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DEPARTMENT OF HEALTH, EDUCATION
AND WELFARE
PUBLIC HEALTH SERVICE

National Institutes of Health
Division of Regional Medical Programs

National Advisory Council on
Regional Medical Programs

Minutes of Meeting

June 20-21, 1966

National Institutes of Health
Conference Room "C"
Stone House

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
NATIONAL ADVISORY COUNCIL ON REGIONAL MEDICAL PROGRAMS

Minutes of Fourth Meeting 1/ 2/
June 20-21, 1966

The National Advisory Council on Regional Medical Programs convened for its fourth meeting at 9:00 a.m., Monday, June 20, 1966, in Conference Room "C", Stone House, National Institutes of Health, Bethesda, Maryland. Dr. Robert Q. Marston, Associate Director, NIH, and Chief, Division of Regional Medical Programs, presided.

The Council members present were:

Dr. Leonidas H. Berry	Dr. J. Willis Hurst
Dr. Mary I. Bunting	Dr. Clark H. Millikan (6/20 only)
Mr. Gordon R. Cumming	Dr. George E. Moore (6/20 only)
Dr. Michael E. DeBakey	Dr. William J. Peeples
Dr. Bruce W. Everist	Dr. Robert J. Slater
Dr. James T. Howell	Dr. Cornelius H. Traeger

Public Health Service members attending some of the sessions included:

Dr. Ernest M. Allen, Grants Policy Officer, OSG, PHS
Mr. Fred A. Peters, OSG
Dr. Stuart M. Sessoms, Deputy Director, NIH
Dr. John F. Sherman, Associate Director for Extramural Programs, OD-NIH

Liaison members:

Dr. A. B. Baker, NINDB Council
Dr. Edward W. Dempsey, NIGMS Council
Dr. Sidney Farber, NCI Council
Dr. John B. Hickam, NHI Council (absent)

- 1/ Proceedings of meetings are restricted unless cleared by the Office of the Surgeon General. The restriction relates to all material submitted for discussion at the meetings, the agenda for the meetings, the supplemental material, and all other official documents.
- 2/ For the record, it is noted that members absent themselves from the meeting when the Council is discussing applications: (a) from their respective institutions or (b) in which a conflict of interest might occur. This procedure does not, of course, apply to en bloc actions--only when the application is under individual discussion.

Others present were:

Mr. Karl D. Yordy, Assistant Chief, DRMP
 Mr. Stephen J. Ackerman, Chief, Planning and Evaluation Branch, DRMP
 Mr. James A. Beattie, Chief, Grants Management Branch, DRMP
 Dr. Carl R. Brewer, Chief, Program Review Branch, DRMP
 Dr. Margaret Sloan, Chief, Program Development and Assistance Branch, DRMP
 Mr. Charles Hilsenroth, Executive Officer, DRMP
 Dr. William D. Mayer, Special Assistant to Chief, DRMP
 Dr. Kenneth M. Endicott, Director, NCI
 Dr. Robert P. Grant, Director, NHI
 Dr. Richard L. Masland, Director, NINDB
 Dr. Frederick L. Stone, Director, NIGMS
 Dr. Samuel Fox, BSS
 Dr. Robert Van Hoek, BMS
 Dr. Benjamin G. Wells, VA
 Dr. Wilfred D. David, BSS
 Dr. Annie Lourie Keyes, BSS
 Dr. Murray Goldstein, NINDB
 Dr. R. B. Stephenson, OD-NIH
 Dr. Jerome G. Green, NHI
 Mr. Cliff Johnson, OD-NIH
 Mr. M. E. Odoroff, DRMP
 Dr. John R. Hamilton, DRMP
 Dr. John G. Hazen, DRMP
 Dr. Robert M. O'Bryan, DRMP
 Mr. R. L. Peterson, DRMP
 Dr. Harry F. Roberts, DRMP
 Miss Cecelia Conrath, DRMP
 Mrs. Jessie Salazar, DRMP
 Mr. Edward Friedlander, DRMP
 Mr. Storm H. Whaley, DRMP
 Mr. William A. Walter, NCI
 Miss Pauline Stephan, NCI

I. CALL TO ORDER AND OPENING REMARKS

Dr. Marston called the meeting to order at 9:00 a.m.

II. ANNOUNCEMENTS

Dr. Marston made general announcements about the Service Desk and luncheon arrangements. Also, he read the statements on, "Conflict of Interest," and, "Confidentiality of Meetings."

There was discussion regarding conflict of interest in relationship to this particular Council. Questions were raised about (1) how long after one has an active attachment with an institution is he considered a representative of that institution; and (2) what are the potential conflicts of interest where there is a borderline of

overlap of regional programs. Dr. Marston will seek clarification of these and report back to the Council at its next meeting.

III. CONSIDERATION OF FUTURE MEETING DATES

The Council approved the following dates for future meetings:

August 12-13, 1966
 October 14-15, 1966
 December 16-17, 1966

(Subsequently, after contacting the Council members, these meeting dates were changed as follows:

August 12-13, 1966
 November 28-29-30, 1966 (instead of
 October 14-15, and December 16-17)

This change is needed because of the problems of reducing the number of applications to be reviewed either in August or October. Also, it was felt that there would not be adequate time for processing the applications between the August and October meetings, and that it would be more advantageous to the applicants if we reviewed them in November instead of October.)

IV. CONSIDERATION OF MINUTES OF APRIL 1966 MEETING

The Council unanimously recommended approval of the Minutes of the April 29-30, 1966, meeting as written.

V. REPORTS FROM LIAISON MEMBERS--Dr. Dempsey for NIGMS Council; Dr. Farber for NCI Council; Dr. Grant for NHI Council; and, Dr. Masland for NINDB Council.

Dr. Dempsey mentioned two programs which the General Medical Sciences is undertaking. Four million dollars was allocated to the General Medical Sciences Council, outside of the appropriation, for the Regional Medical Programs. This was under the authority of the existing authorization for expansions of activity dealing with heart disease, cancer, and stroke. Those sums are being used to support training in radiology, anesthesiology, and bio-engineering. There are 12 new programs that are now operating in diagnostic radiology, 14 in anesthesia, and 14 in biomedical engineering.

The second item concerns a forthcoming International Congress on Bio-Medical Engineering which will probably be sponsored by NIGMS. From this, we will get advice and assistance from people in the United States and from all over the world.

Dr. Dempsey discussed the importance of a more formal arrangement between the staffs of the categorical Councils and that of the Regional Medical Programs, so that there would be prior knowledge at the administrative level as to the nature of the reports being made.

The NIGMS Council has held a conference on Automated Laboratories. The report of this conference has been accepted by the Council with enthusiasm, and there is an opportunity for considerable cooperation and coordination between the activities of the Regional Medical Programs and those laboratories.

Dr. Farber stated that the National Advisory Cancer Council has not yet met, but he hopes to have a report for the Regional Medical Programs at its August Council meeting.

Dr. Grant said the Heart Council has not had its meeting yet, but they, too, hope to have a report for the Regional Medical Programs Council in August.

Dr. Masland reported that the NINDB now has ten stroke research centers in operation in various parts of the country and there may be five more soon.

These will be an important segment of the Regional Medical Programs which may be created in some of these areas.

The NINDB is moving ahead with the development of a training program for specialists to do research in the area of stroke, and also to provide specialized services in that area. This program is carried on under close surveillance of a Joint Council Subcommittee on Cerebrovascular Disease of the Neurology Institute and the Heart Institute. This Subcommittee has been in operation for over six years, and has an extensive plan to cover the broad areas of research training, including continuing education for physicians, as well as information services for the scientific community. Hopefully, this will include the practicing community in the future. A cerebrovascular bibliography and a periodic survey report have been distributed to institutions as a stimulus. These are available to Council members, upon request.

VI. RESEARCH, TRAINING, AND COMMUNITY SERVICES ACTIVITIES IN THE CEREBROVASCULAR AREA

Dr. Millikan stated that this subject was covered to some extent by Dr. Masland's discussion above. The reason for mentioning this was simply to make you aware of the existence of the Joint Council

Subcommittee on Cerebrovascular Disease, and to invite you to use its personnel and its know-how for whatever purposes you see fit. The purpose of this Subcommittee was to bring to the two Councils updating of science information concerning cerebrovascular disease, to provide information concerning needs of all kinds in the area of cerebrovascular disease, research needs, needs for training of all types, developments which might be of potential advantage to the consumer, to the patient population, etc. The Subcommittee has not done the technical review of applications, but has acted as an advisory body. Furthermore, it has conducted what might be called a feasibility study in the area of information retrieval and dispersal.

VII. DISCUSSION OF SYSTEMS ANALYSIS

Mr. Yordy reported that since the last Council meeting, we held a meeting of expert consultants to discuss systems analysis. These experts included people who had had experience in the application of these techniques to the health area.

The recommendations of that group have led us to prepare a policy statement which will be included in the Guidelines. Also, we plan to communicate this information fairly widely so that it will be helpful to applicants. Since the group thought that there should be some exploration in greater depth of the applicability of these techniques to regional medical program planning, they recommended that this Division undertake this exploration as a direct activity through contracts in selected situations with several different contractors. This could be the basis of exploring the application of the techniques and of coming up with findings that could be useful in regional medical programs everywhere. The group believes that this Division should acquire some competence in this area either through the hiring of this competence or through a contract which would make this kind of competence available to the Division on a continuing basis.

The Council was provided with drafts of the proposed statement to be included in the Guidelines and the proposed statement describing background and division policy concerning systems analysis, for overnight study, and approved the use of these statements the following day.

VIII. REPORT ON MAIL BALLOTS--Dr. Marston

Following the recommendation of the Council at the April 29-30, 1966 meeting, mail ballots were made on the following applications:

Application No. 1-S02-RM-00004-01, Albany
Medical College of Union University, Albany,
New York

Application No. 1-S02-RM-00006-01, Duke
University, Durham, North Carolina

Application No. 1-S02-RM-00007-01,
University of Texas, Baylor University
and the Methodist Hospital, Houston,
Texas

The Council recommends that all three applications be approved.

IX. REPORT OF THE SECRETARY'S ADVISORY COMMITTEE ON THE MANAGEMENT OF
NIH RESEARCH CONTRACTS AND GRANTS (Ruina Committee Report)--
Drs. Sessoms and Sherman

Dr. Sherman discussed the Ruina Committee Report at all Council meetings, and opinions of the members were to be given to the Director, NIH.

X. CONTINUING EDUCATION--Dr. Mayer

Dr. Mayer brought the Council up-to-date on the advances we have made thus far in the area of continuing education, and mentioned our thoughts for the future. A lengthy discussion ensued on the document, "Information in Guidelines Relating to Continuing Education."

XI. CONSIDERATION OF PLANNING GRANT APPLICATIONS

The Council made the following recommendations on each application, and, as with the first group of applications considered, suggested that the staff of the Division of Regional Medical Programs meet with each applicant whose application has been recommended for approval or deferral prior to making an award:

Application No. 1-S02-RM-00012-01, Planning Committee on Oregon
Regional Medical Programs, Portland, Oregon; Mr. Roscoe K. Miller,
Program Coordinator.

The Council recommends deferral pending staff consultation and assistance to the applicant. The staff contact would seek clarification concerning points raised during the review process, the provision of additional information, revision of part or all of an application, or the development of closer integration with adjacent or overlapping planning activities.

Application No. 1-S02-RM-00013-01, Health Organization of Western
New York, Buffalo, New York; Dr. Douglas Surgenor, Program
Coordinator

The Council recommends approval in the amounts and time requested of \$111,500 and \$111,825, plus indirect costs.

Drs. Moore and Traeger absented themselves during this discussion.

Application No. 1-S02-RM-00014-01, Boston University, Boston, Massachusetts; Dr. Thomas R. Dawber, Program Coordinator

The Council recommends deferral pending staff consultation and assistance to the applicant.

Drs. Bunting and Farber absented themselves during this discussion.

Application No. 1-S02-RM-00015-01, University of Utah, Salt Lake City, Utah; Dr. C. Hilmon Castle, Program Coordinator

The Council recommends approval in the amounts and time requested of \$380,346 and \$80,500, plus indirect costs.

Application No. 1-S02-RM-00016-01, Health Research, Inc., on behalf of the New York State Department of Health; Dr. Hollis S. Ingraham, Program Coordinator

This is a proposed State-wide "umbrella" planning grant which is intended to coordinate and assist the development of Regional Medical Programs within the State of New York. The "umbrella" type of grant would not lead to the operational phase of a Regional Medical Program. The Council recommends deferral pending (1) a project site visit with members of the Council and the Division staff to explore in greater depth the relationship of the proposed planning activities to other planning activities already ongoing within the State on the regional level, and (2) clarification of the legality of support of this application under the provisions of Title IX of the Public Health Service Act, and exploration of possible alternative means of supporting this type of planning and coordinating activity if the importance and nature of this function is established.

Drs. Moore and Traeger absented themselves during this discussion.

Application No. 1-S02-RM-00017-01, Westchester Academy of Medicine, Purchase, New York; Dr. M. Henry Williams, Jr., Program Coordinator

The Council felt that this application did not include the necessary resources to qualify as a full regional medical program. Therefore, the Council unanimously recommends that this application be disapproved, and the applicant advised to seek a relationship as part of a larger regional medical program.

Application No. 1-S02-RM-00018-01, Vanderbilt University School of Medicine and Meharry Medical College, Nashville, Tennessee; Drs. Randolph Batson and D. T. Rolfe, Program Coordinators

The Council recommends approval with staff consultation to clarify certain items. The amounts requested were: \$647,635 and \$525,906, plus appropriate indirect cost.

Application No. 1-S02-RM-00019-01, California Coordination Agency for Training, Research, Education and Demonstration in the field of Heart Disease, Cancer, Stroke, and Related Diseases; Dr. Nemat O. Borhani, Program Coordinator

This is the same type of application as application number 1-S02-RM-00016-01. The Council, therefore, recommends that it be handled in the same manner.

Mr. Cumming absented himself during this discussion.

Application No. 1-S02-RM-00020-01, Methodist Hospital, Lubbock, Texas; Mr. George M. Brewer, Administrator

The Council recommends disapproval because (1) the inadequacy of the application; and (2) there is no evidence of suitability of the Methodist Hospital to serve as the center for the planning effort.

Dr. DeBakey absented himself during this discussion.

Application No. 1-S02-RM-00021-01, Minnesota State Medical Foundation, St. Paul, Minnesota; Dr. J. Minott Stickney, Program Coordinator

The Council recommends deferral pending staff consultation and assistance to the applicant.

Application No. 1-S02-RM-00022-01, Ohio State University, College of Medicine, Columbus, Ohio; Dr. Richard L. Meiling, Program Coordinator

The Council recommends deferral pending staff consultation and assistance to the applicant.

XII. REORGANIZATION OF THE PUBLIC HEALTH SERVICE

In connection with the reorganization of the Public Health Service, the Council unanimously passed the following resolution for transmittal


to the Surgeon General:

"The Council believes that the CDC audio-visual program is important to the future development of the Regional Medical Programs, and hopes that the administrative and funding support necessary to strengthen this program will be forthcoming."

XIII. ADJOURNMENT

The meeting was adjourned at 3:00 p.m., June 21, 1966.

I hereby certify that, to the best of my knowledge, the foregoing minutes and attachments are accurate and complete.



Robert Q. Marston, M.D.
Associate Director, NIH, and
Chief, Division of Regional
Medical Programs

Eva M. Handal, Recording Secretary
Council Assistant, DRMP

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COUNCIL MEMBERS
8/1/66

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