

Policies and procedures for the expenditure of funds to provide facilities and personnel to implement the services required by residents of Maryland must also be an integral part of your program. You must provide methods for encouraging cooperative efforts among local governments and state governments together with private enterprise — organizations and groups concerned with health services, facilities, or manpower — and for cooperative efforts among such groups, agencies and organizations in the fields of education, welfare and rehabilitation. Satisfactory assurances must be made that Federal funds paid to this effort will be used to supplement, and to increase, the level of funds that would otherwise be made available by Maryland for the purpose of comprehensive health planning, and not to supplant such non-Federal funds.

Also to be included are methods of administration . . . reporting . . . review systems . . . fiscal control and accounting procedures.

Obviously, there will be many problems in implementing a program plan including medical assistance, air and water pollution, solid waste disposal, hospital and nursing home facilities, programs for the mentally ill, along with plans for the necessary manpower to carry out the program. All should be within the context of the law set forth by Congress, and we should utilize those services and organizations presently in operation.

The many problems encountered can be met only by determining well defined goals. To plan without definite goals is to compound the existing confusion in this multi-faceted field already complicated by legislation, rules, professional ethics and individual rights. You must set goals aspiring to the ultimate good of each individual. These goals must then be broken down into project targets and priorities. Many of our existing groups and organizations will be responsible for surveys and data collection within their jurisdictions in order to measure the results of our work and to determine the value of our goal-oriented efforts.

Much valuable material has already been prepared by the Planning Council and other planning committees. One of the priorities in this health mission is to gather and digest this existing information in order to reduce the duplication of effort. Other priorities are to determine from this information the needs of the project and coordinate developing plans with those groups and organizations currently familiar with similar responsibilities.

I have asked Dr. Neil Solomon to serve as Chairman of this Advisory Council. He is known to some of you, but probably not the