

CPSA 6-21-95  
D. B. 11/15/95  
Products Limited  
Com

MEETING LOG

DATE : June 21, 1995  
PLACE : St. James Preferred Residence, Washington, DC  
PURPOSE : Poison Control Center Leadership Group  
ATTENDEES : To be provided when minutes are received.  
SUBMITTED BY : Marilyn Wind, Ph.D.

The majority of the meeting was spent reviewing a study design on potential economies of scale developed by George Washington University Center for Health Policy. They are researching the functions of a poison control center currently and developing a design to evaluate possible configurations of poison control centers. They will be asking questions about the functions that poison control centers perform and looking at what we know about the costs and benefits of performing these tasks. They will pinpoint areas of information gaps and present suggestions about how to fill those gaps. The Leadership Group discussed the matrices they had set up and made suggestions about adding to or subtracting from these matrices. The next phase, the implementation of the design, will be contracted out and not begin before the next calendar year.

Mr. Ted Miller, National Public Services Research Institute, presented a draft report, "Government Financial Option to Preserve and Expand Poison Control Centers." Mr. Miller looked at how much poison control centers cost, where their funding comes from and who derives the benefit from their savings in medical costs. He then proposed possible mechanisms by which the government could partially fund poison control centers. Both this study and the one on economies of scale are being funded by the Health Resource Services Administration.

The Centers for Disease Control is funding a three year study at the San Francisco Poison Control Center to try to evaluate the cost effectiveness of a regional poison control center. They presented an interim report of what has been done to date. In the pilot study and the first phase of the study, they are examining how people get information from poison control centers and what the outcome of the poisoning is. In order to look at what happens if people do not have direct access to a poison control center, they have looked at people who have tried to access the San Francisco Poison Control Center from a county whose access is being blocked because of non-payment of fees. They will evaluate through call backs to these people how they ultimately obtained advice and what the outcome of the poisoning was. In the next two phases they will evaluate use of a 911 operator and the use of an HMO Advice Nurse each with a quick reference card to manage simple poisonings. They will then perform a cost effectiveness analysis. People raised many

✓

questions about the study particularly in regard to the small number of cases to be evaluated. There is a real concern that the sample size for each particular cell in many cases would be too small to draw valid conclusions.