals.

### \$855,928 Grant . . .

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The projects involved include: Small Rural Laboratories, Regional Hypertension, Ambulatory Care, Domiciliary In-Service Training, Medical Genetics, Minority Health Education Delivery System, and the Emergency Medical Services System.

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FORUM is published by the Lakes Area Regional Medical Program, Inc.

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