research summaries

The Research Summary section affords a means of communication and coordination of research activities in Family Practice in North America. These summaries have been developed through the efforts of the North American Primary Care Research Group. The Journal of Family Practice encourages the reporting of active research projects to the two coordinators for this section — Robert Westbury, M.D., 4012 Comanche Road, Calgary, Alberta T2LON8 (for Canada) and Maurice Wood, M.D., Department of Family Practice, Medical College of Virginia, MCV Station, Richmond, Virginia, 23298 (for the United States).

OF PROJECT	INVESTIGATOR(S) AND LOCATION	STATUS & FUNDING	ABSTRACT OF PROJECT AND COMMENT
Investigation of Organizational/ Clinical Information Systems in Family Medicine	L. C. Steevens Sir Charles Tupper A. G. Cameron Medical Building Dalhousie University D. Shires Medical School Halifax, Nova Scotia CANADA	Underway. Funded by a National Health Grant.	A massive attack on the problem of record-keeping in front-line medicine, which will explore the possibilities of central computer storage of clinical data. Progress reports are available.
The Determination of Quality of Care by Analysis of Physicians Morbidity Profile	Jack Froom, M.D. Family Medicine Program University of Rochester — Highland Hospital Rochester, New York	Underway. Funding by Rochester Medical Program.	The project goal is to define local standards of medical care and to identify deviations from these standards. Diagnostic data is currently being collected from 32 primary care physicians including family physicians, internists and pediatricians. The Family Medicine teaching center at Highland Hospital is also involved. The patient population of each practice has been identified by age, sex, marital status, and residence by census tract. Diagnostic data from each physician participant will be analyzed for frequency of occurrence in standard age, sex, and census tract groups and compared with data from the total group. Significant deviations from the standards of the group will be noted and will be followed by a study of patient charts within that particular category. Emphasis will be placed on the 30 most frequently diagnosed health problems.
Development and Validation of Scales to Measure Key Health Concepts	John E. Ware, Jr. Mary K. Snyder Dept. of Educational Resources & Development Southern Illinois University School of Medicine Springfield, Illinois	Underway. Funding from the Research Methods Branch, Bureau of Health Services Research and Evaluation, HEW (\$152,000).	The trend toward "consumerism" in the planning and evaluation of medical care services has not, generally speaking, held up under close scrutiny. With the exception of a few studies, it appears that researchers have not systematically applied multivariate statistica methods and scaling techniques in order to solve the measurement problems involved in assessing consumer perceptions of medica care and other perceptions which may be important. In response to this dilemma, the Methods Branch of the Bureau of Health Services Research and Evaluation (HEW) began sponsoring a program of research at the new School of Medicine, Southern Illinois University.

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			The goal of the research is to develop and validate new ways of measuring: 1) patient beliefs and attitudes about medical care 2) perceived health status 3) health values 4) perceived quality of care
			5) perceived efficacy of care 6) areas of satisfaction and dissatisfaction regarding care received from a particular clinic or hospital As reported received to AAMC, the each form
			As reported recently at the AAMC, the early fo- cus of the research has been on developing new definitions and measurements. Findings from early field studies in central and southern Illinois suggest that the new measurements are reliable
			and that they may have implications regarding evaluation systems throughout the continuum from undergraduate medical education to con- tinuing education. Constructs related to patient
			perceptions regarding continuity and compre- hensiveness of medical care may have particular relevance for the planning and evaluation of educational programs related to family practice as well as for the delivery of services.
Comprehensive Health Services Program	Dept. of Family Practice University of Texas Medical School 7703 Floyd Curl Drive San Antonio, Texas 78284	Underway. DHEW Grant #06-H-000290- 02.	The project provides and studies the delivery of comprehensive health services to a limited number of medically indigent families using paramedical personnel to the maximum. A model is being developed that can be replicated for the purpose of alleviating the recognized na-
			tional shortage of primary care physicians. The "Comprehensive Health Care Delivery Model" which is in operation includes a Family Practice Residency Training Program. Senior medical students are also involved in primary health care within this model.
The Use of a Physician's Associate in General Practice	A. Clews, Chairman Saskatchewan Medical Assn. College of Nursing 505 Canada Building Saskatoon, Saskatchewan CANADA	Underway. Funded by a grant from the Saskatchewan provin- cial government (\$200,000).	One of the many studies currently underway in Canada to examine the value of nurses in an expanded role.
The Evaluation of Computer Aided Instruction in Family Practice Residency Training	Chairman and Faculty University of Nebraska Dept. of Family Practice	Underway. Funding grant to the medical school and to the Dept. of Family Practice.	The Department is participating in the Lister Hill Biomedical Communications Network. The terminal is located in the Departmental building which is adjacent to the clinics. Student and resident response has been evaluated continuously and progress reports will be available in July, 1974.