of that team and each time a family walks into that center the whole family will get all of the services, not only medical, but social services too, and will have the opportunity to see the same health team each time which will provide the kind of continuity and personalized care that we know is as necessary for the poor as for the rest of us.

The quality of care given there will be first rate because it will be under the auspices of a medical school for the first time in that community. The services will be accessible and acceptable to the poor. They will be in the neighborhood where those people live, which overcomes part of the problem of transportation. And if it is true as in the other centers, the neighborhood people will ask for that center to be open until 10 o'clock at night and over the weekends. That is typical of what the neighborhoods have asked and they are open at those kinds of hours for the convenience of the people who live there.

When a person requires more in the way of medical help, then that neighborhood center can provide transportation and appointment to a hospital bed at the Los Angeles County Hospital just as you or I would have. If the person needs more specialized outpatient services they can be provided but the person doesn't go to a web of 30 different clinics, he goes to the one that his doctor in this neighborhood thinks that he ought to go to, and the doctor is able to follow his clinical course there because he is a member of the staff of the hospital as well as working in the neighborhood where the center is located.

Mr. Chairman, If all we do in that center is provide high-quality health care of the kind the University of Southern California School of Medicine is going to make possible, I think and the physicians from the University of Southern California feel that we fall short because, sir, when you have been in that community for a while and have looked at it and listened to those people you realize that their problems and their desires are even more basic than health, that they are interested in jobs.

Such a high percentage of the male members of that community are unemployed; and that is why at this center neighboorhood people will be employed. They will not only be employed as receptionists and clerks and working in the record room and pharmacy and other kinds of service, but the University of Southern California physicians are developing a system of tandem training whereby they will be trained for new health careers in the center from the day it opens, and it will mean that the health occupations will open up for the first time to some of the people living in that community and that notion of jobs is almost as important to them as the health services that will become available for the first time.

Then, sir, over and above the issue of jobs is the participation of the community itself in the planning of the center, in their wish that it be there, in the help that they are giving to the physicians in the neighborhood health council made up of grassroots neighborhood people that are assisting the physicians. That to us is one of the most critical aspects of what is happening.

I had an opportunity not too long ago to visit the neighborhood council in Watts and I don't think that I shall ever forget what Mr. Brown, who is a member of that neighborhood council, said. He talked about a visitor who had come out to Watts to see the new