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SUGGESTED DIFFERENTIAL DEFINITIONS OF COMPONENTS OF  
REGIONAL MEDICAL PROGRAMS

PROGRAM DIRECTION AND PROFESSIONAL SERVICES

The central staff which is directly responsible, and the sub-regional or area staff which is indirectly responsible, to the chief administrative officer of the Regional Medical Program (coordinator or director); and those administrative and professional activities directly related to carrying out those responsibilities, but not including the contribution, in time or other costs, to approved and funded specific projects or studies (as defined below).

II. CENTRAL REGIONAL RESOURCE

Program components which are required for the development and support of the Regional Medical Program, as approved, and which will continue to require grant funds as their principal means of support for as long as they serve the Program of which they are a part. This category can include program evaluation units, data collection and processing resources, etc., as well as service activities designed for immediate response to a regional need (as opposed to establishment of permanent staff services to meet continuing needs).

III. FEASIBILITY STUDY

Specifically definable planning activities which require a separate allocation of funds for a sub-contract or other "purchase" of a planning capability or resource, which are time limited and intended to lead to the development of one or more projects. These are sometimes administered by the central staff, but do not require a permanent increase in staff or represent a continuing cost to the Regional Medical Program.

IV. OPERATIONAL PROJECTS

Time-limited activities which, when completed, can be shown to have. . .

- Identified and met a continuing need in the Region so that it can be expected to receive future support from local funding resources, or
- Defined a program direction to be followed up by a new project approach, or have accomplished a short-term Program goal, and will be terminated.