

Pilot Arthritis Program

Expenditure of RMP grant funds for arthritis program coordination and evaluation activities

The obligation and expenditure of RMP grant funds for pilot orthritis program coordination and evaluation activities is appropriate. These administrative curctions are a part of The traditional mappenent of The RMP's with respect to Council-approved programs. Followup activities including arthritis program surveillance, reporting, coordination and evaluation were recommended by The National Advisory Council at its June 1974 meeting. And Expendit RMP expenditures of earmarked pilot arthritis grant funds, as well as control RMP program coordination and evaluation funds are appropriate when they replect & accepted program followup, and do not bet result in direct arthri-Tis program enlargement beyond the limit established in the Comail's appropriating arthritis program funding approvals.

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE

HEALTH RESOURCES ADMINISTRATION
BUREAU OF HEALTH RESOURCES DEVELOPMENT

TO: The record

DATE: November 18, 1974

FROM

Matthew Spear

Public Health Advisor

SUBJECT: Organization for a national arthritis conference

A discussion was held at O'Hare International airport, Chicago, Illinois, on Sunday, November 17, to explore the feasibility of convening a conference to develop coordinated activities, including program reporting and evaluation, among 29 Regional Medical Programs (RMP's) conducting pilot arthritis grant programs. Participants in the discussion were:

Dr. Roger D. Mason, discussion moderator; Chairman of the former Arthritis ad hoc Review Committee

Mr. Kevin Anderson, staff member, Michigan RMP

Dr. William F. Donaldson, 1st Vice President, American Academy of Orthopaedic Surgeons (Pittsburgh)

Dr. Ephraim P. Engleman, UCLA; chairman of the ARA "committee of five" designated to provide liaison with DRMP (San Francisco)

Dr. Satoru Izutsu, Executive Director, Hawaii RAP

Dr. Lawrence M. Petrocelli, Chief Arthritis Activities, NIAMDD

Mr. David Shobe, Arthritis Foundation (Washington, D.C., and N.Y.)

Dr. Clement W. Sledge, Robert Breck Brigham Hospital (Boston)

Dr. Isaac Taylor, Deputy Director, Tri-State RMP

Dr. Charles D. Tourtelotte, Chief of Rheumatology, Temple University (Philadelphia)

From the Division of Regional Medical Programs:

Mr. Gerald T. Gardell, Acting Director

Mr. Matthew Spear, Staff member

The consensusses reached by the discussion participants are the following:

- 1. There should be a conference to develop coordination, evaluation, and followup activities among the 29 funded pilot arthritis programs.
- 2. The conference should be convened at a site which results in least cost for both the conduct of the conference, and the attendance of the participants.
- 3. Total cost of the conference proper (site and services costs) should not exceed \$10,000.

13. 24. Special resource people should be available in both the workshop, and plenary sessions. Types (or specialties noted):

demography
program evaluation
program funding
program information disseminators
program image builders

Names mentioned:

demography -- William Ranke (?), Johns Hopkins, Md.

evaluation -- Dennison, Mich.; Plotz, N.Y.; Dr. Smyth, Colo.; Confree, Cal.; Joseph Barbaccia, Cal.

funding --- David Rogers, Johnson Foundation
Kellogg Foundation
State Health Department specialists

program delivery -- Ed. Smith, Va.; John Sharp, Houston, and Smiley, Dallas, Texas; Neustadt, Louiseville; Ivan Duff, Mich.; Dr. Klineberg, and George Freo (?), Cal.

program information -- one or two widely known science writers
program image -- Sen. Cranston; Anne Landers

4. Conference sponsors will be, jointly:

Arthritis Foundation American Academy of Orthopaedic Surgeons National Institute of Arthritis, Metabolism, and Digestive Diseases Regional Medical Programs (29 collectively)

- 5. The sponsors will jointly contrive to pay the costs of the conference.
- 6. Participating program attendees will be required to meet their travel and other costs from local sources.
- 7. Program attendance/participation will be limited to Coordinators of the 29 RMP's with finded pilot arthritis programs, their arthritis Project Directors, and others directly associated with the conduct of the conference.
- 8. Special guests, and expert resource personnel will be invited. Their costs of participation will be reimbursed by the sponsors, when necessary.
- 9. The conference will be schedulled for 2 days in the period between January 18, and February 2, 1975.
- 10. DRMP will provide staff support -- in effect, and Executive Secretariat -- for development, conduct, and perhaps followup of the conference.
- 11. The tentative program structure is:
 - I. Educational impact
 - A. Physicians
 - B. Paramedical
 - C. Patients
 - II. Delivery Impact
 - A. Demographic aspects
 - B. Types of services
 - C. Distribution of services
 - III. Objective analysis of results
 - A. Each of the above
 - B. Functional analysis of therapy
 - IV. Continuation funding
- 12. The structure relates to the following tentative agenda:
 - a. short introductory plenary session
 - b. workshops on sections I, and II
 - c. plenary session for reports and discussions
 - d. workshops on sections III, and IV