REGIONALIZATION TASK FORCE STUDYING VITAL HEALTH AREAS

The 1985 Texas State Health Plan, adopted by the Statewide Health Coordinating Council (SHCC) on September 28, 1984 and approved by the governor on January 30, 1985, contains recommendations for the establishment of a Task Force on Regionalization of Specialized Medical Services. On March 22, 1985 the SHCC voted to establish this task force.

Services. On March 22, 1985 the SHCC voted to establish this task force. Its membership is comprised of 15 voting members and nine ad hoc medical specialist members. Voting members represent the SHCC, business coalitions, the elderly, the Texas Medical Association, Texas Osteopathic Medical Association, Lone Star State Medical Association, Texas Nursing Association, Texas Hospital Association and the Texas Association of Counties.

Other members include the Texas Association of Regional Councils, Texas Department of Health, Texas Department of Human Services and the Texas Health and Human Services Coordinating Council. Ad hoc members represent the Texas Pediatric Society, the American College of Obstetrics and Gynecology, the American College of Surgeons, the American College of Emergency Physicians, Texas Society of Internal Medicine, Texas Radiological Society and Rural Physicians of Texas.

The efforts of the task force are to assist the SHCC and the State Health Planning and Development Agency (SHPDA) in planning for the coordination of specialized medical services throughout the state and to assess the feasiblity of regionalization of such services. The overall intent is to improve the accessibility, availability, continuity and cost effective delivery of specialized medical services. Five basic services set forth by the SHCC to be addressed by the task force are perinatal, pediatric, open heart surgery/cardiac catheterization, radiation therapy and end-stage renal disease.

The task force was formally organized at its first meeting on June 17, 1985. Max Brown, Jr., of Dallas, was appointed chair by the SHCC and Brad Helbert, of Abilene, was selected as vice chair. Task force members received a background and purpose briefing and a notebook of background articles and data from staff members of the Bureau of State Health Planning and Resource Development.

Members voted to include trauma centers and organ transplantation to its study and the SHCC concurred with the addition of these two areas.

During the latest meeting of the task force, August 23, 1985 at the Texas Department of Health, the group surveyed the current health care delivery systems for each of its specific areas of concern.

REGION VI ASSOCIATION NEEDS HEALTH PLANNERS

The Region VI Health Planning Association is looking for "a few good planners." Actually, the group is looking for as many new members as are interested in joining. The Association, founded in 1971, is the oldest, largest and most active regional association in the United States. It promotes increased understanding of, appreciation for and expanded involvement in health problems and needs through planning and resources development.

Anyone interested in membership should contact Billy Sladek, Bureau of State Health Planning and Resource Development, Texas Department of Health, 1100 West 49th Street, Austin, Texas 78756-3199.

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RHPAC STAFFS VIEW PLANNING PERSPECTIVES

A working meeting of staffs of the Regional Health Planning Advisory Committee (RHPAC) and the State Health Planning and Development Agency (SHPDA) held Friday, August 16, 1985 at the Texas Department of Health in Austin, provided the group an opportunity to "give and take" on various matters crucial to a successful health planning process now and in the future.

Moderated by Mike Ezzell, Chief, Bureau of State Health Planning and Resource Development, all but six Regional Councils sent representatives to the Capitol City to speak to and hear about such topics as planning perspectives of the governor's office and the Regional Health Planning Coordinating Committee (RHPCC) of the Statewide Health Coordinating Council (SHCC); plan development process for the 1987 State Health Plan; RHPAC-to-SHPDA communications; and data availability and technical assistance.

Doctor Robert Bernstein, Commissioner of Health, welcomed the group of planners and DeAnn Friedholm represented the governor's office. Comments from many of the group indicated a desire to have other such meetings in the future.

ACRONYMS, DEFINITIONS NOW AVAILABLE TO SHCC

The Statewide Health Coordinating Council (SHCC) at its March, 1985 regular meeting, requested the Bureau of State Health Planning and Resource Development to prepare a list of acronyms and definitions of terms most frequently used in the health planning process. The lists, which include only those acronyms and terms which the SHCC will generally encounter, have been compiled and provided to the SHCC. Also, one copy of each has been forwarded to each of the 24 Regional Health Planning Advisory Committee

The acronyms are listed in categories, i.e., those directly related to the health planning agency, state agencies, associations and organizations, health care systems and other. Definitions of terms are found in Definitions of terms are found in alphabetical order.

Copies of the lists are available to other interested persons on request.

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