



E000524

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SHOW FORMAL CLEARANCES OR APPROVALS

DATE

7/23

TO: Mr. Gardell

AGENCY BLDG. ROOM

- APPROVAL
- REVIEW
- PER CONVERSATION
- SIGNATURE
- NOTE AND SEE ME
- AS REQUESTED
- COMMENT
- NOTE AND RETURN
- NECESSARY ACTION
- FOR YOUR INFORMATION
- PREPARE REPLY FOR SIGNATURE OF _____

REMARKS:

Proposals for arthritis
followup.

Orig. to Dr. Pahl!

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To _____

From *Matt*

PHONE	BUILDING	ROOM
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MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE

~~XX~~

HEALTH RESOURCES ADMINISTRATION

BUREAU OF HEALTH RESOURCES DEVELOPMENT

DATE: July 23, 1974

TO : Acting Director, Division of
Regional Medical Programs

FROM : 
Matthew Spear
Public Health Advisor

SUBJECT: Recommendations for special activities to support the pilot
arthritis program

This memorandum and following material present recommendations for film production and program coordination activities related to the subject program. The bases for these proposals are the recommendations made by the Arthritis Ad Hoc Review Committee at its meeting May 23 - 25, and ratified by the National Advisory Council on Regional Programs on June 13.

Two principal areas were addressed by the Committee:

1. Film and Tape Development and Production: The portions of arthritis program applications which requested support for the purchase of hardware for film and video tape production were not funded. Review Committee members were sensitive to the need for such materials, being personally aware of the capabilities of films and cassettes to support patient and other educational activities. It was not considered wise, however, to assent to the volume and diversity of requests made for these purposes. The Committee proposed that DRMP cooperate with concerned RMP's to produce selected films and video tapes on subject matter widely needed. The Committee believed that the widespread, high cost need could be met best in this manner.
2. Program coordination and stimulation: The Committee's review of pilot arthritis grant applications aimed to achieve effective and cohesive program. Having recommended approval for a body of arthritis projects which emphasize outreach to patients, and the development of care providing resources, the Committee noted that approved projects represented dispersed activities requiring a connective, unifying force in order to achieve cohesiveness. The Committee perceived that collateral losses, or gains would emerge respectively

with, or without such a unifying persuasion. With outside attention to the pilot arthritis program being largely expended, with the granting of funds, the terminal nature of the grant program could result in increased conservatism in achieving objectives, and decreasing enthusiasm on the part of participants. Activities which insure a "looking in" by others, however, could sustain interest and enthusiasm, facilitate professional exchanges, and foster momentum beyond the grant period.

While the Committee was unanimous that "something be done," it was not unanimous about what the actions should be. The enclosed material presents recommendations regarding courses of actions to satisfy the Committee's suggestions. Cost estimates are also provided.

These activities have been discussed preliminarily with a number of knowledgeable persons. The proposals on film and tape production have been discussed with:

Mr. Robert Sumpter
Special Assistant to
the Director
National Medical Audio-
visual Center, NLM
(Atlanta)

Mr. Adrian Sybor
Acting Information Officer
BHRD

Mr. Fred Buschmeyer, Jr.
Special Assistant (Medical
AVS), NLM (Bethesda)

Ms. Frances Dearman
Public Information Specialist
BHRD

The proposal on arthritis program coordination has been discussed with Dr. Charles Sisk, Director of Medical Affairs, National Arthritis Foundation.

The sequence of the following material is:

- I. Proposal and cost estimates for films.
- II. Proposal and cost estimates on coordination and evaluative activities.
- III. Accumulated costs of sections I, and II.

I will be pleased to discuss these recommendations with you at your convenience.

Enclosures

Recommendations for the Conduct of Special Activities to Support the
National Pilot Arthritis Program

I. Production of Films and Tapes for Professional Education

A. Recommendation

Films and tapes suitable for use in professional arthritis training activities across the country should be developed and produced.

B. Purpose

To provide an enlarged, and contemporary library of audio visual materials specifically focussed on arthritis.

C. Need

The pilot arthritis program funded by DRMP reflects a strong interest in outreach activities to develop increased referral and care delivery capabilities among private practitioners, and professional allied health personnel. Greater access to arthritis training for medical students, and improved skills for paraprofessional personnel is also planned. The current list of professional and teaching films issued by the National Arthritis Foundation lists only two (2) recent film/slide products. Other films are at least 10 years old; the majority of NAF films, including those produced by local Chapters, are for lay audiences. Thus, there is no significant selection of contemporary film training instruments.

This shortage appears to exist primarily because of the high costs of film products. The interest for such products was reflected in the many requests for support for film production capabilities among the 43 pilot arthritis program grant applications. While professional reviews disapproved all such requests as inappropriately expensive under one-year, limited funds circumstances, they underscored the widespread need for high quality training films. They unanimously requested the DRMP to seek authority, and/or support for the production of quality film training tools.

It is proposed that a single film, or film product would not be responsive to this stated need. It is proposed that authority and resources for three (3), to six (6) professional training film products be provided to assure a meaningful selection of training film subjects and products.

D. Estimated Costs

The following estimated costs were developed in preliminary discussions with experienced PHS audio visual and information personnel. Variations in costs apart from those indicated could result from different product selections, and shorter film lengths than those indicated. The estimated budget also reflects the purpose and amounts of costs arising from collateral activities other than the production costs.

<u>Items</u>	<u>Unit Costs</u>	<u>Number of Films Produced</u>			
		<u>Quantity Costs</u>			
		<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>
1. <u>Audio visual subject</u>	<u>\$8,400</u>	<u>\$8,400</u>	<u>\$8,400</u>	<u>\$8,400</u>	<u>\$8,400</u>
<u>Identification (Est. 12 people)</u>					
12 trips @ \$300.00	3,600				
Service fee \$100/da. x 12 x 3	3,600				
Per diem \$25/da. x 12 x 3	900				
Materials	300				
2. <u>Program specification</u>	<u>\$12,000</u>	<u>36,000</u>	<u>48,000</u>	<u>60,000</u>	<u>72,000</u>
(What will be depicted about the subject)					
3. <u>Production</u>	<u>\$2,000/min</u>	<u>180,000</u>	<u>240,000</u>	<u>300,000</u>	<u>360,000</u>
16mm color film (Alternatives; color video tape \$1,800/min; film strip or sound/slides \$800/min.)	(est. 30 min.)				
4. <u>Professional Surveillance</u>	<u>\$6,600</u>	<u>6,600</u>	<u>6,600</u>	<u>13,200</u>	<u>13,200</u>
of Production (est. 6 people)					
12 trips @ \$300 ea.	3,600				
Service fee \$100/da x 6 x 4	2,400				
Per diem \$25/da x 6 x 4	600				
5. <u>Product testing</u>	<u>\$2,000</u>	<u>6,000</u>	<u>8,000</u>	<u>10,000</u>	<u>12,000</u>
ESTIMATED TOTALS:		\$237,000	\$311,000	\$391,600	\$465,600

**PROFESSIONAL
PUBLICATIONS
and
FILMS
on
ARTHRITIS**



Available from
THE ARTHRITIS FOUNDATION
1212 Avenue of the Americas
New York, N.Y. 10036

TEACHING SLIDES AND SYLLABUS

CLINICAL SLIDE COLLECTION ON THE RHEUMATIC DISEASES. 240 2" x 2" color slides providing visual material of high medical and technical quality for teaching and training. Emphasis is on clinical photographs and x-rays in addition to photomicrographs of pathological specimens. Accompanied by a syllabus containing a description and a black and white photograph of each slide. \$110.00.

PROFESSIONAL FILMS

These films are available on a loan basis within the United States, at a service charge of \$10.00 plus shipping charges for each film. Please write directly to The Arthritis Foundation Film Library, c/o Association Films, 600 Grand Avenue, Ridgefield, N. J. 07657. Purchase prices available from The Arthritis Foundation.

PREVENTION OF DISABILITY IN RHEUMATOID ARTHRITIS. Produced in 1961. Comprehensive report on the most crippling form of rheumatic disease. Examines effective treatment methods including physical therapy, drug therapy, orthopedic measures and value of rest. 28 min., 16mm., color.

PHYSICAL JOINT EXAMINATION OF THE ARTHRITIS PATIENT. PART I: EXAMINATION OF THE PERIPHERAL JOINTS. PART II: EXAMINATION OF THE HIP, SHOULDER AND BACK. Produced in 1961 and 1964 respectively. Written and narrated by Paul J. Bilka, M.D., of the U. of Minn. Medical School. Intended primarily as a supplement to the medical student's introduction to physical diagnosis. Fully detailed presentation of examination techniques employed in the diagnosis of all forms of arthritis. 29 min. each, 16mm., color.

HOME MANAGEMENT OF DISABILITY FROM ARTHRITIS. Produced in 1964. Depicts a home care service for the chronically ill. Designed for physicians and other health professionals. The program is sponsored by The Arthritis Foundation and carried out through a local visiting nurse agency. 29 min., 16mm., black and white.

SELF-HELP DEVICES FOR PATIENTS WITH ARTHRITIS. Produced in 1962. Howard A. Rusk, M.D., and Edward W. Lowman, M.D., of NYU Medical Center join forces in demonstrating the many useful tools available to help the disabled meet challenges in everyday living. 20 min., 16mm., color.

PHYSICAL THERAPY FOR A HOMEBOUND ARTHRITIC. Produced in 1962. Made in cooperation with The Arthritis Foundation Ohio Valley Chapter, and the American Physical Therapy Association. Depicts one chapter's approach to physical therapy treatment in the home. Recommended for showing to all allied health professionals. 27 min., 16mm., color.

JOINT FLUID ANALYSIS, AN IMPORTANT DIAGNOSTIC TEST. Produced in 1969. Written and narrated by Robert A. Gatter, M.D., of Hahnemann Medical College. Designed for general practitioners, internists and rheumatologists, medical students and medical technicians. Describes in detail the gross and microscopic examinations of joint fluid from the aspiration of a knee joint through a visual reproduction of all the various crystals and cellular components which might be found under polarized light and phase light microscopy with special emphasis on sodium urate and calcium pyrophosphate crystals and their diagnostic significance. 13 min., 16mm., color.

II. Program Coordination and Evaluation

A. Recommendation

Activities be organized and implemented to provide coordination and evaluation of the pilot arthritis program.

B. Purpose

To provide a National perspective to the body of pilot arthritis grant programs which have been funded. To provide increased unification to like activities in the various programs. To sustain interest and perseverance in the pursuit of program objectives, simultaneously insuring quality performances. To provide objective evaluation to both RMP programs, and the National pilot effort in arthritis.

C. Need

Applications for DRMP grant support to pilot arthritis programs were required by the sequence of events to be developed and submitted in two (2) months. The quality of planning suffered from this deadline pressure, as well as from competition for RMPs' staff time being otherwise devoted to the development of regular RMP program applications under similar deadlines. Plans for pilot arthritis program evaluations similarly suffered, and are generally inadequate.

The review process of these grant applications resulted in significantly modified program approvals such that the majority of approved pilot arthritis program sponsors are having to rethink, and restructure major program components. Information received in RMP grant acceptance letters and through telephone conversations indicates that thoughtful regrouping is proceeding.

The technical reviewers for the pilot arthritis grant programs, whose recommendations were fully endorsed by the National Advisory Council, imposed drastic downward modifications on the applications to obtain approvable program within available financial resources, improve uniformity of effort and achievability, and remove generally meritorious activity proposals not considered appropriate under the pilot characterization, and limited funding of the National program. The reviewers, with Council approval, also recommended that DRMP support coordinative, and evaluative activities; a clincher is needed for coordination which cannot reasonably be obtained from individual RMP's, and for objective assessment of the overall pilot effort.

D. Estimated Costs

The development of sound estimates is inhibited by present lack of knowledge about a practical procedure. For this reason, the estimates start with a planning conference, and proceed with subsequent activities which may result. The range of possible DRMP costs varies from: (a) the planning conference (or workshop) only, in the event that there is insufficient motivation to proceed further; to (b) the initial conference, and a later evaluation session; to (c) the above activities, and selected continuity activities. DRMP staff costs are not included in these estimates.

<u>Items</u>	<u>Total</u>	<u>Cum Total</u>
1. <u>Program coordination and evaluation planning meeting.</u> (Basis of estimation: 1 RMP, and 2 professional attendees from each of 30 RMP's for 3 days (2 1/2 da. meeting). RMP attendees may be supported by RMP funds.)	<u>53,600</u> ^{2/}	<u>53,600</u>
30 RMP x \$300 travel each	\$9,000	
30 RMP x \$25 x 3	2,300	
30 RMP x \$20 other	600	
60 Prof x \$300 Travel each	\$18,000	
60 Prof x \$100 x 3	18,000 ^{1/}	
60 Prof x \$25 x 3	4,500	
60 Prof x \$20 Other	1,200	
^{1/} Might be partially or wholly offset by existing grant funds as part of approved program.		
^{2/} Range of costs per above notes: Minimum anticipated \$32,000 Middle range \$41,000		
2. <u>Program assessment Conference</u> 30 Prof. attendees per above (1 honorarium offset 50%, total of item would be: Min \$32,700 Min Cum \$84,300)	<u>41,700</u>	<u>95,300</u>
3. <u>Progress assessment Conferences</u> (Est. same as planning conf)	<u>53,600</u>	<u>148,900</u>
(Range of costs with above offsets: Min. Cumulative \$96,700 Middle range Cumulative \$123,700)		

4.	<u>Other Costs</u>	<u>15,100</u>	<u>164,000</u>
	a. Development and printing of reporting forms.	9,100	(158,000)
	2 day meet of 5 people	\$3,000	
	printing	1,000	
	mailing x 3 times	100	
	analysis x 4 times	5,000	
	(1 part-time person)		
	b. Reports to participants, including special program highlights	6,000	(164,000)
	6 reports @ 1,000 copies ea.		
	(Assume use of NAF)		

III Summary of I, and II Costs

	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>
A. <u>Films</u>	237,000	311,000	391,600	465,600
B. <u>Coordinative Evaluation</u>				
Minimum Est.	111,800	111,800	111,800	111,800
Maximum Est.	164,000	164,000	164,000	164,000
C. <u>Totals Estimated</u>	<hr/>			
<u>Total Minimum:</u>	348,800	422,100	503,400	577,400
<u>Total Maximum:</u>	401,000	475,000	555,600	629,600