MEETING SCHEDULE
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD

Washington Hilton Hotel

March 28, 1979

4:30 p.m. Business Meeting Jackson Room
5:30 p.m. Joint Administrative Boards Presentation Georgetown West

Speaker: James Mongan, Director Office of Planning and Evaluation Office of Assistant Secretary for Health

7:30 p.m. Cocktails Georgetown East
8:00 p.m. Dinner Georgetown East

March 29, 1979

8:30 a.m. Business Meeting (Coffee and Danish) Jackson Room
1:00 p.m. Joint CAS/COD/COTH/OSR Administrative Boards Luncheon Ballroom East
3:00 p.m. Adjourn
I. Report of the Chairman

II. ACTION ITEMS

1. Approval of the Minutes of CAS Administrative Board Meeting of January 17-17, 1979

2. Executive Council Action Items with Particular Emphasis on:
   - Report of the CCME Committee on Opportunities for Women in Medicine
   - Proposed Revision to CAS Rules and Regulations
   - VA Budget (Separate Handout)

III. DISCUSSION ITEMS

1. New Developments in Confidentiality

2. Survey of Basic Science Graduate Programs

3. AAMC Annual Meeting Plans

4. Executive Council Discussion Items with Particular Emphasis on:
   - Proposed Revision of the General Requirements in the Essentials of Accredited Residencies
   - Proposal for FLEX I & II Examinations
   - NHI Presentation by James Mongan (Separate Attachment)
   - Compensation of Human Subjects (Separate Handout)

5. CAS Spring Meeting Follow-up Discussion
MINUTES
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD
January 17-18, 1979
Washington Hilton Hotel
Washington, D.C.

PRESENT: Board Members
Thomas K. Oliver, Jr.
   Chairman (Presiding)
Robert M. Berne
F. Marian Bishop
David M. Brown
Carmine D. Clemente
G. W. N. Eggers, Jr.
T. R. Johns
Samuel O. Thier
Frank C. Wilson, Jr.
Frank E. Young

ABSENT: Daniel X. Freedman
   James B. Preston
   Virginia V. Weldon

Guests: Stuart Bondurant
   D. Kay Clawson
   Henry Foley

The CAS Administrative Board Business Meeting convened on January 17, 1979 at 5:00 p.m. and adjourned at 7:30 p.m. A social hour was followed by dinner at 8:30 p.m. After dinner, Henry Foley, Administrator, Health Resources Administration, gave an informal speech. The meeting reconvened at 8:30 a.m. on January 18. Following the usual custom, the CAS Administrative Board joined the other AAMC Boards for a joint luncheon meeting at 1:00 p.m.

*present for part of the meeting.
I. Report of the Chairman

Dr. Oliver opened the meeting by reviewing the discussions the Executive Committee had earlier that day with Hale Champion, Undersecretary for Health, and other HEW staff to discuss AAMC concerns related to health manpower, capitation, and Section 227. Dr. Stuart Bondurant, chairman of the AAMC Task Force on the Support of Medical Education, and Dr. Hiram Polk, Chairman of the AAMC ad hoc committee on Section 227, were also present. Dr. Oliver noted that the meeting began on a somewhat disconcerting level with Mr. Champion stating that the Administration opposes capitation. From that point the discussions explored what the Administration viewed as alternative forms of federal support for the medical schools. References were made by the HEW participants to "glue" money which would be funding tied to special programs with the idea that the federal government would reward schools for performance in areas identified by the government as health manpower priorities. Dr. Oliver indicated that the HEW staff continuously stressed their intention to tie funding to the degree of accountability evidenced by the schools in responding to federal goals and priorities. Dr. Cooper reported that while the Administration's position on capitation and the AAMC's position are indeed polarized, the Executive Committee was heartened by the Administration's willingness to discuss various approaches to institutional support. Dr. Oliver also reported that HEW officials expressed an interest in working with AAMC to develop regulations which would implement Section 227 without promoting a two-class system of care and without seriously disrupting the operation of the medical centers.

II. Adoption of Minutes

The minutes of the September 13-14, 1978 CAS Administrative Board Meeting were approved without change.

III. Action Items

A. Membership Applications

In September, the CAS Administrative Board reviewed the application of the Association of Academic Health Science Library Directors (AAHSLD) for membership in CAS. The Board concluded that this Association did not fully comply with CAS membership criteria since it appeared that its primary purpose was to provide support and service to other CAS societies rather than to provide direct input into the improvement of medical education. The AAHSLD subsequently asked the CAS to reconsider this decision and submitted new bylaws and information about a recent business meeting as evidence of their commitment to and involvement in the improvement of medical education. The CAS Board discussed the application with the additional information on the AAHSLD extensively. Several board members reiterated the opinion that the purpose of the Association was not clearly one of promoting medical education but rather of providing services to its members.
ACTION: The CAS Administrative Board disapproved by a vote of 5-4 the membership application of the Association of Academic Health Science Library Directors. It was the sense of the Board that CAS membership at this time would be premature in that the ASHSLD had not yet held a major national meeting and had not yet clearly shown that its primary purpose was to promote medical education.

B. CAS Bylaws Decision

The Administrative Board discussed at length a change in CAS Bylaws which had been suggested at the Annual Business Meeting. The proposed Bylaws revision would provide for a new method of officer selection by specifying that the CAS Nominating Committee would present a slate of nominees, one for each Administrative Board vacancy, to the CAS for ratification at the Fall Business Meeting. Several Board members expressed the opinion that the present method of nominating two individuals for each vacancy does engender a loss of interest on the part of the many qualified CAS representatives who are asked to stand for election and are subsequently not elected. It was stressed that with this new system, the Nominating Committees would have an even greater responsibility to ensure broad representation among the various disciplines which comprise CAS.

ACTION: The CAS Administrative Board unanimously approved and forwarded for approval by the full CAS the following revision to the CAS Bylaws:

Section V. Committees

1. The Nominating Committee shall be comprised of seven members. The Chairman of the Administrative Board shall be the Chairman of the Nominating Committee and shall vote in the case of a tie. Six individuals (three basic science and three clinical science) shall be appointed by the CAS Administrative Board from among representatives of the member societies. Not more than one representative may be appointed from a society and not more than two members may be current members of the Administrative Board. The Nominating Committee shall meet to select a slate of officers prior to June 1st of the year of the election. The Nominating Committee shall nominate not more than two individuals for each office. The Nominating Committee shall report to the Council at its Annual Meeting a slate of nominees for Administrative Board vacancies. Additional nominations for these positions may be made by any representative to the Council present at the meeting. The Committee will also recommend to the AAMC Nominating Committee candidates for Chairman-Elect of the Association of American Medical Colleges.

C. Appointment of CAS Nominating Committee

Recommendations from the Administrative Board for individuals to serve on the CAS Nominating Committee were considered from the viewpoint of specialty representation, participation in and attendance at CAS meetings, and awareness of CAS and AAMC activities.
The CAS Administrative Board appointed the following individuals to the 1979 CAS Nominating Committee:

**Clinical Sciences**

Philip C. Anderson, M.D., Association of Professors of Dermatology, Inc., University of Missouri - Columbia
Daniel Federman, M.D., American College of Physicians, Harvard Medical School
Frank E. Wilson, Jr., M.D., American Academy of Orthopaedic Surgeons, University of North Carolina

**Basic Sciences**

Carmine D. Clemente, Ph.D., American Association of Anatomists, UCLA
David H. Cohen, Ph.D., Society for Neuroscience, University of Virginia
William F. Ganong, M.D., Association of Chairman of Departments of Physiology, University of California - San Francisco

Drs. Robert L. Berg (BS), Robert E. Olson (BS), Alicia E. Hastings (CS), and John B. Lynch (CS) were designated as alternates. Dr. Oliver will be Chairman of the Nominating Committee.

**D. Report of the Panel on Technical Standards for Medical School Admission**

Kat Dolan was present to discuss with the CAS Administrative Board the report of this panel. She indicated that the primary impetus for forming the panel was the large number of requests from medical schools for assistance in interpreting and responding to the regulations issued for Section 504 of the Rehabilitation Act of 1973. The report of the panel delineates guidelines for minimum technical standards for the M.D. degree which schools may wish to use in the admission process. The Administrative Board reviewed the technical standards included in the panel report and concluded that the report would be useful to schools in designing their own approaches to complying with the handicapped regulations.

**ACTION:** The CAS Administrative Board approved the Report of the Panel on Technical Standards for Medical School Admission for distribution to the medical schools.

**E. Final Report of the Working Group on the Transition Between Undergraduate and Graduate Medical Education**

Dr. D. Kay Clawson, Chairman of the Working Group was present to discuss the Working Group's Final Report. The Administrative Board reviewed with Dr. Clawson each of the recommendations contained in the report. In terms of the information available to applicants about graduate programs, the Administrative Board's only comment was
that a directory listing available programs should be distributed in the Spring of each year rather than in October as the Working Group recommended. The Board felt that while the number of positions offered might be inaccurate with a Spring publication date, it would be more important to publish up-to-date descriptive information about programs in the Spring when students are making decisions about applications and interviews. A second point of discussion related to the application cycle and the earliest date for requesting letters of recommendation and transcripts. The Board agreed with the concept of adherence to a date before which deans letters would not be sent, but felt that the date should be changed from November 1 to October 1 in order to allow sufficient time for programs directors to assess applications and to make decisions about students.

**ACTION:** The Administrative Board approved the Final Report of the Working Group on Transition with the change of the date for earliest request of letters of recommendation from November 1 to October 1.

**F. National Residency Matching Program Request for Endorsement**

**ACTION:** The CAS Administrative Board endorsed the NRMP as the mechanism for providing uniform admission to all programs and positions in graduate medical education that are offered to medical students. The CAS Administrative Board also approved the recommendation that AAMC explore with NRMP a system for reporting student-initiated matching violations.

**G. Assessment of the COTRANS Program**

**ACTION:** The CAS Administrative Board endorsed the recommendation that a small group be formed to assess the COTRANS program.

**H. Use of the Faculty Roster for Recruiting Purposes**

Judy Braslow was present to discuss with the CAS Administrative Board the possibility of utilizing the AAMC faculty roster system to respond to requests for names of minority and women faculty members who might be recruited for such positions as departmental chairmen or members of NIH advisory committees. A number of alternatives were presented by staff for ways this might be accomplished, and the CAS Administrative Board agreed that AAMC should use this existing data base to assist schools and other entities who wish to recruit minority and women faculty.

**ACTION:** The CAS Administrative Board approved a project to develop a roster of minority faculty and a roster of women faculty by working through institutional representatives to contact all women or minority faculty members, to correct their current faculty profile now in the faculty roster system, and to grant permission for their names to be released when appropriate.

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IV. Discussion Items

A. Health Research Support Principles

The Administrative Board reviewed the "Revised Health Research Principles" and agreed that the document sets forth revised principles that are compatible with the AAMC biomedical and behavioral research policy. Dr. Berne, Chairman of the AAMC ad hoc Committee on Biomedical Research, reported that his committee reviewed the document, felt in general that it was a report AAMC could support, and developed a list of minor modifications which would improve or clarify various points addressed in the document. Dr. Berne reviewed the list of modifications which relate primarily to four areas: 1) clarifying the distinction between fundamental and applied research, 2) providing the appropriate level of funding support for both fundamental and applied research and separating the funding of this research from the funding of health services research, 3) strengthening the peer review system and ensuring its integrity and confidentiality, and 4) increasing the emphasis on institutional training grants and biomedical research support grants. Dr. Berne reported that suggested modifications in these areas were being communicated to Dr. Fredrickson, Director of NIH.

B. OSR Resolution on Student Research Opportunities

The Board discussed approaches to implementing the resolution adopted by the Assembly at the Annual Meeting on increasing student research opportunities. The board decided that the initial step should be to hold discussions of this issue at regional OSR and GSA meetings in order to assess the degree to which this is a problem and to solicit ideas about how this issue might be addressed at individual schools.

C. Clinical Laboratory Improvement Act

Dr. Morgan provided background on the development of clinical laboratory regulations noting that CLIA 1978 had not been enacted by Congress but that clinical laboratory legislation would be reintroduced in the 96th Congress. At present, HEW is proceeding to develop clinical laboratory regulations under the authority of the 1967 Act. The board reviewed a proposal which was developed at a meeting of CAS representatives about the regulation of clinical laboratories under the authority of the 1967 Clinical Laboratory Improvement Act. The proposal is based on the regulation of the 20-30 most frequently performed tests rather than all laboratory tests performed in all settings. The board agreed that this more narrow focus would be a more realistic and cost effective approach to quality assurance of laboratory output.

D. Response to Dr. Gilbert Omenn on the Non-Budgetary Restraints to Biomedical Research

Dr. Morgan distributed to the CAS Administrative Board the AAMC
response to Dr. Omenn's request for a delineation of the non-budgetary factors which restrain the conduct of biomedical research. The CAS Administrative Board discussed Dr. Omenn's request at the September 1978 meeting and had asked staff to prepare a response. Dr. Morgan reported that AAMC had worked closely with the Association of Independent Research Institutes and the Federation of American Societies of Experimental Biology. These two organizations issued a joint response to Dr. Omenn separate from the AAMC response. Dr. Morgan reviewed the various factors which the AAMC had identified as impediments to biomedical research. He noted that Senator Kennedy's staff had recently initiated a dialogue with AAMC on this topic and that interest in this issue continues to increase. The Administrative Board expressed support of the AAMC response to Dr. Omenn. Dr. Johns pointed out that an additional factor constraining research that AAMC might examine was the phenomenon of increasing bureaucracy within the higher levels of the institutions' own administrations.

E. Revisions of the General Requirements in the Essentials of Accredited Residencies

Dr. Swanson provided background information on the development of this revision of the General Requirements. The LCQME approved the revision in November 1978 and forwarded it to the Coordinating Committee on Medical Education (CCME). The parent bodies of CCME are now reviewing the document, and comments are due back to the CCME by May 1979. Dr. Swanson described the substantive changes included in the revision and noted that the revision will be an action item at the March Executive Council Meeting.

F. CAS Spring Meeting

Dr. Morgan and Swanson discussed plans for the CAS Spring Meeting scheduled for March 22-23 at the Washington Hilton Hotel. The theme of the meeting will be Graduate Medical Education. CAS participants will be asked to provide timely input to the deliberations of the AAMC Task Force on Graduate Medical Education and will be asked to discuss the revision of the General Requirements.

V. The CAS Administrative Board adjourned at 1:00 p.m.
NEW DEVELOPMENTS IN CONFIDENTIALITY

Since the passage of the Freedom of Information (FOI) and Privacy Acts nearly 5 years ago, Washington observers have urged the enactment of exemptions to preserve the confidentiality of research grant proposals. Among the objectives of such exclusions would be the safeguarding of the ideas of scientists in research grant applications, the preservation of the strengths of the peer review system, and safeguarding the institutional patent system. It is fair to say that despite the advantages of such scientific exemptions from the Sunshine Laws there has been strong opposition to proposals for such exemptions and little support in the Congress. NIH bureaucrats, particularly, have labored long and hard to maintain the system in the face of increasing HEW pressures.

Within the past two months, however, there has been an interesting development. The economic potential of discoveries in recombinant DNA research has not escaped the attention of industrial concerns. NIH permits DNA research after the filing by scientists of Memoranda of Understanding and Agreement (MUA) which contain sufficient detail of recombinant DNA research so that the level of hazard and containment, etc. can be estimated and the public protected. Now, invoking the Freedom of Information Act, industrial concerns have requested copies of more than 40 MUA's. The NIH leadership is seriously concerned and is seeking legislative remedy.
It has been recently proposed that a survey should be made of the extent to which basic science departments are returning to and becoming dependent upon non-federal funds for support of their teaching and training missions. Previous studies have documented the steady increase over two decades of training in basic sciences supported by Federal funds, but the recent changes in availability of Federal research and training support suggests that local institutional funds, especially for training, may have become more important. If true, implications for the future are great. The advice of the CAS Administrative Board will be sought on this subject. Specifically, should a study be made of the relative importance of non-Federal funds for support of pre- and post-doctoral trainees in the basic sciences?
AAMC ANNUAL MEETING PLANS

The AAMC 90th Annual Meeting is scheduled for November 3-8, 1979 at the Washington Hilton Hotel. The time schedule shown below has been established for the formal AAMC sessions. Since requests for hotel meeting room space must be made by May 1, the CAS Administrative Board should discuss plans for CAS session(s) at this meeting.

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