

sought to effect cooperation between the hospital associations, the medical associations, the medical schools, and the State health department, Cancer Society, and Heart Association. There has been established a network of good communications, now, through area committees around every medical school and extending into every area of the State. Consequently, effective working bodies around many of the community hospitals and practically in all of the counties in the State are tied in with medical centers.

A couple of advances are being made. We are going to submit, on April 1 and 2, for consideration by our national site review, 14 proposals for operating grants in California. Among these will be a proposal to establish coronary care unit service in the coastal areas of California, a stretch of several hundred miles of small communities. If this program is approved these units will work with the university medical center in San Francisco, in order to extend this whole program out to the periphery of the State.

In the southern part of the State there is a proposal that would bring together the medical faculties of two of our universities there. This proposed program also would bring the medical faculties of these schools in contact with the practicing physicians in the Watts-Willowbrook area, in the center of Los Angeles—a scene of past violence and serious problems. The medical faculties of these schools would work along with the county and hospital administrators of the region who would then develop a postgraduate medical education program with concentration on heart disease, cancer, and stroke.

I mention these two projects merely to emphasize to the committee that this program is going to bring better care to persons not only in the medical centers but also into those parts of the State which have been relatively neglected in the past, such as the ghetto areas in the cities and the rural areas over the great stretches like in California.

Thank you, Mr. Chairman.

(Dr. Breslow's prepared statement follows:)

STATEMENT OF DR. LESTER BRESLOW, PROFESSOR OF HEALTH SERVICES ADMINISTRATION, SCHOOL OF PUBLIC HEALTH, UNIVERSITY OF CALIFORNIA AT LOS ANGELES

Mr. Chairman and members of the Committee, I am Lester Breslow, Professor of Health Services Administration in the School of Public Health at UCLA. I have previously been the State Health Officer for the State of California. I have come today to speak in support of H.R. 15758 and particularly that section of the bill which would extend the authority for the Regional Medical Programs.

In my professional career I have long been concerned with the need for a more effective organization of our vast health endeavor, and I view the Regional Medical Programs as having great potential for making a very important contribution to this objective. In recent years this Committee has heard a great deal of discussion about the current difficulties of our health-care system. For this Nation, these problems are not always the lack of health resources but rather the effective organization and utilization of the many resources with which we are blessed, including our resources of talent and knowledge as well as capital, equipment, and personnel.

In passing this legislation three years ago, the Congress expressed a public feeling that the benefits of medical science were not being applied uniformly enough to all segments of our population. This expression was part of a growing recognition within the health field that the present complexity and specialization of health care requires exploration of improved patterns of organization. The legislation carried through with this concern by placing emphasis on the development through the Regional Medical Programs of "regional cooperative arrangements"