

## **Coordination of Puerto Rico's Health and Welfare Services**

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**P**UERTO RICO'S experimental project to regionalize health and welfare services is dedicated to achieving a coordinated system for the distribution and delivery of comprehensive health care. This is the integration of preventive, diagnostic, curative, and rehabilitative medicine reinforced by and reinforcing the provision of social service.

In 1954, prior to the initiation of this project, the Secretary of Health of the Commonwealth of Puerto Rico appointed a study group to make a survey of all health and welfare resources available in the 16 municipalities served by the Bayamón District Hospital and to make recommendations for improving their use. This study group gave consideration to the economic, social, and governmental resources of Puerto Rico as a whole, and formulated recommendations for the organization and administration of all publicly financed health and welfare services in these municipalities. Steps were then taken to test these recommendations in the Bayamón region.

In 1956 a regional office for coordination and research was organized within the Department of Health of Puerto Rico to implement the recommended integration of services and to experiment with their organization and administration on a regional basis in the Bayamón area. Regionalization was visualized as a blend of the following components:

1. Creation of a coordinated system of health care facilities in which the peripheral health centers would be organically related to the

operation of a district hospital, and the district hospital, in turn, would function as a base hospital facility. In Puerto Rico a health center brings together in a single facility at the municipal level a public health unit, a public welfare unit, and a hospital unit (based on the standard of approximately 1 bed per 1,000 population). The organizational scheme that was proposed therefore implied an intimate two-way flow between the peripheral health centers and the referral hospitals not only of patients but of services, supplies, and technical personnel.

2. Implementation of a system of continuing education of all health and social workers, encompassing all levels of inservice training and formal postgraduate study.

3. Raising the technical consciousness of the consumer public. This included broad health education aims and incorporated the recognition that the provision of service, however adequate in a technical sense, could function at maximum effectiveness only if the recipients were instructed on how to make the best use of available services.

4. Finally, this development was predicated upon the belief that health does not constitute an end in itself, but it also represents a means toward the development of more viable communities. Because it was recognized that advances in health and welfare cannot proceed independently of the development of the other aspects of community life, a major concern set for this project was an attempt to provide technical services in such a way that they would be more effectively related to the provision of other services such as housing, education, and agricultural development at the community level. In this way it was hoped that health and welfare work would contribute more effectively to

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the broader objective of strengthening community life.

Four distinct phases in the regionalization project can be identified. The initial planning stage entailed the study necessary to devise the methods and procedures which the integration of services implied. The second experimental stage was the preparation of tentative standards for the organization and management of each service operating at the community level and the testing of these standards in one selected demonstration health center. Late in 1958 responsibility for the administration of all health and welfare services in the Bayamón area was delegated to the regional office.

At the start of the current stage of the project, administrative responsibility for the base regional hospital of the coordinated system of health care facilities was transferred to the School of Medicine of the University of Puerto Rico. This hospital is now the primary teaching institution of the school. Subsequently, responsibility for the entire health and welfare

service budget of the Bayamón region, containing a population of more than 800,000 persons, was transferred to the school of medicine.

A new position of assistant dean for community health was created, and the staff and resources have been completely integrated, providing a single unified direction in the three areas of training, research, and service. The faculty of the clinical departments of the school of medicine are currently extending their technical and professional supervision to the periphery of the area. The Bayamón region can be viewed as a working laboratory for clinical and operational research and demonstration.

Evidence is accumulating concerning the impact of this organizational scheme on the quality of care and the improvement of general health levels. Accepting stringent budgetary limitations and other handicaps, this project is demonstrating the extent to which the return on the health-care dollar can be increased. At the same time, much remains to be accomplished to attain the evolving objectives of the regionalization of health care in Puerto Rico.

## **Child Health Center To Be Established**

Secretary of Health, Education, and Welfare Abraham Ribicoff has issued the following statement concerning the President's directive that a Child Health Center be established within the Public Health Service:

"The Public Health Service now has a number of research programs dealing directly or indirectly with child health. We shall concentrate the efforts of these to fuller advantage from funds available. The new program will be further strengthened through close coordination with the programs of the Children's Bureau, an agency serving mothers and children.

"The new center is being set up in the Division of General Medical Sciences at the National Institutes of Health. This action can be taken administratively without legislation or appropriation.

"Establishment of the new center will bring together the various elements concerned with

children's health of several different agencies, and will direct those efforts specifically toward the problems of child health.

"There are statistics to demonstrate the problems facing us in this field. One of these was cited by the President in announcing establishment of the new center when he said that each year some 400,000 babies are born with congenital malformation.

"Here are other statistics considered in the decision to establish the new Child Health Center: Since 1950 the United States has slipped from 6th to 10th place in the rate of infant deaths. The Public Health Service estimates that 3 of every 100 children born are mentally retarded. This is 126,000 mentally retarded children born each year.

"This new program in the field of child health shall have the fullest possible backing and encouragement."