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CONFIDENTIAL

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TO: Dean Surbey

FROM: Henry Blackburn ^{HB} (ny)

RE: Gail Dolliff

file

It is always good to get perceptions directly from people, particularly long-term employees. Gail is still cogitating whether her experience with CARDIA has given her a negative image in the Division. She believes that she did the best she could with that study and helped very much in pulling it out of the fire. At any rate, due to the unique nature of that study and its leadership and its population at that time, she should not be stigmatized forever on this. Her overall and increasing experience and skills should be taken into consideration.

I digest our extensive conversation down to the following issues. She feels the need for more visibility, responsibility and recognition, due to her very longstanding participation in the Division's activities (30 plus years!).

She believes that she is capable of and ready for substantial supervisory function. She would like for it to be central, so that she would be involved, visible and recognized. She will take whatever is most needed but also what is likely to forward her position and status.

Obviously she doesn't feel that her current general flunkey, blood drawing and office work function in the Bloomington/Roseville Survey Center will accomplish these long-term goals, but is not unhappy to be doing it in an interim.

Concerning our next two years plans for her, 100% with MHS Survey, again, she would be supervised by another long-term colleague with whom she gets along very well, but this position doesn't create growth in her responsibility, visibility or skills.

She is much attracted to the PACE program, although has concern about making a long-term commitment at 75% time because she needs full-time work. She would like a central position with a new project central to the Division's efforts (and related to future leaders in the Division). The combination of PACE plus 25% quality control for MHS is the most attractive to her at the moment.

She wonders why she has not been solicited for new cancer center activities. She considers herself the most "ready" person in terms of taking over a study in which she would be in a central role in supervision. She believes that her experience on the Women's Weight and Smoking Project with Phyllis Pirie and her TSI coordination with Harry Lando have strengthened and broadened the favorable experience with her performance in the Division, as well as the ALS study.

I would like her issue put on the AEC agenda for discussion and to have your views.

/nmf