



**association of american
medical colleges**

**AGENDA
FOR
COUNCIL OF DEANS**

**ADMINISTRATIVE BOARD
THURSDAY, JUNE 14, 1979
9 a.m. — 1 p.m.
FARRAGUT ROOM
WASHINGTON HILTON HOTEL
WASHINGTON, D.C.**

COUNCIL OF DEANS
ADMINISTRATIVE BOARD
June 14, 1979
9 a.m. - 1 p.m.
Farragut Room
Washington Hilton Hotel

AGENDA

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B. Final Report of the Working Group on National Standards Formulation and Accreditation (Executive Council Agenda)	(21)
C. Clinical Laboratory Improvement Act (Executive Council Agenda)	(59)
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- C. Review of AAMC Position on Health Planning
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 - D. Interim Report of the Graduate Medical Education
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 - E. Health Manpower Legislation
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 - F. Progress Report: Research Opportunities for
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 - G. AAMC Group Progress Report on Planning Coordinators'
Group
(Executive Council Agenda).(163)
 - H. 1980 COD Spring Meeting
(to be distributed at the Board meeting)
- VI. Old Business
- VII. New Business
- VIII. Adjournment

ASSOCIATION OF AMERICAN MEDICAL COLLEGES
ADMINISTRATIVE BOARD OF THE COUNCIL OF DEANS

Minutes

Thursday, March 29, 1979
9 a.m. - 1 p.m.
Independence Room
Washington Hilton Hotel

PRESENT

(Board members)

John E. Chapman, M.D.
Christopher C. Fordham III, M.D.
Neal L. Gault, Jr., M.D.
Richard Janeway, M.D.
Julius R. Krevans, M.D.
William H. Luginbuhl, M.D.
Allen W. Mathies, Jr., M.D.
Richard H. Moy, M.D.

(Guests)

John A. Gronvall, M.D.
Dan Miller
Peter Shields

(Staff)

Janet Bickel
Robert Boerner
Judith Braslow
John A.D. Cooper, M.D.
Betty Greenhalgh
Paul Jolly, Ph.D.
Thomas J. Kennedy, Jr., M.D.
Joseph A. Keyes
James R. Schofield, M.D.
Emanuel Suter, M.D.
August G. Swanson, M.D.
Marjorie P. Wilson, M.D.

I. Call to Order

The meeting was called to order at 9:05 a.m.

II. Report of the Chairman

There was no report given by Dr. Fordham.

III. Approval of Minutes

The minutes of the January 18, 1979, meeting of the Administrative Board were approved as submitted.

IV. Action Items

A. Election of Provisional Institutional Members

ACTION

On motion, seconded and carried, the Board endorsed the election of the following institution to Provisional Institutional Membership:

Oral Roberts University
School of Medicine

B. Report of the CCME Committee on Opportunities for Women in Medicine

The staff view of the report was presented by Judy Braslow who suggested that it was poorly written and poorly organized, failed to address specific relevant problems and displayed outdated data. Because it would probably create more problems than would be desirable if the AAMC were to fail to approve the report, the staff had identified a series of editorial changes which would make it at least minimally acceptable and recommended its approval.

Recommendation #10 was the subject of some discussion as inartfully phrased. The Board suggested that it be amended to read as follows:

The CCME should commit itself to the principle that opportunities for women in medicine are never less than men.

ACTION

On motion, seconded and carried, the Board endorsed the approval of the report with the editorial changes suggested.

C. Fiscal Year 1979 LCGME Budget

ACTION

On motion, seconded and carried, the Board endorsed the Fiscal Year 1979 budget of \$1,859,235 for the Liaison Committee on Graduate Medical Education.

D. Proposal for OSR Report on Health Legislation

In response to the stated interest of the OSR Board in having the OSR more actively involved in the legislative activities of the AAMC, staff had developed a proposal that an issue of the OSR Report be devoted to describing the legislative process

and health issues of topical concern. Because of the prospect that the publication would constitute lobbying and count against the AAMC's grass roots lobbying ceiling, and because of the possibility of overlap and potential conflict between this activity and that of the deans, the matter was brought before the Board for its consideration.

After some discussion, Board members expressed an interest in reviewing the draft OSR Report. Copies were distributed for review during a brief break. When the Board returned to this subject, members offered several suggestions of concepts to include: that becoming politically aware is an important component of the student reader's education and that all legislative proposals should be examined with the welfare and interests of patients as the first level concern.

ACTION

On motion, seconded and carried, the Board endorsed the proposed OSR Report, with the suggestions noted, and the proposal that each OSR representative be a recipient of President's memoranda on legislative matters on subjects of interest to students.

E. Meeting of House Staff on Graduate Medical Education Task Force Report

While there were some reservations expressed about the utility of obtaining the views of a limited number of housestaff who would not be viewed as necessarily representing the interests of their colleagues (since they would not be selected by their peers), there was a substantial consensus that it would be valuable to have a deliberate review of the Task Force Report by a broad based group of housestaff.

ACTION

On motion, seconded and carried, the Board endorsed the proposed meeting as described in the agenda book.

F. Advanced Placement Achievement Test

The National Board of Medical Examiners has announced its intention to limit the NBME Exam to students enrolled in accredited medical schools. Because this would leave a void in the procedures currently used to evaluate students in foreign medical schools seeking transfer to U.S. schools, the Board was contemplating the development of a new exam for this purpose.

The COD Board was asked for its views on the following questions:

- Should there be such an exam?
- If so, what should be its characteristics?
- Should the AAMC have any role as a test sponsor?

The Board concluded that an exam such as described in the background material would be useful to the schools and students alike, but that the implication of advanced placement as such be eliminated from the written material. Toward this end it was proposed that it be called the Placement Evaluation Test.

The exam would be open to anyone wishing to take the test. It would be without a passing score, but results would be given by percentile ranking and would be used by the schools as one additional datum to be considered in the evaluation of students seeking to transfer into a school.

The AAMC should have no role as sponsor of the exam.

ACTION

On motion, seconded and carried, the Board approved the proposal as modified.

V. Discussion Items

In order to facilitate attendance and discussion by appropriate staff, the discussion items were taken out of order.

C. Proposal for FLEX I & II Examination Sequence for Licensure

The Board discussed the proposal of the Federation of State Boards of Medical Licensure that had been discussed by representatives of the Board with the Executive Committee at its last meeting. The proposal was a rather straightforward adoption of the NBME GAP Report by the Federation.

Dr. Krevans recalled and reemphasized his strong dissent to the AAMC position on the GAP Report. He suggested that that that position left little room for opposing this proposal but reiterated his views that the AAMC should leave licensure matters to the appropriate state agencies and not permit the confusion of licensure and academic matters.

Dr. Luginbuhl suggested that this would be an appropriate matter for consideration at the COD Spring Meeting and urged that Dr. Cramblett and/or Dr. Casterline be invited to present the Federation's point of view.

A. LCCME Reorganization

A number of concerns were raised about the utility of the current system for accrediting continuing medical education programs. The Board developed a consensus around the following judgments:

--Authority for the accreditation of medical school CME programs should not reside with state bodies; some kind of national system with the possible involvement of the AAMC should be developed.

--Every attempt should be made to move CME accreditation away from a system involving site surveys and toward a process relying on the review of documents.

E. VA Budget

Dr. Kennedy passed out an information sheet on the VA budget for FY 80 and discussed it in the context of the recent meeting of the AAMC-VA Liaison Committee. Dr. Cooper indicated that the state schools developed with VA support had announced plans to seek assistance from the VA in addition to that authorized by the original legislation. While there was still a shortfall in the funds committed under the initial program, which the AAMC should fight for on behalf of these schools, Dr. Cooper questioned whether the AAMC should support, oppose, or remain silent regarding these schools' efforts to receive additional assistance. The Board was of the view that the AAMC should remain silent on this issue.

Dr. Krevans argued that the medical care budget recommendation proposed was unrealistic. With the number of people cared for increasing, this budget will result in a decline in the quality and efficiency of care. He proposed a 5.9% increase as consistent with the President's cost and inflation control proposals. This was adopted over Dr. Luginbuhl's objection to the AAMC lending its support to the VA medical care system. In his view it is outmoded, anachronistic and deserving of being phased down and out.

B. Essentials of Accredited Residencies

Dr. Swanson presented the document and pointed out its emphasis on institutional responsibility. He also noted three specifics: 1) the fifth pathway was not mentioned and there was no requirement that FMG's take a year of clerkship before being eligible to enter GME programs; 2) there was a change in the designation of program types; and 3) there was a strong emphasis on participation in NRMP.

Dr. Swanson solicited expressions of concern or recommendations from Board members. Dr. Janeway expressed concern over the provision on page 17, sec. 3.1.2. which countenanced the exclusion of osteopathic physicians from some programs under specified conditions.

VI. Information Items

A. State Legislation on Standardized Tests

The activity in several state legislatures directed to regulating standardized tests, mandating disclosure of test items and testing procedure was brought to the Board's attention.

B. Medical School Clusters of Special Interest Groups

Dr. Wilson discussed the interest of medical school deans to meet together with others of similar interests and concerns. She asked for the Board's reaction to her proposal that these groups use the term "Section" to describe themselves, e.g., the New and Developing Schools Section of the Council of Deans. While it was noted that this term was used to designate components of groups, the Board concluded it would be an appropriate use of the term.

VII. Adjournment

The meeting adjourned at 12:55 p.m.

NOMINATION OF DISTINGUISHED SERVICE MEMBERS

It has been traditional at the June meeting of the Administrative Board to authorize the appointment of a two or three member committee of the Board to solicit recommendations from the Council of Deans for nominees for Distinguished Service Membership. The attached material reflects the format of the prior years' solicitation.

RECOMMENDATION

That the Board authorize the appointment of a committee to solicit and screen recommendations for Distinguished Service Members.

Attachment



association of american medical colleges

MEMORANDUM

TO: Members of the Council of Deans

FROM: Joseph A. Keyes *J.A.K.*

SUBJECT: Nominations for Distinguished Service Membership

The Administrative Board of the Council of Deans is inviting nominations for Distinguished Service Membership in the Association of American Medical Colleges. The Board has authorized its chairman to appoint a nominating committee which would solicit recommendations from the general membership of the Council of Deans. The committee has been appointed and consists of:

The Association Bylaws provide that:

"Distinguished Service Members shall be persons who have been actively involved in the affairs of the Association and who no longer serve as AAMC representatives of any membership described under Section 1." (Section 1 established nine classes of institutional, academic society and teaching hospital members.)

The Bylaws further provide that:

"Distinguished Service Members will be recommended to the Executive Council by either the Council of Deans, the Council of Academic Societies, or the Council of Teaching Hospitals." (Article 1, Section 3E).

The procedures established by the Administrative Board require that each candidacy be supported by a description of the "active and meritorious participation of the candidate in the affairs of the AAMC while a member of

the Council of Deans." If you would like to propose a candidate, please forward your suggestions with appropriate supporting materials no later than August 15 to:

Joseph A. Keyes, Director
Division of Institutional Studies
AAMC
1 Dupont Circle, N.W.
Suite 200
Washington, D.C. 20036

This will permit the nominations to be considered by the committee, the Administrative Board and the Executive Council at their September meetings and referred to the Assembly at the time of the Annual Meeting. For your information, we are providing a list of those Distinguished Service Members who have been elected through nomination by the Council of Deans.

Enclosure

DISTINGUISHED SERVICE MEMBERS
Council of Deans

George N. Aagaard, M.D.
Chairman, Department of Clinical
Pharmacology
University of Washington

William G. Anlyan, M.D.
Vice President for Health Affairs
Duke University

Peter B. Bosomworth, M.D.
Vice President for Medical Center
University of Kentucky

Carleton B. Chapman, M.D.
Vice President
Commonwealth Fund

Kenneth R. Crispell, M.D.
formerly V.P. for Health Affairs
University of Virginia

Merlin K. DuVal, M.D.
National Center for Health Education
San Francisco

Robert J. Glaser, M.D.
President
The Henry J. Kaiser Family Foundation

Clifford G. Grulee, M.D.
Dean
Rockford School of Medicine

John R. Hogness, M.D.
President
University of Washington

Robert B. Howard, M.D.
Director of Medical Education
Abbott-Northwestern Hospital

William H. Hubbard, Jr., M.D.
President
The Upjohn Company

Andrew D. Hunt, M.D.
Medical Humanities Program
Michigan State University

Thomas H. Hunter, M.D.
Professor of Medicine
University of Virginia

Leon O. Jacobson, M.D.
Franklin-McClean Research Institute

Philip R. Lee, M.D.
Professor of Social Medicine
University of California at
San Francisco

Robert Q. Marston, M.D.
President
University of Florida

William Mayer, M.D.
Assistant Chief Medical Director
for Academic Affairs
Veterans Administration

Manson Meads, M.D.
Vice President for Medical Affairs
The Bowman Gray School of Medicine

Stanley Olson, M.D.
Provost
Northeastern Ohio Universities

Richard R. Overman, M.D.
Vice Chancellor for Academic Affairs
University of Tennessee

John W. Patterson, M.D., Ph.D.
formerly V.P. for Health Affairs
& Executive Director of the
Health Center
University of Connecticut
School of Medicine

David E. Rogers, M.D.
President
Robert Wood Johnson Foundation

Cheves McC. Smythe, M.D.
Professor of Medicine
University of Texas at Houston

Robert D. Sparks, M.D.
Program Director
W.K. Kellogg Foundation

Charles C. Sprague, M.D.
President
University of Texas Health Science
Center at Dallas

Lewis Thomas, M.D.
President
Memorial Sloan-Kettering Cancer Center