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ACTIONS

TAKEN AT MEETINGS OF:

Assembly (November 14, 1974)	٠	•	•	•	•	•	•	•		Z
COD Business Meeting (November 12, 1974)		•		•	•	•		•	•	4
CAS Business Meeting (November 12, 1974)				•			•			5
COTH Administrative Board (November 12, 1974)										8
OSR Business Meeting (November 11 & 12, 1974)	• .									9

ASSOCIATION OF AMERICAN MEDICAL COLLEGES
SUITE 200, ONE DUPONT CIRCLE, N.W., WASHINGTON, D. C. 20036

ASSEMBLY ACTIONS

November 14, 1974

ELECTION OF MEMBERS

ACTION: The Assembly elected the following schools to Institutional

Membership in the AAMC:

University of Massachusetts Medical School

Worcester, Massachusetts

State University of New York Stony Brook Medical School

Texas Tech University School of Medicine

University of Texas

Medical School at Houston

ACTION: The Assembly elected the following school to Provisional

Institutional Membership in the AAMC:

Wright State University School of Medicine

ACTION: The Assembly elected the following societies to Academic

Society Membership in the AAMC:

Society for Critical Care Medicine

Association for Academic Psychiatry

ACTION: The Assembly elected the following hospitals to Teaching

Hospital Membership in the AAMC:

Faulkner Hospital Boston, Massachusetts

Mayaguez Medical Center Mayaguez, Puerto Rico

McLean Hospital

Belmont, Massachusetts

Memorial Medical Center Springfield, Illinois Mulhenberg Hospital Plainfield, New Jersey

The Norwalk Hospital Norwalk, Connecticut

St. John's Hospital Springfield, Illinois

Veterans Administration Hospital White River Junction, Vermont

Wake County Hospital System, Inc. Raleigh, North Carolina

ACTION: The Assembly elected the following individuals to Emeritus

Membership in the AAMC:

Dr. Robert Hanna Felix

Dr. Walter Campbell Mackenzie

The Assembly elected the following individuals to Distin-ACTION:

guished Service Membership in the AAMC:

Dr. Donald Caseley Dr. John Knowles Dr. Carleton Chapman Dr. Robert Marston Dr. Sam Clark Mr. Matthew McNulty Dr. Ludwig Eichna Dr. Russell Nelson Dr. Harry Feldman Dr. John Nurnberger Dr. Patrick Fitzgerald Dr. Jonathan Rhoads Dr. Robert Forster Dr. David Rogers Dr. Robert Glaser Dr. Albert Snoke Dr. Charles Gregory Dr. Charles Sprague Dr. John Hogness Dr. Robert Stone Dr. Robert Howard Dr. Daniel Tosteson Dr. William Hubbard Dr. James Warren Dr. Thomas Hunter Dr. Ralph Wedgwood Dr. Thomas Kinney Dr. William Weil

ACTION: The Assembly elected 175 people to Individual Membership in

the AAMC.

AMENDMENT OF THE AAMC BYLAWS

ACTION: The Assembly voted to amend Title VI, Section 4 of the AAMC Bylaws to read:

The annual meeting of the Executive Council shall be held within one hundred twenty (120) days after the annual meeting of the Assembly at such time and place as the Chairman shall determine.

AAMC POLICY ON HEALTH MANPOWER LEGISLATION

ACTION: The Assembly voted unanimously to recommend strongly a oneyear extension of the existing health manpower legislative authorities and concurred in the recommendation of the Executive Committee that a Task Force be appointed to reconsider the Association's current policy, taking into account the views expressed by the Assembly members and by the meetings of the Councils and the OSR.

ELECTION OF OFFICERS AND EXECUTIVE COUNCIL MEMBERS

ACTION: The Assembly approved the report of the Nominating Committee and elected the following individuals to the offices indicated:

Chairman-Elect - Leonard W. Cronkhite, Jr., M.D.

Executive Council Members:

COD Representatives - J. Robert Buchanan, M.D. Neal L. Gault, Jr., M.D.

CAS Representative - Rolla B. Hill, Jr., M.D.

COTH Representatives - Charles B. Womer David D. Thompson, M.D.

Distinguished Service Member - Kenneth R. Crispell, M.D.

COUNCIL OF DEANS BUSINESS MEETING

November 12, 1974

ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The Council of Deans ratified the action of its Administrative Board and recommended for Assembly action the election of the following institutions to the AAMC membership category indicated:

- a. Institutional Member
 - The University of Massachusetts Medical School
 - The State University of New York at Stony Brook School of Medicine
 - Texas Tech University School of Medicine
 - The University of Texas Medical School at Houston
- b. Provisional Institutional Member
 - Wright State University School of Medicine Dayton, Ohio

ELECTION OF OFFICERS

ACTION: The Council of Deans elected the following slate of officers proposed by the COD nominating committee:

- a. Chairman-Elect of the Council of Deans:
 John A. Gronvall, M.D., Dean
 University of Michigan Medical School
- Member-at-Large, Council of Deans Administrative Board: Andrew D. Hunt, Jr., M.D., Dean Michigan State University College of Human Medicine

Ivan Bennett, Jr., M.D. assumed the gavel as Chairman of the Council for the coming year.

ACTIONS COUNCIL OF ACADEMIC SOCIETIES

November 12, 1974

NEW MEMBERSHIP APPLICATION

ACTION: The application for membership of the Society of

Critical Care Medicine was unanimously approved.

BORDEN AWARD

ACTION: The recommendation by the Administrative Board that

each Society submit at least one nomination for the Borden Award for Outstanding Biomedical Research

was unanimously approved.

*GAULT REPORT

ACTION:

The Council accepted the "Gault" Report as submitted in the Agenda on pages 23-24 with the following modifications.

1. Delete Paragraph No. 1 and substitute the following:

The Task Force believes that the 3-part system should not be abandoned until a suitable examination has been developed to take its place and has been assessed for its usefulness in examining medical school graduates in both the basic and clinical science aspects of medical education.

2. Delete Paragraph Nos. 2 and 3 and substitute the following:

Be it resolved that the AAMC recommend that the Coordinating Council on Medical Education and the Liaison Committee on Medical Education require as a part of the accreditation process that medical schools provide evidence of utilizing external evaluation data in the assessment of the educational achievement of students as they progress through a school's curriculum with continuing emphasis on the basic sciences.

^{*}Report of the AAMC Task Force on the Goals and Priorities Committee Report of the National Board of Medical Examiners

3. Accept the first paragraph of Paragraph No. 4 with only one recommendation (g): that graduates of both domestic and foreign schools should be required to pass the exam as a prerequisite for entrance into accredited programs of graduate medical education in the U.S.

The other sub-paragraphs listed as recommendations in this item (a-f) should be transmitted to the National Board as information items. The first three of these, a-c, should be transmitted without change. Item (d) is modified to read:

The results of the exam should be reported to the students and through the students to the graduate programs to which they are applying and to the licensing boards that require certification for graduate students.

Item (e) is modified to read:

The exam results may be reported to medical schools if they request them.

Item (f) is unchanged.

- 4. Paragraph Nos. 5, 6, and 7 are accepted without change.
- 5. A final paragraph should be added to direct the National Board of Medical Examiners to administer the examination early enough in the student's terminal year that the results can be transmitted to the program directors without interference in the matching plan.

OPTIONS FOR ASSOCIATION POLICY ON FEDERAL FUNDING OF MEDICAL SCHOOLS

ACTION: The Council voted unanimously to support the following action taken by the CAS Administrative Board on September 19:

The CAS Administrative Board voted unanimously to recommend that the AAMC be advised of the faculty's concern about the portions of the proposed HPEA bill that constrain and impinge upon the integrity of undergraduate and graduate medical education even to recommend the defeat of the total bill. The CAS Administrative Board further recommends that every Dean and every Board of Trustees seek every opportunity to obtain funding through alternative means such as tuition increases, increased support from state legislatures, or a decrease in faculty size where necessary to preserve the role of the medical schools in developing and implementing educational programs.

NOMINATING COMMITTEE

ACTION: The Council elected the 1975 Nominating Committee.

ELECTION OF MEMBERS TO 1974-75 CAS ADMINISTRATIVE BOARD

ACTION: The Council elected by ballot the following to serve

on the CAS Administrative Board effective 1974-75:

<u>Chairman-Elect</u>

Rolla B. Hill, Jr. M.D., SUNY Upstate Medical Center

For Administrative Board, from the Basic Sciences

Robert M. Berne, M.D., University of Virginia F. Marion Bishop, Ph.D., University of Alabama

For Administrative Board, from the Clinical Sciences

David R. Challoner, M.D., Indiana University
Thomas K. Oliver, Jr., M.D., University of Pittsburgh

INSTALLATION OF CHAIRMAN

ACTION: Dr. Jack W. Cole was installed as Chairman of the

Council of Academic Societies for 1974-75.

COMMENDATIONS

ACTION: In separate actions by acclamation the Council expressed

sincere appreciation and congratulations for their leadership and service to Dr. Ronald W. Estabrook, CAS Chairman for 1973-74, and to Dr. Michael F. Ball, Director of the AAMC Division of Biomedical Research, August 1, 1972-

December 30, 1974.

COUNCIL OF TEACHING HOSPITALS ADMINISTRATIVE BOARD

November 12, 1974

COTH MEMBERSHIP APPLICATIONS

ACTION:

It was moved, seconded and carried that the Audie L. Murphy Memorial Veterans Administration Hosptial in San Antonio, Texas be approved for membership in the

Council of Teaching Hospitals

Action on the Crozer-Chester Medical Center in Chester, Pennsylvania was deferred until January, and the staff was requested to seek further information on the details

of the application.

NEW COTH MEMBERSHIP CRITERIA

ACTION:

It was moved, seconded and carried that the present committee report on COTH membership criteria be tabled and that the incoming COTH Chairman appoint a new ad hoc committee of the board to review the committee report, specifically the issue of membership categorization, in light of the recent concern expressed by the Council of Deans in the AAMC Executive Council. The Board also endorsed adoption of a revised application form to assist the Board in evaluating potential members.

AMA GUIDELINES FOR HOUSE STAFF CONTRACTS

ACTION:

It was moved, seconded and carried by the COTH Administrative Board that the sense of the resolution as adopted on September 19, 1974, by the COTH Administrative Board and the AAMC Executive Council be reaffirmed. The Board went on to further note that many of the elements of the Guidelines

may be adequately delineated by the presence of the

essentials of approved residencies.

OSR BUSINESS MEETING

November 11 and 12, 1974

REVISIONS TO THE OSR RULES AND REGULATIONS

ACTION: The OSR approved a set of revisions to the OSR Rules and

Regulations.

PROCEDURES FOR AAMC DATA RELEASE

ACTION: The OSR approved a resolution requesting the AAMC to

consult with the OSR prior to the use or release of medical student names and addresses for mailings

in cooperation with outside organizations.

ELECTION OF NATIONAL OFFICERS

ACTION: The OSR elected the following national officers:

Chairperson: Mark Cannon

Vice-Chairperson: Cindy Johnson

Representatives-at-Large: Serena Friedman

Stanley Pearson Elliott Ray Phil Zakowski

HEALTH MANPOWER LEGISLATION

ACTION: The USR adopted a policy statement regarding health

manpower legislation which stated opposition to mandatory service for medical students and support for volutary programs such as the National Health Service Corps and for greater support of primary care

training on the undergraduate level.

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ACTIONS

TAKEN AT THE MEETINGS OF:

Executive Council (September 20, 1974).		• • •	•	•	•	•	•	•	•	•	•	Z
COD Administrative Board (September 19,	•	1974)	•		•					•		5
CAS Administrative Board (September 19,												
COTH Administrative Board (September 19												
OSR Administrative Board (September 13												

ASSOCIATION OF AMERICAN MEDICAL COLLEGES
ONE DUPONT CIRCLE, N.W., WASHINGTON, D.C.

EXECUTIVE COUNCIL ACTIONS

September 20, 1974

APPROVAL OF THE FY 1974 AUDITORS REPORT

On recommendation of the Association's Audit Committee, chaired ACTION:

by Robert A. Derzon, the Executive Council meeting in Executive Session approved the report of the Association's auditors,

Ernst & Ernst. for FY 1974.

ESTABLISHMENT OF AAMC FISCAL POLICY

ACTION: The Executive Council, meeting in Executive Session, established

> a fiscal policy specifying that the Association should accrue and maintain unrestricted reserve funds at a level equaling from 50% to 100% of one year's total operating budget (including both general and restricted funds). The Executive Council further stipulated that Association revenues and programs be thoroughly re-evaluated whenever the minimum level of 50% appears to be in

jeopardy.

RESIGNATION OF EXECUTIVE COUNCIL MEMBERS

ACTION: The Executive Council accepted with regret the resignations of

Dr. William D. Mayer and Dr. William F. Maloney from the Execu-

tive Council.

APPOINTMENT OF EXECUTIVE COUNCIL MEMBER

On the recommendation of the Council of Deans, the Executive

Council appointed Dr. William Luginbuhl to complete the unexpired Executive Council term of Dr. William Maloney. This term will

expire in November 1975.

RATIFICATION OF LCME ACCREDITATION DECISIONS

The Executive Council ratified the accreditation decisions of the ACTION:

Liaison Committee on Medical Education.

ELECTION OF PROVISIONAL INSTITUTIONAL MEMBER

On recommendation of the COD Administrative Board and pending ACTION:

approval of the full Council of Deans, the Executive Council recommended to the Assembly the election of Wright State University School of Medicine to Provisional Institutional Membership

in the AAMC.

ELECTION OF ACADEMIC SOCIETY MEMBER

ACTION: On the recommendation of the Council of Academic Societies Adminis-

trative Board and pending the approval of the full CAS, the Executive Council recommended to the Assembly the election of the Society for Critical Care Medicine to Academic Society Member-

ship in the AAMC.

ELECTION OF TEACHING HOSPITAL MEMBERS

ACTION: On the recommendation of the Council of Teaching Hospitals Administrative Board and pending the approval of the full COTH, the Executive Council recommended to the Assembly the election of the following hospitals to Teaching Hospital Membership in the AAMC:

Wake County Hospital System, Inc. Raleigh, North Carolina

Mayaguez Hospital Mayaguez, Puerto Rico

McLean Hospital Belmont, Massachusetts

ELECTION OF INDIVIDUAL MEMBERS

ACTION: The Executive Council recommended to the Assembly the election of 175 individuals to Individual Membership in the AAMC.

ELECTION OF EMERITUS MEMBER

ACTION: The Executive Council recommended to the Assembly the election

of Dr. Walter Campbell MacKenzie to Emeritus Membership in the

AAMC.

1974 FLEXNER AWARD

ACTION: The Executive Council approved the recommendation of the Flexner

Award Committee that Dr. John L. Caughey, Jr. receive the 1974 Flexner Award for "extraordinary individual contributions to medical schools and to the medical educational community as a

whole."

1974 BORDEN AWARD

ACTION: The Executive Council approved the recommendation of the Borden

Award Committee that Dr. Edwin D. Kilbourne receive the 1974 Borden Award for "outstanding research in medicine conducted by

a member of the faculty of an affiliated college."

AAMC POLICY STATEMENT ON NEW RESEARCH INSTITUTES AND TARGETED RESEARCH PROGRAMS

ACTION: The Executive Council approved a policy statement on New Research

Institutes and Targeted Research Programs.

STUDENT REPRESENTATIVE ON THE CCME AND LCME

ACTION: The Executive Council, with one dissenting vote, denied a request

of the Organization of Student Representatives that student representation on the Coordinating Council on Medical Education and the

Liaison Committee on Medical Education be supported.

NBME RANKING OF STUDENT PERFORMANCE

ACTION: The Executive Council, with two dissenting votes, rejected a state-

ment proposed by the Group on Medical Education asking that the National Board of Medical Examiners cease publishing information on medical school rankings of student performance on Parts I and

II of the National Board Examination.

REPORT ON COTH MEMBERSHIP CRITERIA

ACTION: The Executive Council referred back to the COTH Administrative

Board a report on COTH Membership Criteria specifically asking that the Board consider the inclusion of family medicine programs in community hospitals as an exception to the requirement for a

minimum number of residency programs.

REPORT ON JCAH STANDARDS

ACTION: The Executive Council approved the report of the COTH Ad Hoc

Committee on Standards of the Joint Commission on Accreditation of Hospitals indicating that this report was long overdue and that the letter transmitting the report to the JCAH should reflect the Executive Council's strong feelings about improving

the quality of the JCAH review process.

CCME REPORT: PHYSICIAN MANPOWER AND DISTRIBUTION

ACTION: The Executive Council approved, with minor modifications, the

CCME Report: Physician Manpower and Distribution.

AMA GUIDELINES FOR HOUSE STAFF CONTRACTS

ACTION: The Executive Council approved a statement of the COTH Adminis-

trative Board to form the basis of discussions with the AMA over

their proposed Guidelines for House Staff Contracts.

RECOMMENDATION OF THE HEALTH SERVICES ADVISORY COMMITTEE

ACTION: The Executive Council approved a recommendation of the Health

Services Advisory Committee that the AAMC provide a wider forum

for the consideration of the issues surrounding the geographic and specialty distribution of physicians and that the AAMC seek to organize technical assistance for constituent institutions addressing these problems. The Executive Council adopted a COTH proviso that the staff develop a catalog listing of institutions successfully addressing these problems and develop a technical assistance program which will be made available to the interested institutions.

ACTION:

The Executive Council voted not to approve a Health Services Advisory Committee recommendation that it support the establishment of a national health professions data base along the lines of Section 707 of Senate Bill S.3585.

CCME APPEAL OF RECOGNITION OF CHIROPRACTIC ACCREDITING AGENCY

ACTION:

The Executive Council endorsed a proposal by the Coordinating Council on Medical Education that it appeal a decision by the U.S. Commissioner of Education recognizing the Council on Chiropractic Education as an official accrediting body for chiropractic colleges.

CONSIDERATION OF HEALTH MANPOWER LEGISLATION

The Executive Council devoted a considerable portion of its meeting to a discussion of the diverse health manpower legislative proposals pending before the Congress. It was strongly felt that the Association needed to develop a distinctly new policy in this area. It was agreed that the Executive Committee would develop a succinct set of principles which would be distributed to the Executive Council and that this issue would be placed on the agenda of the three Councils and the Assembly in November.

COUNCIL OF DEANS ADMINISTRATIVE BOARD

September 19, 1974

DISTINGUISHED SERVICE MEMBERS

ACTION: The COD Administrative Board made no new nominations for

election of Distinguished Service Members.

REPORT TO CCME ON PHYSICIAN DISTRIBUTION

ACTION: The Board recommends the adoption of the report entitled

"Physician Manpower and Distribution: The Primary Care Physician." The Board views this as one in a series of potential reports relating to physician manpower distri-

bution.

AAMC POLICY STATEMENT ON NEW RESEARCH INSTITUTES AND TARGETED RESEARCH PROGRAMS

ACTION: The Board recommends that the AAMC Executive Council

approve the revised Policy Statement on New Research

Institutes and Targeted Research Programs.

RESIGNATION OF EXECUTIVE COUNCIL MEMBERS

ACTION: The Board deferred William D. Mayer's replacement on the

Executive Council to the Assembly for election this

November.

ACTION: The Board nominates to the Executive Council William H.

Luginbuhl, M.D., Dean of the College of Medicine, The University of Vermont, for election to fill Dr. William

F. Maloney's unexpired term.

NEW INSTITUTIONAL MEMBER

ACTION: The Board recommends that the Executive Council recommend

Wright State University School of Medicine to the

Assembly for election to Provisional Institutional Membership in the AAMC, contingent upon ratification by the full

Council of Deans.

HEALTH SERVICES ADVISORY COMMITTEE RECOMMENDATIONS

ACTION: The COD Administrative Board endorsed for Executive Council

action recommendation No. 1 of the Health Services Advisory Committee Report which states:

The Health Services Advisory Committee recognizes that individual institutions have made strong efforts in the direction of examining and beginning to deal with physician manpower needs, geographically and by specialty. ever, the crucial importance of the geographical and specialty maldistribution of physician manpower in the USA is such that more concerted regional and national efforts must be made by the academic medical center to help solve this problem. The Committee recognizes that the academic medical centers have a major responsibility to examine their own programs in concert with regional and national groups. The Committee therefore recommends that the AAMC immediately provide a wider forum for the urgent consideration of these issues and seek to organize technical assistance for constituent institutions for the achievement of these purposes.

ACTION:

The Board recognizes the importance of the development of appropriate data base regarding the characteristics and distribution of health professionals to effective national health policy planning. Nevertheless, the Board specifically declines to endorse the recommendation of the Health Services Advisory Committee to support the approach of Section 707 of Senate Bill S. 3585. The Board requests that a more extensive study of alternative approaches be undertaken and the advantages and disadvantages be identified.

BOARD INPUT TO ANNUAL RETREAT AGENDA

ACTION:

Because of the importance of improved communication between the Assembly and those participating in the Annual Retreat, the Board recommended that some time before the Retreat Dr. Cooper ask in his Weekly Activities Report for suggestions from the Assembly of issues which should be placed on the Retreat Agenda.

ANNUAL SURVEY OF DEANS' COMPENSATION

ACTION:

The Board endorsed the continuation of the AAMC Annual Survey of Deans' Compensation, and approved of the continued inclusion of fringe benefit data. It stressed, however, that the format of the Survey results be kept as simple as possible.

AMERICAN FACULTY TEACHING ABROAD

ACTION: The Board expressed its concern over the issue of

American Faculty teaching abroad, but would not make a recommendation at this time. Discussion of this issue is postponed until the next Board meeting at which time more detailed information will be presented.

REPORT OF COTH AD HOC COMMITTEE ON JCAH STANDARDS

ACTION: The Board recommends that the Executive Council approve

the report for transmission to the Joint Commission on Accreditation of Hospitals. The Board suggests, however,

that prior to forwarding the report, the committee examine the potential for enhancing the quality of accreditation through less frequent but more thorough

site visits.

REPORT OF THE COTH AD HOC COMMITTEE ON COTH MEMBERSHIP CRITERIA

ACTION: The Board recommends that the Executive Council approve

the Report of the COTH Ad Hoc Committee on COTH Membership Criteria and specifically approve the recommendations con-

tained therein. It is further recommended that the

Executive Council consider any modifications which might

be presented by the COTH Administrative Board.

ACTION: The Board recommends that the committee examine further the problems resulting from the trend toward the establishment of university affiliated residency programs in primary care

specialties in hospitals without the requisite number of additional programs. Recommendation No. 3 may appropriately be amended to permit exceptions to the membership criteria

in the case of such hospitals.

COUNCIL OF ACADEMIC SOCIETIES ADMINISTRATIVE BOARD

September 19, 1974

MEMBERSHIP DUES

ACTION: A motion that the Association of Teachers of Preventive

Medicine pay the assessed CAS membership dues was unani-

mously approved.

SPECIAL MEETING

ACTION: Staff were authorized to organize a meeting of the

Council of Academic Societies Administrative Board with the American Academy of Family Physicians Executive Committee and representatives of the Society of Teachers of Family Medicine. The meeting will be the evening of January 14, immediately preceding the next scheduled CAS

Board meeting.

PROPOSED HPEA LEGISLATION

ACTION:

The CAS Administrative Board voted unanimously to recommend that the AAMC be advised of the faculty's concern about the portions of the proposed HPEA bill that constrain and impinge upon the integrity of undergraduate and graduate medical education even to recommend the defeat of the total bill. The CAS Administrative Board further recommends that every Dean and every Board of Trustees seek every opportunity to obtain funding through alternative means such as tuition increases, increased support from state legislatures, or a decrease in faculty size where necessary to preserve the role of the medical schools in developing and implementing educational programs.

LCME ACCREDITATION DECISIONS

ACTION: The CAS Administrative Board voted unanimously to ratify the

LCME accreditation decisions as set forth in the Executive

Council Agenda on pages 24-26.

AAMC POLICY STATEMENT

ACTION: The CAS voted to approve the revised AAMC Policy State-

ment on New Research Institutes and Targeted Research Programs as set forth in the Executive Council Agenda on pages 36-37. One vote was cast against the motion.

STUDENT REPRESENTATION

ACTION:

The CAS Administrative Board considered the request by the OSR Administrative Board for student participation and representation in the CCME and in the LCME in the Executive Council Agenda on page 38. The CAS Administrative Board voted unanimously to accept the student's request to sit on the CCME with the recommendation that such individual serve for no less than two years. Due to the operational nature of the LCME activities, however, it was felt inappropriate to create a student seat on the LCME.

GME RESOLUTION ON NBME RANKINGS

ACTION:

The CAS Administrative Board voted to defeat the GME Resolution on NBME Rankings as set forth in the Executive Council Agenda on page 39. One vote was cast against the motion.

COTH MEMBERSHIP CRITERIA

ACTION:

The CAS Administrative Board voted unanimously to approve the Report of the COTH Ad Hoc Committee on COTH Membership Criteria as set forth in the Executive Council Agenda on pages 40-49.

JCAH STANDARDS

ACTION .

The CAS Administrative Board voted unanimously to approve the Report of the COTH Ad Hoc Committee on JCAH standards as set forth in the Executive Council Agenda on pages 53-73.

PHYSICIAN MANPOWER & DISTRIBUTION

ACTION:

The CAS Administrative Board unanimously endorsed the CCME Report on Physician Manpower and Distribution with thanks to the Committee.

VIOLATIONS OF NIRMP

ACTION:

The CAS Administrative Board unanimously approved a recommendation to the Executive Council that it direct the LCGME, after appropriate review, to take punitive action in cases of recognized violations of NIRMP.

PHYSICIAN MANPOWER DISTRIBUTION

ACTION:

The CAS Administrative Board unanimously approved the following recommendations from the Health Services Advisory Committee:

- The Health Services Advisory Committee recognizes that individual institutions have made strong efforts in the direction of examining and beginning to deal with physician manpower needs, geographically and by specialty. However, the crucial importance of the geographical and specialty maldistribution of physician manpower in the USA is such that more concerted regional and national efforts must be made by the academic medical center to help solve this problem. The Committee recognizes that the academic medical centers have a major responsibility to examine their own programs in concert with regional and national groups. The Committee therefore recommends that the AAMC immediately provide a wider forum for the urgent consideration of these issues and seek to organize technical assistance for constituent institutions for the achievement of these purposes.
- 2. The Health Services Advisory Committee recommends to the Association of American Medical Colleges that it support the establishment of a national health professions data base along the lines of Section 707 of Senate Bill S.3585. Without some such data base, any approach to health manpower planning, whether by public agency or private institution, will have little or no chance of success.

COTH ADMINISTRATIVE BOARD

September 19, 1974

COTH MEMBERSHIP APPLICATIONS

ACTION:

It was moved, seconded and carried that the following applications for membership be accepted:

Wake County Hospital System, Inc. Raleigh, North Carolina

Mayaguez Medical Center Mayaguez, Puerto Rico

It was moved, seconded and carried that the following application be approved subject to verification of a documented affiliation agreement with Harvard Medical School:

McLean Hospital
Belmont, Massachusetts

It was moved, seconded and carried that the following hospital be rejected without prejudice from membership in the Council of Teaching Hospitals and they be encouraged to reapply, upon approval of their residency programs.

Franklin Delano Roosevelt Veterans Administration Hospital Montrose, New York

REPORT OF THE COTH AD HOC COMMITTEE ON COTH MEMBERSHIP CRITERIA

ACTION:

It was moved, seconded and carried that the Board approve the report of the Ad Hoc Committee, and that it be brought before the membership at the COTH Institutional Membership Meeting in November.

CCME REPORT: PHYSICIAN MANPOWER AND DISTRIBUTION

ACTION:

It was moved, seconded and carried that the report and its objectives be endorsed and accepted by the COTH Administrative Board with the following amendments:

CCME REPORT. . .

- 1. On page 12, paragraph 3, line 3, the word "unit" following the terms "family practice" should be replaced by the word "program."
- The last sentence on page 13, Recommendation C should read: "Financial support for this development should be provided and some reallocation of resources may be essential to foster family practice residencies."

REPORT OF THE HEALTH SERVICES ADVISORY COMMITTEE

ACTION:

It was moved, seconded and carried by the COTH Administrative Board that the report of the Health Services Advisory Committee and the recommendation therein be approved with the amendment to recommendation 1 to read that:

- (A) Staff develop a catalogue listing of institutions successfully addressing the problem of geographic and specialty maldistribution and a summary of each program;
- (B) That staff detail a technical assistance program which will be available to interested institutions. Categories of technical assistance would include, but not be limited to, activities in liaison with study groups such as the Institute of Medicine and activities that ease the institutional transitions toward providing more effective primary care.

AMA GUIDELINES FOR HOUSE STAFF CONTRACTS

ACTION:

It was moved, seconded and carried that the AMA Guidelines for House Staff Contracts be rejected and the following resolution be sent to the AAMC Executive Council with recommendation that it be forwarded to the AMA.

"The Council of Teaching Hospitals, Association of American Medical Colleges, expresses its dissatisfaction with both the intent and structure of the American Medical Association's "Guidelines for House Staff Contracts," as revised August 10, 1974. The Council of Teaching Hospitals holds that individual agreements with house officers directed toward clarifying and emphasizing the educational content

AMA GUIDELINES . . .

and process of the post graduate training experience are beneficial. Primary responsibility for conduct of the graduate training program must rest with the program director and faculty/medical staff. The Council believes that the intervention of third parties, such as house officer collective bargaining agents, erodes the trainee-faculty relationship and the content, form and process of graduate training programs are adequately delineated by the essentials of approved residencies and the American Hospital Association's statement on the terms and conditions of hospital-house officer agreements as approved by the American Hospital Association's Council on Manpower and Education on March 11, 1970."

AAMC POLICY STATEMENT ON NEW RESEARCH INSTITUTES AND TARGETED RESEARCH PROGRAMS

ACTION: It was moved, seconded and carried that the COTH Administrative

Board approve the request that the policy statement be endorsed

by the AAMC Executive Council.

STUDENT REPRESENTATION ON CCME, LCME

ACTION: It was moved, seconded and carried that the COTH Administrative

Board take no position on this matter.

GME RESOLUTION ON NBME RANKING

ACTION: It was moved, seconded and carried that the COTH Administrative

Board take no position on the GME Resolution on NBME Ranking.

COTH AWARDS

ACTION: It was moved, seconded and carried that the COTH Administrative

Board reject all research proposals and that those having

submitted proposals be so notified.

OSR ADMINISTRATIVE BOARD

September 13 and 14, 1974

COMMITTEE NOMINATION

ACTION: The Administrative Board nominated Alvin Strelnick to serve

on the AAMC Committee on Admissions Assessment.

AAMC POLICY STATEMENT ON NEW RESEARCH INSTITUTES AND TARGETED RESEARCH PROGRAMS

ACTION: The Administrative Board endorsed the revised AAMC Policy

Statement on New Research Institutes and Targeted Research

Programs.

GME RESOLUTION ON NBME RANKINGS

ACTION: The Administrative Board approved the GME Resolution on

NBME Rankings.

REPORT OF THE COTH AD HOC COMMITTEE ON COTH MEMBERSHIP CRITERIA

ACTION: The Administrative Board approved the Report of the COTH

Ad Hoc Committee on COTH Membership Criteria and the

recommendations contained therein.

REPORT OF THE COTH AD HOC COMMITTEE ON JCAH STANDARDS

ACTION: The Administrative Board approved the Report of the COTH

Ad Hoc Committee on JCAH Standards.

CCME REPORT: PHYSICIAN MANPOWER AND DISTRIBUTION

ACTION: The Administrative Board affirmed the CCME Report: Physician

Manpower and Distribution.

RESOLUTIONS

ACTION: The Administrative Board approved a number of resolutions on

student evaluation, financial aid, accreditation, and health

care in prisons and referred them to appropriate AAMC

councils and groups.

OSR RULES AND REGULATIONS

ACTION: The Administrative Board approved several changes in the

OSR Rules and Regulations. A final set of revisions will be presented to the OSR at their November Business Meeting.

AAMC/OSR BULLETIN BOARD

ACTION: The Administrative Board approved the format of a mock-up

of the AAMC/OSR Bulletin Board which will be distributed as

an insert in Student Affairs Reporter.



ACTIONS

TAKEN AT MEETINGS OF:

Executive Council (June 21, 1974)						•		•	٠		1
COD Administrative Board (June 20, 1974).		•	•		•			•			5
CAS Administrative Board (June 20, 1974).		•	•	٠		•					9
COTH Administrative Board (June 20, 1974).		•	•	٠		•	•	•			12
OSR Administrative Board (June 15, 1974) .		•	•	•	•	•	•	•	•	•	16

EXECUTIVE COUNCIL GENERAL SESSION

June 21, 1974

REGULATIONS IMPLEMENTING SECTION 223 OF PL 92-603

ACTION: The Executive Council approved a six-point recommendation of

the Council of Teaching Hospitals outlining activities to be undertaken by AAMC staff and legal counsel regarding the pro-

posed Section 223 regulations.

ABMS DUES INCREASE

ACTION: The Executive Council approved payment of an increased level

of dues to the American Board of Medical Specialties and requested by their next meeting full documentation of the use

of those funds.

LCME ACCREDITATION DECISIONS

ACTION: The Executive Council ratified the accreditation decisions

made by the Liaison Committee on Medical Education at its

March 27, 1974 meeting.

ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The Executive Council, on recommendation of the Council of

Deans Administrative Board and pending the approval of the full COD, recommended to the Assembly the election to full institutional membership of the four medical schools listed

below:

University of Massachusetts - Worcester

SUNY - Stony Brook Medical School

Texas Tech University School of Medicine

University of Texas Medical School at Houston

ELECTION OF COTH MEMBERS

ACTION: The Executive Council recommended to the Assembly the election

of the two teaching hospitals listed below:

Memorial Medical Center - Springfield, Illinois St. John's Hospital - Springfield, Illinois

ELECTION OF DISTINGUISHED SERVICE MEMBERS

ACTION: The Executive Council, on the recommendation of the Council of Academic Societies, recommended to the Assembly the election of the following individuals to Distinguished Service Membership:

Thomas Kinney
Jonathan Rhoads
Daniel Tosteson
Harry Feldman
Sam Clark, Jr.
Patrick Fitzgerald
John Nurnberger

Ralph Wedgwood James Warren Charles Gregory William Weil Robert Forster Ludwig Eichna

AMENDMENT TO THE CAS RULES AND REGULATIONS

ACTION: The Executive Council approved an amendment of the Council of

Academic Societies Rules and Regulations which would modify

the composition of the CAS Administrative Board.

CCME BYLAWS CHANGE

ACTION: The Executive Council approved an amendment of the CCME Bylaws

which would change the procedure by which CCME Bylaws might be

changed.

AMENDMENT TO THE AAMC POSITION ON FOREIGN MEDICAL GRADUATES

ACTION: The Executive Council approved an amendment to the Association position on foreign medical graduates which would substitute for Recommendation #2 the following:

2. Admission Criteria - The process of certifying FMGs for admission to graduate medical education programs in the United States is inequitable and inadequate. In order to apply the same standards to all medical graduates it is recommended that a generally acceptable qualifying examination be developed as rapidly as possible and be made a universal requirement for admitting all physicians to approved programs of graduate medical education. Until such an examination becomes available, Part I and II of the National Board Examination or the FLEX examination should be required. FMGs can register for these examinations only after having demonstrated an acceptable command of spoken and written English.

ESTABLISHMENT OF A LIAISON COMMITTEE ON CONTINUING MEDICAL EDUCATION

ACTION: The Executive Council approved a proposal to establish a

Liaison Committee on Continuing Medical Education, specifying that in establishing a long-range financing plan for the LCCME all costs of that body's activities should be recovered from fees assessed to programs of continuing medical education.

STATEMENT ON THE RESPONSIBILITIES OF INSTITUTIONS, ORGANIZATIONS AND AGENCIES OFFERING GRADUATE MEDICAL EDUCATION

ACTION: The Executive Council approved a statement forwarded by the

Coordinating Council on Medical Education on the Responsibilities of Institutions, Organizations and Agencies Offering

Graduate Medical Education.

BIOMEDICAL RESEARCH MANPOWER REPORT

ACTION: The Executive Council endorsed the recommendations contained

in the report of the Seattle Biomedical Research Manpower

Conference.

ISSUES, POLICIES AND PROGRAMS OF THE AAMC

ACTION: The Executive Council approved for publication the "Green Book"

entitled, "Issues, Policies and Programs of the Association of American Medical Colleges," and stipulated that the document be distributed to the constituent members of the Association with additional distribution to be at the discretion of the

AAMC President.

AAMC POLICY STATEMENT ON NEW NIH INSTITUTES AND CATEGORICAL RESEARCH PROGRAMS

ACTION: The Executive Council asked the AAMC staff to redraft the pro-

posed policy statement for Executive Council consideration in

September.

REPORT OF THE NATIONAL HEALTH INSURANCE TASK FORCE

ACTION: After incorporating a Statement on Philanthropy recommended by

the Council of Teaching Hospitals, the Executive Council

approved the report of the National Health Insurance Task Force to form the basis of any future Association position on NHI.

REPORT OF THE AD HOC REVIEW COMMITTEE ON THE MCAAP

ACTION: The Executive Council, with three minor modifications, approved

the Report of the Ad Hoc Review Committee on the Medical College Admissions Assessment Program and concurred with the recommendations proposed by the Chairman for membership on the

Committee on Admissions Assessment.

REPORT OF THE COMMITTEE ON THE FINANCING OF MEDICAL EDUCATION

ACTION: The Executive Council approved the final report of the Sprague

Committee on the Financing of Medical Education.

AAMC STATEMENT ON MOONLIGHTING BY HOUSE OFFICERS

ACTION: After approving amendments proposed by the Council of Deans and

the Council of Teaching Hospitals, the Executive Council approved an Association Statement on Moonlighting by House Officers which

had been proposed by a committee chaired by Dr. Mellinkoff.

COUNCIL OF DEANS ADMINISTRATIVE BOARD

June 20, 1974

ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The COD Administrative Board recommends that the Executive Council nominate to the Assembly the following institutions for election to Institutional Membership in the AAMC, provided that this action is ratified by the full Council of Deans on November 13, 1974:

- University of Massachusetts Worcester
- State University of New York at Stony Brook Medical School
- Texas Tech University School of Medicine
- 4. University of Texas Medical School at Houston

AAMC POSITION ON THE REPORT AND RECOMMENDATIONS OF THE FMG TASK FORCE

ACTION: The Board recommends that the Executive Council not adopt the FMG Task Force Report at this time but refer the matter to each of the Councils for full deliberation and place this on the Agenda of the Assembly for action this November.

PROPOSAL FOR THE ESTABLISHMENT OF A LIAISON COMMITTEE ON CONTINUING MEDICAL EDUCATION

ACTION: The Board endorsed the recommendation that the Executive Council approve the establishment of a Liaison Committee on Continuing Medical Education. It is further recommended that the Executive Council specify that in establishing a long-range financing plan for the LCCME all costs of that body's activities should be recovered from fees assessed to programs of continuing medical education.

STATEMENT ON THE RESPONSIBILITIES OF INSTITUTIONS, ORGANIZATIONS AND AGENCIES OFFERING GRADUATE MEDICAL EDUCATION

ACTION: The Board endorsed the recommendation that the Executive Council ratify the <u>Statement on the Responsibilities of Institutions</u>, <u>Organizations and Agencies Offering Graduate Medical Education</u>.

DISTINGUISHED SERVICE MEMBERS

ACTION: A nominating committee to be chaired by Dr. Mayer and including Drs. Grulee and Cazort was appointed to submit names to the Council of Deans for nomination to Distinguished Service Membership.

ACTION: The Board voted to urge that the Executive Council require that nominations submitted to it for such membership be accompanied by a description of the "active and meritorious participation" in the affairs of the Council and the AAMC which justifies each candidate's election to this category of membership.

ISSUES, POLICIES AND PROGRAMS OF THE AAMC (GREEN BOOK)

ACTION: The Board endorsed the recommendation that the Executive Council approve for publication the "Green Book" entitled, "Issues, Policies and Programs of the Association of American Medical Colleges." It is further recommended that the Executive Council stipulate that the document be distributed to the constituent members of the Association with additional distribution to be at the discretion of the AAMC President.

It suggested in addition:

- That the document be distributed in looseleaf form to permit easy revision.
- That revisions be made from time to time as appropriate, but that a comprehensive revision be undertaken at least annually.
- That the revisions indicate what steps have been taken to implement the policy positions and what the status of the implementation is.
- 4. That a careful record of the distribution be made so that revisions would reach each recipient, and outdated sheets could be destroyed.

SEATTLE BIOMEDICAL RESEARCH MANPOWER REPORT

ACTION: The Board endorsed the recommendation of the Council of

Academic Societies' Administrative Board that the Executive Council endorse the recommendations of the Seattle Research

Manpower Conference.

AAMC POLICY STATEMENT ON NEW RESEARCH INSTITUTES AND TARGETED RESEARCH PROGRAMS

ACTION:

The Board urged that the Executive Council return the proposed statement to the Committee for redrafting. The Board concluded that a number of separately identifiable issues were inappropriately joined and addressed in the statement. Each of these issues should be separately addressed in a revision of the document.

REPORT OF THE NATIONAL HEALTH INSURANCE TASK FORCE

ACTION:

The following recommendation was passed with one member registering a no vote. He felt strongly that the issue of National Health Insurance should not be a concern of the AAMC since it does not fall within the purpose clause of the AAMC's charter: "the advancement of medical education."

It is recommended that the Executive Council approve the report of the national health insurance Task Force to form the basis of any future AAMC position on national health insurance.

REPORT OF AD HOC REVIEW COMMITTEE ON MCAAP

ACTION -

The Administrative Board proposed the following modifications to the Committee's recommendations for Executive Council action:

- Under the "Administrative Recommendation," 3. the following words should be added after the word assessment in the first sentence "... and for improving access for minorities to medical school admissions.
- Under the heading <u>Program Development Recommendation</u> 2,(A) the words "for the next two or three years" should be deleted.
- 3. In Appendix A, <u>Objectives of MCAAP</u>, Section 2, the words "to encourage and advocate" should be substituted for the words "to initiate and coordinate."

REPORT OF THE COMMITTEE ON FINANCING MEDICAL EDUCATION

ACTION: The Board endorsed the report of the Committee.

PROPOSED AAMC STATEMENT ON MOONLIGHTING BY HOUSE OFFICERS

ACTION: The Administrative Board endorsed the Committee's draft statement on moonlighting with the following addition: "(4) The LCGME should take the necessary steps in its process of approval of graduate medical education programs to assure compliance with the above guidelines."

GUIDELINES FOR GROUPS

ACTION: The Board recommends that the Guidelines for Groups adopted by the Executive Council in March of 1972 which appears on pp. 62 and 63 of the Executive Council Agenda Book be amended as follows:

- Statement number 2 which reads "All Group activities shall be under the general direction of the AAMC President or his designee from the Association staff" should be amended by adding the following words "and shall relate to the appropriate council as determined by the Executive Council."
- 2. Statement number 5 which reads "The activities of Groups shall be reported periodically to the Executive Council" should be amended by deleting the words "Executive Council" and substituting the words "Council designated under number 2 above."

ACTION: The Board recommended that the Group on Student Affairs, the Group on Medical Education, the Group on Business Affairs, the Group on Public Relations and the Planning Coordinators Group be designated by the Executive Council to relate to the Council of Deans.

ACTIONS COUNCIL OF ACADEMIC SOCIETIES ADMINISTRATIVE BOARD

June 20, 1974

RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: A motion to ratify LCME Accrediting Decisions (as set forth in the Executive Council Agenda Book on page 15) was approved by the CAS Administrative Board with two for the motion and four abstaining due to insufficient information on which to

make a decision.

ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The CAS Administrative Board voted unanimously to approve

for full Institutional Membership in the AAMC the four medical schools listed in the Executive Council Agenda on

page 18.

COTH MEMBERSHIP

ACTION: The CAS Administrative Board approved unanimously the hos-

pitals approved for COTH Membership as listed on page 19

in the Executive Council Agenda.

PROPOSED CHANGE IN CCME BYLAWS

ACTION: The CAS Administrative Board voted unanimously to approve

the proposed change in the CCME Bylaws as set forth in the

Executive Council Agenda on page 22.

SUGGESTED AMENDMENT TO THE AAMC POSITION ON FOREIGN MEDICAL GRADUATES

ACTION: The CAS Administrative Board voted unanimously to approve

the suggested amendment to the AAMC position on foreign medical graduates as set forth in the Executive Council Agenda on pages 23-24 with one additional modification: to delete in line 9 the phrase "(or the FLEX examination)

could)".

PROPOSAL FOR THE ESTABLISHMENT OF A LIAISON COMMITTEE ON CONTINUING MEDICAL EDUCATION

ACTION: The CAS Administrative Board voted unanimously to approve

the proposal for the establishment of a Liaison Committee on Continuing Medical Education as set forth in the Execu-

tive Council Agenda on page 28.

STATEMENT ON THE RESPONSIBILITIES OF INSTITUTIONS, ORGANIZATIONS, AND AGENCIES OFFERING GRADUATE MEDICAL EDUCATION

ACTION: The CAS Administrative Board voted unanimously to approve

the Statement on the Responsibilities of Institutions, Organizations, and Agencies Offering Graduate Medical Education as set forth in the Executive Council Agenda on page

31.

ISSUES, POLICIES, AND PROGRAMS OF THE AAMC (GREEN BOOK)

ACTION: The CAS Administrative Board voted unanimously to approve

the proposed publication and distribution of the "Green Book" entitled <u>Issues</u>, <u>Policies</u>, <u>and Programs of the AAMC as set forth in the Executive Council Agenda on page 33.</u>

AAMC POLICY STATEMENT ON NEW RESEARCH INSTITUTES AND TARGETED RESEARCH PROGRAMS

ACTION: The CAS Administrative Board modified and then approved the

AAMC Policy Statement on New Research Institutes and

Targeted Research Programs.

REPORT OF THE NATIONAL HEALTH INSURANCE TASK FORCE

ACTION: The CAS Administrative Board voted, with one abstention,

to approve the Report of the National Health Insurance Task Force as set forth in the Executive Council Agenda

on pages 36-47.

REPORT OF THE AD HOC REVIEW COMMITTEE ON THE MCAAP

ACTION: The CAS Administrative Board voted unanimously to approve

the Report of the Ad Hoc Review Committee on the MCAAP as set forth in the Executive Council Agenda on pages 49-53.

REPORT OF THE COMMITTEE ON THE FINANCING OF MEDICAL EDUCATION

ACTION: The CAS Administrative Board voted, with one abstention, to approve the Report of the Committee on the Financing of Medical Education (Charles C. Sprague, M.D., Chairman) dated May, 1974.

AAMC STATEMENT ON MOONLIGHTING BY HOUSE OFFICERS

ACTION: The CAS Administrative Board voted to approve the AAMC Statement on Moonlighting by House Officers as set forth in the Executive Council Agenda on page 56 with a modification to delete items 2(c) and 2(d) with four votes for, one against, and one abstaining.

PROGRAM FOR PROFESSORS EMERITI

ACTION: The CAS Administrative Board voted unanimously to approve the proposed program for Professors Emeriti.

APPLICATION FOR MEMBERSHIP OF THE SOCIETY FOR CRITICAL CARE MEDICINE

ACTION: The application for membership of the Society for Critical Care Medicine was approved for recommendation to the full Council with one vote cast against the motion.

COTH ADMINISTRATIVE BOARD

June 20, 1974

COTH MEMBERSHIP APPLICATIONS

ACTION:

It was moved, seconded and carried that the following applications for membership in the Council of Teaching Hospitals be accepted:

Memorial Medical Center Springfield, Illinois

St. Johns Hospital Springfield, Illinois

It was moved, seconded and carried that the following applications for membership in the Council of Teaching Hospitals be rejected until there is greater evidence of involvement in medical education:

New York Infirmary New York, New York

Wake County Hospital Systems, Inc. Raleigh, North Carolina

It was moved, seconded and carried that the following hospital be rejected without prejudice for membership in the Council of Teaching Hospitals pending signatures of both parties to the Service Agreement:

Mayaguez Medical Center Mayaguez, Puerto Rico

REPORT OF THE COTH AD HOC COMMITTEE ON MEMBERSHIP

ACTION:

It was moved, seconded and carried that the staff make every effort to determine the reasons hospitals have terminated COTH membership, and to determine why hospitals currently eligible for membership have not joined.

Additionally, Dr. Cooper was specifically requested to invite military teaching hospitals to join the Council of Teaching Hospitals.

REPORT OF THE AD HOC COMMITTEE ON JCAH STANDARDS

ACTION:

It was moved, seconded and carried that the board accept the report of the Ad Hoc Committee. The staff was directed to circulate the report to COTH members for comment; additionally, the board requested that the report be placed on the agenda of all three council administrative boards for review and action at their September meetings.

SECTION 223 OF PUBLIC LAW 92-603

ACTION:

It was moved, seconded and carried that the Administrative Board of the Council of Teaching Hospitals objects strenously to the final regulations implementing Section 223 of P.L. 92-603. The Board believes that these regulations are unsound conceptually and, in fact, threaten the financial viability of many of our nation's leading public and private teaching hospitals. Following extensive deliberation, the Board recommends to the Executive Council the following statement of position and strategy as we seek remedy against these inequitable rulings. Therefore, the Administrative Board:

- reinforces its strong support of the AAMC position as detailed in the letters to Commissioner Cardwell of April 18 and May 20, 1974;
- (2) requests AAMC staff to pursue immediately, discussions with HEW and SSA that will develop an exceptions process for over-ceiling hospitals which is expeditious and is based upon clear guidelines consistent with the original intent of the law;
- (3) requests staff to seek absolute assurances that the AAMC will have a major role in the reformulation of a classification system that will be implemented for accounting periods beginning on or after July 1, 1975;
- (4) requests staff to survey member and certain non-member teaching hospitals now to ascertain the anticipated impact of these rules;
- (5) recommends that the Execuive Council authorize: (1) legal counsel to prepare necessary legal documents at this time and (2) that the Executive Council continue the authorization of the Executive Committee to commence suit if the actions in paragraph (2) and (3) cannot be accomplished in a reasonable time period; and lastly,
- (6) suggests that the technical resources of the AAMC be available to member hospitals who seek exception or independent legal action.

AAMC STATEMENT ON MOONLIGHTING OF HOUSE OFFICERS

ACTION: It was moved, seconded and carried that the report of the Committee be accepted with the following amendment:

The amendment changed the wording of the report of item 3 as printed on page 56 of the agenda for Executive Council Meeting, June 21, 1974 to read as follows:

"3. Moonlighting by incumbents of internships and residencies approved by the Liaison Committee on Graduate Medical Education, may be permitted only if those activities are reviewed and approved by the person(s) responsible for the individual's graduate training program. House officers should be informed of the substance of this provision prior to appointment."

REPORT OF THE NATIONAL HEALTH INSURANCE TASK FORCE

ACTION: It was moved, seconded and carried that the report of the National Health Insurance Task Force be accepted with the following additions:

"Philanthropic contributions have provided non-profit hospitals with urgently needed support. Teaching hospitals, particularly, have relied upon philanthropy for support of new construction and for innovative programs. This vital support has stimulated research and development in medical care organization.

The Council of Teaching Hospitals believes that statements of the Association of American Medical Colleges concerning National Health Insurance should recognize and encourage the contribution of philanthropy to the health care system. More specifically, the tax system should continue to provide deductions from corporate and individual income taxes for charitable contributions. Second, hospital reimbursement formulas should specifically provide that unrestricted endowment principal and income, donations, legacies, bequests and other charitable contributions not be included in formulas establishing payment rates. Finally, expenditures of funds derived from philanthropy should be under the control of the Board of Trustees of the respective hospital subject only to the control of the State Planning Agency."

The Council of Teaching Hospitals requests that this amendment be included in all AAMC position statements on National Health Insurance.

STATEMENT ON FOREIGN MEDICAL GRADUATES

ACTION: It was moved, seconded and carried that the amendment on Foreign

Medical Graduates be accepted.

STATEMENT ON THE RESPONSIBILITIES OF INSTITUTIONS, ORGANIZATIONS, AND AGENCIES OFFERING GRADUATE MEDICAL EDUCATION

ACTION: It was moved, seconded and carried that the statement be accepted.

ISSUES, POLICIES AND PROGRAMS OF THE AAMC

ACTION: It was moved, seconded and carried that the staff recommendation

to publish this document be approved. It was further recommended that the Executive Council stipulate that the document be distributed to the constituent members of the Association with additional distribution to be at the discretion of the AAMC

President.

REPORT OF THE COMMITTEE ON FINANCING OF MEDICAL EDUCATION

ACTION: It was moved, seconded and carried that the Report of the Committee

on Financing Medical Education be approved.

RELATIONSHIP WITH THE ASSOCIATION OF CANADIAN TEACHING HOSPITALS

ACTION: It was moved, seconded and carried that the current financial relation-

ship with the ACTH be terminated and that all future relationships be on a fraternal basis with no exchange of dues payment. The Board further directed that the staff make every effort to continue the excellent cooperative relationships that have been developed between

the two organizations.

AMA GUIDELINES FOR MODEL CONTRACTS BETWEEN HOUSE OFFICERS AND HOSPITALS

ACTION: It was moved, seconded and carried to recommend that the Executive

Council Chairman sent a telegram to the Chairman of the AMA Board of Trustees expressing the AAMC objections to the proposed AMA Guidelines for Model Contracts Between House Officers and Hospitals.

OSR ADMINISTRATIVE BOARD

June 15, 1974

AMENDMENT TO THE AAMC POSITION ON FOREIGN MEDICAL GRADUATES

ACTION:

The Administrative Board endorsed the recommendation to the Executive Council that the COD amendment to the AAMC Position on Foreign Medical Graduates be approved with the recommended changes.

STUDENT REPRESENTATION ON THE LCME AND THE CCME

ACTION:

The Administrative Board agreed to forward to the Executive Council the request that one student representative be named to both the LCME and the CCME. The Board suggested that OSR, SNMA, and SAMA each nominate a student for each position with the LCME and the CCME making the final selection of student representation.

STATEMENT ON THE RESPONSIBILITIES OF INSTITUTIONS, ORGANIZATIONS, AND AGENCIES OFFERING GRADUATE MEDICAL EDUCATION

ACTION:

The Administrative Board approved the recommendation that the Executive Council ratify this statement.

SEATTLE BIOMEDICAL RESEARCH MANPOWER REPORT

ACTION:

The Administrative Board endorsed the recommendations made by

the Seattle Research Manpower Conference.

ISSUES, POLICIES AND PROGRAMS OF THE AAMC (GREEN BOOK)

ACTION:

The Administrative Board approved the publication of the booklet describing the issues, policies and programs of the AAMC, with the understanding that it will be distributed to all OSR representatives and updated periodically.

REPORT OF THE NATIONAL HEALTH INSURANCE TASK FORCE

ACTION: The Administrative Board approved the report of the National

Health Insurance Task Force as the basis of any future AAMC

position on national health insurance.

REPORT OF THE AD HOC REVIEW COMMITTEE ON THE MCAAP

ACTION: The Administrative Board recommended that the Executive Council

by requested to add a minority representative to the proposed

Committee on Admission Assessment.

AAMC STATEMENT ON MOONLIGHTING OF HOUSE OFFICERS

ACTION: An amendment to the AAMC Statement was approved by the

Administrative Board and forwarded to the Executive Council

for consideration.

AAMC POLICY STATEMENT ON NEW NIH INSTITUTES AND CATEGORICAL RESEARCH PROGRAMS

ACTION: The Administrative Board affirmed the AAMC Policy Statement

on New NIH Institutes and Categorical Research Programs.

COMMITTEE NOMINATION

ACTION: Elliott Ray was nominated to the GSA Ad Hoc Committee on

Professional Development and Advising.

PROCEDURES FOR RESOLUTIONS AT OSR BUSINESS MEETINGS

ACTION: The Administrative Board approved the requirement that resolu-

tions to be considered at the OSR Business Meeting be submitted thirty days in advance of the Annual Meeting to a resolutions committee for review. The resolutions committee will accept new resolutions on Sunday, November 10, but a two-thirds vote to suspend the rules of procedure will be required for resolu-

tions offered from the floor of the Business Meeting.

PROCEDURE FOR ELECTION OF NATIONAL OFFICERS

ACTION: The Administrative Board established the requirement that

nominations and curriculum vitae will be solicited thirty days prior to the Business Meeting for those candidates who wish to identify themselves in advance. Nominations will be accepted from the floor on Monday morning, November 11, with nominations closing at the beginning of Tuesday morning's Business Meeting.

OSR COMMUNICATION THROUGH AAMC PUBLICATIONS

ACTION: The Administrative Board approved the recommendation that an

insert in poster format be included in the Student Affairs Reporter

as a means of communicating OSR issues to the medical student population and recommended that the idea be further investi-

gated by staff.



A C T I O N S

TAKEN AT MEETINGS OF THE:

Executive Council (March 22, 1974)	•	.•	•	•	•		٠	•	•	- 1
COD Administrative Board (March 21, 1974)		•		•	•		•	•		6
CAS Administrative Board (March 3, 1974).	í	•	•	•	•	•	•	•		11
COTH Administrative Board (March 21, 1974	1.		•			٠		• ,		17
OSR Administrative Board (March 16, 1974)	٠,	•		•	•			•		20
	•									

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

EXECUTIVE COUNCIL

March 22, 1974

HEALTH MANPOWER LEGISLATION

ACTION: The Executive Council agreed to support the health manpower

legislative proposal developed by the Federation of

Associations of Schools of the Health Professions, after reviewing the differences between this proposal and the Krevans Committee Report which had been adopted by the Council in

December.

APPOINTMENT OF A VICE PRESIDENT

ACTION: The Executive Council appointed John F. Sherman, Ph.D. as

the first Vice President of the Association.

SETTING OF AAMC PRIORITIES

ACTION: The Executive Council approved a procedure for the setting of AAMC priorities which would:

- 1. continue the procedure of holding a Retreat for the purpose of establishing goals and priorities;
- request input to the Retreat agenda from the Executive Council and Administrative Boards at their September meetings, and from the full Councils in November;
- allow more time between the Annual Meeting and the Retreat and between the Retreat and the first Executive Council meeting;
- modify the Association Bylaws to allow the Executive Council to meet within 120 days after the Annual Meeting, and
- expand the first meeting of the Executive Council to two days.

AAALAC REQUEST FOR FINANCIAL SUPPORT

ACTION: The Executive Council tabled a motion to provide financial support for the operations of the American Association for Accreditation of Laboratory Animal Care, pending determination of the current medical school contributions to AAALAC.

APPOINTMENT OF A GAP TASK FORCE

ACTION: The Executive Council appointed a Task Force to develop an

Association position on the Goals and Priorities Committee Report of the National Board of Medical Examiners. Such a position would be forwarded to the Executive Council for re-

view and approval at its June meeting. The Executive

Council concurred with the proposed list of committee members.

APPOINTMENT OF AN MCAAP AD HOC REVIEW COMMITTEE

ACTION: The Executive Council formally received the "Final Report

of the AAMC National Task Force with Recommendations for the Medical College Admissions Assessment Program Study" and appointed an <u>ad hoc</u> review committee to study and evaluate the report and to recommend priorities and mechanisms for

its implementation. The Council concurred with the proposed

list of committee members.

NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN'S ASSISTANTS

ACTION: The Executive Council agreed to request representation on

the NCCPA with the stipulation that no financial obligation other than travel expenses of the representative will be incurred. The Council concurred with the Chairman's recommendation that Dr. Thomas Kinney be asked to represent the

AAMC.

OSR REQUEST FOR ADDITIONAL BOARD MEETINGS

ACTION: The Executive Council approved increasing the number of OSR

Administrative Board meetings from two to four meetings per year (not including meetings held at the time of the Annual Meeting). The Council reminded the OSR representatives that regular reports to the Council of Deans must be made.

RESOLUTION ON SAFEGUARDING DATA SYSTEMS

ACTION: The Executive Council tabled a motion to approve a resolu-

tion on safeguarding data systems which had been forwarded

by the OSR Administrative Board.

STUDENT PARTICIPATION IN THE NATIONAL BOARD OF MEDICAL EXAMINERS

ACTION: The Executive Council supported in principle the concept of

adding student representation to the NBME and asked the Association representatives to the National Board to report

this action.

AAMC RESPONSE TO THE IOM COST STUDY

ACTION: The Executive Council approved the following points as the basis of any Association response to the Institute of Medicine cost study:

- 1. The AAMC agrees with the IOM recognition that the federal government has a role in providing ongoing support for health professions education.
- The AAMC supports the IOM position that the federal role in supporting health professions education may be best administered through first-dollar capitation support, dependent on maintaining the present production of graduates.
- The level of capitation for medical education recommended by the IOM (\$2,450 3,900) corresponds to the basic capitation support level recommended by the AAMC Committee on Health Manpower (\$3,000).
- 4. The concept of health professional education as including components of instruction, research, and provision of health services which was utilized by the IOM in allocating costs is similar in principle to the judgments of the AAMC's Sprague Committee.
- 5. There is substantial agreement between the IOM cost figures and those determined by the AAMC's Sprague Committee, despite the empirical judgments involved in allocating costs in the highly complex process of educating physicians. The AAMC is attempting to identify the reasons for such differences as do exist in the costs determined by the two studies.

REPORT OF THE AAMC TASK FORCE ON FOREIGN MEDICAL GRADUATES

ACTION: The Executive Council, with two dissenting votes, approved the FMG Task Force Report with several amendments which had been offered by the constituent councils.

COMMENDATION OF THE FMG TASK FORCE

ACTION: The Executive Council commended Dr. Kenneth Crispell and the members of the FMG Task Force for their extraordinary efforts in presenting an excellent and scholarly report.

RELATIONSHIPS OF AAHC AND AAMC

ACTION: The Executive Council approved a document setting forth

the appropriate relationships between the Association and the Association for Academic Health Centers. This document

has not yet received final approval of the AAHC.

COALITION FOR HEALTH FUNDING

ACTION: The Executive Council endorsed the goals and purposes of

the Coalition for Health Funding and agreed to support the Coalition recommendations as a minimum level of FY 1975

health appropriations.

FINANCIAL AUTHORITIES

ACTION: The Executive Council approved adding the signature of

John F. Sherman, Vice President, to the list of individuals authorized to sign and countersign checks drawn on the following Association accounts established in the American

Security and Trust Company, Washington, D. C.

Operating Account - Checking 29-8

29-860-56-660-01

Payroll Account

29-860-36-118-01

Petty Cash Account

29-860-56-694-01

ACTION:

The Executive Council approved authorizing John F. Sherman, Vice President, to transfer funds from the Association's Savings Account on deposit with the American Security and Trust Company, Washington, D. C, Account No. 29-967-99-374, to the Operating Account and the Payroll Account of the Association in the American Security and Trust Company,

Washington, D. C.

AUTHORITY TO ACT ON SECTION 223 OF THE 1972 SOCIAL SECURITY AMENDMENTS

ACTION:

In response to a request from the Council of Teaching Hospitals, the Executive Council authorized the Executive Committee to take necessary and appropriate action in response to the regulations implementing Section 223 of

P.L. 92-603.

RENEWAL OF HILL-BURTON AUTHORITIES

ACTION: The Executive Council adopted an Association position on

the renewal of Hill-Burton authorities which would extend

the program for formula grants:

- shifting the emphasis from construction of new hospitals to modernization of existing facilities, replacement of non-conforming hospitals, and construction of outpatient facilities;
- replacing the rural-biased allotment formula with a more equitable formula based on need;
- increasing the emphasis on assistance for teaching hospitals and outpatient facilities, particularly those promoting innovative methods of providing hospital and outpatient care.

RENEWAL OF RMP-CHP AUTHORITIES

The Executive Council reached consensus on the following principles, which would form the basis of an Association position on proposals to renew RMP-CHP authorities:

- Planning, regulation and implementation should be vested in separate bodies. Planning should take place outside the state health departments.
- 2. Regulation should be a state function.
- 3. Planning should take place at the regional level
- 4. Regions for planning should not cross state lines. Planning areas should be kept large (minimum population of 50,000) with exceptions granted for sparsely populated areas.
- 5. The governing board should include as many providers as possible.
- 6. There should be minimum federal standards which states may exceed.
- There should be a mechanism for timely redress of adverse decisions.
- States should not be required to set up State Health Commissions.
 They should be given sufficient time to develop regulatory structures at the state level, according to federal norms and standards.
- In general, the Council endorses the Rogers bill, with changes in the organizational structure as noted in 1 - 7 above.

March 21, 1974

SETTING OF A.A.M.C. PRIORITIES

ACTION:

The C.O.D. Administrative Board supported the recommendation that the A.A.M.C. continue the procedure of holding a retreat for the purposes of establishing organizational goals and priorities. It was further recommended that the A.A.M.C. Executive Council and Administrative Boards, as part of their September meetings, discuss the agenda of the retreat and suggest items to be included. The Board also recommended that Executive Council Meeting following the retreat be extended from one day to two.

APPOINTMENT OF A TASK FORCE TO DEVELOP A.A.M.C. POSITION ON G.A.P. REPORT OF N.B.M.E.

ACTION:

The Board endorsed the recommendation that such a Task Force be appointed and charged with the responsibility of developing the A.A.M.C. position on this very important report. It was further recommended that this Task Force seek input from those groups such as the G.M.E. and the O.S.R. who have developed information or expressed interest in the matter.

APPOINTMENT OF AN AD HOC REVIEW COMMITTEE TO STUDY M.C.A.A.P.

ACTION: The Board recommends the appointment of an ad hoc committee to evaluate the report of the Task Force Study on the Medical College Admissions Assessment Program. If appointed, this ad hoc committee will review the Task Force report and report to the Executive Council.

In this discussion, it was suggested that the A.A.M.C.'s efforts should focus on the first such project areas listed in the "Status Report on M.C.A.A.P. Projects."

- 1. The Cognitive Assessment Battery
- 2. Formalized Assessment of Personal Qualities
- 3. Problem Solving
- 4. Pre-enrollment Guidance and Advising
- 5. Letters of Evaluation
- 6. The Interview
- Medical Student Information System

There are other organizations actively studying the evaluations of clinical performances of students and physicial performance issues (Projects eight and nine) and A.A.M.C. should take

advantage of work being done elsewhere in this area.

RESOLUTIONS ON SAFEGUARDING DATA SYSTEM

ACTION:

The Board recommends Executive Council approval of the following statement: the A.A.M.C. urges its member institutions to establish a mechanism for monitoring automated and non-automated personal data systems. There should be no personal data recordsystems whose existence is secret.

In this discussion it was concluded that specific policies on this matter would necessarily be developed at the institutional level.

A.A.M.C. RESPONSE TO THE I.O.M. REPORT

ACTION: The Board endorsed the recommended A.A.M.C. responses

to the I.O.M. report with the addition of the following phrase to the sixth point, "by looking at the two

methodologies."

REPORT OF THE A.A.M.C. TASK FORCE ON FOREIGN MEDICAL GRADUATES

ACTION: The Board approved the recommendations as stated in the A.A.M.C. Task Force Report on Foreign Medical Graduates, and as ammended by both the C.A.S. and C.O.T.H. Administrative Boards. Further recommendments from the C.O.D. Administrative Board included:

- 1. policy statement # 5: delete the word
 "minimal" in the third sentence
- 2. policy statement # 7: The second sentence in the C.A.S. amendment altered to read: "They may be accepted into special programs without the qualifications contained in the second recommendation of this report, provided these trainees are not permitted to assume independent patient care obligations and provided the training there obtained is not credited towards specialty board qualifications in this country.

This subject stimulated considerable discussion. The matter of greatest concern from the standpoint of the report itself was the recommendation that every student, whether U.S. or foreign-trained, would be required to take Parts I and II of the National Board to be eligible for appointment to approved graduate medical programs. C.O.D. Administrative Board acceptance of the report was based on the conclusions that the requirement described above can be altered when better assessment methods become available.

RELATIONSHIPS OF A.A.H.C. AND A.A.M.C.

ACTION: The Board voted to approve the document, "Relation-

ships of A.A.H.C. and A.A.M.C."

It was noted that the A.A.H.C. has not yet approved the document.

COALITION FOR HEALTH FUNDING

ACTION: The Board approved the recommendation: that the Exec-

utive Council endorse the goals and purposes of the Coalition for Health Funding and support the Coalition's recommendations both publicly and in testimony delivered

to the Congress.

MODIFICATION OF THE HILL-BURTON PROGRAM

ACTION: The Board endorsed the third option suggested by the A.A.M.C. staff recognizing that the principles of option three are not exclusive of option four. It is suggested that a consistent approach of the two options would be appropriate.

Option 3. Extend and modify the program as proposed in a 1972 A.A.M.C. staff memorandum: shifting the emphasis from construction of new hospitals to modernization of existing facilities and construction of outpatient facilities; replacing the rural-biased allotment formula with a more equitable formula based on need; increasing the emphasis on assistance for teaching hospitals and outpatient facilities; calling for priority assistance to projects for facilities which will promote the use of innovative and experimental methods of construction and methods of providing hospital and outpatient care.

The .

Option 4. Convert the program from a formula to a project-grant basis, with or without priorities for urban versus rural hosptials or for certain kinds of facilities, as proposed in legislation (S 2983) introduced February 7, 1974, by Senator Javits, and supported by the Council of Urban Health Providers.

MODIFICATION OF R.M.P.-C.H.P. PROGRAMS

ACTION: The Board voted to approve the recommendation that the Executive Council--

supports the organizational structure of the Kennedy and Rogers bill relating to health planning and regulation;

reaffirm past Association support of a Presidential panel of health advisors and independent judicial review of actions taken by health planning and regulatory bodies;

authorized the Association staff to work with appropriate legislative and Executive agencies and groups in consideration and development of necessary legislative proposals.

Discussion here revolved around the relationships of the planning, implementation, and regulatory functions.

STUDENT PARTICIPATION IN THE N.B.M.E.

ACTION:

The Board endorsed the recommendation: that the Executive Council <u>not</u> approve the O.S.R. resolution, but support in principle the concept of adding student representation to the N.B.M.E. and ask the A.A.M.C. representatives to the N.B.M.E. to report this action.

O.S.R. REQUEST FOR ADDITIONAL ADMINISTRATIVE BOARD MEETINGS

ACTION:

The Board approved the recommendation: that the Executive Council approve increasing the number of O.S.R. Administrative Board meetings from two to four (not including meetings held at the time of the Annual Meeting.)

O.S.R. REQUEST FOR BUDGET FOR AN O.S.R. BULLETIN

ACTION:

The Board endorsed the goal of incorporation of student opinion in existing A.A.M.C. publications. It was further recommended that all A.A.M.C. publications be examined from the standpoint of their continued existence, bearing in mind the importance of relevance to the student.

In the discussion, it was suggested that student concerns could be included in editorials and letters to the editor in the J.M.E., the use of local institutional publications, and reports in the President's "Weekly Activities Report."

DISCUSSION ITEMS

- The C.O.D. Administrative Board received the report of the O.S.R. Chairperson, Mr. Dan Clarke-Pearson.
- 2. The Board responded to the staff request for comments on the A.A.M.C. Faculty Salary Survey. There was some concern that the data received from the schools is not always accurate, and that not all schools respond to the questionnaire. There is a need for clarification

about the point of origin of salary data; in addition, there should be a clear distinction of base salary figures. Indications of supplementary income for geographic full time faculty is also requested.

Several Board members praised the survey, indicating that the results are useful for purposes of salary review and hiring. It was suggested that the report be released earlier in the year.

3. Staff also requested guidance on <u>Distribution of Confidential</u> Institutional Reports

ACTION: The Board recommends that Confidential reports be released only to the Dean. Requests for the data should be referred to the Dean's office for consideration. No such information should go to any other level of the University without consultation and approval of the Dean.

4. The annual C.O.D. meeting agenda was discussed; it was concluded that the Business meeting of the C.O.D. will be shortened so that a combined C.O.D./C.A.S./C.O.T.H. program can be planned for November.

COUNCIL OF ACADEMIC SOCIETIES

ADMINISTRATIVE BOARD

3/6/74

FALL MEETINGS

ACTION: The CAS Administrative Board voted unanimously to meet with the COD and the COTH in a joint session on Wednesday afternoon, November 13.

NEW APPLICATIONS

ACTION: The application of the Society of Critical Care Medicine was deferred, and the Society will be invited to send representatives to the next meeting of the Administrative Board.

ACTION: The application for membership of the Association for Academic Psychiatry was unanimously approved for recommendation to the full Council.

RECOMMENDATIONS OF THE FMG TASK FORCE

ACTION: The CAS Administrative Board voted unanimously to adopt the recommendations of the FMG Task Force as set forth in the Agenda on pages 18-20 with the following amendment:

Delete Paragraph 1, in Recommendation 7 and substitute the following paragraph:

7. Special categories - The Task Force recognizes two categories of FMG's, which require special consideration. The first category includes FMGs who are seeking limited educational objectives in this country with the full intent of returning to their home country. They may be accepted into special programs without the qualifications contained in the third recommendation of this report, provided these trainees are not permitted to assume any patient care obligations usually required of the members of the housestaff and provided the training thus obtained is not credited toward specialty board qualification in this country.

BIOMEDICAL RESEARCH MANPOWER CONFERENCE

ACTION: The CAS Administrative Board voted unanimously to approve the three recommendations derived from the Biomedical Research Manpower Conference (Seattle/Battelle) held last Fall as principles that should be endorsed by AAMC:

- 1. That the Congress establish a national commission, possibly under the auspices of the National Academy of Sciences, to help in determining the appropriate role for the federal government in the support of biomedical research and research training, with particular attention to the mission of its principal agency, the National Institutes of Health. Such a commission should have broad representation from business, labor, consumers, foundations, the scientific community, and other interested parties.
- 2. The Association of American Medical Colleges should take a leadership role in the evaluation of needs for manpower development and should call upon the assistance of voluntary health agencies. This program should also involve the biomedical scientific societies participating in the Council of Academic Societies of the AAMC in order to obtain a broad consensus of needs. The informed support of business, labor, and individual citizens should be utilized to promote a rational, national biomedical research and research training The academic medical community, the professional biomedical scientific associations and the voluntary health agencies should also develop mechanisms to foster public education regarding the implications of biomedical research programs on the public and individual health of the American citizens.
- 3. A study group should be established to evaluate biomedical research from the standpoint of optimizing contributions to health care and suggesting guidelines for the allocation of resources to basic and applied research. This group will require input of biomedical scientists and should include among its topics for consideration the factors which contribute to the career choice of students who enter biomedical research.

RESOLUTION

ACTION: The CAS Administrative Board authorized the Chairman to write a letter on behalf of the Board to the family of the late Dr. Louis Welt in appreciation of his many and significant contributions to the AAMC.

OSR PLANS

ACTION: After reviewing the OSR plans for the coming year as presented in the agenda on pages 27-34, the CAS Administrative Board took the following actions:

- 1. To request of the Executive Council that two members of the OSR be on the "GAP" Task Force.
- 2. To endorse the concept that the OSR Administrative Board meet in conjunction with the Executive Council; and
- 3. To invite OSR to submit articles by students for publication in such ongoing AAMC publications as the Student Affairs Report (STAR) as opposed to the initiation of a separate OSR newsletter.

NIRMP PROGRESS REPORT

ACTION: The CAS Administrative Board voted unanimously to recommend to the Executive Council that it establish a Task Force to evaluate in detail the NIRMP and to produce recommendations to make NIRMP a viable service in this era when the interface between undergraduate and graduate education has become quite complex.

SETTING OF AAMC PRIORITIES

<u>ACTION:</u> The CAS Administrative Board voted unanimously to approve the following proposal for setting of AAMC priorities:

- 1. That the AAMC continue the procedure of holding a retreat for the purpose of establishing goals and priorities;
- That the AAMC Executive Council and Administrative Boards, as part of their September meetings, discuss the agenda of the retreat and suggest items which they feel to be pressing concerns which the Association needs to address in the coming year. The full Councils will also be asked to contribute suggestions at their November meetings. The staff in conjunction with the AAMC Chairmen should continue to organize and coordinate the agenda items.
- 3. That the retreat continue to be scheduled between the Annual Meeting and the first Executive Council meeting. The timing between these functions should be relaxed to allow more time for circulation of the retreat agenda and to allow more time for circulation to the Executive Council of the retreat recommendations.
- 4. That the first meeting of the Executive Council be held in January and be expanded to two days (Thursday and Friday). Administrative Board meetings would then be shifted back to Wednesday. Title VI, Section 4 of the AAMC Bylaws should be amended to read, "The annual meeting of the Executive Council shall be held within 120 days after the annual meeting of the Assembly. . ."

FUTURE MEETINGS

ACTION: The CAS Administrative Board voted unanimously to invite the COTH Administrative Board to a dinner meeting prior to the June meetings of the Board to discuss mutual interests. It was specified that the agenda should be developed with the COTH Administrative Board.

 $\underline{\mathsf{ACTION:}}$ The CAS Administrative Board voted unanimously to invite on a rotating basis representatives from the societies to meet with the Board.

COUNCIL OF ACADEMIC SOCIETIES

BUSINESS MEETING

3/7/74

CHANGE IN CAS RULES AND REGULATIONS

ACTION: The CAS voted unanimously to approve the proposed change in the CAS Rules and Regulations providing for a nine-member Administrative Board, changing the term of office from two to three years, eliminating the position of Secretary, and including the Past-Chairman as a member of the Administrative Board.

DISTINGUISHED SERVICE MEMBERSHIP

ACTION: The CAS concurred unanimously in the recommendations of the Administrative Board for Distinguished Service Membership.

RECOMMENDATIONS OF THE FMG TASK FORCE

ACTION: The CAS voted unanimously to adopt the recommendations of the FMG Task Force as set forth in the Agenda on pages 22-24 with the following amendment:

Delete Paragraph 1, in Recommendation 7 and substitute the following paragraph:

7. Special categories - The Task Force recognizes two categories of FMG's, which require special consideration. The first category includes FMGs who are seeking limited education objectives in this country with the full intent of returning to their home country. They may be accepted into special programs without the qualifications contained in the third recommendation of this report, provided these trainees are not permitted to assume any patient care obligations usually required of the members of the housestaff and provided the training thus obtained is not credited toward specialty board qualification in this country.

BIOMEDICAL RESEARCH MANPOWER CONFERENCE

ACTION: The CAS voted unanimously to approve the three recommendations derived from the Biomedical Research Manpower Conference (Seattle/Battelle) held last Fall as principles that should be endorsed by AAMC:

- 1. That the Congress establish a national commission, possibly under the auspices of the National Academy of Sciences to help in determining the appropriate role for the federal government in the support of biomedical research and research training, with particular attention to the mission of its principal agency, the National Institutes of Health. Such a commission should have broad representation from business, labor, consumers, foundations, the scientific community, and other interested parties.
- 2. The Association of American Medical Colleges should take a leadership role in the evaluation of needs for manpower development and should call upon the assistance of voluntary health agencies. This program should also involve the biomedical scientific societies participating in the Council of Academic Societies of the AAMC in order to obtain a broad consensus of needs. The informed support of business, labor, and individual citizens should be utilized to promote a rational, national biomedical research and research training The academic medical community, the professional biomedical scientific associations and the voluntary health agencies should also develop mechanisms to foster public education regarding the implications of biomedical research programs on the public and individual health of the American citizens.
- 3. A study group should be established to evaluate the biomedical research from the standpoint of optimizing contributions to health care and suggesting guidelines for the allocation of resources to basic and applied research. This group will require input of biomedical scientists and should include among its topics for consideration the factors which contribute to the career choice of students who enter biomedical research.

NEW APPLICATION

ACTION: The application for membership of the Association for Academic Psychiatry was unanimously approved.

NIRMP PROGRESS REPORT

ACTION: The CAS approved the recommendation of the CAS Administrative Board to the Executive Council that it establish a Task Force to evaluate in detail the NIRMP and to produce recommendations to make NIRMP a viable service in this era when the interface between undergraduate and graduate education has become quite complex.

ACTION ITEMS COTH ADMINISTRATIVE BOARD March 21, 1974

GROUP ON PUBLIC RELATIONS:

ACTION:

It was moved, seconded and carried that the COTH Administrative Board encourage the Executive Committee of the Association to endorse the proposal that COTH member hospitals be permitted to nominate individuals for membership in the Group on Public Relations.

AAMC PRIORITIES:

ACTION:

It was moved, seconded and carried that the COTH Administrative Board endorse the recommendations contained in the staff report entitled, "The Setting of AAMC Priorities."

AAMC TASK FORCE ON FOREIGN MEDICAL GRADUATES:

ACTION:

It was moved, seconded and carried that:

1) Recommendations 1-6 be approved as written in the Task Force Report; 2) that the first paragraph of recommendation #7 be changed to read as follows:

7. Special Categories

The Task Force recognizes two categories of FMG's which require special attention. The first category includes FMG's who are seeking limited educational objectives in this country with the full intent of returning to their home country. They may be accepted into special programs without the qualifications contained in the second recommendation of this report, provided these trainees are not permitted to assume any independent and/or patient care obligations usually required of the members of the housestaff and provided the training thus obtained is not credited toward specialty board qualifications in this country.

3) That recommendation #8 as contained in the Task Force recommendations be altered to read as follows:

8. Time Table

A realistic time table should be established for the implementation of these recommendations. Particular attention should be given to avoid abrupt disruptions of patient care services in teaching hospitals and the potential economic impact.

COTH MEMBERSHIP CRITERIA:

ACTION:

It was moved, seconded and carried that Mr. Charles Womer be appointed to chair an ad hoc committee on membership criteria of the Council of Teaching Hospitals. It was suggested that membership of the committee be representative of a cross section of present COTH membership and that the committee should forward to the board its findings within a reasonable time period.

MEMBERSHIP APPLICATIONS:

ACTION:

It was moved, seconded and carried that the following application for membership in the Council of Teaching Hospitals be rejected:

Veterans Administration Hospital Salem, Virginia

It was moved, seconded and carried that the following application for membership in the Council of Teaching Hospitals be accepted:

Faulkner Hospital Boston, Massachusetts

INSTITUTE OF MEDICINE REPORT:

ACTION:

It was moved, seconded and carried that the recommendations contained in the staff report entitled, "AAMC Response to the I.O.M. Report" be approved.

MODIFICATION OF HILL-BURTON PROGRAM:

ACTION:

The COTH Board endorses the extension and modification of the Hill-Burton grant program as proposed in a 1972 AAMC staff memorandum: Shifting the emphasis from construction of new hospitals to modernization of existing facilities and construction of outpatient facilities; replacing the rural biased allotment formula with a more equitable formula based upon need; increasing the emphasis on assistance for teaching hospitals and outpatient facilities. It was further recommended that the sentence referring to innovative and experimental construction be removed from the statement.

RELATIONSHIP OF THE AAHC AND AAMC:

ACTION:

It was moved, seconded and carried that recommendations contained in the staff report entitled, "Relationships of AAHC and AAMC" be approved.

ACTIONS ORGANIZATION OF STUDENT REPRESENTATIVES ADMINISTRATIVE BOARD March 16, 1974

OSR BULLETIN

The consensus of the Administrative Board was that a separate OSR Bulletin would be more desirable than other alternatives such as a section in the STAR for OSR news. Therefore, the Board decided to endorse the concept of an OSR Bulletin and refer the question to the Executive Council for a decision.

STUDENT REPRESENTATION ON NBME

The Board discussed the issue of student representation on the NBME and agreed to request that two student representatives serve on the NBME. The Board supported the idea of an OSR representative serving as one of the three AAMC representatives to the NBME, and they agreed to forward that to the Executive Council.

OSR REPRESENTATION ON THE AAMC GAP COMMITTEE

In view of the fact that an AAMC Committee will be formed to study the GAP Report, the Administrative Board concurred that a separate OSR Task Force on Evaluation, Certification, and Licensure in Medicine would be unnecessary. The Board expressed the view that OSR representation on the AAMC GAP Committee should be equal to that of the other Councils. In an effort to ensure that student input to this Committee is as effective and representative as possible, the Board agreed to have each OSR region submit a position paper on the GAP Report to the staff to be forwarded to the Committee following the regional meetings.

OSR REPRESENTATIVES TO AAMC COMMITTEES AND TASK FORCES

The following OSR representatives were nominated to AAMC committees and task forces:

MCAAP Task Force - Ernie Turner and Tessa Fisher
NBME Task Force - Mark Cannon
JME Editorial Board - Bob Rosenbaum
Committee on Continuing Medical Education - Janet Schlechte

It was agreed that Craig Moffat, not Paul Romain, would stand as the official representative to the AAMC Committee on Financing of Medical Education.