4. Emergency Food and Medical Services; and
5. Alcoholism Counselling and Recovery.

All projects are designed—in the words of the Economic Opportunity Act—to be "furnished in a manner most responsive to needs (of low-income families) and with their participation."

Of the 64 comprehensive health services projects currently funded, 47 are serving urban populations, and generally involve some form of "neighborhood health center." Seventeen projects are testing alternative models in rural settings.

In addition to providing health services, these programs offer training in health fields and new careers to poor persons. Over half of the present positions in the health centers are staffed by community residents. To date, these positions represent more than 6,000 new jobs, including potential new careers such as family health workers.

As additional health programs are developed, they will focus their attention on different mechanisms to deliver comprehensive health care. The various types of mechanisms include development of community programs serving the health needs of about 100-200,000 patients, reorganization of hospital out-patient departments, special approaches for rural areas, expansion of existing programs and the development of additional group practice systems which will include new prepayment systems.

The Neighborhood Health Centers vary greatly in design and conditions and have the potential to provide services to residents of a target area. In a city, the program may deliver services to a compact neighborhood; in a rural area, to a group of counties. In either case, a well-organized center can provide services for a population ranging from 10,000 to more than 50,000.

Among new approaches to health care being tested at the Neighborhood Health Center is the grouping of their health staff into family care teams. A family care team may include an internist, a pediatrician, a dentist, a pharmacist, a public health nurse, several family health workers and a social worker. All members of a family are served by the same group. In this manner health care is based upon a coordinated personal relationship between the patient and the health team.

Except for emergencies, all patients are seen by appointment. They are made to feel welcome, and are treated with warmth, respect, sympathy and understanding—the indispensable elements in helping people in trouble, everywhere.

The Neighborhood Health Center provides comprehensive, high quality, personalized, continuous health care. Services for the entire family are offered at a conveniently located facility, various ambulatory services are usually provided under one roof, and referrals to needed specialized services and in-patient facilities are arranged.

OEO usually funds health centers through a grantee agency, such as the local Community Action Agency, which then delegates the program, for purposes of operation, to an administrative agency, such as a hospital or medical school, group practice, or a community health corporation. Since these groups usually have pre-existing managerial and business systems, OEO does not ordinarily require any different fiscal and management systems. No single system is prescribed as long as the existing one is responsive to community needs and conditions. The Office of Health Affairs does provide technical assistance to modify existing systems when the need arises and when a new program becomes operational. An example of this approach is pharmacy delivery systems. Neighborhood Health Centers attempt to utilize local resources to the maximum extent feasible. Health centers will accept proposals to utilize pharmacies or pharmacists in the community to provide pharmaceutical services to patients. A recent survey of programs in operation indicated 34% used only community pharmacy sources in the health programs, 30% utilized only in-house pharmaceutical programs and 20% used a combination of in-house and community pharmacy programs. The remaining 16% used miscellaneous sources of pharmaceutical services. The pharmacy programs of Neighborhood Health Centers which were instituted were in response to the needs of the community and were designed to be an integral part of the comprehensive health services delivery system.

DRUG PURCHASING

I would now like to describe some of the experiences which the Office of Health Affairs has encountered with drug purchasing in Neighborhood Health Centers.