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MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE HEALTH RESOURCES ADMINISTRATION BUREAU OF HEALTH RESOURCES DEVELOPMENT DATE: December 5, 1974

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Acting Director, Division of Regional Medical Programs

Public Health Advisor

SUBJECT: Background material for discussion on Arthritis Conference on Dec. 5

With reference to our telephone conversation this morning, the enclosed material is the basis of the general discussion I would like to have with you at 3:00 p.m. today. The discussion need not be long, as my agenda is to go over with you (a) where matters stand, (b) explore any potential problem areas vis a vis DRMP, and (c) obtain clearance on potential, small cost items.

Since I do not clearly recall which documents have been forwarded to you for information, I am enclosing the following:

- 1. A letter to Dr. Shulman, President of the Americal Rheumatism Association, the professional organization of the Arthritis Foundation. The letter updates him on events, and transmits the report on the Chicago Discussion.
- 2. A memorandum to 5 of the "consultants" who were, on November 25, in Washington to testify on the Cranston Bill. I was able to deliver this material to them at the Rayburn Building. There has been no play=back, to date. This document is the first "hard" proposal on the Conference, proper; it is the result of the experience I had at the San Francisco meeting of the western Coordinators on arthritis, and discussions which Dr. Englemen and I had on the plane, returning to Washington.
- 3. The third document is an itemization of activities and functions surrounding the conference proper. It will become a part of a larger document I am preparing to send to the involved people for (a) their information, and (b) concurrence on what is being done. I may be able at the same time to include some concepts on conference subject matter which, I hope, will elicit ectension of ideas from them.

Items Nos. 2, and 3, are most pertinent to our discussion.

Enclosures

cc: Ken Baum

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FROM



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE HEALTH RESOURCES ADMINISTRATION ROCKVILLE, MARYLAND 20052

BUREAU OF HEALTH RESOURCES DEVELOPMENT

November 22, 1974

Lawrence E. Shulman, M.D., Ph.D. 916 Clinical Science Building Johns Hopkins Hospita' Baltimore, Maryland 21205

Dear Dr. Shulman:

This follows up our telephone conversation of about two weeks ago to keep you advised regarding progress and arrangements for pilot arthritis progran followup.

I have enclosed a statement I developed for our guidance in the Division of Regional Medical Programs regarding the Chicago O'Hare "fly-in" discussion on November 17. It is enclosed not only to save rewriting, but to permit others receiving copies of this letter to advise me of any misrepresentations.

I wish, first, to convey our feelings of sincere appreciation of the interest and thoughtfulness extended by each of the participants in the Chicago discussion. This was not a "pat" meeting; most of the points I have enumerated in the enclosure elicited initial differences of opinions, and were subjected to considerable scrutiny by the group. I believe however, that doubts have been moderated if not retired, and that there is positive consensus regarding the need for the arthritis conference, and the potential it provides for substantive results.

Several key factors affected the outcome of the Chicago discussion which are not apparent in my summary. First, enroute to the meeting, I was advised by Mr. Gardell, Acting Division Chief, that funds I had believed to be available as our contribution toward the conference were not, in fact, available. We will continue to seek identification of a Federal contribution, but the prospect is not bright. Secondly, it was agreed that the conference should constitute a working session on the present funded pilot programs, their present circumstances, and future; attendance should be limited accordingly. It was agreed that the members of the Arthritis Ad Hoc Review Committee should be invited.

I estimate that the conference will require the attendance of about 120 people. This includes 29 RMP representatives, about 60 Project Directors, and the remainder made up by representatives of the sponsoring agencies, resource specialists, and guests. For your information, Dr. Evelyn Hess is contacting all of the pilot arthritis Project Directors to explore the possibility of developing data within the ARA uniform reporting format. Also, the Michigan RMP is contracting with the University of Michigan School of Public Health to carry out evaluation of Dr. Ivan Duff's geriatric demonstration. This might provide an avenue of interest other schools of public health to perform similar evaluative work.

I was provided an opportunity yesterday to discuss conference plans with the Steering Committee of the National Association of RMP Coordinators. On Saturday, November 23, there will be an opportunity to discuss the program and coference plans at a one-day arthritis conference in San Francisco of the Western Regional Medical Programs (7 or 8 states).

I will need and sincerely appreciate your counsel about the conference as it develops. We will be able to announce the date and location next week. I am obtaining cost and support information on both Kansas City and St. Louis, which are, in the aggregate, the least-cost sites of 11 which we priced out in some detail. I prefer Kansas City because of the existance of a strong Kansas RMP and arthritis program, and an active local Arthritis Chapter. We are inviting these respective K.C offices to serve as hosts to the conference if it is, in fact, schedulled there.

I trust that these comments will assure you that plans for an effective conference are moving forward. I look forward to your counsel with respect to program substance, and key speakers.

Sincerely,

Public Health Advisor Division of Regional Medical Programs

Enclosure

Tele: 301/443-1916 Address: Division of Regional Medical Programs Parklawn Building, Room 15-42 5600 Fishers Lane Rockville, Maryland 20852

cc: Dr. Roger D. Mason Mr. Kevin Anderson Dr. William F. Donaldson Dr. Ephraim P. Engleman Dr. Satoru Izutsu Mr. Gerald Gardell

Dr. Lawrence M. Petrocilli Mr. David Shobe Dr. Clement W. Sledge Dr. Isaac Taylor

Dr. Charles D. Tourtelotte

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 (RP'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 lzutsu, Executive Director, Hawaii RMP

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:

- 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.

Conference sponsors will be, jointly: 4.

no Lusinen Arthritis Foundation American Academy of Orthopaedic Surgeons National Institute of Arthritis, Metabolism, and Digestive Diseases Regional Medical Programs (29 collectively)

- The sponsors will jointly contrive to pay the costs of the conference. 5.
- Participating program attendees will be required to meet their travel and 6. other costs from local sources.
- 7. Program attendance/participation will be limited to Coordinators of the 29 RMP's with funded pilot arthritis programs, their arthritis Project Directors, and others directly associated with the conduct of the conference.
- Special guests, and expert resource personnel will be invited. Their costs 8. of participation will be reimbursed by the sponsors, when necessary.

The conference will be schedulled for 2 days in the period between 9. January 18, and February 2, 1975.

- DRMP will provide staff support -- in effect, an Executive Secretariat --10. for development, conduct, and perhaps followup of the conference.
- The tentative program structure is: 11.

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- Educational impact I.
 - Physicians Α.
 - B. Paramedical
 - Patients C.
- II. Delivery Impact
 - A. Demographic aspects
 - Types of services Б.
 - C. Distribution of services
- Objective analysis of results III.
 - A. Each of the above
 - Functional analysis of therapy Β.

IV. Continuation funding

The structure relates to the following tentative agenda: 12.

- 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
- summary plenary session e.

14. 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, Nd.

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

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARI PUBLIC HEALTH SERVICE HEALTH RESOURCES ADMINISTRATION BUREAU OF HEALTH RESOURCES DEVELOPMENT DATE: November 25, 1974

Dr. Donaldson Dr. Engleman

Mr. Shobe

Dr. Shulman

FROM

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Dr. Sledge Topean

SUBJECT: Proposed organization of an arthritis conference

The enclosed pages set forth (albeit hurriedly) a proposed format and organization for the arthritis conference discussed at Chicago on Nov. 17. The format seeks to provide maximum participation to develop a forward looking perspective, and a degree of collective action by program participants.

The characteristics seem critical to me in view of the prospects. If we dry up and go away for lack of Federal support, the present investment must be optimally employed, adequately documented, and permitted to provide a bridge to whatever local continuity as can be elicited. If additional, similar support evolves, the present program must be in position to move forward appropriately.

This is the basis on which I have striven to define a method to through which the combined elements of the existing pilot arthritis program can focussed on a forward looking, active venture. The conference must not, in my thinking, be allowed to lapse into a passive talkfest. Similarly, it must occur in a time and manner in which there is maximum involvement and interest, and serve to maintain or build on those characteristics.

The proposed attendance results in the presence of a wide spectrum of experience and outlook. The proposed techniques are an attempt to capture both the conscious, and subconscious expressions of this reservoir, and to highlight program perspectives which are, respectively, shared and unique.

It may be too much to anticipate and plan for collaborative actions as an outcome from this single conference. However, we can assure "undershooting" if we don't aim, and press for hard targets.

The proposal needs critical examination. If we progress in this, or a similar format, planning and logistics must be carefully developed.

Enclosures

Conference on Pilot Arthritis Programs

Purposes

1.

- A. Share program experiences
 - 1. Program developmental approaches
 - 2. Significant problems
 - 3. Problem resolutions
- B. Define overall program goal (s)
 - 1. Identify major obectives
 - Identify principal forces, or program elements
- C. Identify major criteria of program outcome for delivery
 - 1. Professional training
 - 2. Patient training
 - 3. Program services
- D. Identify feasible measurement techniques (to emply criteria)

1. - 2. - 3. - (as C above)

E. Identify feasible program continuation (activities/support)

1. - 2. - 3. - (as C above)

Outcomes

- A. Relate and coordinate like activities
 - 1. Obtain interprogram assistance
 - 2. Establish a newsletter
- B. Establish a central program reporting and analysis activity.
 - C. Establish a reporting format and schedule
 - D. Establish a program monitoring and counseling activity

E. Report (via newsletter) activities which win continuity support.

Schematic plan for an arthritis conference January 1975

Basis of Plan

6.

Representatives of 29 pilot arthritis programs will be convened; with others, to:

- a. Share program experiences.
- b. Develop a perspective of the program, as an initiation of arthritis control activities.
- c. Identify salient factors of program strengths, and continuity elements.
- d. Devise processes for program reporting for coordination, and evaluation.
- e. Specify collaborative roles, or functions, to be executed to effect program quality improvement, coordination of like activities, and evaluation.

Thus, the conference process must be a joint working session which initiates, if it cannot fully realize, leadership roles which draw forth participatory commitments from a wide range of individuals and groups. The objective is the establishment and coalescence of a broad constituency embracing both those required to effect delivery of good program, and those who can elicit active awareness from Municipal, State, and Federal Institutions, and agencies.

Conference Program Plan

Conference events must be formulated to elicit the experiences and judgements of present program leaders, and amalgamate their perspectives and expectations into unified objectives to be achieved within a stated period. To achieve this, conference activities will put the participants to work almost at the outset, and keep them actively engaged in a process of rapid definition of feasible actions which they can agree to undertake individually, and jointly.

A series of workshops will be conducted which will:

- 1. highlight major program requirements
- 2. emphasize similarities of perspectives
- 3. reveal innovative approaches
- 4. specify actions required to be undertaken with some uniformity.

The process is an offshoot of the "brainstorming" conference approach, and will permit:

a. direction: The matters to be addressed by the conference will be determined by the key questions posed to the participants. 2

b. maximum input: everyone will be provided opportunity to express judgements and opinions.

rapidity of response: participant responses will be obtained simultaneously; the workshop function is to focus participant responses into coherent statements of perspectives, objectives, and initiatives.

It remains questionable at this time whether the brainstorming process can be effectively conducted as a plenary session activity because of logistic, and participant fatigue problems. However, this plan assumes that these problems can be managed.

A. Requirements

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- A leader with a set of focussed questions. The questions must be orally stated to the participants and also individually displayed, as they are posed, on a large placard.
- 2. Participants must have several 3" x 5" pads of note paper, and pen/pencil.
- 3. Ushers must be available tp pick up the 3" x 5" pages after each question session.
- 4. A small collator and typing staff must be available in a separate room.
- 5. Meeting rooms are needed for designated groups (workshps). Workshops address themselves to specific questions, and the responses provided by plenary activity; the plenary responses are in the hands of the members of the designated workshop via the collator/typing team.

Sample process:

- 1. Leader states the question, which is simultaneously displayed in large print.
- 2. Leader states the time limit (2-3^min.) which participants have to write down all the responses which occur to them.
- 3. Participants write <u>one</u> answer on <u>one</u> 3" x 5" page, proceeding to successive pages as responses occur.
- Leader calls TIME; ushers pick up all answers (collect in plastic bage). Responses are delivered to the collatot/ typing room.

5. Leader proceeds to next question; etc.

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When all (or a designated set) questions are completed, a series of talks is presented relating to the conference interest. This provides the collator/typing team time to complete their work in preparation for the workshops. The collator/typing team process must not screen responses. The limiting factor will be time; all the responses which can be typed within a time limit must be prepared for perusal, discussion, and resolution by the designated workshop. Everyone must know what is occurring, but nothing must be done overtly which inhibits full, and free response from all participants.

Workshops then proceed on the questions, and responses provided in the plenary question session. Unless logistic prospects require modification of this plan, each workshop will deal with specific propositions with respect to which it has input from the aggregate conference.

Workshop output is:

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- 1. A synthesis of the conference perspectives
- 2. Statement of feasible objectives
- 3. Recommendations on conference positions, and appropriate followon initiatives.

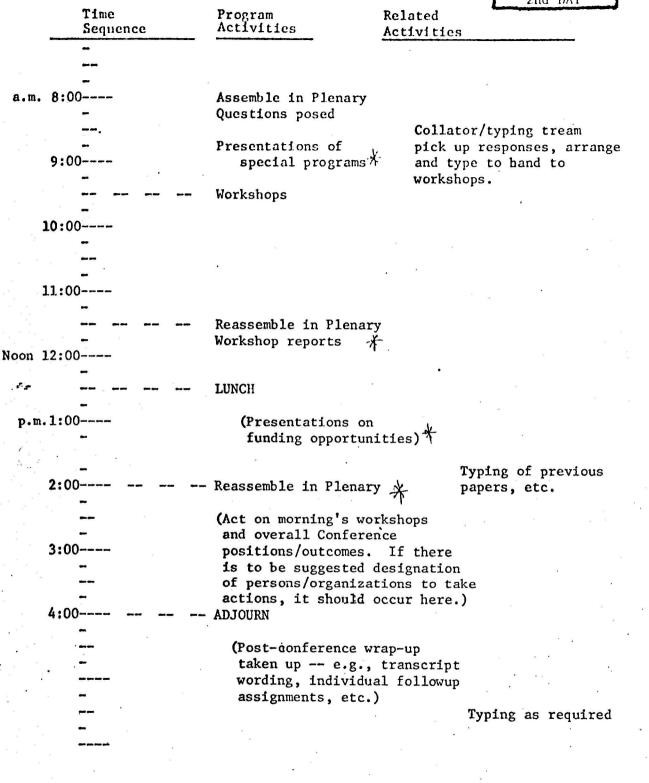
Workshop deliberations will be reported to a plenary session by the Workshop leader.

An approximate sequence for this proposed activities is attached.

e*		Ist DAY	5		
Time	Program	Related			
Sequence	Activities	Activities			
a.m.9:00	Welcome/Introduction Explanation of Agend				
	Instructions on Ques	stions .			
-	Questions posed				
10:00		Collation/typing team pick up			
	Coffee Break	responses, arrange, and type in form to be handed to workshops			
11:00	Reassemble, Introduc	ce speakers			
•••••	(15 min. presentations of				
	representative arth	nritis			
-	programs.)	•	•		
Noon12:00	LUNCH				
-	Description	•			
	Presentation on operating program				
p.m.1:00	evaluation.				
p.m.1.00	evaluation.				
	Workshops	•			
2:00	(Simultaneous con of Education Im				
	Delivery Impact				
3:00	by a number of workshops. Breakout determined by				
and a second sec	Specificity of qu Coffee Break				
-	Reassemble in Plenar	су.			
4:00	Workshop Reports	×			
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-		·			
5:00	Plenary Discussions Positions defined				
	proceeds, if appr		•		
-	proceedo, 11 app.	opilatet			
6:00	Cocktails	Typie			
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7:00	Dinner				
	Conference Keynote	Specker			
2	conference Reynole	speaker			
8:00		·			
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* Record proceedings





* Record proceedings.

Schedule, Site, Agenda, Format, Assignments, Estimated Costs, and Related Matters A. <u>Place</u>: Hotel Muchlebach Kansas City, Missouri B. <u>Dates</u>: January 19-20, 1995 C. <u>Conference</u> Hosts: Konsos City Chapter, Arthritis Foundation Konsos Regional Modical Program D. <u>Conference</u> Sponsors: American Academy of Orthoppodic Surgeon Arthritis Foundation Participating Regional Medical Program E Available Resources: 1. Travel/Per Diem of Participants: #21,000 provided by 29 RMF For participation of Coordinators, and Project Director 2. Others (DRMP, Associations, etc): Cost paid by organization 3. Conference Site/Service Casts: (maximums) a. #2,500 American Acadamy of Orthopsedic Surgeons b.ª 2,500 Arthritis Foundation C. 1,000 Kansas RMP, plus stopp support d. - KCArthritis Chapter stopp support e. Div. Regimal Medical Programs, staff support

F. Estimated Costs:

	(i) Abbreviations: AAOS AF DRMP HM KCAF KRMP RMP	Arthri Div. of Hotel Kansas Kansa	itis Founda Reg'l Mea Muchleb City Arth s Reg'l Ma	l. Programs ach . Chapter				
	(ii) Footnotes: * Indicates items which could be partially							
	or wholly charged to participants							
,								
	"Items not required if costs covered							
	by conference sponsors.							
	/ ·		p p-					
	Items	Est. Amount	Proposed Sources	Comments				
1. Faci	ities:		,					
	ary room for 150 w tables	0	нM					
	Admin. Room with tables	0	HM					
•	mittee Rooms for 30 ea. Hable	U	HM					
· · · · ·	ch Room 2 days	Ó	HM					
	ing Room I Night	0	НM					
	eping Rooms for 120-152	\$1700 single	Individual					
		•	+ 1.1.1					

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2300 dble Individual VIP Rooms (2003) 0 Post-Conference Work Room 0

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2. Services: Paging HM ٥ KRMP KOAF PA System, Plenery Room ٥ Tape Recording, Plenary, KRMP-KCAF 6 Lunch, & Driner Rooms Typewriters KRMP-KCAP ۵ Secretories (2-5) (messangers) KRMP-KCAF ٥ Reproduction equipment/services KRMP-KCAF Ô 3. Travel: * Representations of 29 RMP program 21,000 RmP's * Arthritis Ad Hoc Review Committee \$ 3,400 Individual (14 @ est. \$40 ea) VIP's (est 2@" 500 Stravel) 4 ALOS - AF 500 Rep'S AAOS, AF, DRMP, NIAMOD Individual NA 4. Meals: Lunch (2 × 4,50 × 120) \$ 1,080 * AAOS - AF * Dinner (1×10.00 × 120) \$ 1,200 AAOS - AF * Cocktails (1 × 12.25 × 240) 4 350 AAOS - AF VIP's, included above Breakfast (2) Individual 0 * Coffee Breaks (3 times)fr AAOS · AF 240 Coffee 0.35 /serving Tea 90.35 / serving

Propose d Fst Comments Items Amount Source 5. Supplies: Nome Tags (150) DRMP υ Registration Books (2) DRMP ٥ Ľ Meal Tickets (450) HM 0 3" x 5" pods (500) DRMP 0 Plastic Bays (10) DRMP Writing Paper (150) DRMP Pencils (200) DRMP ø Typing Paper KRMP-KCAF Ø Paper (Reproduction) greams KRMP-KCAF 0 Envelopes DRMP 0 ¢ ର୍ଚ୍ଚ Patage NO IAA M