MEETING SCHEDULE
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD

Washington Hilton Hotel

September 13, 1978

5:00 p.m. Business Meeting Jackson Room
7:30 p.m. Cocktails Kalorama Room
8:30 p.m. Dinner Jackson Room

Guest: Richard J. Crout, M.D.
Director, Bureau of Drugs
Food and Drug Administration

September 14, 1978

8:30 a.m. Business Meeting (Coffee and Danish) Farragut Room
1:00 p.m. Joint CAS/COD/COTH/OSR Administrative Boards Luncheon Georgetown West

3:00 Adjourn
AGENDA
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD
September 13-14, 1978

I. Report of the Chairman

II. ACTION ITEMS

1. Approval of Minutes of CAS Administrative Board Meeting of June 21-22, 1978 ............... 1
2. Membership Application ........................................ 7
3. Executive Council Action Items
   - Endorsement of LCME Accreditation Decisions ........................ (19)
   - Election of Provisional Institutional Members .................. (21)
   - Election of Teaching Hospital Members ........................... (22)
   - Election of Academic Society Members ............................ (23)
   - Election of Distinguished Service Members ...................... (24)
   - Election of Emeritus Members .................................. (25)
   - Election of Individual Members ................................ (26)
   - Subscriber Status ............................................. (29)
   - Flexner and Borden Awards .................................... (30)
   - Report of the Task Force on Minority Student Opportunities in Medicine .... (31)
   - Report of the Task Force on Student Financing ................ (39)
   - Preliminary Report of the Task Force on the Support of Medical Education .............. (41)
   - CCME White Paper on Foreign Medical Graduates ............... (49)
   - Withholding of Services by Physicians .......................... (72)
   - Draft Report of the ad hoc Committee on Medicare Section 227' ..................... (76)
   - Response to Manpower Report .................................. (79)

III. DISCUSSION ITEMS

1. Administration of the Biomedical Research Enterprise ....... 19
2. Membership benefits for CAS Societies ....................... 22
3. AAMC Survey of Medical School Faculty Salaries
IV. INFORMATION ITEMS

1. Public Affairs Workshop .......................... 23

2. Status of Califano's Initiative in Support of Biomedical Research ..................... 24

3. Executive Council Information Items
   - Report of Working Group on Transition ................................ (118)
   - Expenditure Reporting for NIH Grantees ................................ (127)
   - Special Advisory Panel on Technical Standards for Medical School Admission .......... (132)
The CAS Administrative Board Business Meeting convened on June 21, 1978 at 5:00 p.m. and adjourned at 7:30 p.m. A social hour was followed by dinner at 8:30 p.m. The meeting reconvened at 9:00 a.m. on June 22. Following the usual custom, the CAS Administrative Board joined the other AAMC Boards for a joint luncheon meeting at 1:00 p.m.
I. Adoption of Minutes

The minutes of the March 22-23, 1978 CAS Administrative Board Meeting were approved without change.

II. Action Items

A. Thoracic Surgery Program Directors

Drs. Wilson and Oliver were asked at the March meeting to review this society's application for CAS membership. In his letter of April 13, Dr. Wilson indicated that both he and Dr. Oliver supported the society's membership application. It was noted that an IRS ruling on the tax status of the society was still pending, and the Board decided to consider the application contingent upon a favorable IRS ruling.

ACTION: The CAS Administrative Board voted to approve the application of the Thoracic Surgery Program Directors for membership in the CAS contingent upon an IRS ruling that the society qualifies for tax exemption status.

B. Endorsement of LCME Accreditation Decisions

ACTION: The CAS Administrative Board endorsed the LCME Accreditation Decisions.

C. AAMC Affiliate Institutional Membership

ACTION: The CAS Administrative Board agreed with the recommendation that the AAMC require accreditation by the LCME as a prerequisite for election to Affiliate Institutional Membership.

D. Eligibility for Continuing COTH Membership

ACTION: The CAS Administrative Board concurred with the recommendations on page 24 of the Executive Council Agenda noting that the quality of COTH member institutions is an area of legitimate interest to the CAS.

E. AAMC Biomedical and Behavioral Research Policy

The CAS Administrative Board considered in depth the section of the report dealing with Targeted Research focusing primarily on the portion which discusses the tension between targeted and basic research. The Board recommended the rewording stated below to make this portion more direct. The Board also discussed the issue of interdisciplinary training for Ph.D.'s. They agreed with the report's statement about the merit of interdisciplinary training, but recommended that a sentence be added to reiterate the position that the disciplinary approach should be the mainstay of Ph.D. training. After discussing other minor wording changes, the Board agreed that the report was an excellent distillation of the various policies AAMC should support with regard to biomedical and behavioral research.
ACTION: The CAS Administrative Board approved the AAMC Biomedical and Behavioral Research Policy paper as it appeared in the Executive Council Agenda with the following modifications:

p. 31, bottom - Although prompted by the most admirable motives, The implementation of these legislative authorities through a combination of research contracts and centers for funding of targeted research has caused tension and competed for funding with basic and applied research initiated by investigators.

p. 35, top - One such method is that of interdisciplinary training which has considerable merit because of the demonstrated ability of such Ph.D.'s to switch fields of research activity as new opportunities develop. However, rigorous disciplinary training programs should remain the mainstay of Ph.D. training.

F. Discharge in Bankruptcy of Student Loans

ACTION: The CAS Administrative Board concurred with the proposed AAMC statement on student bankruptcy and agreed that students who discharge loans in bankruptcy seriously endanger future funding for medical students.

G. Report of the Task Force on Minority Student Opportunities in Medicine

Dr. Paul Elliott, Chairman of the AAMC Task Force on Minority Student Opportunities in Medicine was present to review the task force's final report and highlight the major recommendations. The major focus of discussion dealt with whether the laudable goals outlined in the report could be accomplished within the recommended time frame and in the face of increasing financial constraints on medical school budgets.

ACTION: The CAS Administrative Board supported the spirit and intent of the Report on Minority Student Opportunities in Medicine with the recommendation that the timetable proposed for accomplishing the major goals be extended.

H. Recent Manpower Reports from GAO, National Academy of Sciences, and CCME

ACTION: The CAS Administrative Board briefly discussed the substance of recent manpower reports and concurred with the recommendation that an AAMC committee be established to review and comment upon them. The CAS Board further recommended that one particular focus of the proposed committee should be to define the physician's role and the relative role of other health care providers within the framework of the current and future health care delivery system.
I. Financial Considerations for Admission to Medical School

The CAS Administrative Board strongly agreed with the concept that admission to medical school should not in any way be tied to financial contributions. It was also agreed that the background statement (p. 80) should be modified to delete the phrase "including relatives of enrolled students and alumni for donations" from the last paragraph since it was felt that the solicitation of contributions from these sources was not appropriate in all circumstances.

ACTION: The CAS Administrative Board approved the policy statement on Financial Considerations for Admission to Medical School.

J. Recommendations of the CCME Committee on the Opportunities for Women in Medicine

The CAS Administrative Board discussed at some length the recommendation in the CCME report that the CCME respond affirmatively to the statutorily-mandated requirement for the development of shared-schedule residency programs. While the Board generally agreed with the report, it felt that the CCME should not support the legislative intrusion by the Federal government in programs of the medical schools. Several Board members stated the opinion that while certain individual circumstances might warrant the development of shared-schedule programs, legislative mandates of this type are inappropriate and disruptive.

ACTION: The CAS Administrative Board approved the recommendations of CCME Report Opportunities for Women in Medicine but urged that in the body of the report, the CCME take a strong stand against legislative mandates such as the shared-schedule residency provision.

III. Discussion Items

A. Secretary Califano's Initiative in Support of Biomedical Research

The description of Secretary Califano's April 30 speech to the American Federation for Clinical Research in which he outlined his intention to develop a comprehensive five-year plan for the conduct of federal research efforts for DHEW as a whole prompted considerable discussion. A few Board members questioned the uniqueness of this plan since it has been customary for DHEW to produce a yearly five-year Forward Plan for Health. In a review of the proposed principles outlined by Califano as the basis for what he would envision for the five-year plan, there was considerable skepticism among members of the Board as to what could be accomplished by such an undertaking. It was felt that Califano's intention to enhance federal support for basic research while, at the same time, ensuring that research is targeted to meet the nation's health care needs is irreconcilable since he intends to accomplish both without an increase in funding. Dr. Thier questioned whether AAMC should devote time and effort to participating in the development of the DHEW plan if it is to be based upon principles which are, in themselves, diametrically opposed. The
sentiment was expressed, on the other hand, that AAMC cannot afford to ignore the development of such a plan that is so closely related to the interests of the medical schools. Although the CAS Board was not optimistic about the outcome, it agreed that the AAMC should participate in the DHEW development of a national research plan using the Biomedical and Behavioral Research Policy paper as a baseline document. The CAS Board also agreed that if health care research and technology transfer are identified as national priorities, these functions should be carried out by a separate agency (such as the proposed National Institutes of Health Care Research) with separate funding so as not to compromise the basic research function of NIH. Dr. Bishop recommended that AAMC inform all member societies about DHEW's plan and that special effort be made to inform societies with a clear interest in this process, such as the Association of Teachers of Preventive Medicine.

B. Appointment of Women Liaison Officers from CAS

The proposal that CAS societies be asked to appoint women liaison officers raised the issue of the proliferation of "special interest" groups, and the Board discussed whether other segments of the academic medicine population would want similar status. Judy Braslow, the Special Assistant to the AAMC President for Women in Medicine, responded that the purpose of the proposal was not to establish another group or to fragment CAS but rather to establish a communication network among women faculty members from the various academic disciplines. She stated that the proposed mechanism would facilitate the identification of women for vacant faculty positions and for women's programs. After a thorough discussion, the CAS Administrative Board decided to ask its member societies to appoint women liaison officers to promote interdisciplinary communications among women in academic medicine.

C. AAMC Dues Structure

The CAS Administrative Board reviewed the Report of the Executive Council on Revising the AAMC Dues Structure. The recommendations contained in the report were considered by the CAS Board at its March meeting and were approved at that time. The report and its recommendations for changes in the AAMC dues structure will be considered by each Council and by the Assembly in October at the AAMC Annual Meeting. The CAS Board asked that the societies be informed as soon as possible after October of what their dues will be for the coming year and of projected dues for future years.

D. Annual Meeting Plans

Dr. Swanson suggested that Dr. Paul Beeson, who is chairing the IOM Committee on Aging and Medical Education, might be asked to deliver the Keynote Address at the CAS Business Meeting on Monday, October 23. The Board concurred with this recommendation and asked that staff contact Dr. Beeson. The CAS Administrative Board also endorsed plans to hold a Public Affairs Workshop with key congressional and executive branch staff on Wednesday and Thursday of the Annual Meeting (October 25 and 26).
E. Section 227 Regulations

Dr. Richard Knapp, Director of the AAMC Department of Teaching Hospitals, reported to the CAS Administrative Board that draft regulations for Section 227 of the 1972 Social Security Act are expected to be published in the Federal Register late in July. Section 227 deals with when a physician in a teaching hospital can bill for professional services and, as such, will have a great bearing on clinical departments in the medical schools. Dr. Morgan pointed out that while these regulations are of direct interest to clinical CAS societies, they will also have an impact on basic science departments because of their implications for total medical center revenue. Dr. Knapp indicated that after the regulations appear in the Federal Register, AAMC will be calling on certain CAS societies to assist in the development of a response. The CAS Board felt that this would be entirely appropriate since the regulations will deal with a subject of considerable interest to CAS.

IV. Adjournment

The CAS Administrative Board adjourned at 1:00 p.m.
MEMBERSHIP APPLICATION  
COUNCIL OF ACADEMIC SOCIETIES  
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

MAIL TO: AAMC, Suite 200, One Dupont Circle, N.W., Washington, D.C. 20036  
Attn: Ms. Mignon Sample

NAME OF SOCIETY: AMERICAN SOCIETY FOR PHARMACOLOGY AND EXPERIMENTAL THERAPEUTICS

MAILING ADDRESS: 9650 Rockville Pike  
Bethesda, Maryland 20014

PURPOSE: To promote pharmacological knowledge and its application and to conduct research pertaining thereto.

MEMBERSHIP CRITERIA: Any qualified investigator who has conducted and published a meritorious original investigation in pharmacology and is a legal resident of the United States, its dependencies, Canada or Mexico shall be eligible for membership in the society.

NUMBER OF MEMBERS: 2786

NUMBER OF FACULTY MEMBERS: approximate 80%

DATE ORGANIZED: 1909

SUPPORTING DOCUMENTS REQUIRED: (Indicate in blank date of each document)

Constitution - 1969 April 17

Bylaws - 1976 December

Program - Semi-annual meeting 1977 August 21-25 pp. 120-255.

Minutes - 1977 August 20

(CONTINUED NEXT PAGE)
QUESTIONNAIRE FOR TAX STATUS

1. Has your society applied for a tax exemption ruling from the Internal Revenue Service?
   
   _X_ YES         _   _ NO

2. If answer to (1) is YES, under what section of the Internal Revenue Code was the exemption ruling requested?
   
   501c3

3. If request for exemption has been made, what is its current status?
   
   _X_ a. Approved by IRS
   _   _ b. Denied by IRS
   _   _ c. Pending IRS determination

4. If your request has been approved or denied, please forward a copy of Internal Revenue letter informing you of their action.

   (Completed by - please sign)

   May 19, 1978
   (Date)
August 14, 1978

August G. Swanson, M.D.
Association of American Medical Colleges
One Dupont Circle, N.W.
Suite 200
Washington, D.C. 20036

Dear Gus:

I have reviewed the application of the American Society for Pharmacology and Experimental Therapeutics and believe it to be fully qualified for membership in the CAS.

Cordially,

Thomas K. Oliver, Jr., M.D.

TKO:hl
MEMBERSHIP APPLICATION
COUNCIL OF ACADEMIC SOCIETIES
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

MAIL TO: AAMC, Suite 200, One Dupont Circle, N.W., Washington, D.C. 20036
Attn: Ms. Mignon Sample

NAME OF SOCIETY: ASSOCIATION OF ACADEMIC HEALTH SCIENCES LIBRARY DIRECTORS

MAILING ADDRESS: Lane Medical Library, Stanford University Medical Center
Stanford, CA 94305

PURPOSE:
A medium for communication among directors of academic health sciences libraries
to address their common concerns of planning, program and policy development, to extend their
contacts nationally, and to provide a forum for joint action.

Objectives: Investigate the status of academic health sciences libraries concentrating
on their general conditions of existence, and to make recommendations, as appropriate, to correct
deficiencies at the national level, and to take action, where feasible, to improve these conditions
to enhance their capabilities to render support to their parent institutions. Specifically, this
would touch on such areas as increasing the effectiveness of the library in relation to health
sciences educational programs, joint planning in the development of curricula, and the improvement
of the libraries' services and staff. Clarify the status of member libraries. Develop positive
papers about funding support, whether from private, state or Federal sources. Establish close
cooperation with such related organizations as the Association of American Medical Colleges, the
Medical Library Association, the National Library of Medicine, and similar institutions and organ-
izations for mutual support and improvement of programs.

MEMBERSHIP CRITERIA:

NUMBER OF MEMBERS: *
NUMBER OF FACULTY MEMBERS: Not available
DATE ORGANIZED: 18 January 1978

SUPPORTING DOCUMENTS REQUIRED: (Indicate in blank date of each document)

1 February 1978 1. Constitution & Bylaws (The Association has Bylaws only)

1 February 1978 2. Program & Minutes of Annual Meeting (The first Annual
Meeting of the Association will be held in June 1978.
Minutes here appended are those of the Organizational
Meeting of the Board of Directors).

CONTINUED NEXT PAGE

* Membership applications are being received now. Number of regular members
will not exceed number of accredited medical schools.
QUESTIONNAIRE FOR TAX STATUS

1. Has your society applied for a tax exemption ruling from the Internal Revenue Service?
   
   X YES  NO

2. If answer to (1) is YES, under what section of the Internal Revenue Code was the exemption ruling requested?
   
   501(a) (based on 501(c)(3) and 509(a)(2))

3. If request for exemption has been made, what is its current status?
   
   a. Approved by IRS
   b. Denied by IRS
   X c. Pending IRS determination

4. If your request has been approved or denied, please forward a copy of Internal Revenue letter informing you of their action.

   13 March 1978
   (Date)
August 14, 1978

August G. Swanson, M.D.
Director
Department of Academic Affairs
Association of American Medical Colleges
1 Dupont Circle N.W.
Suite 200
Washington, D.C. 20036

Re: Application for Membership in
CAS of the Association of Academic
Health Sciences Library Directors

Dear Gus:

Dr. Marian Bishop and I were asked to look into the appropriateness of the Health Sciences Library Directors for membership in the Council of Academic Societies.

We have reviewed their membership application and find it to be in order, including approval for 501 (c) (3) by the Internal Revenue Service.

This is a new organization, having had its first meeting as recently as June 1978. Their stated purpose is "A medium for communication among directors of academic health sciences libraries to address their common concerns of planning, program and policy development, to extend their contact nationally, and to provide a forum for joint action." It thus seemed to us that their primary goal was not the advancement of education per se, although to improve the conditions of libraries and to increase their effectiveness might be considered related to the advancement of education. Even so, their primary mission would seem to be that of service and support for the various groups that make up the CAS, rather than any direct input into the medical education process. Therefore, Dr. Bishop and I feel that this application should probably be rejected, although we realize that this is a "gray zone" case, and that there is room for doubt or disagreement.

Sincerely,

[Signature]

Frank C. Wilson, M.D.

cc: F. Marian Bishop, Ph.D.
August 22, 1978

August G. Swanson, M.D.
Director
Department of Academic Affairs
Association of American Medical Colleges
1 Dupont Circle N.W.
Suite 200
Washington, D.C. 20036

Dear Gus:

Dr. Frank Wilson and I conferred by telephone August 10, 1978, regarding the application of the Health Sciences Library Directors for membership in the Council of Academic Societies and Dr. Wilson has written a memo dated August 14, 1978, detailing our recommendation.

I concur with the recommendation to reject and the reasons as outlined in his memo. It has been sometime since CAS rejected an application and it is difficult to determine where to draw the line. However, this one was "gray" enough that we are suggesting the line be drawn here.

Sincerely,

F. Marian Bishop, Ph.D., MSPH
Professor and Chairman
Community Medicine

cc: Dr. Frank Wilson
NAME OF SOCIETY: Association for the Behavioral Sciences and Medical Education (ABSAM2)

MAILING ADDRESS: College of Human Medicine
University of Wyoming
Box 3433, University Station
Laramie, Wyoming 82071

PURPOSE:  
(a) to promote the application of social and behavioral science knowledge, skills and perspectives in the education and training of physicians, nurses, and other professional persons working in the field of health;

(b) to improve the effectiveness, efficiency, and quality of health care through the application of social and behavioral science knowledge, skills, and perspectives;

(c) to encourage the improvement of educational and training practices in the preparation of physicians, nurses and other health professionals;

(d) to aid in the continuing education of teachers, clinicians, researchers and administrators involved in carrying out the above activities;

(e) to engage in any and all lawful activities incidental to and conducive to the attainment of the foregoing objectives.

MEMBERSHIP CRITERIA: The membership of the organization shall be multidisciplinary and include physicians, behavioral scientists, and other persons who have a significant interest in this field. A reasonable admixture of behavioral scientists and physicians should be maintained at all times without undue dominance by either group. The membership shall include both regular members and student members. Student physicians and graduate students interested in this interdisciplinary field are eligible for membership.

NUMBER OF MEMBERS: 327

NUMBER OF FACULTY MEMBERS: 281

DATE ORGANIZED: November 1970 - Incorporated December 7, 1975 in Pennsylvania

SUPPORTING DOCUMENTS REQUIRED: (Indicate in blank date of each document)

9 December 1975  1. Constitution & Bylaws

16-19 October 1977  2. Program & Minutes of Annual Meeting

(CONTINUED NEXT PAGE)
QUESTIONNAIRE FOR TAX STATUS

1. Has your society applied for a tax exemption ruling from the Internal Revenue Service?

   X YES  NO

2. If answer to (1) is YES, under what section of the Internal Revenue Code was the exemption ruling requested?

   501(c)(3)
   509(a)(1) & 170(b)(1)(a)(vi)

3. If request for exemption has been made, what is its current status?

   X a. Approved by IRS
   _ b. Denied by IRS
   _ c. Pending IRS determination

4. If your request has been approved or denied, please forward a copy of Internal Revenue letter informing you of their action.

   Donald A. Kennedy, Sec.-Treas.
   (Completed by - please sign)
   31 May 1978 (Date)
MEMBERSHIP APPLICATION
COUNCIL OF ACADEMIC SOCIETIES
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

MAIL TO: AAMC, Suite 200, One Dupont Circle, N.W., Washington, D.C. 20036
Attn: Ms. Mignon Sample

NAME OF SOCIETY: Society for Neuroscience
MAILING ADDRESS: Suite 110, 9650 Rockville Pike, Bethesda, MD 20014

PURPOSE: The purpose of the Society shall be (a) to advance the understanding of
nervous systems, including the part they play in determining behavior, by bringing to-
gether scientists of various backgrounds, and by facilitating the integration of
research directed at all levels of biological organization; (b) to promote education
in the neurosciences; and (c) to inform the general public on the results and implica-
tions of current research in this area.

MEMBERSHIP CRITERIA: (See attached sheet)

NUMBER OF MEMBERS: 5,400
NUMBER OF FACULTY MEMBERS: 5 Staff
DATE ORGANIZED: July 11, 1969
SUPPORTING DOCUMENTS REQUIRED: (Indicate in blank date of each document)

Revised Bylaws Sept. 1972
Constitution & Bylaws

November 1977 2. Program & Minutes of Annual Meeting

(CONTINUED NEXT PAGE)
SOCIETY FOR NEUROSCIENCE (supplemental sheet)

MEMBERSHIP CRITERIA:

Regular Members: Any scientific worker residing in Canada, Mexico, or the United States who has done meritorious research relating to the neurosciences is eligible to apply. Applications must include a curriculum vitae and list of publications.

Student Members: Pre-doctoral students at degree-granting institutions are eligible to apply for Student Membership. Applications must be sponsored by two (2) Regular Members of the Society in good standing.

Affiliate Members: All persons interested in the Society's objectives but not eligible for Regular or Student Membership may apply for Affiliate Membership. They must be sponsored by two (2) Regular Members of the Society.
QUESTIONNAIRE FOR TAX STATUS

1. Has your society applied for a tax exemption ruling from the Internal Revenue Service?
   
   _____ x  YES  ________ NO

2. If answer to (1) is YES, under what section of the Internal Revenue Code was the exemption ruling requested?

   _____ 501 (c) (3) _________

3. If request for exemption has been made, what is its current status?

   _____ x  a. Approved by IRS
   _____ b. Denied by IRS
   _____ c. Pending IRS determination

4. If your request has been approved or denied, please forward a copy of Internal Revenue letter informing you of their action.

   (Completed by - please sign) Marjorie G. Wilson, Executive Secretary

   _____ May 8, 1978 _____ (Date)
ADMINISTRATION OF THE BIOMEDICAL RESEARCH ENTERPRISE

On the following page is a letter from Dr. Gilbert S. Omenn of the Office of Science and Technology requesting AAMC's assistance in identifying and solving some of the administrative problems and non-budgetary factors which constrain the performance of biomedical research and reduce the efficiency of the overall biomedical research enterprise.

Dr. Omenn's letter raises questions which are of considerable concern to academic societies but which do not lend themselves to easy analysis or solution. It is recommended that the CAS Administrative Board review Dr. Omenn's letter and discuss an appropriate means for responding to his request.
Thomas E. Morgan, M.D.
Director, Division of Biomedical Research
Association of American Medical Colleges
Suite 200
One Dupont Circle, N.W.
Washington, D.C. 20036

Dear Tom:

I am writing to elicit your help in identifying and solving some of the administrative problems which affect the efficiency of the biomedical research establishment. I raised these issues during testimony at the Special Hearing on Basic Biomedical Research before the Senate Appropriations Subcommittee on January 19, 1978, at the FASEB Annual Meeting in Atlantic City on April 10, 1978, and at other smaller meetings. Unfortunately, we have received little or no response thus far.

President Carter is determined to sustain his strong commitment to basic research in general and health-oriented research, in particular. At the same time, the President is attempting to reduce the federal deficit and the Congress continues to mandate new responsibilities and demand administrative and fiscal accountability.

In light of these realities, it seems appropriate to take a special look at the non-budgetary factors which may constrain the performance of biomedical research and reduce the efficiency of the overall biomedical research enterprise. Examples of such constraints include:

1. the administrative demands of Federal rules and regulations covering affirmative action, equal opportunity in employment, informed consent by human subjects, animal care, laboratory safety standards, privacy, freedom of information, and others;

2. the paperwork to demonstrate accountability;

3. a decrease in grant periods and inflexibility in granting procedures;

4. rapid shifts in priorities of certain funding agencies; and

5. the loss of independence of investigators as researchers aggregate themselves into program projects and centers.
I would appreciate your assistance in defining these administrative constraints and identifying possible changes which could ease the burden they engender. The following questions may provide a useful format:

1. Which specific non-budgetary requirements, regulations, guidelines, and practices individually, or collectively, impose an excessive administrative burden on the individual investigator? Or are most of these responsibilities actually handled by administrative staff in the University?

2. For each case, how does the specific requirement affect the investigator? That is, what is the direct or indirect impact of the requirement on the investigator in terms of time, money, independence, etc.? For each case, what is the source of the requirement and its ostensible rationale?

3. For each case, what specific proposal would you make for relieving the burden on the investigator, recognizing institutional and national objectives of the various regulations and guidelines?

I realize this review will take some time and effort. However, if we are to make any progress in this area, we will need to have more specific information than I have been able to obtain thus far. Armed with such specifics, I will work with the appropriate agency officials to determine what administrative changes can be implemented.

Many thanks in advance for your help in this matter.

Sincerely yours,

Gilbert S. Omenn, M.D., Ph.D.
Assistant Director for
Human Resources and Social and Economic Services

cc: Denis Prager
MEMBERSHIP BENEFITS FOR CAS SOCIETIES

The issue of what publications are routinely distributed to CAS member societies was raised recently by a member of the American Physiological Society. The individual inquiring about this issue asked that the CAS Administrative Board reevaluate the adequacy of the information provided to the societies.

CAS societies currently receive the AAMC Weekly Activities Report, the quarterly CAS Brief, the periodic Public Affairs Newsletter, AAMC Assembly memoranda, the Journal of Medical Education, periodic CAS Alerts, and the annual CAS Directory. Because of budgetary and other factors, only two complimentary copies of other AAMC reference books (Curriculum Directory, Directory of Medical Education, and the Medical School Admissions Requirements) are sent to each institution. Although not distributed in the past to CAS societies, annual issues of the AAMC Publications Catalogue could be mailed free of charge to all CAS members to inform them of publications which they may order.
PUBLIC AFFAIRS WORKSHOP

The 1978 CAS Public Affairs Workshop is scheduled for October 25-26, 1978 during the final days of the AAMC Annual Meeting at the New Orleans Hilton Hotel. The workshop will be a repeat of the one held in Palm Beach, Florida in December 1976. Our faculty will include Larry Horowitz and Steve Lawton, staff of the Senate and House Health Subcommittees respectively; Terry Lierman and Henry Neel of the Senate and House Labor-HEW Appropriations Subcommittees; Bob Knouss, Acting Director, Bureau of Health Manpower; and Charlie Miller, Deputy Assistant Secretary for Health, DHEW. Members of the Administrative Board who have not attended a previous workshop are cordially invited (and encouraged) to attend. Social enticements include cocktails and dinner at Antoine's on the evening of October 25. Contact Tom Morgan for information and reservations.
STATUS OF CALIFANO'S INITIATIVE IN SUPPORT OF BIOMEDICAL RESEARCH

In early May, 1978, DHEW Secretary Califano initiated a Department-wide review of the support of biomedical and behavioral research and the relationship of such research to the functions and missions of the various agencies of DHEW. Don Fredrickson of NIH was given the leadership role in this activity and has discussed the Califano initiative with the various advisory councils of NIH, met with DHEW agency representatives to obtain their output, written to more than 1,000 individuals and organizations (including AAMC) requesting their assistance, and directed his staff to synthesize a document from all of the collected materials in support of the Califano initiative. Such a document is now ready for agency review and will be made available to us about September 10.

In response to Fredrickson's request, AAMC provided him with a copy of the Biomedical and Behavioral Research Policy on August 7. AAMC has been asked to make a further response to HEW at an October 3-4 NIH meeting. AAMC staff proposes that the testimony to the NIH panels be made by members of the ad hoc Committee on Biomedical and Behavioral Research Policy. Staff also proposes that the Biomedical and Behavioral Research Policy Statement form the basis of AAMC testimony. Members of the ad hoc Committee have agreed to assist with this proposal.