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AAMC

Group on Business Affairs

**Report of the GBA
Strategic Planning Task Force**

October 1996



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Report of the GBA Strategic Planning Task Force

Background

The GBA has been functioning successfully for approximately 29 years. The last time it questioned what direction to take, a self-study was conducted and a report presented to the GBA National Chair, Lester Wilterdink, on April 21, 1986. One recommendation was, in essence, to realign the GBA along functional lines with membership representing a wide spectrum of administrative personnel. GBA membership has continued to grow. At this time, it includes Principal Business Officers, Dean's Office staff, department administrators, central university professional staff, research administrators, practice plan managers, budget managers, and others, including some whose major interests are not known.

In November 1995, the GBA National Chair, Byron Backlar, with the support of the Steering Committee, proposed that a Strategic Planning Task Force be created. The charge to the Task Force was to make recommendations to the GBA Steering Committee regarding if-and-how the current structure and activities of the GBA should be changed to better serve the membership.

The principal question to be addressed by the Task Force pertained to whether the GBA should try to retain its current membership groups, or restrict its membership to one or a few types of medical school administrators? Each recommendation has its consequence. If it is concluded that the GBA should retain its current membership, what should be done to serve the needs of all members? (Special attention should be paid to professional development programs.) If it is concluded that the GBA should be selective rather than inclusive in its membership, what groups should be included within the GBA and what should be done to serve their needs? What needs of medical school administrators should be met by the GBA? What should be the relative roles of GBA, GIP, GFP and non-AAMC organizations, e.g., NCURA, SRA, APA/MGMA, in meeting medical school administrators' needs? How should the GBA relate to and coordinate efforts with these groups? What suggestions are there to serve the needs of persons who will not remain within the GBA?

The Task Force operated under the general assumption that the principal challenge in the coming years will be figuring out ways to manage at the institutional and the departmental levels in an era of diminished and constrained resources. There are increasing demands and expectations that we're going to have to conduct our business in a more corporate fashion. In the future, we'll be managing in smaller organizations, rather than growing organizations. And, this will have to be done in cultures/milieu where key personnel with authority have different expectations.



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The Task Force is chaired by Philip Schrodell. Its members include Jaclyne Boyden, David Perry, Deborah McGraw, Spencer Tom, Jeffrey Mossoff, Cheryl Atkins-Lubinski, and Jack Krakower. The Task Force conducted its deliberations through a combination of meetings and telephone conference calls. It also conducted a survey of all designated members. The following text summarizes the recommendations of the Task Force, and includes the key findings from the survey. A more detailed listing of the survey and its results is included in an appendix to this document.

Key Survey Findings

In February, 1996, all designated GBA members were mailed a survey aimed at identifying members' views of the organization. 299 people responded to the survey. The vast majority of respondents, 72%, reported that as currently structured, the GBA was an appropriate organization for them. The remaining 28% generally indicated that other organizations, principally the MGMA APA, better met their professional development and networking needs.

Respondents cited the greatest strengths of the GBA as including: networking & information sharing; professional development programs; expertise among members; and friendships. The greatest weaknesses included: diversity of membership leading to a lack of focus; failure to reach out to junior members; lack of routine professional communication; and disconnection from the GIP and GFP.

Respondents cited the greatest opportunities for the GBA as including: information sharing; use of the Internet; combining GBA and GIP annual meetings; developing "best practices". The greatest threats included: lack of participation by members; apathy; duplication of programs and groups; cost of meetings; and lack of focus on key issues.

44% of respondents indicated that they attended a GBA Spring Meeting in the past two years. 90% or more of these people rated the programs positively. 60% rated the programs good to excellent with respect to the meeting content, networking opportunities, location, cost, appropriateness to position, materials, time of year, and notification.

Recommendations of the Task Force

GBA Mission



The Task Force recommends that the mission of the GBA be redefined in terms of the general and financial administration of medical schools' missions and programs.

As stated in the current rules and regulations of the GBA, the purpose of the organization is to advance the managerial art and science of administering medical schools, and to facilitate direct interaction of the AAMC staff and Councils with institutional representatives charged with the responsibilities of business affairs. GBA members are appointed annually by the deans of medical schools and are members of the AAMC and serve at the pleasure of their respective deans.

There is wide variation in membership, ranging from limiting appointments to business associate dean(s) only, to including the associate dean(s) and related staff in the dean's office, to appointing these individuals plus department business managers. Some deans appoint only one or two members to the GBA, while others appoint over 30.

This varied membership has made planning the annual spring meeting agenda challenging, and the Task Force recognizes that the GBA Professional Development Committee has struggled in the past with developing programs that are "all things to all people." Though generally well attended, minor criticisms of the meeting have ranged from being too focused on clinical issues to comments that certain academic programs were not adequately addressed. While clinical department managers have used the MGMA Academic Practice Assembly and other groups for professional development opportunities, the basic science department managers and dean's office administrative staff look to the GBA as their major professional development group.

The Task Force recommends that rather than focus on particular academic programs, the mission of the group be redefined in terms of the **administration of medical schools' missions and programs**. Future professional development programs and activities should focus on general and broad-based administrative management skills, functions, and issues that are appropriate and of concern to the entire medical school organization.

The Task Force acknowledges that the center of gravity for the GBA is, and should be, the academic mission of the institution and there is no attempt to dilute that in this recommendation. However, the interrelationship of the educational mission with research, patient care and public service, as well as the consolidation of administrative functions occurring at many medical schools, mandate that dean's office staff and department business officers be well versed in general administrative and management issues. While the Task Force believes that the impact of this suggested change in the GBA's mission will be relatively modest in terms of the future meetings, it could serve as an important reference as future planning committees set agendas. The change of the mission statement might also modestly impact GBA membership, which is discussed later in this report.



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GBA Structure

The Task Force strongly recommends increased collaboration between the GBA and GIP.

In light of the overlap in the interests, concerns, responsibilities, and professional development programs of the GBA and Group on Institutional Planning, and the proposed refinement in mission, the Task Force urges the leadership of both groups to seek every opportunity to engage in collaborative efforts. Moreover, the Task Force believes that the overlap in both groups' interests and concerns warrants giving serious consideration to a merger of the groups, and urges the leadership of the groups to pursue discussions of this proposal.



The Task Force considered changes to the current regional organizational structure, but decided to recommend retention of the current structure.

The Task Force spent considerable effort discussing the current regional organizational structure within the GBA. There was some consensus to abandon it completely, due to the difficulties that have been experienced in several of the regions to recruit regional leadership and to hold successful regional meetings. There was some thought that disbanding the regional structure would enhance the spring annual meeting and would increase attendance and improve the quality of the program.

There were major objections expressed by members of the Southern Region to the possible elimination of the regional structure. The Southern Region in particular has had very strong regional participation and excellent summer programs. There was also concern within the Task Force as to what structure should replace the regional structure for selecting members for the Steering Committee. Finally it was decided to retain the current regional structure for now and that it be reexamined within the next few years at such time that the GBA and GIP consider consolidation.

There was also agreement within the Task Force that conducting summer educational programs be considered as an option for the regions. No region would be expected to conduct a summer program and those regions that do hold summer programs would not be able to look to the national GBA Steering Committee to underwrite any financial shortfalls. It was the consensus of the Task Force that participation in the spring meeting and participation on the Steering Committee would likely increase if regional representative did not feel compelled to organize a regional meeting. It was agreed to continue to select representatives for the Steering Committee using the current regional structure.

The organization should encourage the development of affinity groups.

The Task Force recommends development of affinity groups structured along functional lines, or focus areas that encompass the responsibilities of our constituents. These groups will provide more fluidity as the needs and roles of our membership changes. Examples of such functional areas that might warrant an affinity group include finance, general administration, information systems, research administration, and planning (strategic and facilities). Future consideration could be given to including representatives from active affinity groups on the Steering Committee. It was recognized that affinity groups may be established to deal with specific, time-bound issues. Consequently, such groups might be formed and dissolved depending on their intended focus.

GBA Membership



The Task Force recognizes the need to broaden its membership base to include those individuals whose backgrounds may extend beyond the traditional GBA stereotype.

The trend towards blending the various components of the academic medical center environment has significantly increased the variety of individuals who could benefit from and who could provide a valuable resource to the GBA. Accordingly, the Task Force recognizes the need to broaden its membership base to include those individuals whose backgrounds may extend beyond the traditional GBA stereotype. However, the group also believes that there is a strong need to retain the primary association with the medical school component of the academic medical center environment.

At the present time, the GBA is a primary affinity group for Principal Business Officers (PBOs) and basic science administrators. The GBA is viewed as a valuable resource for clinical science administrators, although many of these individuals recognize the MGMA Academic Practice Assembly as their primary professional affiliation. Finally, there are other groups which actively interact with GBA members, but have not been included in the traditional GBA membership to date. These groups include managers of information systems as well as other areas for which GBA affinity groups are expected to develop.

Given the above, the Task Force recommends that the current GBA appointment process be modified to read as follows:

- A Principal Business Officer (PBO) will be appointed by the Dean to serve as the principal institutional contact to the AAMC on matters involving finance and general institutional administration, e.g., faculty appointments, information systems, research administration, personnel, and the like.
- GBA members can be appointed by either the Dean or his/her designee (i.e., the PBO). The individual responsible for GBA appointments should be strongly encouraged to appoint active and diverse representation from their respective institutions.
- Individuals may also petition the GBA Steering Committee for membership.
- The GBA strongly encourages membership for anyone who has significant administrative responsibilities involving medical school operations. This includes, but is not restricted to PBOs, departmental administrators, senior planners, information systems administrators, and others who may become actively involved in GBA affinity groups.
- As in the past, the size of an institution's GBA membership will not impact an institution's



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Communication

There is both an opportunity and a need for the GBA to find ways to inform non-GBA members about the organization, and how it might serve their needs or interests.

The Task Force believes that many individuals who might benefit from participation in the GBA are not familiar with the organization since it does not actively solicit membership. Furthermore, designation to the group is currently limited to appointment by the Dean. To this end, the Task Force recommends that the leadership make a commitment to develop an “active” and expanded membership. It also recommends, as previously noted, that in addition to the dean, the designated Principal Business Officer shall also have authority to appoint appropriate staff at their school to the Group.

The Task Force recommends that communication devices like listserves and the World Wide Web be used to share information.

The Task Force recognizes that the AAMC and related constituent groups produce many publications that are of interest to GBA members. The Task Force suggests that mechanisms be established (including listserves and a Web site) to facilitate sharing relevant information and publications with constituents. These mechanisms should also be looked upon as vehicles for enhancing communications among constituents.

Professional Development Programs

The Task Force considered and developed several recommendations for professional development programs:

AAMC Annual Meeting: The Task Force recommends that the GBA discontinue sponsoring a program at the AAMC Annual Meeting. Such programs comprise a minuscule fraction of the Annual Meeting content, and GBA members do not appear to attend the Annual Meeting in sufficient number to justify the effort expended by the Professional Development Committee in organizing the programs. In advancing this recommendation, however, the Task Force in no way means to discourage attendance at the Annual Meeting by any GBA member whose interest or professional development needs otherwise might be served by such attendance.

As a corollary of this recommendation, the Task Force proposes that GBA activities which



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historically have taken place at the AAMC Annual Meeting (e.g., election/installation of new officers, the Carroll lecture, conferral of emeritus or honorary membership status) be conducted at the Spring Meeting. This well-attended professional development conference should afford a better venue and membership participation in these activities which are central to the GBA's mission.

Principal Business Officer Meeting: The Task Force recommends that the GBA continue to sponsor and, if possible, enhance the PBO Meeting. Although attendance at this meeting hovers between one-half and two-thirds of the institutions' PBOs, those who do attend feel overwhelmingly that it is a worthwhile and unique professional development opportunity. Limiting participation to the PBO and, if accompanied, by one other senior administrative colleague, is viewed as appropriate for the future as in the past.

In light of the Task Force's recommendation to cease sponsorship of a GBA program at the AAMC Annual Meeting, our proposal would be to continue the past practice of holding the PBO Meeting as a stand-alone event in the early to mid-fall time frame. This aspect of the recommendation, however, should be further evaluated in view of the experience with the 1996 PBO Meeting in Monterey, California, in conjunction with the Annual Meeting in San Francisco.

Spring Meeting: This conference has become and should continue to serve as the centerpiece of the GBA's professional development activities. Noting, however, the substantial degrees of overlap in subject matter, speakers, and format in the program offerings of the GBA and the Group on Institutional Planning, the Task Force recommends that the decision of the two groups to sponsor a joint meeting in April 1997 be extended to at least 1998. The concept of the joint meeting should be adequately tested and opportunities to refine and perfect the program exploited before the two groups reach a conclusion about continuing or abandoning that approach. The Task Force notes that subsequent to the development of this recommendation, the national Steering Committees of both groups have elected to hold a joint 1998 Spring Meeting.

Focus of Professional Development Meetings: The Task Force advocates that future professional development programs, and in particular the Spring Program, should have as their focus general, broad-based administrative management skills, functions, and issues. These should not be limited just to a central, Dean's Office perspective, but apropos to the entire organization. This is meant specifically to include departmental and center-level administrators. The Task Force senses that there is both a need and an opportunity to include more programming related to the institutions' management information systems requirements.

Costs of Meetings: The Task Force recommends cutting the registration fees and closely related costs of meetings as much as possible. Member concerns on this score are palpable, especially in



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times of increasing fiscal constraints. Cost-saving approaches that the Task Force believes should be considered include:

- minimizing speaker fees, albeit not necessarily eliminating a highly paid professional speaker if this is judged the best way to assure coverage of certain topics;
- reduce the number of meal functions included in the registration fee;
- forego the increasingly costly and often poorly attended “theme dinner and party” on the last evening of the meeting;
- limit “free bar” offerings to soft drinks, beer, and wine, i.e., forego hard liquor offerings, including in the hospitality suite.

Encouraging GBA membership participation: The Task Force calls upon all PBOs to actively encourage participation in GBA professional development program offerings by their institutions’ administrative team, i.e., departmental and interdisciplinary center administrators as well as central Dean’s Office and Fiscal Affairs Staff. The Task Force urges that future PBO meetings include discussions which emphasize the importance of the PBO serving as a role model in respect to supporting the professional development of the School of Medicine’s entire administrative team.

Regional or Affinity Group Meetings: The Task Force recommends that the GBA national organization should maintain an essentially neutral posture on such meetings, neither encouraging nor discouraging them. Any such gatherings, however, must be entirely self-sustaining from a financial perspective, and cannot be offered at times that might be seen as conflicting with the GBA’s national-level meetings, i.e., the Spring Meeting and the PBO Meeting.

Summary of Recommendations

GBA Mission

The Task Force recommends that the mission of the GBA be redefined in terms of the general and financial administration of medical schools’ missions and programs.

GBA Structure

The Task Force strongly recommends increased collaboration between the GBA and GIP.



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Communication

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The Task Force recommends that communication devices like listserves and the World Wide Web be used to share information.



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Principal Business Officer Meeting: The Task Force recommends that the GBA continue to sponsor and, if possible, enhance the PBO Meeting.

Spring Meeting: This conference has become and should continue, in the Task Force's view, to serve as the centerpiece of the GBA's professional development activities. The Task Force recommends that the GBA and GIP sponsor a joint meeting in 1998.

Focus of Professional Development Meetings: The Task Force advocates that future professional development programs, and in particular the Spring Program, should have as their focus general, broad-based administrative management skills, functions, and issues.

Costs of Meetings: The Task Force recommends cutting the registration fees and closely related costs of meetings as much as possible.

Encouraging GBA membership participation: The Task Force calls upon all PBOs to actively encourage participation in GBA professional development program offerings by their institutions' administrative team.

Regional or Affinity Group Meetings: The Task Force recommends that the GBA national organization should maintain an essentially neutral posture on such meetings, neither encouraging nor discouraging them.



Survey Summary

The following summarizes the results of the survey which was sent out to all GBA members in February, 1996. 299 people responded to the survey. Their responses are reported below.

1. Respondents (% of total):

- 76 (25%) Principal Business Officers (54% of all US and Canadian PBOs)
- 75 (25%) Clinical Science Department Administrators
- 41 (14%) Basic Science Department Administrators
- 75 (25%) Senior Medical School Managers -- including dean's office staff (e.g., Assistant Deans, Associate Deans), Directors and Assistant Directors of various medical school operations (e.g., Personnel, Practice Plan, etc.).
- 32 (11%) Senior Health Sciences Center Administrators -- e.g., Vice Chancellor, Associate Vice Chancellor, Executive VP, VP, Deputy VP, Assistant VP, Assistant Provost

299 Total Respondents

2. Region Number of Respondents (% of total):

Midwest	82 (28%)	Northeast	46 (16%)
South	111 (38%)	West	56 (19%)

3. Job Responsibilities:

- General school of medicine administration: Yes - 130
- General school of medicine finance: Yes - 126
- Campus administration: Yes - 40
- Hospital administration: Yes - 20
- Department administration: Yes - 157
- Department finance: Yes - 134
- Research administration: Yes - 141
- Management information systems: Yes - 94



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Practice plan administration: Yes - 102

Other responsibilities: planning, managed care development, human resources, facilities planning, academic personnel, legislative liaison, faculty affairs, fundraising, space management, residency program administration.



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4. AAMC Meetings Attended:

GBA Spring 1994: Yes - 97 AAMC Annual 1994: Yes - 78
GBA Spring 1995: Yes - 88 AAMC Annual 1995: Yes - 56

Regional 1994: Yes - 50
Regional 1995: Yes - 47

5. Non-AAMC Meetings Attended in Last Two Years:

MGMA-APA, MGMA, NACUBO, COGR, AUTM, AAHC, EACUBO, CPPD, SACUBO,
SAFO, SRA, NCURA

6. Does the Dean decide who is appointed to the GBA? Yes - 161

7. Who suggests appointments to the GBA at your school?

Associate Dean Suggests Membership: Yes - 148
Assistant Dean Suggests Membership: Yes - 46
Department Chair Suggests Membership: Yes - 48
Self Referral: Yes - 82

8. Should the GBA be divided into subgroups? Yes - 105 No - 171

If “yes,” what structure would you suggest? Clinical department administrators, basic science department administrators, faculty practice administrators, hospital administrators, dean’s office staff, research administrators, public vs. private schools.

9. Should specific criteria be established for membership? Yes - 23 No - 235

If “yes,” what criteria would you suggest? Limit participation to dean’s staff; should be left to each institution to decide; involvement in fiscal affairs.



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10. Should specific groups be excluded? Yes - 10 No - 249

If “yes,” what groups? Departmental administrators; limit to members with financial responsibilities.

11. Should membership fees be charged? Yes - 68 No - 203

12. Should institutions be limited to the number of designated members?

Yes - 50 No - 227

If “yes,” in what ways? Limit to three individuals, one voting; based on institutional size (including the number of students, faculty, total budget); limit to PBOs; maximum of three per school; one per subgroup.

13. Memberships in non-AAMC professional organizations:

AAHC, ACHE, CUPA, AHA, APA, AIM, MGMA, AUTM, COGR, AMIA, NACUBO, AERA, NCURA, CAUSE, SRA, UHC.

Do the activities of these organizations overlap with the GBA? Yes - 94 No - 112

If “yes,” do you have any suggestions regarding how to eliminate inappropriate duplication? Combine APA and GBA meetings; overlap in meeting schedules; increased collaboration between groups -- specifically APA and GBA.

14. If you have attended a GBA Spring meeting in the last two years, please rank the following:

	Deficient				Excellent	
	0	1	2	3	4	5
Meeting Content	2	3	6	37	67	19
Networking Opportunities	0	1	9	13	51	56
Location	0	0	2	21	51	57
Cost	0	1	15	37	63	15
Appropriateness to Your Position	0	1	9	24	61	35



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Materials Provided	0	0	2	31	62	23
Time of Year	0	5	6	15	64	40
Program Notification	0	2	1	8	51	65



If you have not attended a meeting, why?

Not appropriate for my position - 26
Cost/budget limits - 86
Too much free time - 8
Program content not appealing - 52
Information not available - 8
Time of year/conflict - 47

15. What do you feel are the greatest strengths of the GBA?

Networking & information sharing; professional development programs; expertise among members; friendships.

16. What do you feel are the greatest weaknesses of the GBA?

Diversity of membership dilutes strength; program duplication; cliquish; lack of focus; failure to reach out to junior members; lack of involvement by Canadian business officers; lack of routine professional communication; disconnection from GIP and GFP; not enough interaction among members; tends to focus on larger, prominent institutions.

17. What do you feel are the greatest opportunities for the GBA?

Information sharing; use of the Internet; to be more inclusive; provide expertise on national issues; combine GBA and GIP annual meetings; develop “best practices”; dissemination of information.

18. What do you feel are the greatest threats to the GBA?

Lack of participation by members; apathy; duplication of programs and groups; cost of meetings; lack of focus on key issues



19. Professional Development Meetings

National:

- Increase the number of meetings held per year: Yes - 13
- Decrease the number of meetings held per year: Yes - 22
- Increase the number of sessions held per meeting: Yes - 52
- Eliminate participation at the Annual Meeting: Yes - 40
- Eliminate Spring Meeting: Yes - 18

Regional:

- Increase the number of meetings held per year: Yes - 22
- Decrease the number of meetings held per year: Yes - 11
- Increase the number of sessions held per meeting: Yes - 25
- Eliminate regional meetings: Yes - 40

20. If the GBA did as you suggest, would you attend more meetings? Yes - 127 No - 42

21. GBA Directory changes:

Add email addresses; index by mission area; sort by department; put it online.

22. As it is currently structured, is the GBA an appropriate organization for you?

Yes - 217 No - 37

If not, why? APA better fits my professional needs; I get little, if anything, out of the organization; Too much focus at dean's level; offers very little to basic science administrators; offers very little to research administrators; scope of programs is too broad; I don't know enough about the GBA; as a Canadian member, the financial officials are often not relevant.

23. What issues would you recommend the GBA pursue to enhance the well-being of academic medicine?

Tenure; developing new resources; cost of educating medical students; faculty compensation;



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use of technology in management; increased collaboration with MGMA/APA