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AREA V minute news

vol. 2 no. 26 July 1, 1970

## MISSION IM/POSSIBLE?

By: Russell D. Tyler, M.D.
Chairman, Goals and Objectives Committee

(Some months ago, Dr. Petit appointed several members of AREA V staff to a special committee charged with the task of finding a method of developing goals and objectives. The following is a synopsis of the deliberations of that Committee as contained in a preliminary report currently being circulated to the Staff and Committee Chairmen.)

Beginning with the assumptions that we in Regional Medical Programs are concerned with the quality of life in Southern California, and that good health probably contributes to the quality of life, we found that our organization was committed to the Guidelines of Regional Medical Programs and the contributions this law makes to good health.

The Guidelines imply a difference between theoretically optimal care and measurable observable care. Although a definitive description of how optimal care differed from actual care was necessary before imaginative programs could be developed, the Committee soon became aware that this was related to an extremely large number of variables--not the least of which was the fact that a problem might not be relevant by the time the facts defining it were determined.

A second problem is the determination of "what could be." "What could be" is related to the goals of the many different groups, segments, organizations, etc., that make up our society. Ultimately, in order to meet the "needs" of these groups, we must find out what they want. This requires skills, techniques, and objectivity; of the three, objectivity is probably of the greatest premium, particularly for a bureaucracy.

Although Regional Medical Programs offers an adequate outlet for health activities of many of its staff, it is obvious that there are multiple organizations and individuals not associated with either Regional Medical Programs or Comprehensive Health,

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who are already in the business of improving health care. In fact, most of the available health manpower is already committed to existing organizations with existing goals and objectives, however implicit these may be.

In considering the mission implied by the Guidelines, as well as the problems outlined above, the Committee on Goals and Objectives wondered if it would not be possible to aid in the refinement of the goals and objectives of existing individuals and organizations, and in turn, to mobilize the efforts of these health resources toward more effective health care.

Several advantages seemed attractive to such a program. First, it does not require development of parallel organizations or duplication of personnel. Second, it does not require the reinterpretation of society's goals and objectives but utilizes present groups to interpret these "needs." Third, it leaves operational activities in the hands of those who have already demonstrated operational ability. Fourth, it guarantees program flexibility. Fifth, it requires a small staff and little expense.

Implementation of such a program would require the acceptance of the Area Advisory Group and the development of a small planning council to manage staff activities. The organization would require reference and consulting capabilities in data gathering and processing; funding mechanisms including mobilization of private funds; community liaison personnel; organizational liaison; educational techniques, etc. It would function to aid, advise, and stimulate the exploration of better methods of health care by existing resources.

In summary, the report of the committee is a combination of philosophy, strategy and methodology, which, if adopted, will require further refining as well as supplementary steps for implementation. To those who hoped for a cookbook method of defining goals and objectives, the report will be a disappointment, nevertheless, the activities of any organization must be related to a philosophy of action as a first step. While recognizing that it is less than a giant step, the committee hopes that it is more than a misstep.

* * * *

Area V Committee on Goals and Objectives

Russell D. Tyler, M.D., Chairman, Operations Division
Lee Cady, Jr., M.D., Chairman, Systems and Computers Committee
Bernice C. Harper, ACSW, Chairman, Social Workers Advisory Committee
Wilson Mizener, M.D., Area Advisory Group Executive Committee
John S. Lloyd, Ph.D., Assistant Coordinator, Evaluation

# AREA V REGIONAL MEDICAL PROGRAMS
## CALENDAR
## July 1970

| | | |
|---|---|---|
| **Wednesday, July 1** | | |
| AREA V | Staff Meeting | 9:30 a.m. |
| AREA V | Cancer Planning Committee | 12:15 p.m. RMP Conference Room |
| **Thursday, July 2** | | |
| CCRMP | Ad Hoc Conference Committee | 11 a.m. to 2 p.m. |
| | Staff Consultants Committee | 2 to 5 p.m. Pompany Rm. Airport Marina L. A. |
| **Friday, July 3** | HOLIDAY - OFFICE CLOSED | |
| **Tuesday, July 7** | | |
| AREA V | Staff Stroke Team | 12 noon RMP Conference Room |
| **Wednesday, July 8** | | |
| AREA V | Staff Meeting | 9:30 a.m. |
| CCRMP | Full Committee | 9 a.m. to 5 p.m. San Francisco |
| **Friday, July 10** | | |
| AREA V | Committee Chairmen | 11:30 a.m. RMP Conference Room |
| **Saturday, July 11** | | |
| | Rummage and Bake Sale (Proceeds to the clinic) | 9 a.m.-5 p.m. Free Clinic, 526 E. Oaks St. |

**AREA ADVISORY GROUP MEETINGS FOR 1970**

July 14 September 8 November 10

**COMMITTEE CHAIRMEN'S MEETINGS - JULY, AUGUST, SEPTEMBER**

July 10 August 14 September 11

**NOTICE**

During the summer months, the Calendar will cover two-week periods and V-Minute News will be published once every two weeks.

V minute news

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## Area V Staff

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| William A. Markey, M.S. | Deputy Coordinator |
| Russell D. Tyler, M.D. | Operations Division |
| Frank F. Aguilera, M.P.A. | Community Programs |
| Gladys Ancrum, Dr. P.H. | Coronary Care Program |
| Dorothy E. Anderson, M.P.H. | Community Programs |
| Kay D. Fuller, R.N. | Nursing |
| Leon C. Hauck, M.P.H. | Health Data |
| John S. Lloyd, Ph.D. | Evaluation |
| Elsie M. McGuff | Communications |
| Clyde E. Madden, A.C.S.W. | Social Work |
| Toni Moors, B.A. | Community Programs |
| Robert E. Randle, M.D. | Continuing Education |
| Luis A. Pingarron | East Los Angeles |
| Vivien E. Warr, R.N. | Coronary Care Programs |

## Committee Chairmen

| | |
|---|---|
| Area Advisory Group | Chester A. Rude |
| Cancer | Lewis W. Guiss, M.D. |
| Chronic Disease | Russell D. Tyler, M.D. |
| Cardiac | George C. Griffith, M.D. |
| Continuing Education | Phil R. Manning, M.D. |
| Hospital Administrators | Henry B. Dunlap, M.P.H. |
| Library Services | John M. Connor, M.A. |
| Nursing | Fotine O'Connor, R.N. |
| Stroke | Robert H. Pudenz, M.D. |
| Systems & Computers | Lee D. Cady, M.D. |
| Social Workers | Bernice W. Harper, A.C.S.W. |