



**association of american  
medical colleges**

**AGENDA  
FOR  
COUNCIL OF DEANS**

**ADMINISTRATIVE BOARD  
THURSDAY, JUNE 25, 1981  
9 a.m. — 12:30 p.m.  
INDEPENDENCE ROOM  
WASHINGTON HILTON HOTEL  
WASHINGTON, D.C.**

COUNCIL OF DEANS  
ADMINISTRATIVE BOARD  
Thursday, June 25, 1981  
9:00 a.m. - 12:30 p.m.  
Independence Room  
Washington Hilton Hotel

AGENDA

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

Minutes

Thursday, March 26, 1981  
9:00 a.m. - 12:30 p.m.  
Independence Room  
Washington Hilton Hotel  
Washington, D.C.

PRESENT

(Board members)

Steven C. Beering, M.D.  
David R. Challoner, M.D.  
John E. Chapman, M.D.  
John W. Eckstein, M.D.  
Richard Janeway, M.D.  
William H. Luginbuhl, M.D.  
Allen W. Mathies, Jr., M.D.  
Richard H. Moy, M.D.  
Leonard M. Napolitano, Ph.D.  
Edward J. Stemmler, M.D.

(Guests)

Lisa Capaldini  
Grady Hughes  
Julius R. Krevans, M.D.  
Manson Meads, M.D.  
Thomas K. Oliver, Jr., M.D.

(Staff)

Janet Bickel  
Robert Boerner  
John A. D. Cooper, M.D.  
Betty Greenhalgh  
Thomas J. Kennedy, Jr., M.D.  
Joseph A. Keyes  
Mary McGrane  
James R. Schofield, M.D.  
John F. Sherman, Ph.D.  
Kathleen Turner  
Marjorie P. Wilson, M.D.

I. Call to Order

The meeting was called to order at 9:10 a.m. Dr. Beering welcomed Dr. David Challoner, the new Board member present. He was presented with an AAMC tie.

II. Report of the Chairman

Dr. Beering asked Joseph Keyes to briefly discuss the program scheduled for the AAMC Annual Meeting to be held October 31-November 5 at the Washington Hilton Hotel. Mr. Keyes described the basic format which will consist of a Monday morning Plenary Session; the COD Administrative Board Luncheon and the COD Business Meeting will both be held on Monday afternoon. On Tuesday morning there will be an Assembly Meeting and a Plenary

Session. Tuesday afternoon there is a Special General Session planned, "Academic Functions in an Increasingly Commercial Hospital Environment."

At last year's Annual Meeting, the leadership of the Society of Medical College Directors of Continuing Medical Education met with the leadership of the COD. The conclusion of that meeting was that a future joint meeting between the full COD and the CME directors would be a good idea. Thus, plans are underway for such a meeting at this year's Annual Meeting. Dr. Richard Byrne was asked to keynote a session to be held from 8:00 pm - 10:00 pm on Sunday, November 1. Although he was unable to speak at that time, he would be available to speak on Saturday. Board discussion disclosed a consensus that it is unlikely there would be an adequate audience on Saturday night. The Board judged that Sunday night would be more conducive to a larger attendance. The Board agreed to a joint meeting on Sunday night with another speaker; the topic would focus on the role of telecommunications in the health professions or in medical education. Mr. Keyes asked for suggestions of speakers. The Board also approved continued planning for a forum on the public general hospital to be held during the Annual Meeting to which appropriate deans and hospital directors would be invited.

Dr. Beering then reported on the collaborative efforts of the AAMC, Association of American Universities, and the National Association of State Universities and Land-Grant Colleges regarding indirect costs. At a recent meeting in St. Louis which Drs. Beering, Cooper, and Sherman attended, it became apparent that there was an urgent need for continuous one-on-one communication between deans and university presidents on significant national issues.

Finally, Dr. Beering gave a very brief synopsis on several items discussed earlier at the Executive Committee meeting: the medicaid capitation testimony which the Department of Teaching Hospitals is working on and what the AAMC position should be; the National Board of Medical Examiners' planning in conjunction with the Federation of State Medical Boards for implementing a FLEX I - FLEX II sequence as a single route to licensure; and a letter from Dr. Butler at the National Institute on Aging.

### III. Approval of Minutes

The minutes of the January 29, 1981, meeting of the Administrative Board were approved as submitted.

### IV. COD Rules and Regulations Changes

The Executive Committee had expressed its intention to propose changes in the AAMC Bylaws which would, in effect, codify and regularize the practices of the Council of Academic Societies and the Council of Teaching Hospitals with respect to membership on their respective Administrative Boards and the Executive Council of their Chairman-Elect and Immediate-Past-Chairman.

The proposal discussed at the Officers' Retreat would make these two positions on each of the three constituent Councils and the Executive Council ex officio members of the Executive Council.

In recognition of the fact that this ex officio membership not only provides additional and desirable stability to the Administrative Board and Executive Council, but also has the effect of limiting the number of elective positions on the Board and thus limits "new blood" being brought into the organization, the proposed COD Rules and Regulations changes would provide for the addition of two members-at-large on the Board (for a total of three such members). These positions would continue to carry a one year term to permit maximum potential for turnover. These additions would bring the COD Board to a size comparable to those of the other constituent Councils.

Other changes in the Rules and Regulations include removing several anachronisms: the specification of a meeting with the AMA Congress on Medical Education; and the requirement that groups meet on a regional basis at least once a year.

Before the COD Nominating Committee could proceed with its work, it was necessary to acquire the Board's approval of these changes.

#### ACTION

On motion, seconded, and carried, the Administrative Board adopted the proposed Rules and Regulations changes and recommended their approval by the Executive Council.

#### V. OSR Report

Lisa Capaldini, OSR Chairperson, reported that most of their meeting was devoted to a discussion of the items contained in the Executive Council agenda and thus she would comment on those issues at the appropriate time during the Executive Council meeting. She also announced that the OSR had begun to make plans for the Annual Meeting, including the Women in Medicine program. As a follow-up to the Administrative Board's last meeting, Ms. Capaldini reported on the status of the Consortium of Medical Student Organizations. After more discussion at the OSR meeting, the OSR decided to present its problem to the Consortium, allowing it to decide whether to change its structure to be more consistent with the status of the OSR within the AAMC (i.e. to refrain from developing and announcing policy positions) or to provide for a new membership category which would make the OSR leadership a participant in the discussions but not a "signator" on policy pronouncements.

#### VI. Election of Institutional Members

On motion, seconded, and carried, the Board endorsed the election of the following institutions to Full Institutional Membership in the AAMC:

East Carolina University School of Medicine  
Marshall University School of Medicine

VII. General Requirements of the Essentials

In January representatives of the Accreditation Council for Graduate Medical Education and the Council for Medical Affairs met to resolve differences among the five parent organizations on the General Requirements section of the Essentials of Accredited Residencies in Graduate Medical Education. The revised version of the General Requirements was approved by the ACGME at its February meeting and has been sent to the ACGME sponsoring organizations for approval.

Board members were concerned about the provision granting the unrestricted eligibility of U.S. foreign graduates into residency training if they are licensed in any state. The fear was that this was an insufficient quality control mechanism.

Dr. Cooper urged that the new set of Essentials be approved because failure to do so will continue in effect the present Essentials which are worse than the proposed ones. He suggested that we note our dissatisfaction and urge that the document be amended quickly.

ACTION

When it became apparent that this concern could still be dealt with in the foreseeable future, the Board voted six to three to recommend that the Executive Council approve the General Requirements section of the Essentials of Accredited Residencies in Graduate Medical Education.

VIII. USFMS Committee --- Status Report

This item was brought up only briefly because it would be discussed in greater detail at the Council of Deans Spring Meeting in Colorado Springs.

IX. GSA Resolution on Completion of Admission Process by May 15

Robert Boerner of the AAMC staff briefly summarized the material contained in the Executive Council agenda. The Group on Student Affairs voted at its 1980 Annual Business Meeting to propose that all U.S. medical schools complete the admissions process by May 15 each year prior to the fall matriculation of students. After unanimous approval, this recommendation was sent to all admissions officers of U.S. medical schools with a copy to the dean. Eleven responses had been received with only three citing reasons why their school could not comply with the recommendation. The other eight supported the resolution.

ACTION

It was moved, seconded, and carried, that the following should be added to the "Recommendations of the AAMC Concerning Medical School Acceptance Procedures" as a new recommendation number 6.

6. By May 15 each medical school should have made sufficient offers of acceptance to fill all places in its first-year class.

X. Student Financial Assistance

A position paper prepared by the Financial Aid Committee of the Group on Student Affairs, which had been approved by the GSA Steering Committee, was contained in the Executive Council agenda. The basic concerns of the committee addressed preserving the access to medical education among minorities and keeping within reasonable limits the indebtedness of the graduates of a medical education program.

Lisa Capaldini, OSR Chairperson, described the OSR concerns of local and institutional problems of financial aid citing inconsistency from school to school as a confusing factor in the availability of financial aid. In addition, most financial aid officers still consider parental resources when evaluating eligibility for financial aid whether or not either the student or the parents consider the student "emancipated" or whether or not there is commitment on the part of the parents to provide support. Therefore, parental independence is a specific concern among the OSR Board members.

There was a question among Board members as to the actual position of the AAMC since there were some inconsistencies between testimony given by Dr. Stemmler on behalf of the AAMC, the submitted written statement and this current statement. After some suggestions from Board members, it was decided to postpone any recommendations by the COD Board, pending further consideration of the matter at the full COD Spring Meeting.

XI. Legislative and Budget Matters

These matters were discussed only briefly because they would be a major focus for discussion at the COD Spring Meeting. Dr. Kennedy had prepared various handouts for the Board on the Health Manpower and Omnibus Bills. Dr. Sherman explained the importance of discussing the process and strategies available to our constituents at the Spring Meeting in Colorado Springs. Material on the legislative and budget process would be distributed to COD members at the beginning of the meeting, allowing time for a general review and the development of additional materials. The topics would be discussed again at the Wednesday morning business meeting. The point Dr. Sherman emphasized to the COD Board was that we are dealing with poorly informed people in Washington and thus need to initiate a massive educational effort at both the Congressional and Executive Branch. The most effective way of conducting this educational effort is through the individual members of the AAMC.

XII. Report of the Ad Hoc Committee on Competition

Peter Butler of the AAMC staff appeared before the Board to discuss this report. Since the previous discussion on the report at the January Board meeting, the report had been modified to include a section on faculty practice plans and volunteer faculty. In addition, this new version reflected an attempt to better define competition. The committee recommended adopting the new version, Version 1, as contained in the agenda.

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## ACTION

On motion, seconded, and carried, the Board recommended that the Executive Council approve the first version of the report for distribution to AAMC constituents and other interested parties.

### XIII. Health Planning Legislation

Peter Butler briefly discussed the position of the AAMC on the National Health Planning Program, the outline of which was approved by the Board in January. It now appears that the AHA is about to change its position and thus it is possible that the COTH Board may recommend a revised AAMC position after more discussion with the AHA Washington office. Mr. Butler asked Board members for ideas on this issue, but did not seek specific recommendations.

### XIV. Due Process for Students and Residents

Mr. Keyes reminded Board members that this same subject was discussed at the last Board meeting in January. Since the paper that had been prepared for that meeting seemed inappropriate, a new paper describing the process was prepared for this meeting and was included in the Executive Council agenda. Board members generally agreed that this was an improved statement and the question before the Board was whether or not this memorandum satisfactorily covered all of the points we wished to address and thus could be sent out as a pink memorandum to members of the Assembly. Since the document will be available for discussion by the full COD in Colorado Springs, the Board recommended that we wait until after the Spring Meeting to send this out as a pink memo.

### XV. Possible AAMC Activities in Geriatric Medicine

The Association, in the past, has not overly identified itself nor has it undertaken particular efforts with respect to specific categorical interests because of its primary concern with the comprehensiveness of medical education. Geriatric medicine, however, involves a sufficiency of unusual characteristics to suggest the desirability of reviewing that general attitude. Dr. Robert Butler, Director of the National Institute on Aging, has approached the Association in regard to considering greater cooperation with the Institute.

Although the Association has recognized, through testimony and correspondence, the health needs of the elderly, additional possibilities which could be explored in cooperative fashion with the Institute on Aging were discussed with Dr. Butler and his colleagues. Options included: holding a jointly sponsored major conference of medical center officials and faculty which would have as its theme the challenge of adapting medical centers to meet the needs of the elderly; establishing a grant program by the NIA to identify and facilitate the training of young physicians for academic positions with an emphasis on geriatric medicine; including the special problems of the elderly as part of the AAMC's proposed study of undergraduate medical education; sponsoring a meeting by the NIA in conjunction

with the 1982 AAMC Annual Meeting to provide visibility among the various constituencies of the Association; and inviting Dr. Butler to speak at a forthcoming Executive Council meeting.

The question before the Board was whether or not these were reasonable and acceptable possibilities. It was the consensus of Board members that the AAMC position should remain exploratory and that these and other possibilities can continue to be discussed for implementation in the future.

XVI. Memorandum to the Federation of State Medical Boards and the National Board of Medical Examiners

Mr. Keyes explained that the NBME was holding a meeting the next day to announce their intention to enter into a formal agreement with the Federation to proceed with the implementation of the single route to licensure. This had been the subject of the recent CAS Interim Meeting as well as the focus of the Association's External Examination Review Committee. The AAMC would have two representatives at that meeting and the Board discussed how to best call to the attention of the NBME the opposition of the Association. Mr. Keyes read a proposed memo that the Executive Committee was considering sending to that meeting. In it the Association urged that the NBME not act precipitously to enter into this now but to undertake further deliberations. After a brief discussion the Board decided to continue the discussion with the CAS at the Executive Council meeting and at that time come to a decision on its approach to the NBME proposal.

XVII. Adjournment

The meeting was adjourned at 12:40 pm.

PROPOSED DATES AND SITES FOR THE 1983 COD SPRING MEETING

On the basis of an examination of holidays and already scheduled meetings which might conflict with the 1983 COD Spring Meeting, the staff proposes that the Board approve the following dates:

Wednesday, April 6 - Saturday, April 9

SCHEDULE OF 1983 MEETINGS

COD Ad Board/Executive Council	March 24 or 31
Am. College of Surgeons	April 11-14
Passover	March 29-April 5
Easter	April 3
FASEB	April 10-15
Am. College of Physicians	April 11-14
Am. Ass. of Neurological Surgeons	April 24-28
AFCR, ASCI, AAP	April 31-May 2
Pediatric Research	May 3-6
Am. Soc. of Internal Medicine	April 28-30

With the above set of dates in mind, we have begun making inquiries for an appropriate site for our 1983 COD Spring Meeting. The data which we have compiled thus far is found on the following pages.

	S	M	T	W	T	F	S		S	M	T	W	T	F	S
JAN	2	3	4	5	6	7	8		JUL	3	4	5	6	7	8
	9	10	11	12	13	14	15			9	10	11	12	13	14
	16	17	18	19	20	21	22			15	16	17	18	19	20
	23	24	25	26	27	28	29			21	22	23	24	25	26
	30	31								27	28	29	30		
FEB	6	7	8	9	10	11	12		AUG	1	2	3	4	5	6
	13	14	15	16	17	18	19			7	8	9	10	11	12
	20	21	22	23	24	25	26			13	14	15	16	17	18
	27	28								19	20	21	22	23	24
MAR		1	2	3	4	5			SEP	4	5	6	7	8	9
	8	9	10	11	12					10	11	12	13	14	15
	13	14	15	16	17	18	19			16	17	18	19	20	21
	20	21	22	23	24	25	26			22	23	24	25	26	27
	27	28	29	30	31					28	29	30	31		
APR	3	4	5	6	7	8	9		OCT	2	3	4	5	6	7
	10	11	12	13	14	15	16			8	9	10	11	12	13
	17	18	19	20	21	22	23			14	15	16	17	18	19
	24	25	26	27	28	29	30			20	21	22	23	24	25
										26	27	28	29	30	31
MAY	1	2	3	4	5	6	7		NOV	1	2	3	4	5	6
	8	9	10	11	12	13	14			7	8	9	10	11	12
	15	16	17	18	19	20	21			13	14	15	16	17	18
	22	23	24	25	26	27	28			19	20	21	22	23	24
	29	30	31							25	26	27	28	29	30
JUN	5	6	7	8	9	10	11		DEC	4	5	6	7	8	9
	12	13	14	15	16	17	18			10	11	12	13	14	15
	19	20	21	22	23	24	25			16	17	18	19	20	21
	26	27	28	29	30					22	23	24	25	26	27
										28	29	30	31		

<b>LEGAL NATIONAL HOLIDAYS</b>		<b>OTHER IMPORTANT DATES</b>
New Year's Day	JAN. 1	Ash Wednesday
Washington's Birthday	FEB. 21	Good Friday
Memorial Day	MAY 30	Easter Sunday
Independence Day	JULY 4	Passover
Labor Day	SEPT. 5	Mother's Day
Columbus Day	OCT. 10	Father's Day
Veterans Day	OCT. 24	Rosh Hashana
Thanksgiving Day	NOV. 24	Yom Kippur
Christmas Day	DEC. 25	Election Day
		NOV. 8

1983

NAME AND LOCATIONFEATURESCOMMENTS

The Broadmoor  
Colorado Springs, Colorado

April 1981 Rates --

Main \$56 Single  
\$59 Double

South \$67 Single  
\$70 Double

West \$82 Single  
\$85 Double

PREFERRED DATES NOT  
AVAILABLE BUT ARE  
TENTATIVELY HOLDING  
APRIL 20-23

Claremont Resort Hotel &  
Tennis Club  
Oakland, California

Resort hotel set on 22 acres; 10 day/  
night tennis courts; 1 pool; hotel  
will provide transportation to golf  
which is minutes away at Tilden Golf  
Course; complimentary transportation  
provided to and from Oakland International  
Airport; from San Francisco, transportation  
can be arranged through the limo service at  
\$12/person; only 1 dining room in hotel--  
suggest scheduled breakfasts and luncheons  
for entire group

HOLDING ROOMS ON A  
TENTATIVE BASIS

1981 Rates -- \$58 Single  
\$68 Double

Grenelefe Golf & Tennis Resort  
Haines City, Florida

Condo villa type of resort; 2 golf courses,  
4 pools, 12 tennis courts; 45 minutes from  
Orlando International Airport with hotel  
van transportation to and from for \$30/  
person/round trip

HOLDING ROOMS ON A  
TENTATIVE BASIS

1981 Rates -- \$85 Single or Double regular hotel room  
1982 Rates \$115 one-bedroom suite

<u>NAME AND LOCATION (CONT'D)</u>	<u>FEATURES</u>	<u>COMMENTS</u>
Seascape Resort & Conference Center Destin, Florida	200 acre resort with condo accommodations located on panhandle of Northwest Florida between Panama City and Pensacola; airline connections in Atlanta to Eglin Air Force Base which is 23 miles from the hotel; 1-golf course; 8 tennis courts; 2 pools  1982 Rates -- \$59 1 bedroom - 1 bath \$70 2 bedrooms - 1 bath \$75 2 bedrooms - 2 baths \$97 3 bedrooms - 2 baths	
Sheraton Old Town Albuquerque, New Mexico	Hotel is adjacent to historic Old Town; 2 tennis courts; pool; golf is 15 minutes away; complimentary airport transportation  1981 Rates -- \$50 Single \$55 Double	HOLDING ROOMS ON A TENTATIVE BASIS
Alamos Resort Hotel Scottsdale, Arizona	Located on 25 acres; 4 tennis courts, 2 pools, Jacuzzis, jogging/exercise trail, golf at nearby course; airport limo service available from Sky Harbor Airport in Phoenix  1983 Rates -- \$65 Executive Suite (64 available) \$75 Hospitality Suite (72 available) \$110 Luxury Suite (34 available)  *Extra person \$10.00	HOLDING ROOMS ON A TENTATIVE BASIS