

Gvt. 01
4

Free
no

MINUTES OF MEETING OF
COMMITTEE ON ADMINISTRATIVE PRACTICE
September 20, 1933

Present:

Professor C.-E. A. Winslow, Chairman
Dr. Haven Emerson
Dr. Louis I. Dublin
Dr. E. L. Bishop
Dr. Henry F. Vaughan
Dr. George T. Palmer
Dr. George C. Ruhland
Dr. Robert H. Riley
Dr. John L. Rice
Miss Sophie C. Nelson
Dr. Joseph W. Mountin
Dr. W. F. Walker
Dr. Leverett D. Bristol
Dr. Kendall Emerson (ex-officio)
Dr. Carl E. Buck, Field Director
Alma W. Fraas, Secretary

Absent:

Dr. Charles V. Chapin
Dr. Michael M. Davis
Dr. Watson S. Rankin

Guests for Luncheon:

Dr. John A. Ferrell
Mr. John A. Kingsbury
Mr. Homer Folks

Professor Winslow reviewed the statement on the work of the C.A.P. which he had prepared for inclusion in the report of the Chairman of the Executive Board to the Governing Council. He read the following statement on Future Activities of the Committee:

"Insofar as funds and personnel are available, the Committee will continue to carry on the same activities during the coming year, together with such new projects as may subsequently be discussed and approved by the Committee.

"The most important service of the Committee has been, and will continue to be, the voluntary work of its tireless and devoted sub-committees, and this will continue, irrespective of special funds. We are confident that the Health Conservation Contest will be financed in its present more economical form and we hope that funds may be again available for the vital work of the Evaluation Committee.

"The major problem before us at the moment is, of course, the damage that has been done to the health machinery of the

country by reduction in appropriations, sometimes necessary, more often the result of thoughtless panic and lack of intelligent planning. In many states and cities the work of a decade has been undone. Health organizations have been wrecked in certain instances and reduced below the minimum of safety in many more. Now that the economic crisis appears to have passed its gravest stage, it would appear that the Committee on Administrative Practice should be in position to take a position of real leadership in the struggle to restore our health machinery to a position of effectiveness. Nor should we be satisfied with a mere return to the conditions of 1930. We are living through a unique period of purposeful social and economic planning and one of the leading features of such a period should be a program providing adequate health protection for the whole American people.

"The Committee on Administrative Practice has already begun to collect material indicating the seriousness of recent reductions in health service. If authorized by the Governing Council - and particularly if special funds can be obtained for the purpose - this Committee should be in position to cooperate very effectively with the United States Public Health Service and other official and voluntary agencies in a positive and constructive program for the restoration and upbuilding of the health defenses of the nation."

In view of the importance of the problem, Professor Winslow said that he had taken the liberty of inviting Dr. Ferrell, Mr. Kingsbury and Mr. Folks to luncheon at which time the matter could be discussed in considerable detail.

It was voted that a letter from the Committee be sent to Dr. Chapin.

The Committee next took up reports of sub-committees:

Record Forms

This committee, of which Dr. Ruhland is chairman, has had no meeting this year. It still has before it the development of forms for sanitation. When these are ready the committee can proceed with the preparation of the booklet which will contain the philosophy of records and sample forms.

Professor Winslow asked the committee's opinion with reference to the stimulation of the sale of record forms. It was the consensus of opinion that the function of the Record Forms Committee is to prepare a booklet on the need for and use of records with samples giving the minimum essential information, rather than to stimulate the sale of forms prepared by the Committee. It was felt, however, that state health departments might encourage the use of forms developed by the committee in county or rural health districts.

Rural Health Work

Dr. Bishop read the following report on the work of his committee:

"The report of the study of rural health work is being bound and will be ready for distribution before the first of the month. The complicated nature of the material and the necessity of having the manuscript in final form and proofs read by a number of people has been primarily responsible for the delay in publication. However, the use of a large part of the material in the Rural Appraisal Form means that the survey has not lain dormant during this period. The retardation of rural health work due to the depression makes the findings and conclusions of the report and recommendations equally good at the present time.

"The special sub-group of the committee on rural health work which has been at work on rural record forms has been carrying on throughout the year, giving consideration to the general scope of record systems and the items that should be incorporated on specific case records. The committee has felt the necessity of proceeding cautiously in this matter in order not to develop a too elaborate program. A feeling has been expressed by some organizations that records are complicated and too time consuming. It is, however, the feeling of the members of the records committee from experience in a number of small as well as large units, that well planned and carefully used records do, in fact, increase the effectiveness of the organization and can be provided for with state cooperation at a reasonable figure. For example, our experience in Tennessee with a state system of records indicates that the ordinary four-piece unit can have satisfactory record forms provided for from \$35 to \$40 per year. The committee is planning the publication of a record manual which will indicate the minimum essentials of satisfactory records. Though the committee does not feel that records identical in form and arrangement must be adopted in all places, it seeks to encourage the recording of certain items and the acceptance of standard definitions of terms."

Professor Winslow said that the Rural Study was one of the most valuable contributions to public health by the Committee. Reference was made to the splendid work of Dr. Freeman on the report. It was voted that a letter be sent to Dr. Freeman expressing the gratitude of the Committee for his very excellent work.

In discussing record forms for rural health work, Dr. Emerson pointed out that there was bound to be duplication if two booklets on record forms are issued, one for urban and the other for rural health work. He felt that for the purposes of teaching and for sale it would be advantageous to issue one book. Since the principles are essentially the same, it might be possible to do this. Other members pointed out certain difficulties in carrying out this idea.

It was moved by Dr. Emerson, seconded by Dr. Bishop, that the C.A.P. recommend that the Committee on Record Forms and the Committee on Rural Health Work consider the possibility of a unified publication, insofar as it seems practicable. CARRIED.

Vital Statistics

Dr. Dublin stated that he had been advised that all the Vital Statistics Section Committees allocated to this sub-committee would make reports at the Annual Meeting in Indianapolis. Copies of these reports are not yet available.

Organized Care of the Sick

In the absence of Dr. Davis, Chairman, Dr. Walker reviewed the work of the committee during the past year. The tentative draft of the hospital survey schedule and appraisal form is now ready for review by Dr. Davis's committee, which will meet for that purpose the latter part of October or early in November.

Dr. Emerson said he had many misgivings concerning the C.A.P. entering the field of evaluation of hospital work.

Dr. Walker said that from discussion of this form with the representatives of the American Hospital Association it was his feeling that they would welcome the work of the committee.

Dr. Bristol told of the favorable reaction of the committee in Montclair, New Jersey, to the report which Dr. Buck presented after studying the hospitals in Montclair, using the tentative survey schedule developed by Dr. Davis's committee.

It was suggested that a representative of the nursing profession be added to this committee.

Manual of Public Health Administration

Dr. Vaughan stated that because of lack of funds nothing has as yet been done toward the development of a manual. His committee had served as a clearing house on questions of administration referred from the central office. He felt that the committee might well disband.

The committee opposed this suggestion.

Annual City Health Department Reports

Dr. Rice reported that his committee had prepared a form setting up basic information which the committee thought might be secured from cities and published early in the year. The form was sent to the central office, but nothing further had been done about it.

Dr. Buck stated that this form was considered in connection with the work of the sub-Committee on Current Practices of Health Departments and that it was felt that the information called for on the form might be tabulated from the Health Conservation Contest material.

It was suggested that further discussion of the work of Dr. Rice's committee be deferred until after the report of the Committee on Current Practices of Health Departments.

Public Health Nursing

Miss Nelson said that she had no formal report to present for this committee. She reported that the Evaluation Study of Public Health Nursing is about ready for publication. She called attention to the wide distribution of the statement on "Objectives" issued by the N.O.P.H.N.

Health Conservation Contest

Dr. Dublin presented a very gratifying report on the Contest. There are 141 cities already enrolled in the fifth Contest. The state health departments are cooperating in providing field service which had to be discontinued from the central office because of curtailed income for the Contest.

Professor Winslow in commenting upon Dr. Dublin's report spoke of the credit due Dr. Buck for his efficient management of this project. Dr. Buck was unwilling to take full credit for the Contest but told the Committee that due credit and recognition should be given Miss Tonnele, of the office staff, for her untiring efforts and loyal work in connection with the Contest.

Dr. Emerson brought up the question of what should be done with the group of cities that have won first prize in the Contest for several years. The matter was discussed at some length and then referred to Dr. Dublin's committee for further consideration. Dr. Dublin asked that committee members send to him any specific suggestions which they may care to make on the subject.

Medical Participation

In the absence of Dr. Rankin, Dr. Vaughan read the following report:

"The purpose of the committee is to bring about a larger, more effective, and more harmonious cooperative relationship between members of the medical profession engaged in private practice and health officials.

"In discussing the possible service that this sub-committee might render both health departments and the medical profession, there was universal agreement by the sub-Committee that:

- (1) Organized medicine has a legitimate interest in the field of prevention as well as in the field of cure, which should be respected, encouraged, and promoted by health departments.
- (2) To ignore or disregard the interest of organized medicine in the prevention of disease would ultimately lead to:
 - (a) the employment, at great and unnecessary public expense, of excessive public health personnel, physicians, nurses, dentists, etc.;

- (b) the assumption by public officials of a large service for which physicians are educated and prepared in every way to render and for which they are entitled to reasonable compensation, and
- (c) a spirit of conflict instead of one of cooperation in a problem of mutual interest between the public, on the one hand, and the profession on the other.

"While the committee has itself been inactive because of lack of funds, one member of the committee, Dr. Henry F. Vaughan, has done a great deal of splendid work in bringing about harmonious working relationships between general practitioners of medicine and health authorities.

"The sub-Committee asks that it be continued and it is to be hoped that funds may be procured for carrying on an active program."

Some discussion arose as to whether or not the publicity for the principles set forth in this report would be psychologically wise at the present moment. It was voted to lay the report on the table until another meeting at which Dr. Rankin can be present.

Evaluation of Administrative Practices

Dr. Emerson reported as follows:

"The prenatal study, under the direction of Professor Winslow, has been completed and copies of the report submitted to the committee.

"The laboratory diphtheria studies carried on by Dr. William H. Park have been completed. The epidemiologic diphtheria study, under the supervision of Dr. Edward S. Godfrey, Jr., was discontinued in May. The study was not completed but the funds were exhausted and no further support could be secured at the present time. However, Dr. Godfrey is continuing certain phases of the study without financial assistance from the committee.

"The scarlet fever study, under the guidance of Dr. J. E. Gordon, has been continued this year and funds are available to carry this work on until the fall, at which time it is hoped that additional financial assistance will be secured so that this project may be carried on for at least another year."

The committee expressed the hope that it might be possible to get the prenatal study published and permission was granted Professor Winslow to arrange for publication, if possible.

Dr. Walker pointed out that as yet no summary of the evaluation studies has been published. It was suggested that the chairman of the committee prepare for publication a report stating the problems studied, method of study and conclusions.

Current Practices of Health Departments

Dr. Mountin reviewed the activities of his committee since its appointment. Because of lack of funds the work of the committee this year has been confined to summarizing the data from the Health Conservation Contest schedules. It is to be hoped that for the coming year information may be collected from states, cities and counties on:

- (1) Personnel (classified by type, full-time, part-time)
- (2) Expenditures (by functions - if possible)

In discussing this report Dr. Rice asked if the data summarized from the Contest would be published giving the name of the city. He felt that health officers were interested in knowing what was the practice in a given city, rather than for a group of cities.

Dr. Buck stated that according to our present agreement with the National Chamber of Commerce the information from cities is considered confidential and may not be released except in summarized form. However, he thought it would be possible to secure the consent of health officers concerned so that it could be published giving the name of the individual cities.

Further discussion brought out the need for the close cooperation of the United States Public Health Service and state health departments in the work of this committee. It was voted to ask the president of the State and Provincial Health Authorities to appoint a committee, or designate an existing committee, to work with the sub-Committee on Current Practices of Health Departments. It was further suggested that a joint meeting be held for the purpose of developing a plan of work.

Professor Winslow asked Dr. Kendall Emerson to sit in with this group when it meets.

Relation of Social Worker to Public Health

Dr. Walker presented the following report:

"Something more than a year ago, the committee was appointed to consider the relation of social workers to public health work. As all appointments were made by correspondence and no previous discussion of the function and purpose of the committee had taken place, there was some confusion in the minds of those appointed as to its exact purpose. It was finally agreed by the members, through individual consultation, that the function was to give consideration to the use of social workers in the public health program and to discuss with the American Association of

Hospital Social Workers, as an organized representative of this profession, what they believed to be sound relationships and how they might be furthered and what would be gained by collaboration of the two organizations.

"As is well known to many of us, Dr. Bigelow and other state and local administrators have made excellent use of socially trained individuals in the promotion of the public health program both in the fields of tuberculosis and venereal disease and chronic disease service.

"In accordance with this program, the American Association of Hospital Social Workers was approached early this year and the project discussed with Miss Helen Beckly, the executive secretary. The questions which might finally come before such a joint committee were as follows:

1. What is there in the field of public health which requires the skill and training of a social worker?
2. Should this be a medical social worker, or is it more the field of a generalist?
3. If it requires special training, what ought to be included in that training?
4. What administrative set-up should there be: should this person be a part of the department of public welfare or under the health department?

"Miss Beckley indicated the interest of the Association in discussing these questions and at her suggestion Miss Elizabeth Gardiner, the president, has appointed Miss Marguerite Spiers of Oakland, Cal., Mrs. Charles W. Webb, of Cleveland, Ohio, and Miss Elizabeth P. Rice, of Boston, as members representing the A.A.H.S.W. to discuss the questions with us.

"No meeting has been held of the Committee on this subject as it was believed that at the present time the urgency of the question did not justify the expenditure of funds.

"At the suggestion of the committee, Dr. Buck has sent questionnaires to certain state health departments and to the 50 largest cities to inquire concerning the use of social workers in the health departments. The returns so far show that three state health departments and 16 cities have indicated that they have social workers on their staffs. It is the plan of the committee to seek a meeting of representatives from some of these states and cities at least at Indianapolis with representatives of the A.A.H.S.W. for the purpose of discussing this material further and seeing to what extent such a joint committee may be helpful or advisable."

Appraisal of Industrial Health Service

As copies of the report of this committee were available at the meeting, Dr. Bristol made the following summary of activities:

"The method of procedure agreed upon was that so far as practicable each committee member would place in the hands of a company manager or supervisor who might be willing to cooperate in the trial of this Form: (a) a copy of the original reprint on the subject, and (b) a mimeographed copy of the preliminary and tentative Survey Schedule which is nothing more nor less than a questionnaire, with the request that this be filled out and returned with personal comments or criticisms as to its value and feasibility to the committee member, the latter would then have the Appraisal or scoring part of the Form filled out for the unit in question, on the basis of the information received in the Survey Schedule.

Preliminary Appraisals Obtained

"Up to date, members of the sub-committee have been instrumental in obtaining preliminary and confidential Appraisal Forms filled out by:

- (a) Two eastern companies of the Bell Telephone System;
- (b) Two units of General Motors Corporation;
- (c) A department store on the West Coast;
- (d) A paint, roofing and floor covering company of California.

"In addition to the above, a small company in New Jersey considered the Form briefly without attempting to score its health activities.

Next Steps

"When at least ten or twelve such Appraisals have been received your sub-committee will proceed to hold further meetings for the study and consideration of the entire subject and for the possible revision and development of a proposed official Form for the Appraisal of Industrial Health Service.

General Comments

"The general comments received to date from companies using the preliminary and tentative Form would seem to indicate that:

- (a) The original Form, as proposed, is too comprehensive and should be shortened and simplified.
- (b) Under present economic conditions, and the low level of health activities in industry, it will be difficult to interest industries in such a Health Appraisal Form.
- (c) It may be desirable eventually to develop two or three Forms - for large, medium and small companies, with some possible variation based on the type of organization and work involved."

The committee expressed its approval of the progress already made in the development of the Appraisal Form for Industrial Health Service.

Report of the Field Director

Dr. Buck reported that surveys have been made in the following cities:

New York City	-	Tuberculosis survey
Cambridge, Mass.	-	Tuberculosis survey
Chicago, Ill.	-	Survey of Health Department
Montclair, N. J.	-	Hospital Survey

Income from surveys this year will total approximately \$3,000.00.

Dr. Buck reported further:

"In addition we are negotiating with Elizabeth, N. J., for a hospital survey and have had inquiries from Jacksonville, Florida, and Salt Lake City, Utah, regarding health surveys. It seems quite sure that we will be called upon for a health survey of New Mexico about January of next year.

"We have during the year maintained our usual close cooperation with the National Tuberculosis Association, the National Organization for Public Health Nursing, the American Social Hygiene Association, and the American Child Health Association. We have been represented on the Summer Round-Up Advisory Committee of the National Congress of Parents and Teachers.

"The Field Director has attended and given papers at meetings of the Western Branch of the American Public Health Association in Pasadena, the State and Provincial Health Authorities of North America in Washington, and the National Tuberculosis Association in Toronto. He also participated in the Tuberculosis Institute held in Philadelphia. Invitations have been accepted to present the Health Conservation

Contest to the Connecticut Public Health Association, to talk at the meeting of the Vermont Conference of Social Workers, and to participate in the program of the Texas Public Health Association and the Texas Public Health Nursing Association."

With reference to the present financial status of the Committee, Dr. Buck reported that expenditures for the first eight months had totaled \$12,646.92, and that the expenditures for the year would amount to about \$18,970.92.

The total income to date, minus \$5,500.00 to be held over for the completion of this year's Contest, amounts to \$23,973.65. There is an additional \$1,000.00 to come in on field service. This means that we have a surplus of approximately \$6,000.00. It was Dr. Buck's feeling that some of this might well be spent in rendering a limited amount of field service in connection with the Contest, if the committee approve. The committee raised no objection to this suggestion.

Professor Winslow said that this financial report was an example of the excellent management of finances by Dr. Kendall Emerson and Dr. Buck.

- - - - -

At the luncheon Professor Winslow stated that the purpose of this meeting was to discuss three important functions which all those interested in the maintenance of public health protection should unite in fostering:

- (1) The stabilization of public health appropriations.
- (2) The stabilization of sound health organization and administration.
- (3) The evaluation of public health activities to the end that funds expended for public health shall be used in the most scientific and effective manner.

1. Stabilization of Public Health Appropriations

A general discussion followed of the present problem and the part the committee might play in bringing about stabilization of health appropriations. Dr. Dublin reported on the work of the Association's Committee on Stabilization and referred to the activities of a similar group of the National Municipal League.

Mr. Folks, Chairman of the National Tuberculosis Association committee, read the resolution passed at the Toronto meeting.

Mr. Kingsbury offered the suggestion that a telegram be sent to President Roosevelt calling attention to existing emergencies in state and local health organizations, and asking him to give a short radio message on the

subject at the time of the Annual Meeting in Indianapolis, or at his convenience. This suggestion met with the approval of those present and Professor Winslow asked Mr. Kingsbury, Mr. Folks, Dr. Ferrell and Dr. Kendall Emerson to draft a telegram.

The following message was approved and sent to President Roosevelt:

"At a meeting of an administrative committee of the American Public Health Association in New York today existing emergencies in state, city and local public health organizations official and voluntary, were reviewed and their serious implications recognized stop we enthusiastically share your expressed view that nothing is more important to the state than the health of its people stop we therefore urge you to exert the great influence of your office in a radio message to the American people at the time of the American Public Health Association Convention in session at Indianapolis the week of October eighth stop we respectfully request an opportunity for representatives of this committee to present to you personally these facts and this request

John A. Ferrell, President, American Public Health Association
 E. L. Bishop, Chairman of the Executive Board
 C.-E. A. Winslow, Chairman Committee on Administrative Practice
 Homer Folks
 John A. Kingsbury
 Kendall Emerson, Executive Secretary American Public Health Association

Word has been received from the President that he will be unable to deliver a radio talk, but he will send a letter.

After further discussion it was the consensus of opinion that work on stabilization of public health appropriation should be left in the hands of existing committees appointed to carry on activities in this field, and that the Committee on Administrative Practice should cooperate in every way possible.

2. Stabilization of Sound Health Organization and Administration

It was felt that the Committee on Administrative Practice might render valuable service in this field. Reference was made to Los Angeles, Cal., where the local medical society had set up an outline of the duties of a health department. Dr. Pomeroy had sent copies of this material and his reply to a number of the members of the committee for personal comment and advice. It was pointed out that if the committee had had a prepared statement on what constitutes sound health organization it would have been more valuable to Dr. Pomeroy than individual comments.

Dr. Haven Emerson stated that this is no time for inter-professional controversies. Our job is to tell people what is a good public health program and not to take part in controversies.

After further discussion it was voted to authorize the chairman to appoint a small committee to draw up a brief, concise statement setting forth the essentials of public health organization; this statement to be presented to the C.A.P. at a meeting in Indianapolis, and when approved to be submitted to the Association for endorsement. It was recommended that the committee appointed for this purpose should be retained as a permanent committee to act in an advisory capacity on questions pertaining to health organization.

Professor Winslow appointed the following committee:

Sub-Committee on Essentials of Health Organization

Dr. Haven Emerson, Chairman
 Dr. Matthias Nicoll
 Dr. Thomas Parran, Jr.
 Dr. John L. Rice
 Dr. W. F. Walker

3. The Evaluation of Public Health Activities to the End that Funds Expended for Public Health shall be used in the Most Scientific and Effective Manner

Professor Winslow stated that this project was in keeping with the work already being undertaken by the committee and that further discussion of it would be deferred until the afternoon session.

After the luncheon session the committee resumed the regular order of business.

Appraisal of City Health Work

Dr. Palmer presented the following report:

"The work on the revision of the Appraisal Form has been in progress for the last three years. The completed form is now submitted for approval to the Committee on Administrative Practice with the understanding that suggestions will be presented to the sub-Committee on Revision for action on October 2nd. In the revision effort has been made to harmonize the content with that of the Rural Appraisal Form. Comments have been solicited from the chairman of the various sections of the American Public Health Association, from the national voluntary health associations and from other interested groups and individuals. Valuable suggestions have been received and incorporated into the Form.

Introductory Statement

This has been completely revised in order to interpret the uses and purposes of the Form more clearly.

General Information

Considerable revision has been made in the general statistical information requested. A new feature has been added in the introduction of charts to permit cities to observe their standing in certain particulars in comparison with other cities.

The Appraisal Form

The new revision provides for 13 independent sections, two of them, "Other Disease Activities" and "Other Activities" not being scored. The old form contained 14 sections. One of these "Heart Disease Control" has been omitted. Another, "Cancer Control" has been merged in the section on "Other Disease Activities." Another, "Popular Health Instruction" has been distributed over the various sections.

Although the Laboratory Section is likewise distributed over other sections in the Rural Form, our Committee decided to retain this material as an independent section.

A new column has been provided in which the work done by private physicians may be entered.

Principal Changes

Numerous changes in details have been made although the main body of the Form remains about as previously.

Laboratory

The base for computing milk specimens analyzed has been changed from "specimens per 100,000 gallons" to "specimens per supply delivered in community." This applies to milk to be consumed raw as well as pasteurized milk. Milk specimens before pasteurization are still based on total quantity (per 100,000 gallons).

Communicable Disease

New instructions have been introduced in estimating proportion of children immunized against diphtheria.

Tuberculosis

Cases of hilum tuberculosis are now counted as cases of tuberculosis.

School Hygiene

Revisions have been made with the object of encouraging closer working relations between teachers and nurses, and the school and the home.

Sanitation

An item on Housing has been introduced.

Food and Milk

An item on meat inspection has been added.

Recognition has also been made of pasteurization by the high temperature, short time method.

Scoring

Some slight changes have been made in the weights assigned to the sections.

A provision for a maximum credit of 50 points for a balanced program has been added. This was copied from a similar provision in the Rural Form.

Approval is requested of the publication of this Form in time for release by January 1, 1934."

It was moved by Dr. Haven Emerson, seconded by Dr. Rice, that the Appraisal Form as revised by Dr. Palmer's Committee be approved, subject to the detailed consideration of an editorial group. Suggested changes were offered by those present which were noted by Dr. Palmer.

It was voted to request the sub-Committee on Vital Statistics to bring to the attention of state health officers the importance of accurate statistics on resident and non-resident deaths.

Program and Budget for 1934

Dr. Buck stated that in addition to the sub-committee activities, the Health Conservation Contest and the Scarlet Fever Study, he would like to secure the approval of the Committee for two new projects:

1. The evaluation of public health activities, to the end that funds expended for public health shall be used in the most scientific and effective manner.
2. Free survey and consultant service.

He pointed out that the first project had been brought into discussion at the luncheon session. With regard to the second, it was his feeling that, if the Surgeon General would write a letter to the President of the Association stating that the appropriations of the United States Public Health Service had been curtailed to such an extent that it is not able to take care of all the requests received for surveys, and expressing the hope that the A.P.H.A. might help in supplying this important service, it is possible that funds might be made available for this purpose.

The Committee approved the program as outlined by Dr. Buck and the tentative budget as follows:

Proposed Budget for Minimum Activities of
Committee on Administrative Practice
1934

	<u>Total</u>	<u>Health Conservation Contest</u>	<u>Sub- Committee Activities*</u>	<u>Field Service</u>
Staff Salaries	\$15,840.00	\$ 7,850.00	\$4,740.00	\$3,250.00
Awards	400.00	400.00	--	--
Travel - Committee	3,110.00	350.00	2,760.00	--
" Staff	1,500.00	1,000.00	--	500.00
Maintenance	<u>1,100.00</u>	<u>400.00</u>	<u>500.00</u>	<u>200.00</u>
<u>Total</u>	\$21,950.00	\$10,000.00	\$8,000.00	\$3,950.00

* Record Forms
Organized Care of the Sick
Appraisal of Industrial Health Service
Current Health Department Practices
Other Committees

The following tentative budget for new projects was approved provided funds could be obtained:

Budget for Proposed New Projects - 1934

	<u>Total</u>	<u>Development of Evaluation Principles</u>	<u>Free Survey and Consultant Service</u>
Staff Salaries	\$ 7,500.00	\$2,500.00	\$ 5,000.00
Travel - Committee	700.00	700.00	--
" Staff	3,000.00	1,500.00	1,500.00
Maintenance	1,300.00	300.00	1,000.00
Outside Salaries	<u>2,500.00</u>	<u>--</u>	<u>2,500.00</u>
<u>Total</u>	\$15,000.00	\$5,000.00	\$10,000.00

The Committee also voted its approval of the following salary schedule:

Dr. Buck	-	\$7,000.00
A. W. Fraas	-	3,700.00
C. Tonnele	-	2,500.00
Stenographer	-	1,440.00
"	-	1,200.00

Next Meeting

Professor Winslow asked Dr. Buck to arrange for a meeting of the C.A.P. in Indianapolis on Monday afternoon, October 9th, for the purpose of receiving the report of the sub-Committee on Essentials of Health Organization. It was understood that the Committee would not be asked to pay expenses of members attending this meeting. Because of the meeting of the Governing Council on Sunday at 3:00 P. M., the meeting of the C.A.P. has been called for 12:30 Sunday, October 8th, in the Italian Room of the Hotel Lincoln.

Adjourned.