This study evaluated public health workshops held at Orlando, Florida (September 25-26, 1969), and Baltimore (October 12-15, 1969), by means of responses from 115 physicians, social workers, administrators, attorneys, and other participants having legal and regulatory responsibilities in the public health field. The 20 point Kropp-Verner Evaluation Scale was used, together with a questionnaire covering the effectiveness of each speaker and topics, teaching techniques and activities, and satisfaction with physical arrangements. Also sought were comments on the value of the courses and recommendations for improvement. All speakers but two received at least an average effectiveness rating. When scores for both workshops were combined, no pair of speakers received less than 3.21 on a scale of five. (One speaker received extremely high ratings of 4.89 and 4.83 at the two workshops.) None of the 13 workshop topics received a combined rating of less than 3.09 (average or above), and two topics were rated 4.21 or better. Panel presentations, mock hearings, mock trials, and discussion groups received above average overall ratings. However, evaluation activities and group reporting drew slightly below average ratings. Facilities and instructional materials were generally rated highly. (LY)
ASSESSMENT OF WORKSHOPS ON PRINCIPLES OF PUBLIC HEALTH LAW AND LEGAL TOOLS FOR EFFECTIVE HEALTH ADMINISTRATION

by

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Special acknowledgement is extended to the Division of Health Manpower, Department of Health, Education, and Welfare, United States Public Health Service for financial support of the courses.

Finally, the authors are indeed grateful to the secretarial staff of the Adult Education Department at Memphis State University and to the secretarial staff of the Southern Branch, American Public Health Association for typing the manuscript.
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CHAPTER I

INTRODUCTION

Background

In this modern era of technological and sociological change, the legal aspects of public health have become of increasing importance to health personnel. In an effort to be of service to the Southern Branch Region of the American Public Health Association, a decision was made to incorporate these legal aspects into the continuing education activities of the Southern Branch Office.

A course on "Principles of Public Health Law and Legal Tools for Effective Health Administration" was designed to equip public health professionals with an understanding and knowledge of the use of legal procedures; enable them to act properly in the protection of the public health, with full understanding and protection of the right of the individual; and stress the mechanics of developing law, including explanations of the legislative process.

With this in mind, a decision was made to conduct three of these workshops in the Southern Branch Region in the Fall of 1969--
Orlando, Florida, September 23-26; Baltimore, Maryland, October 12-15; and Nashville, Tennessee, December 1-4.¹

The following topics were covered at the workshops:

2. Individual Rights vs. Community Protection.
3. Legal Basis of Public Health Practice.
6. Legal Tools to Prevent or Solve Problems in Environmental Health.
7. Legal Tools to Prevent or Solve Problems in Medical Care Administration.
8. Administration of the Law.
10. Mock Hearing and Mock Trial.
12. How to Make Effective Legislative Committee Presentations.

The plan of the workshops was such that constructive learning experiences were provided by means of lectures by experts in the field;

¹At the time of this writing, the first two had been conducted; therefore, in order to submit this report to the U.S. Public Health Service prior to the end of the year, the results of the Tennessee Workshop will not be included. However, due to the same program content and many of the same speakers, the writers feel that the effectiveness will be similar to that reported here.
panel discussions by representatives of national, state, and local organizational resources; question and answer periods; role playing demonstrations; films; audio-visual aids; and small group discussions, with exercises in the development of appropriate legal tools for health administration and legislation.

These workshops were sponsored jointly by the respective State Department of Public Health and the State Public Health Association in the State in which the workshop was located and Southern Branch of The American Public Health Association. The workshops were funded by a special grant from the United States Public Health Service.

**Purpose of the Study**

The purpose of this study was to ascertain the degree of effectiveness of the Public Health Law Workshops conducted at Orlando, Florida, September 23-26, 1969, and Baltimore, Maryland, October 12-15, 1969.

**Methodology**

**Source of Data**

A committee, comprised of individuals from the local planning committee in each state in which the workshop was held was responsible for the selection of the participants. The criteria for determining eligibility was set forth in the grant from the U. S. Public Health Service. It included professional public health personnel—physicians, dentists, sanitarians, social workers, administrators, hearing officers, attorneys, and others engaged in legal and regulatory responsibilities in health
departments and other health agencies as related to prevention and control of disease, food, water, air, drugs, nursing homes, housing, hospitals, schools, industry, and other areas of public health concern. Potential participants were expected to have obtained their basic professional degree and be working in the field of public health or an allied field.

With these criteria in mind, the committee notified eligible participants and requested applications from those who were interested and who could attend the entire workshop. This resulted in a total of 115 participants at the two workshops (see Table 1).

Collection of Data

Two instruments were used to collect the data presented in this study. The first was a questionnaire designed to determine the participants' rating as to the effectiveness of each of the speakers, each of the topics, techniques of teaching employed throughout the conference, and satisfaction with physical arrangements. It was also designed to elicit written comments as to the value of the course and recommendations for improvement.

The second instrument was an evaluation scale developed by Russell Kropp and Coolie Verner. According to its authors, it appears to be a valid instrument for determining an overall rating of participant reaction to short-term workshops. This scale consists of twenty items arranged in rank order of value, with item

TABLE 1.—A comparison of the discipline profile of the participants at the Orlando and Baltimore Public Health Law Workshops

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Workshop</th>
<th>Orlando</th>
<th></th>
<th>Baltimore</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
<td>Per cent</td>
</tr>
<tr>
<td>Public Health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrator, Director, or Supervisor</td>
<td></td>
<td>22</td>
<td>33.3</td>
<td>22</td>
<td>44.9</td>
</tr>
<tr>
<td>Public Health Nurse</td>
<td></td>
<td>10</td>
<td>15.2</td>
<td>9</td>
<td>18.4</td>
</tr>
<tr>
<td>Health Educator</td>
<td></td>
<td>2</td>
<td>3.0</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Sanitarian</td>
<td></td>
<td>13</td>
<td>19.7</td>
<td>7</td>
<td>14.3</td>
</tr>
<tr>
<td>Program, Service Personnel and others</td>
<td></td>
<td>16</td>
<td>24.2</td>
<td>9</td>
<td>18.4</td>
</tr>
<tr>
<td>Hospital-Medical Care Clinic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M.D.</td>
<td></td>
<td>1</td>
<td>1.6</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>R.N.</td>
<td></td>
<td>0</td>
<td>0.0</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Others</td>
<td></td>
<td>0</td>
<td>0.0</td>
<td>2</td>
<td>4.0</td>
</tr>
<tr>
<td>Voluntary Health Agency</td>
<td></td>
<td>2</td>
<td>3.0</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>66</td>
<td>100.0</td>
<td>49</td>
<td>100.0</td>
</tr>
</tbody>
</table>
number one being the best thing that could be checked about the program, item number two, the second best, and so on, with item number twenty being the least favorable response.

**Statistical Technique and Hypotheses**

No attempt was made to determine any significant differences between variables. A decision was made to present the data in tabular form for the Orlando and Baltimore workshops. Since no significant differences were being ascertained, no technique other than arithmetical means was necessary. Also, as a result of the decision not to determine significant differences, no hypotheses were developed.
CHAPTER II

PRESENTATION OF DATA

The purpose of this chapter is to present the data collected in this study. It will be presented in five tables as follows:

1. A comparison of the discipline profile of the participants at the Orlando and Baltimore workshops.
2. A comparison of the average rating ascribed to the speakers at the Orlando and Baltimore workshops.
3. A comparison of the average rating ascribed to the various topics covered at the Orlando and Baltimore workshops.
4. A comparison of the average ratings ascribed to the various workshop activities at the Orlando and Baltimore workshops.
5. A comparison of the average ratings of general items relative to the Orlando and Baltimore workshops.

No discussion will be presented in regard to these five tables as it is felt that these can easily be scanned and interpreted. However, a brief summary will be presented in Chapter III.

In addition to these tables, which were derived from the questionnaire constructed, it was stated previously that overall participant reaction would be ascertained by using the Kropp-Verner Scale. The ratings of the participants were analyzed and
the obtained weighted means, according to values on the Kropp-Verner Scale, were 3.51 for the Orlando workshop and 3.19 for the Baltimore workshop. Averaged together, the weighted mean was 3.35. The most positive score possible on the scale is 1.13, and the most negative score possible is 10.89, with a median value of 6.02.
<table>
<thead>
<tr>
<th>Speakers</th>
<th>Orlando Rating</th>
<th>Baltimore Rating</th>
<th>Combined Rating of Both</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jerome Conger</td>
<td>3.47</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lewis Schmidt</td>
<td>3.62</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lewis Earl</td>
<td>3.61</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Francis Burch</td>
<td>4.89</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frank Grad</td>
<td>3.83</td>
<td></td>
<td></td>
</tr>
<tr>
<td>David Warren</td>
<td>3.40</td>
<td></td>
<td></td>
</tr>
<tr>
<td>David Warren and Sidney Edelman</td>
<td>3.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Murray Grant</td>
<td>2.73</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lindsey G. Peeples</td>
<td>4.83</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frank Grad</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robert M. Eisenberg</td>
<td>3.22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Frank Grad</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Speaker</td>
<td>Rating 1</td>
<td>Rating 2</td>
<td>Rating 3</td>
</tr>
<tr>
<td>-------------------------</td>
<td>----------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>Richard Hodes</td>
<td>3.72</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Harry Hughes</td>
<td>3.90</td>
<td></td>
<td>3.81</td>
</tr>
<tr>
<td>Noble J. Swearingen</td>
<td></td>
<td>3.21</td>
<td>3.21</td>
</tr>
<tr>
<td>H. P. Hopkins</td>
<td>3.38</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eugene Guthrie</td>
<td>2.81</td>
<td></td>
<td>3.10</td>
</tr>
</tbody>
</table>

These ratings were based on the following scale:

5 = Extremely Effective  
4 = Most Effective       
3 = Effective            
2 = Least Effective      
1 = Not Effective

b. These "pairs of speakers" represent persons who spoke on the same subject but at different workshops.
TABLE 3.—A comparison of the average rating ascribed to the various topics covered at the Orlando and Baltimore Public Health Law Workshops

<table>
<thead>
<tr>
<th>Topics</th>
<th>Orlando Rating</th>
<th>Baltimore Rating</th>
<th>Combined Rating of Both</th>
</tr>
</thead>
<tbody>
<tr>
<td>New and Current Trends in Public Health</td>
<td>3.39</td>
<td>3.14</td>
<td>3.27</td>
</tr>
<tr>
<td>Individual Rights vs. Community Protection</td>
<td>3.75</td>
<td>2.86</td>
<td>3.31</td>
</tr>
<tr>
<td>Legal Basis of Public Health Practice</td>
<td>4.59</td>
<td>3.83</td>
<td>4.21</td>
</tr>
<tr>
<td>Legal Tools</td>
<td>3.54</td>
<td>3.26</td>
<td>3.40</td>
</tr>
<tr>
<td>Administration of the Law</td>
<td>3.75</td>
<td>2.62</td>
<td>3.19</td>
</tr>
<tr>
<td>The Nature and Types of Hearings and Trials</td>
<td>3.20</td>
<td>3.74</td>
<td>3.47</td>
</tr>
<tr>
<td>Mock Hearing and Mock Trial</td>
<td>3.22</td>
<td>3.31</td>
<td>3.27</td>
</tr>
<tr>
<td>How Law Is Conceived, Made and Passed</td>
<td>3.95</td>
<td>3.45</td>
<td>3.70</td>
</tr>
<tr>
<td>Topic</td>
<td>Rating 1</td>
<td>Rating 2</td>
<td>Rating 3</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>----------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>How to Make Effective Legislative Committee Presentations</td>
<td>3.51</td>
<td>3.21</td>
<td>3.36</td>
</tr>
<tr>
<td>Impact of Comprehensive Health Planning on Public Health Law</td>
<td>3.37</td>
<td>2.81</td>
<td>3.09</td>
</tr>
</tbody>
</table>

*a These ratings were based on the following scale:

5 = Extremely Effective
4 = Most Effective
3 = Effective
2 = Least Effective
1 = Not Effective
TABLE 4.--A comparison of the ratings ascribed to the various workshop activities at the Orlando and Baltimore Public Health Law Workshops

<table>
<thead>
<tr>
<th>Activities</th>
<th>Orlando Rating</th>
<th>Baltimore Rating</th>
<th>Combined Total of Both</th>
</tr>
</thead>
<tbody>
<tr>
<td>Panel Presentations</td>
<td>3.60</td>
<td>3.74</td>
<td>3.67</td>
</tr>
<tr>
<td>Mock Hearing and Mock Trial</td>
<td>3.28</td>
<td>3.52</td>
<td>3.40</td>
</tr>
<tr>
<td>Discussion Groups</td>
<td>3.27</td>
<td>2.74</td>
<td>3.01</td>
</tr>
<tr>
<td>Group Reports</td>
<td>2.80</td>
<td>2.66</td>
<td>2.70</td>
</tr>
<tr>
<td>Evaluation</td>
<td>3.22</td>
<td>2.74</td>
<td>2.98</td>
</tr>
</tbody>
</table>

The ratings were based on the following scale:

5 = Extremely Effective
4 = Most Effective
3 = Effective
2 = Least Effective
1 = Not Effective
<table>
<thead>
<tr>
<th>Items</th>
<th>Orlando Rating</th>
<th>Baltimore Rating</th>
<th>Combined Total on Both</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing</td>
<td>3.61</td>
<td>2.19</td>
<td>2.90</td>
</tr>
<tr>
<td>Location</td>
<td>4.00</td>
<td>3.09</td>
<td>3.55</td>
</tr>
<tr>
<td>Materials</td>
<td>4.02</td>
<td>3.66</td>
<td>3.84</td>
</tr>
</tbody>
</table>

The ratings were based on the following scale:

- 5 = Extremely Effective
- 4 = Most Effective
- 3 = Effective
- 2 = Least Effective
- 1 = Not Effective
CHAPTER III

SUMMARY AND CONCLUSIONS

Based on the data presented in this study, all of the speakers except two, received an average effectiveness rating of above 3.00 (see Table 2). When the scores for the two workshops were combined, no pair of speakers received less than a 3.21 score. One speaker received a rating of 4.89 and 4.83 at the two workshops which is rather high by any standards.

As far as the average rating of the various topics were concerned, no topic received a combined rating of less than 3.09, and two of them were rated 4.21 or better (see Table 3).

Relative to workshop activities, panel presentations, mock hearings and mock trials, and discussion groups, an average effectiveness rating of above 3.00 was designated. However, the group reports and evaluation dropped slightly below the 3.00 level (see Table 4).

---

1. The ratings for Tables 2-5 were based on the following scale:
   5 = Extremely Effective
   4 = Most Effective
   3 = Effective
   2 = Least Effective
   1 = Not Effective
The location of the workshop and materials used received excellent ratings at both workshops; however, the housing at Baltimore apparently was not satisfactory (see Table 5).

In addition to these tables, the Kropp-Verner overall evaluation mean rating for both workshops combined was 3.35. Based on the fact that the most positive score available on this scale is 1.13, and the most negative is 10.89, with a median possible score of 6.02, it appears evident that, in general, the participants felt that the workshop was helpful and gave it a rating well on the positive side of the median.

Based on the above data and the written comments in the Appendices, the writers have concluded that the Public Health Law workshops were needed and were well received. They further conclude that considerable effort should be exerted to sponsor these workshops in each state of the Southern Branch Region. In addition, some means should be found for making this available to all of the public health personnel in each state, rather than a select few.
APPENDICES
WRITTEN COMMENTS AS TO EACH INDIVIDUAL'S EVALUATION OF THE WORKSHOPS

Orlando

1. Very good or extremely effective (twenty responses of this type).

2. In general, the workshop served its purpose. It brought out many common problems.

3. This particular workshop did not prove as valuable to my particular situation as I would have liked. Being in the nursing field, I feel that more could have been directed to us.

4. I enjoyed the workshop; and from a personal viewpoint, I gained a great deal of knowledge and awareness of law.

5. Well organized and planned but would prefer to eliminate the evening session as the schedule was "pretty tight."

6. This was the first that I have attended that was very helpful.

7. It was most worthwhile and a privilege to attend. I would suggest additional workshops for those not attending this one.

8. I believe this workshop compares favorably with the original one held in Atlanta in April of 1967.

9. I see this as a possibility for an end to the current view, so widely held, that a lower echelon employee has nothing to contribute. I think the most telling impact was the generation of the conviction that the team is larger than we thought it was.

10. Very well planned and conducted and excellent faculty; however, facilities detracted from learning experience.

11. I am one of those who needed more on personal health rather than sanitation. I believe, as Dr. Grad said, that the times are bringing awareness of this to lawyers.

12. This was one of the best courses I have attended in several years. There needs to be some change in the group problem-solving session. There were excellent discussions of each
person's problems but inadequate opportunity to apply the knowledge learned in a classroom type learning situation.

13. This workshop was excellent except for the heavy emphasis on sanitation and environmental problems.

14. I came to learn about public health laws and found the workshop most informative and helpful.

15. An excellent presentation of materials but a little too general in nature.

16. It had effective speakers and was well planned. I believe it was most beneficial to me.

17. This is the best workshop of this type that I have attended.

18. The workshop certainly covered an area of concern and interest to all public health employees. The areas covered were general by necessity, which somewhat diluted their effectiveness. In summary, I personally was rewarded. Speakers, especially Dr. Grad, were excellent.

19. It was effective in that it gave us a greater appreciation of the divergent problems of those in other fields.

20. Should be considered as a very important program and should be continued. Presentation, as a whole, was outstanding.

21. I commend you for recognizing the need for this course. I was most impressed with the high quality of public health personnel. I gained more than I had anticipated; the workshop was well planned, but it was geared more for environmental health divisions than "physical."

22. It was not what I had expected. Dr. Hopkins and Dr. Grad began to talk about the important (for me) issues on Friday. The material was well presented.

23. Most interesting and informative; should be offered in a similar way by individual states.

24. A very worthwhile learning experience—well planned and presented.

25. Stimulating! It added to recent accumulation of knowledge at UNC.

26. Very worthwhile presentations on difficult area.

27. Dr. Frank Grad is indeed the best individual for this type of workshop, and it has been a very rewarding experience to have been a participant.
28. It was very good but could not cover everything. A second workshop is needed, designed primarily for physicians and nurses regarding: (1) personal health care; (2) evaluation and licensing of professionals; and (3) data, computers, and communications.

29. It provided a useful tool to relay to my unit.

30. It was satisfying, and the faculty is to be complimented for the well organized program.

31. It was highly rewarding to me—met a personal need in my service to public health and the community.

32. I was weak on public health laws and the tools to implement these laws. Now, I am going home with a broader view.

33. Very useful information gained; however, I would not schedule evening sessions.

**Baltimore**

1. Excellent or very good (fifteen comments of this type).

2. I found it to be a personal learning experience but felt it was designed for the top administration rather than the general staff.

3. The fact that participants "stuck to it" as they did speaks for itself! The "free-flow" and informality was excellent. While many facts and ideas were rudimentary, they were needed!

4. Very informative, pleasant, excellent speakers and topics, and the time did not drag (three responses of this type).

5. The topics covered were excellent; however, so much information was covered in a short time that I feel a five day program could accomplish more.

6. I learned a great deal and will be able to transfer this knowledge into actual practice. I enjoyed myself and was impressed with the congeniality of the group.

7. This has been an extremely worthwhile workshop, and it has provided me with much useful material.

8. I enjoyed the group participation. Good information was given in an understandable manner.

9. Exactly what the M.D. described.

10. Very interesting and educational.
11. Good course—a course of general value to the entire public health profession.

12. Very stimulating with basic tools to take back to the personnel with whom we work. It was the speakers and their ability to communicate well that was most helpful.

13. An overall picture was presented. Specific help to special interest groups cannot be covered as well in a general seminar as this.

14. The presentation of material and preparation of faculty was excellent, as was the organization of the entire program.

15. I felt that this workshop was very helpful.

16. Very well planned, tightly knit, and all portions dove-tailed very well. Very little lost time.

17. Effective organization and presentation covering a wide and important area.

18. The materials and program were very well organized and presented. I was especially impressed with the friendly attitude of the participants and faculty and was pleased with the opportunity to share with the other disciplines.

19. Overall, it was very effective though slanted more to environmental problems of a physical nature and therefore not especially relevant to the nature of day-to-day workload.

20. On the whole, it was well worthwhile, but you could give more depth in administrative decision making and the law, specifically when you do use the law as a tool.

21. Effective for some professional levels.

22. It was very rewarding. There should be an advanced type workshop in the future.
RECOMMENDATIONS FOR IMPROVING THIS TYPE OF WORKSHOP

Orlando

1. A good training film concerning a mock hearing would be more effective in my view.

2. Better housing and meeting place.

3. More precise mock hearing.

4. Faculty was generally effective but weak in case of David Warren. I would suggest that care be taken in selection of a replacement. Increase emphasis on personal liability experts.

5. Could be directed into more specific areas as determined by background and experience of participants.

6. Divide the workshop into two parts—environmental problems and personal health problems.

7. Enlargement of the area omitted—the doctors' and nurses' role and legal aspects in performing their duties in giving personal health services (two responses of this type).

8. Need more "specific area" presentation and discussion.

9. Need another workshop with as much time spent on provisions of health services as was spent on environmental health in this one.

10. My only criticism was relative to the physical arrangements of the meeting room. This, however, did not ruin the workshop for me.

11. This "problem of communication" is self-explanatory. Regarding group reports, "I know you believe you understand what you think I said, but I am not sure you realize what you heard is not what I meant." Reserve one session for professional personnel.

12. The objective for the workshop groups should be more clearly defined.
13. Additional programs might deal with some topics which were glossed over by necessity at this workshop; for example, problems in personal health care delivery, professional liability of public health workers, more detailed state comparison of laws, etc.


15. Develop means of sticking more closely to the subject.

16. No major change recommended—perhaps more outstanding people participating like Dr. Grad.

17. Increase the duration of the workshop by one day.

18. It would be very difficult to improve the present method, although it might be beneficial to have some audio-visual aids.

19. Shorter presentations with longer discussion and question and answer periods.

20. Need to include more "specifics" as to effective public health law enforcement; for example, gathering of evidence, filing complaints, authenticating evidence, etc.

21. I believe this should be held for all County Health Officers, Chief Nurses, and Sanitation Directors.

22. Use more actual legal cases and evaluate why they were or were not successful.

23. If possible, a wider range of audio-visual aids to break up the speeches.

24. The inclusion of more on personal care aspects of public health.

25. Divide into groups by profession or interest. Assignment of specific problems which are currently popular to each group. Complete evaluation of the solution (P.O.M.E.) by a panel of the lawyers present.

26. Have a more even representative group from several states and hold the meeting in an area that is not represented by the participants.

27. Include a variety of disciplinary and professional categories.

28. Include more attention to personal health services (four responses to this type).

29. If held in a state where administrative hearings on trials are held, an actual case in process would be highly effective following advanced information on procedure.
30. If possible, it would be good to have local prosecutors attending.

31. Unable to be improved.

**Baltimore**

1. Seven participants stated that it would be difficult to "improve on" the quality of the workshop as it was excellent.

2. Small discussion groups should have been led by the noted speakers.

3. Stronger speakers are needed, along with papers or "proceedings" of the speakers' presentations.

4. More is needed on areas of liability of health providers.

5. Need a five day workshop to allow more time for discussion.

6. Need lectures on individual problems of the different disciplines and how they can be resolved.

7. Need a list of subjects (problems) pertinent to workshop for discussion groups.

8. Eliminate the group reports.

9. Try different presentation of Comprehensive Health Planning.

10. More time for discussion with speakers.

11. Need an outline of presentations.

12. More specific digging into specific fields of endeavor; for example, environmental problems and the legal aspects.

13. Would have liked more time on problems of medical care administration.

14. More planned group discussions; leaders should be selected in advance and "primed" for the sessions.

15. Would like to see planning to include wider incorporation of legal aspects as applied to "practice" within disciplines.

16. More emphasis and involvement of "how to" techniques; getting recipients of health services to utilize them without resorting to punitive techniques.

17. Involve more governmental lawyers.

18. Either give discussion groups enough time to produce or dispose with some not essential to this type of activity.

19. More guidance in group discussion and purpose.
RECOMMENDATIONS FOR FOLLOW-UP ACTIVITIES

Orlando

1. Segregate the participants according to their respective disciplines.

2. Have special courses in different states dealing with primarily only those local situations and laws.

3. Go more in depth on some of the law issues.

4. Should be an annual affair (thirteen responses of this type).

5. A follow-up of the same type of program but in more detail and depth.

6. This seminar should be repeated at various locations around the State of Florida.

7. Delineate some of the sharply demarcated areas and concentrate on overall general problems applicable to all areas rather than specifics.

8. Mail out legislation data to attenders.

9. Write to registrants and request how they put this course material to use in their respective agencies.

10. Begin another workshop where we began on Friday and continue with those topics. Invite more lawyers, private physicians, nurses other than public health, plus public health personnel to instigate more communication (two responses of this type).

11. Extend these seminars to the local level.

12. Provide similar programs for municipal and county officials, legislature, etc.

13. Provide "proceedings."
1. Nine participants stated that a follow-up workshop was needed within 6-12 months, involving the same participants to ascertain problems and changes that have taken place.

2. If possible, make this an annual affair with "proceedings" to be mailed to each participant.

3. Provide an opportunity to utilize information gained.

4. Keep all persons on APHA mailing list for future information.

5. Continued notification of equally needed workshops.

6. Newsletters, as appropriate.

7. A problem developed around issue of "motivating citizens" and better understanding human behavior.

8. More of Professor Grad—excellent philosophical basis for law in public health.
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COURSE PROGRAM*

PRINCIPLES OF PUBLIC HEALTH LAW AND LEGAL TOOLS FOR EFFECTIVE HEALTH ADMINISTRATION

September 23–26, 1969

Park Plaza Hotel
Orlando, Florida

Sponsored by

Florida Public Health Association
Florida Department of Health and Rehabilitative Services
Orange County Health Department

SOUTHERN BRANCH, AMERICAN PUBLIC HEALTH ASSOCIATION

*The course program for the Baltimore workshop was similar with the exception of the involvement of local speakers as listed on pages 32, 33, 40, and 41.
PROGRAM AGENDA

Tuesday, September 23, 1969

7:00 P.M. REGISTRATION
6:30 P.M. WELCOME
  Mabel Johansson, President, Florida Public Health Association
  Wilfred N. Sisk, M.D., Director, Orange County Health Department

INTRODUCTION AND COURSE PLAN
  Frederick W. Hering, Ed.D., Program Director

8:00 P.M. NEW AND CURRENT TRENDS IN PUBLIC HEALTH LAW
  Jerome N. Conger, M.P.H.

9:00 P.M. DISCUSSION AND REACTION

9:30 P.M. SOCIAL HOUR

Wednesday, September 24, 1969

9:00 A.M. INDIVIDUAL RIGHTS VS. COMMUNITY PROTECTION
  Lewis Earl, D.D.S.

9:45 A.M. LEGAL BASIS OF PUBLIC HEALTH PRACTICE
  Frank P. Grad, L.L.B.

10:30 A.M. INTERMISSION
  (To write questions for panel)

10:45 A.M. BASIC CONCEPTS AND PRINCIPLES OF PUBLIC HEALTH LAW
  Frank P. Grad, L.L.B.

11:30 A.M. PANEL DISCUSSION
  Moderator: Wilfred N. Sisk, M.D.

12:00 Noon LUNCH

1:30 P.M. LEGAL TOOLS TO HELP PUBLIC HEALTH WORKERS--AN OVERVIEW
  David Warren, L.L.B., Speaker and Coordinator

2:15 P.M. LEGAL TOOLS TO PREVENT OR SOLVE PROBLEMS IN ENVIRONMENTAL HEALTH
  David Warren, L.L.B., Speaker and Coordinator
3:15 P.M.  LEGAL TOOLS TO PREVENT OR SOLVE PROBLEMS IN MEDICAL CARE ADMINISTRATION  
            David Warren, L.L.B., Speaker and Coordinator

4:00 P.M.  GROUP SESSIONS TO IDENTIFY BACK-HOME PROBLEMS, ORGANIZE AGENDA, SET GOALS, AND POSSIBLE SOLUTIONS  
            Wilfred N. Sisk, M.D.

5:00 P.M.  ADJOURNMENT

7:30 P.M.  ADMINISTRATION OF THE LAW  
            William Hill, M.D.  
            Byrd Booth, L.L.B.  
            Willard C. Galbreath, M.P.H.

9:00 P.M.  ADJOURNMENT

Thursday, September 25, 1969

9:00 A.M.  THE NATURE AND TYPES OF HEARINGS AND TRIALS  
            Robert M. Eisenberg, L.L.B., Coordinator  
            Lindsay G. Peeples, L.L.B., Speaker

10:00 A.M.  MOCK HEARING AND MOCK TRIAL  
            Robert M. Eisenberg, L.L.B., Chief Trial Counsel  
            John F. Gaillard, L.L.B.  
            General Counsel  
            Charles P. Milliford, L.L.B.  
            Associate Counsel

12:00 Noon  LUNCH

1:30 P.M.  HOW LAW IS CONCEIVED, MADE, AND PASSED  
            Richard S. Hodes, M.D.

3:00 P.M.  HOW TO MAKE EFFECTIVE LEGISLATIVE COMMITTEE PRESENTATIONS  
            Faculty and Others

4:00 P.M.  GROUP SESSIONS  
            Continue P.O.M.E.

Friday, September 26, 1969

9:00 A.M.  IMPACT OF COMPREHENSIVE HEALTH PLANNING ON PUBLIC HEALTH LAW  
            R. P. Hopkins, Ph.D.
10:00 A.M. GROUP SESSIONS
Action Plan

11:30 A.M. PRESENTATION OF GROUP REPORTS
SUMMARY
EVALUATION

12:30 P.M. ADJOURNMENT
PRINCIPLES OF PUBLIC HEALTH LAW AND LEGAL TOOLS FOR EFFECTIVE HEALTH ADMINISTRATION

Baltimore, Maryland
October 12-15, 1969

Please do not sign this or in any way identify yourself. Consequently, you are encouraged to be absolutely honest in your evaluation of this workshop. Please rate the speakers and topics covered according to the following scale:

5 = Extremely Effective
4 = Most Effective
3 = Effective
2 = Least Effective
1 = Not Effective

Speakers

Lewis Schmidt
Francis Burch
Frank P. Grad
David Warren
Sidney Edelman

Murray Grant
Honorable Harry R. Hughes
Noble J. Swearingen
Eugene Guthrie:

Topics

NEW AND CURRENT TRENDS IN PUBLIC HEALTH LAW
Lewis Schmidt

INDIVIDUAL RIGHTS VS. COMMUNITY PROTECTION
Francis Burch

LEGAL BASIS OF PUBLIC HEALTH PRACTICE
Frank P. Grad

BASIC CONCEPTS AND PRINCIPLES OF PUBLIC HEALTH LAW
Frank P. Grad

LEGAL TOOLS TO HELP PUBLIC HEALTH WORKERS
Frank P. Grad and David Warren

40
LEGAL TOOLS TO PREVENT OR SOLVE PROBLEMS IN ENVIRONMENTAL HEALTH
Sidney Edelman

LEGAL TOOLS TO PREVENT OR SOLVE PROBLEMS IN MEDICAL CARE ADMINISTRATION
Frank P. Grad and David Warren

ADMINISTRATION OF THE LAW
Murray Grant, M.D.

THE NATURE AND TYPES OF HEARINGS AND TRIALS
Frank P. Grad

MOCK HEARING AND MOCK TRIAL
Frank P. Grad and Faculty

HOW LAW IS CONCEIVED, MADE AND PASSED
Honorable Harry R. Hughes

HOW TO MAKE EFFECTIVE LEGISLATIVE COMMITTEE PRESENTATIONS
Noble J. Swearingen

IMPACT OF COMPREHENSIVE HEALTH PLANNING ON PUBLIC HEALTH LAW
Eugene Guthrie, M.D.

Activities

Panel Presentations
Discussion Groups
Mock Hearing and Mock Trial
Group Reports
Evaluation

General

Housing
Location
Materials
Please write out your feelings regarding the following open-ended items.

PERSONAL EVALUATION OF THE WORKSHOP


RECOMMENDATIONS FOR IMPROVEMENT OF THIS TYPE OF WORKSHOP


RECOMMENDATIONS FOR FOLLOW-UP ACTIVITIES
KROPP-VERNER EVALUATION SCALE*

Please follow directions carefully: Read all twenty of the following statements. Check as many statements as necessary to describe your reaction to the workshop.

1. ____ It was one of the most rewarding experiences I have ever had.
2. ____ Exactly what I wanted.
3. ____ I hope we can have another one in the near future.
4. ____ It provided the kind of experience that I can apply to my own situation.
5. ____ It helped me personally.
6. ____ It solved some problems for me.
7. ____ I think it served its purpose.
8. ____ It had some merits.
9. ____ It was fair.
10. ____ It was neither very good nor very poor.
11. ____ I was mildly disappointed.
12. ____ It was not exactly what I needed.
13. ____ It was too general.
14. ____ I am not taking any new ideas away.
15. ____ It didn't hold my interest
16. ____ It was much too superficial.
17. ____ I leave dissatisfied.
18. ____ It was very poorly planned.
19. ____ I didn't learn a thing.
20. ____ It was a complete waste of time.

*Dr. R. Kropp and Dr. C. Verner, Florida State University

IF YOU WISH, ADD ANY COMMENTS ON REVERSE SIDE OF THIS PAGE.
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