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ANDERSON CREEK MEDICAL CENTER
DEDICATION
ANDERSON CREEK, NORTH CAROLINA
FEBRUARY 10, 1980

RURAL HEALTH CARE --
GOVERNMENT CAN WORK --

Today we are dedicating the second new medical center to be opened in Harnett County in the last six months. This is a great day and a great triumph for the people of Harnett County, as well as all rural and eastern North Carolinians.

Anderson Creek Medical Center is a part of the recent, rapid expansion of available health care services in North Carolina. When I was a small boy growing

up in this area, most rural counties did not have any resident doctors, and most other counties had only one. There were no community or rural health centers, no family nurse practitioners, no physician assistants and almost no hospitals.

Even as little as ten years ago, there was no place in the entire eastern part of the state where problem pregnancies could be dealt with. In such cases, the patients had to be sent to Raleigh or Chapel Hill, and while that is not too terribly far for those of us in Harnett County, it is in the case of emergencies, when the lives of mother or child could be endangered.

Today, we have a thriving medical school and teaching hospital in Greenville, with 65 or 70 doctors. We have these two new medical centers in Harnett County. There is also an active doctor recruiting program going on, which is run by the state government in conjunction with the U.S. Public Health Service; it is so successful that we are now in the position of being able to choose between a number of doctors who wish to come here.

All of us complain about government regularly, especially the federal government. It gets accused, accurately I believe, of being ineffective, inefficient, arrogant, and insensitive. But even as we worry

about government and try to make it better, we should keep things in perspective and remember that government can and does work, sometimes quite well.

The Anderson Creek Medical Center represents such a triumph. The initiative for this medical center came from the local community, with one-sixth of the local residents signing a petition asking for a new health clinic. Local residents contributed money and time to establish a place to locate the clinic temporarily, so it could be opened as rapidly as possible. Federal financial assistance was received for the construction of a new facility. And, the community has worked with the state government in order to recruit new doctors for

the area.

In short, the development of Anderson Creek Medical Center is a model in cooperative government, with the initiative and most of the work coming from the local community, with needed technical and financial support being provided by the state and federal governments.

The job is not done. Harnett County is growing, and we still need more doctors, more nurses, and to generally improve the availability of services.

And the role being played the federal government can still be improved. HEW is still too rigid, and needs to permit greater

flexibility in the development of the local programs. Related to this, we still need better cooperation between HEW and the state government, as evidenced by the complaints my office still receives periodically.

Many of you may not realize this, but the public health system of which you are a part is widely recognized to be the best in the country. To indicate how much North Carolinians have done, let me read from the introduction of a June, 1977 report by the Council of State Governments:

"North Carolina has gone further perhaps than any state to design and implement a comprehensive program to help communities construct and staff rural health centers

that provide primary health care. The cost to the state has not been great and the benefits to thousands of North Carolinians are clear. The purpose of this report is to describe North Carolina's innovative rural health center program in a way that will enable officials in other states to determine if parts of the North Carolina program have applicability and feasibility in their states."

The Area Health Education Centers program is another example of what we have accomplished in this area. This program was originally devised by the University of North Carolina at Chapel Hill and the state government. Its purpose is to increase the

attractiveness to doctors and other health care personnel of practicing in rural areas throughout the state, thereby increasing the number of trained medical personnel in North Carolina and improving their distribution around the state.

This program has proved so successful that it came to the attention of the Congress. The Congress enacted its own Area Health Education Centers program, and for the last several years has been appropriating about \$20 million annually for the purpose of encouraging other states to develop such programs of their own.

I believe that the lesson from the rural health programs is that all govern-

ment, all of our social programs, are not bad or necessarily inappropriate. Government can play a valuable role in helping Americans improve the quality of their lives.

But the success of these programs also carries another lesson along with it, and that is that there is a right way for government to try to help people and a wrong way.

The wrong way is to have some academics and bureaucrats up in Washington, people who often have had little experience with the practical problems that have to be faced at the local level, to dream up some new program, to insist that this is the only

solution, and to then demand that every community and every state follow detailed federal specifications to the letter.

Unfortunately, this is what happens all too often. The result is that the public ends up being mad at the federal government, resists the program, and in the end, much less gets accomplished than should have been.

The right way to deal with these issues is for the community, usually through their local government, to be involved with the program or project in its every phase. Hopefully, the local citizens will initiate things, as you did, but they must be brought

into the planning, implementation and funding. And, after the program gets under way, it is the local community that must be in charge of its operation.

When these criteria are met, the program will be one that is appreciated and used rather than one that is disliked and resisted. People will still be running their own lives, rather than being told what to do. And, the simple fact that the local community and the local government is taking the lead means that the community and government is strengthened, something that works to the benefit of our form of government and our way of life.

In conclusion, the opening of Anderson Creek Medical Center represents another step forward for Harnett County. You should be proud of what you have accomplished, and I am pleased to be a part of it.