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D. BROTZMAN DISTRICT 2-BOULDER

COLORADO-WYOMING REGIONAL MEDICAL PROGRAM

Planning Funds in the amount of \$339,605 are available to the two-state program with Dr. Paul Hildebrand, a leading practicing physician as Program Coordinator.

Emphasis has been placed on widespread involvement through planning committees and community advisory groups. Committees involve more than 50 representatives of a wide variety of health interests and focus on Heart Disease, Cancer, Stroke, Continuing Education and Health Planning. Studies cover patient needs and services demonstrations of best care and early detection of disease.

More detailed information on the Colorado-Wyoming Regional Medical Program can be found in the following material.

D. BROTZMAN DISTRICT 2 -BOULDER

COLORADO-WYOMING REGIONAL MEDICAL PROGRAM

REGION

The States of Colorado-Wyoming

University of Colorado Medical Center

COORDINATING HEADQUARTERS

January 1, 1967

FUNDING

STARTING DATE

Current Award:

Projected Next Year:

OPERATIONAL STATUS

PROGRAM COORDINATOR

ADVISORY GROUP

\$339,605

\$1,000,000

Anticipated to begin in Fiscal Year 1969

Paul R. Hildebrand, M.D. Assistant Professor Department of Medicine University of Colorado

(Program Director - Howard W. Doan, M.D.)

 Chairman: John J. Conger, Ph.D.
Membership: 27 Practicing M.D.'s 4; Medical Center

Officials 6; Hospital Administrators 2; Medical Societies and other Health Persons 4; Voluntary Health Agencies 4; Institutions and Agencies 2; Lay Public 5.

Preplanning began in the Colorado-Wyoming region late in October of 1965. After consultation with Governor John A. Love of Colorado, Dr. John J. Conger, Dean of the University of Colorado School of Medicine spoke at a meeting of the State Medical Society. Dr. Conger sought endorsement to establish committees in the areas of heart disease, cancer, stroke, continuing education, and community health planning to begin the program. In the spring of 1966 the leadership of the health community of both Colorado and Wyoming met at the request of Dr. Conger and heard the initial reports of the five committees that were appointed. Then it was agreed that the University of Colorado School of Medicine would take responsibility for developing an initial planning grant application for this two-state region. An Advisory Group was appointed, a planning grant developed, and activities formally began on January 1, 1967.

Organization and Staffing

The professional staff now consists of seven persons and should increase to 14 during the next year. The staff is now made up of physicians, hospital administrators, staticians and health planners. Key positions that have been filled thus far include the Program Coordinator, Program Director, Director of Continuing Education, Director of Program Development, and a Resource Physician Advisory.

Organization

Five Committees have been set up in the areas of heart disease, cancer, stroke, continuing education, and health planning. The aggregate membership of these committees is approximately 50 and represents numerous components of the health community in this two-state region. They have been given primary responsibility for judging the technical merit of projects as they are developed. They have also assisted in launching the planning program by the collection of data, the development of needs and priorities, and the creation of a six-criteria test, which proposed projects must pass before they can be funded.

Regional Advisory Group

The Advisory Group has increased in membership from 19 to 27 over the past year. It is representative of both the professional and lay community of this region and meets four times a year. The Group has responsibility for dimensions of the program such as the development of guidelines, final approval of projects, and the collection of pertinent data.

Planning Activities

The Colorado-Wyoming Regional Medical Program was funded on January 1, 1967. The first full-time staff members joined the program on February 16, 1967, and the ensuing weeks were largely devoted to expanding the staff, establishing administrative procedures, and making contact with other health agencies.

The primary emphasis of the first year of planning has been in the area of data collection. The program has become deeply involved with, and committed to the existing <u>PAS</u> and <u>MAP</u> endeavors presently being carried out in this region. This program will be utilized as the framework for developing feasibility studies and operational programs. Also, an inteagency conference on data collection was sponsored by the Regional Medical Program. This activity was the major mechanism used by the Colorado-Wyoming Regional Medical Program for involving other health agencies during the first year of planning.

Subregionalization

More intensive and continuous local involvement will be achieved by establishing Community Advisory Groups, which will dunction essentially as a local Regional Colorado-Wyoming

Advisory Group. The Community Advisory Group will serve as a source of invaluable information on local impressions of and attitudes toward health problems and potential solutions. It will also serve as a medium of communication between the program and the local community.

It should be pointed out that three of these groups have been established in Casper and Cheyenne, Wyoming as well as Greely, Colorado; it is felt that they will begin to actively function and have a significant input in the planning process during the second year of planning.

Feasibility Studies

Seven feasibility studies are in the planning stage or have been initiated. They include:

- 1. Training Directors of Medical Education and Nursing Education to become Coordinators for Subregions.
- 2. The development of short-term fellowships and other intensive training programs for health professionals.
- 3. Determining the use of closed circuit television and other new teaching and communication techniques for RMP purposes.
- 4. The development of demonstration care programs.
- 5. Development of new occupational roles in the health field.
- 6. Survey of existing patient needs, facilities, and services in the Region.
- 7. Development and implementation of Systematic Early Detection Programs.

ADVISORY COMMITTEE FOR PLANNING FOR REGIONAL MEDICAL PROGRAMS

COLORADO-WYOMING

John J. Conger, Ph.D. Dean, School of Medicine University of Colorado

Robert Alberts, M.D. Director Wyoming State Health Department

Chester M. Alter, Ph.D. Chancellor Emeritus University of Denver

James G. Carr, Jr. Representative Wyoming Hospital Association

Roy L. Cleere, M.D. Director Colorado Department of Public Health

John Cobb, M.D. Faculty, School of Medicine University of Colorado

Thomas E. Creighton, L.L.B. Attorney at Law Denver, Colorado

C. Wesley Eisele, M.D. Associate Dean Postgraduate Medical Education University of Colorado

William H. Hiatt, D.D.S. Colorado Dental Association

George D. Humphrey, Ph.D. President Emeritus University of Wyoming

N. Paul Isbell, M.D. President Colorado Division American Cancer Society Roger Larson, M.H.A. President Colorado Hospital Association

Gordon Meiklejohn, M.D. Faculty, School of Medicine University of Colorado

Austin Mutz, M.D. President Colorado Heart Association

Thomas Nicholas, M.D. President Wyoming State Medical Society

James C. Schafer Executive Vice President Colorado Hospital Services

J. Robert Spencer, M.D. Colorado Medical Society

C. Robert Starks, Sr., D.O. Colorado Osteopathic Association

E. Stewart Taylor, M.D. Faculty, School of Medicine University of Colorado

William R. Waddell, M.D. Faculty, School of Medicine University of Colorado

Virginia S. Ward Executive Director Colorado Nurses Association