AWARD OF $182,040 TO FUND 5 PROJECTS

The Lakes Area Regional Medical Program, Inc., received an award of $182,040 from the Division of Regional Medical Programs, U.S. Department of Health, Education and Welfare, which will be used to fund five health related projects benefiting Western New York and Northwestern Pennsylvania.

The L.A.R.M.P.'s Regional Advisory Group approved on September 12, the funding of five projects that were previously approved by the L.A.R.M.P. but not funded due to lack of funds. The new award will provide support for approximately ten months to June 30, 1975. The projects are: The Regionwide Genetics Program, which will provide education and special diagnostic and counseling facilities in the nine county region of Western New York and Northwestern Pennsylvania; The Primary Care Nurse Practitioner Program, to expand the role of the nurse in the health related delivery system; Domiciliary Staff In-Service Training, to develop an inservice training program to improve services within domiciliary facilities; The Rehabilitation of Aphasia Patients, based at W.C.A. Hospital, Jamestown, New York, to develop a regional center for the treatment of aphasic patients (speech therapy) from throughout Western New York and Northwestern Pennsylvania; The Centralized Relocation Service, to develop a regional center for the treatment of aphasia patients (speech therapy); and the Centralized Relocation Service, to develop a regional center for the treatment of aphasia patients (speech therapy) from throughout Western New York and Northwestern Pennsylvania.

The L.A.R.M.P. grant will provide support for the Regionwide Genetics Program, to develop a regional center for the treatment of aphasia patients (speech therapy) from throughout Western New York and Northwestern Pennsylvania.

ELECTION

A slate of officers for the National Association of Regional Medical Programs was also elected. The officers are: Chairman — John R.F. Ingall, M.D., Lakes Area RMP, Buffalo, N.Y.; Vice Chairman — Donal R. Sparkman, M.D., Seattle, Washington; Secretary — J. Gordon Barrow, M.D., Atlanta, Georgia; Treasurer — Benjamin Morgan, Lakes Area RMP, Buffalo, N.Y., Board Members — Paul D. Ward, Oakland, California; James W. Cuberston, M.D., Memphis, Tennessee; Robert W. Brown, M.D., Kansas City, Kansas; Charles W. Caldwell, Oakdale, Iowa.

Funded by LARMP
Ambulatory Care Services Model Used In Planning Hospital Facility

The School of Architecture and Environmental Design, State University of New York at Buffalo, has completed an eight-month study financed by the Lakes Area Regional Medical Program, Inc., which is being used by the Buffalo General Hospital to design its new ambulatory care facilities and to enable them to make better administrative policies and decisions for their hospital. The cost of the project was $100,000.

A team of researchers, headed by Associate Professor Gunter Schmitz, developed the model which is based on about 300 hours of direct observation of patients and employees while in ambulatory clinics, plus in-depth identification of trouble spots and measures used to deal with patient-employee problems.

Data gathered revealed the interactions between the formal organization, its physical environment, and the behavior of its personnel.

(Cont'd on Page 2)
Continuing Education Programs

Two continuing education workshops for health professionals will be presented by the Lakes Area Regional Medical Program, Inc. in October. They are:

**OCTOBER 16-17:** Health Team Services — Right of the Elderly — Erie County Home and Infirmary, Alden, New York — registration limited.

**OCTOBER 24:** Current Concepts In the Treatment of Uterine Cancer — Wellsville Country Club, Wellsville, New York.

Another program entitled "Crisis: Death in the Hospital," sponsored jointly by the WCA Hospital, Jamestown, New York, and the LARMP, will be held November 6 at the First United Methodist Church, Buffalo Street at Lakeview Avenue, Jamestown.

For reservations contact: LARMP, 2929 Main Street, Buffalo, New York 14214.

management of cancer patients. A stipend of $1,200 is made available to defray the expenses and loss of income to the physician during his/her absence from practice. The physician must reside within the area of the Division. Inquiries to: Chairman, Professional Education Committee, American Cancer Society, New York State Division, Inc., 6725 Lyons Street, P.O. Box 7, East Syracuse, New York 13057.

LARMP GRANT

(Conf'd from Page 1) toward the staffs, administrators, board members and other local authorities serving both private and public nursing homes and health facilities. The program’s objectives include an emphasis on the improvement of existing rehabilitation techniques and the development of new ones. Also, through the use of films, lectures, discussions and role playing, the program hopes to educate the personnel of other health related facilities about the needs of the elderly, improve communication among the agencies involved with older people, and promote better utilization of existing facilities.

when and where they do these things are important. Good data collection can determine, for example, how many interns actually need to be assigned to a clinic, or how many registered nurses are necessary during certain times of the day. Or how to shift procedures from one time of day to another to eliminate bottlenecks and long patient visits."

"The Ambulatory Care Services Model, which computerized the data collected is a group of tools which can be used to solve a problem or a group of problems. It's necessary to find out which employees perform certain tasks and where they go to perform them and ask whether these particular employees should be doing this task. Only when the problems are identified, be they structural or staffing, can a solution be devised," Mr. Danford said.

Copies of the Ambulatory Care Services Model report can be obtained by contacting Scott Danford, School of Architecture and Environmental Design, State University of New York at Buffalo, 2917 Main Street, Buffalo, New York 14214.
Rural Externship
Students In Action

Fifty-seven health sciences students participated in this summer’s eight-week Rural Externship Project, sponsored by the LARMP. The purpose of the project is to provide students with actual living and working experiences in rural areas where health manpower is in short supply, with hopes they will like the setting and consider setting in one of those rural areas after they graduate. Students found the experience challenging and worthwhile, many indicating they like rural medicine and will consider it after graduation.

Tumor Registry Report Available

The Lakes Area Regional Tumor Service Registry has published a two year report which includes data submitted to the Registry by 20 participating hospitals during the period from January, 1970 through December, 1972. Funded by the LARMP, the Registry was organized in 1969 and serves hospitals, physicians and cancer patients in the geographic area of the LARMP. The project is designed to improve patient care through a careful follow-up system, to provide a method of continuous evaluation of the cancer control program in the area, and to assist in the establishment and maintenance of hospital based cancer registries. Copies of the report are available. Write, Lakes Area Regional Tumor Service Registry, 651 Elm Street, Buffalo, New York 14203 or call 883-7169.

From the Director's Desk

Hastily Constructed Projects In Response to Money Offers Is Out

A question frequently asked of the RMP is: "Why should we construct a proposal to do things and submit them to your organization when there is no money available to support us? Good proposals well constructed, responding to a well defined need in this region require construction because of the very existence of that need. Furthermore, good projects require a decent time period to produce a good document; one that stands a much better chance of success in the competitive funding arena than those projects that are constructed in haste just because money has suddenly been made available. This is irresponsible. Where projects are submitted to provide community services or improve medical care delivery, the community itself should have time and the opportunity to consider what is being devised in their interest.

Community input from those involved in the provision of services and equally those recipients of them cannot take place in the time allowed by the Federal agencies especially at the end of the fiscal year. It is, therefore, my view that we could have well constructed projects and programs available in the "top drawer" and ready to go rather than to construct them hurriedly at the last minute in response to offers of money. I believe money is not the reason for doing things. It is irresponsible for those whose problem is balancing the books to solve their problem; namely the distribution of money and in so doing create a problem for the community asking to use it. This particular opinion is supported by resolution of the Board of the Regional Advisory Group and reads as follows...

WHEREAS the hurried commitment of monies towards the end of the fiscal year vitiates responsible planning for their commitment, and

WHEREAS the resolution of a problem, namely disbursement of unencumbered funds at the Federal level creates conflicts at the community level, and

WHEREAS our private corporate function is the response to a regional plan and review of the technical value of that response, and

WHEREAS the community acceptance of that response and their investment in that response must be documented, and

WHEREAS the foregoing requires time, negotiation, sincere commitment and a framework which can be monitored, evaluated and modified. Now therefore

BE IT RESOLVED THAT:

1. The Lakes Area Regional Advisory Group will not respond to requests for proposals in a time-frame seen as inadequate.

2. The Lakes Area Regional Advisory Group will not approve the acceptance earmarked money by the Lakes Area Regional Medical Program, Inc. in response to a hastily constructed plan.

3. The Lakes Area Regional Medical Program will not compromise the quality of projects devised by subjecting the administrative staff to a planning obligation in an unreasonably short time.

This RMP will continue to help the community in defining its needs and documenting its response to them. There is considerable competence and experience within our organization to continue to do this. It is an enabling function necessary in a community and will be needed for the future and should be seen as a necessary function irrespective of the label of the organization which discharges it.

JOHN R.F. INGALL, M.D.
Executive Director
Lakes Area RMP, Inc.

Free Booklets

Booklets describing the Allegany County Mobile Health Unit and the Rural Externship Program, both projects funded by the Lakes Area Regional Medical Program, Inc., are available for the asking. Write, Editor, FORUM, for copies.
RMP Accomplishments Listed in Booklet

RMP BENEFITTING PEOPLE & IMPLEMENTING LOCAL HEALTH SERVICES is the title of a recently prepared report describing the nation's RMPs accomplishments in developing health delivery systems across the country over the past four years.

Findings contained in the report show that more than 9 million people received direct health care services in Regional Medical Program (RMP) activities in 1973. An estimated 12 million additional persons benefited as a direct result of the use of new skills acquired by local health professionals in RMP training programs. Despite a year marked by lack of clarity in health policy at the Federal Administration level and illegal impoundments of Congressional appropriations, the RMPs continued to record substantial accomplishments in expanding and improving local services for people.

Other findings of a March, 1974 national survey of the nation's 53 RMPs revealed that in 1973:

... over 80 percent of the almost 1000 RMP projects not designed as "one-time" activities were continued by local financing mechanisms at an annual estimated level of $58 million after RMP funding support was completed.

... RMPs provided major technical assistance in over 6000 instances in creating new health services organizations and in securing over $350 million of non-RMP funds:
1) for other health organizations for needed improvements in local health services, and
2) for rapid, locally suitable implementation of new Federal initiatives.

The report was prepared by the RMP Public Accountability Reporting (PAR) Group Council of which Robert J. Miller of LARMP is a member. This 10 member Council was formed to develop descriptive and evaluative information about the nation's 53 RMPs. PAR operates in cooperation with the Division of Regional Medical Programs and under the auspices of the Coordinator's Executive Committee.

Copies of RMP-BENEFITTING PEOPLE AND IMPLEMENTING LOCAL HEALTH SERVICES are available upon request. Write, Editor, FORUM.

TLN SCHEDULE (Cont'd from Page 2)

October 15—Tuesday
MEDICINE & SURGERY—11:30 A.M.
COMPUTERIZED AXIAL TRANSVERSE TOMOGRAPHY
William R. Kinkel, M.D.
NURSING—1:30 P.M.
THE AGED ADULT IN THE COMMUNITY
Sister Mary Ballas, R.N.
EMERGENCY MEDICAL TRAINING—7:00 P.M.
(For locations designated by the Emergency Medical Services Director)

October 16—Wednesday
CANCER ONCOLOGY—11:30 A.M.
TREATMENT OF MELANOMA
Douglas E. Holyoke, M.D.
Arnold Mittelman, M.D.

CANCER ONCOLOGY/NURSING—12:30 P.M.
NURSING MANAGEMENT OF THE PATIENT WITH MELANOMA
Linda Weisbeck, R.N.
DIETETICS—2:00 P.M.
LEGAL ASPECTS OF DIETETIC PRACTICE
Samuel S. Rabkin, L.L.D.

October 17—Thursday
RESPIRATORY THERAPY TECHNOLOGY—11:30 A.M.
RESPIRATORY STIMULANTS (Journal Club)
Robert Moore, ARIT
David T. Smith, ARIT

VOLUNTEER SERVICES—1:30 P.M.
STAFF ATTITUDES AND RELATIONSHIP
Pearl Ross, B.A., C.V.C.
Marilyn Hergesell

October 21—Monday
FOOD SERVICE—2:00 P.M.
PROFESSIONAL FOOD PREPARATION
Dorothy Deering, M.S., R.D.

October 22—Tuesday
MEDICINE & SURGERY—11:30 A.M.
NEUROMUSCULAR DISORDERS IN INFANTS AND CHILDREN
K. Kalyanaraman, M.D.

NURSING—1:30 P.M.
PATIENT READINESS TO LEARN
Barbara K. Redman, Ph.D., R.N.

EMERGENCY MEDICAL TRAINING—7:00 P.M.
(For locations designated by the Emergency Medical Services Director)

October 23—Wednesday
ANESTHESIA—3:15 P.M.
THE ELECTROCARDIOGRAM DURING ANESTHESIA
Raymond Trudnowski, M.D.

October 24—Thursday
ALLIED HEALTH—1:00 P.M.
A TEAM APPROACH TO WORKING WITH AN AUTISTIC CHILD
Lewis K. Shupe, Ph.D.
Gary Powell, M.S., O.T.R.

October 29—Tuesday
MEDICINE & SURGERY—11:30 A.M.
DIAGNOSTIC APPROACH TO HEADACHES
Ellen S. Dickinson, M.D.

NURSING—1:30 P.M.
NURSING IN A MOBILE HEALTH UNIT
Virginia L. Barker, Ed.D.

EMERGENCY MEDICAL TRAINING—7:00 P.M.
(For locations designated by the Emergency Medical Services Director)

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