

and/or a *health research facility* has been required to make separate applications to the medical library construction program and the health research facilities construction program as well as to the health professions educational assistance construction program. Applications have been reviewed by three separate councils on three separate sets of criteria.

The bill would authorize a school to make one application to and to receive funds under the health professions educational assistance construction program if the project is for the construction of facilities which are to a substantial extent for teaching purposes but are also for health research purposes or medical library purposes.

Section 105.—Under the present program, work area in a medical, dental, or other health professions school can be constructed with program funds only if it is space attributable to the teaching program leading to the degree of doctor of medicine, doctor of dentistry, or other first health professional degree. This has proven to be a most undesirable barrier to sound planning and construction of the school as an entity.

The bill would allow the inclusion in the construction project of space for graduate, continuation, and other advanced training activities as well as that attributable specifically to the training of persons in the first health professional degree curriculums. This would allow for sound, coordinated planning and construction of the total school.

In the present educational system where advanced and undergraduate education arrangements for health professionals are largely interdependent, and the inability to support advanced training space has resulted in considerable difficulties for all of our applicant institutions, the institutions have been forced to pay for the entire cost of advanced training space, limit it, or eliminate it from its plan.

PART B—INSTITUTIONAL AND SPECIAL PROJECT GRANTS TO HEALTH PROFESSIONS PERSONNEL

Section 111 (amends secs. 770–772 of the PHS Act).—Under present law, grants may be made to improve the quality of schools of medicine, dentistry, osteopathy, optometry, and podiatry. Improvement grants are of two kinds: (a) *basic* grants made on the basis of a *formula* of \$25,000 per school and \$500 per enrolled student, (b) *special* grants made on a *project* basis. There is a single appropriation authorization for both types of grants. Special improvement grants are awarded from the sums appropriated and not required for making the formula grants.

This program became effective in fiscal year 1966. It has provided a source of continuing support for the teaching curriculums of the respective schools. Appropriations were not sufficient to fund the basic improvement grants under the statutory formula in fiscal years 1966 and 1967. Therefore, no special projects were funded in those years.

The bill would authorize a 4-year extension (fiscal year 1970 through fiscal year 1973) of both the institutional (formula) (sec. 771) and special project (sec. 772) grant authorities with significant modifications.

The 4-year period represents the recommended time to assure these schools of the continued support necessary for sound curriculum devel-