AGENDA

FOR

COUNCIL OF ACADEMIC SOCIETIES

WEDNESDAY, JUNE 17, 1987
JOINT BOARDS SESSION AND DINNER
6:00 – 10:00 P.M.
JEFFERSON ROOM

THURSDAY, JUNE 18, 1987
JOINT BOARDS BREAKFAST
7:30 – 9:30 A.M.
MAP ROOM

CAS ADMINISTRATIVE BOARD MEETING
9:30 A.M. – 12:30 P.M.
HAMILTON ROOM

JOINT BOARDS LUNCHEON
12:30 – 1:30 P.M.
MILITARY ROOM

WASHINGTON HILTON HOTEL
WASHINGTON, D. C.
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD

SCHEDULE
June 17-18, 1987

Wednesday, June 17, 1987

6:00 - 7:00 p.m. Jefferson Room West
Joint Boards Session
Guest Speaker: James Wyngaarden, M.D.

7:00 - 10:00 p.m. Jefferson Room East
Joint Boards Reception and Dinner

Thursday, June 18, 1987

7:30 - 9:30 a.m. Map Room
Joint Boards Breakfast
Guest Speaker (at 8:00 a.m.): Rep. Willis Gradison, Jr. (R-OH)
Chairman's and President's Reports

9:30 a.m. - 12:30 p.m. Hamilton Room
Council of Academic Societies Administrative Board Meeting

12:30 - 1:30 p.m. Military Room
Joint Boards Luncheon

1:30 - 4:00 p.m. Cabinet Room
Executive Council Business Meeting

DATES TO REMEMBER

September 9-10, 1987 Administrative Board/Executive Council
Washington, D. C.

November 7-12, 1987 AAMC Annual Meeting
Washington, D. C.

January 13-14, 1988 Administrative Board/Executive Council
Washington, D. C.
April 6-7, 1988
April 13-15, 1988 Council of Academic Societies Spring Meeting
San Diego, California
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD

Thursday, June 18, 1987
9:30 a.m. - 12:30 p.m.
Hamilton Room
Washington Hilton Hotel
Washington, D. C.

AGENDA

I. Chairman's Report -- Frank G. Moody, M.D.

II. President's Report -- Robert G. Petersdorf, M.D.

III. Action Items

A. Approval of Minutes ........................................Y1
B. Nominating Committee Report .................................Y7
C. New Schedule for Executive Council Meetings .............B27
D. Organizing the Group on Faculty Practice ..................B21
E. Possible AAMC Activities on AIDS ..........................handout

IV. Discussion Items

A. AAMC activity on AIDS legislation ..........................B31

III. Action Items (continued)

F. Change in AAMC Statement on Medical Education of Minority Group Students ..................B18
G. ACGME Policy Matter ...........................................B25
H. Mandatory Health Benefits .....................................B28

V. Information Items

A. Ad Hoc Committee on Housestaff Participation ............B43
B. Legislative and Regulatory Update ..........................attachment
   Please note especially:
   1. FDA Treatment IND final regulations
   2. GAO report on VA Health Care
   3. Proposed Changes in DRG Classification System
   4. Research Facilities Construction
   5. Fetal Research Bill
MINUTES
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD

April 15-16, 1987
Washington Hilton Hotel
Washington, D. C.

PRESENT: Board Members
Frank G. Moody, Chairman
S. Craighead Alexander
Lewis Aronow
David H. Cohen
Joe Dan Coulter
William F. Ganong
Ernst R. Jaffe
A. Everett James, Jr.
Douglas E. Kelly
Herbert Pardes
Frank M. Yatsu

Staff
James Bentley*
Jane Donovan
Richard Knapp*
Robert G. Petersdorf*
John Sherman*
Elizabeth M. Short
August G. Swanson*
Carl A. Taylor
James Terwilliger
Kathleen Turner*

Guests
Donald Langsley (ABMS)
Edward J. Stemmler*
Kirk Murphy (OSR)

*present for part of the meeting

I. CHAIRMAN’S REPORT

Dr. Moody acknowledged the CAS Spring Meeting and his attendance at the recent Council of Deans Spring Meeting. He also mentioned that the Executive Council has formed an investment committee, and is looking for members with financial management experience in the Washington, D. C. area.

II. PRESIDENT’S REPORT

Dr. Petersdorf reported on the AAHC/AAMC Vice President’s Group Forum, which was held the last Saturday in March. The meeting was very positive, and engendered a collegial, not adversarial, tone. AAMC’s physician supply study was very well received by the Forum, which went on to discuss the President’s Budget, particularly with regard to resource allocation by the Veterans Administration, Medicare, and student financial assistance.

A group of university Government Representatives, based at their home locations, has been formed, and is being housed by the AAHC. It is possible that a joint information sharing agreement can be worked out, although this is not a policy-making group. The group will be closely monitored by AAHC and AAMC.

The Marketing Committee Report, which was to be considered by Council today, has been tabled. The Vice Presidents were unhappy with the idea of surveying either Congress or Congressional
staffs, and decline to share the $50,000 cost of the survey. Dr. Petersdorf feels that it would be inappropriate for AAMC to pay this entire amount, and recommends that a series of regional Congressional dinners be held instead. The first dinner will occur before the end of the academic year. Dr. Pardes reported on the successful American Psychiatric Association program that arranges for key Congressional staffers to visit academic medical centers, and suggested that AAMC host a similar program.

Dr. Petersdorf reported on the quarterly AAMC/VA Liaison Committee meeting. John Gronvall announced that the new VA management team is now in place. Key members of that team include Deputy Chief Medical Director Arthur Lewis, Associate Medical Director David Worthen, Geriatrics Program Director Marcia Godwin, Housestaff Director Daphne Hare, Medical Education Director Malcolm Peterson, Director Peter Regan, Research and Development Director Richard Greene, and Clinical Services Director David Law. It appears that Congress will approve a far higher FY88 VA budget than the President had requested. On the conflict of interest issue, no resolution is near. A task force is writing a proposal intended to resolve the concerns of the Inspector General's office on this issue. A national competition for clinical pharmacology fellowships will be held in the near future. It will be a competitive, peer reviewed program, and is part of the VA's effort to improve their academic programs.

A Steering Committee has been appointed for AAMC's physician supply study, but state institution and basic science representatives are still being recruited. The first meeting will be May 27-28, and Dr. Petersdorf hopes to have a second meeting prior to AAMC's Annual Meeting in November. CAS proved to be much more enthusiastic about the subject of down-sizing than did the Council of Deans, whose uneasiness stemmed from potential state funding reductions. The 1986 Reconciliation Bill established the Commission on Graduate Medical Education (COGME) to study the physician supply issue, but its budget restrictions may impair its effectiveness. The COGME has a ten year life span with its first report due in two years.

AAMC Annual Meeting speakers will be Alvin Tarlof, Uwe Reinhardt and Walter Cohen. Dr. Petersdorf hopes to have Senator Edward Kennedy on the program as well. The Annual Meeting plenary sessions will be about physician supply, and the need for a national policy.

Joseph Keyes has already begun recruiting to fill the LCME Secretary post, which will be vacated by James Schofield's July 1 retirement. Dr. Petersdorf says that the post is available to Ph.D.s as well as M.D.s, as long as candidates have a good knowledge of medical education. AMA recently appointed Harry Jonas, Dean of Missouri/Kansas City and President of the American College of Obstetricians and Gynecologists, as their LCME secretary upon Ed Peterson's retirement.

Dr. Petersdorf asked the Board for ideas about how AAMC can make a unique contribution to the efforts to combat AIDS. Academic
medicine is carrying a huge part of the treatment burden, as local physicians are hesitant to become involved. The economic implications for teaching hospitals and the subsequent distortion of residency training are areas that affect the AAMC constituency very directly. The suggestion was also made to encourage the development of AIDS treatment curricula in medical schools.

III. ACTION ITEMS

A. The minutes of the January 21-22, 1987 CAS Administrative Board meeting were approved as submitted.

B. The membership of the Nominating Committee was accepted. It will meet via conference call in late May, and any nominations should be sent to Dr. Short in the meantime.

C. Committee on Faculty Practice Report
Dr. Stemmler guided a thorough discussion of the report. The new AAMC Group on Faculty Practice will be housed in the Division of Clinical Services and staffed by Dr. Bentley.

ACTION: The CAS Administrative Board voted unanimously to accept the report of the Committee on Faculty Practice. The Board noted that this issue is of great importance to CAS, and that CAS would like to be kept closely informed of the activities of the Group.

D. Transition Committee Report Followup

ACTION: The CAS Administrative Board voted unanimously to accept the report of the Transition Committee. The Board made the additional comment that the November 1 deadline should be both the earliest and the latest date for the Deans’ letters, and that it was their understanding that the dates between November 1 and March 23 could accommodate all matches necessary to place the senior class in graduate medical education.

E. ACGME Policy Matters
1. San Juan Battista Medical School in Puerto Rico is not accredited by LCME, but its graduates are licensed to practice medicine in Puerto Rico, thus making them eligible for ACGME residency programs. A proposal was submitted that would preclude graduates from non-LCME programs from being eligible for ACGME accredited residencies, unless they entered the system through the FEMGEMS route.

ACTION: The CAS Administrative Board voted unanimously to approve this proposal, Section 5.3.1, 5.3.4.

2. It is proposed that a new subsection be added to Section 5 of the General Requirements Section of The Essentials of Accredited Residencies which states that trainees in graduate medical education should be provided professional liability insurance coverage that includes legal defense against awards for claims filed after the completion of graduate medical education. This coverage is limited to incidents occurring within the scope of the educational program.
ACTION: The CAS Administrative Board voted unanimously to approve this proposal.

3. A proposed addition to Subsection 5.1.4 of the General Requirements Section of The Essentials of Accredited Residencies was discussed. This addition asks program directors and teaching staff to make special provisions to inform residents of chemical dependency problems among medical students, residents and physicians as well as specialized resources for dealing with such problems.

ACTION: The CAS Administrative Board voted unanimously to approve this proposal, Section 5.1.4.

F. Proposal for International Medical Scholars Program
Dr. Swanson led the discussion of this issue. Current program standards require that all foreign medical graduates who study in the U.S. return to their home countries for at least two years, although there are widespread abuses of this regulation. Dr. Moody suggested small demonstration projects before any national program is instituted, and Dr. Alexander expressed concern that state licensing boards be involved in the process. It was the consensus of the Board that the AAMC should monitor the international medical scholars program against potential abuses.

ACTION: The CAS Administrative Board approved the participation of the AAMC in the International Medical Scholars program with the proviso that CAS understands that any specific policies or programs when developed will be ratified by the AAMC governance, as well as the other four parents, along the model of ACGME governance.

G. Committee on Strategies for Promoting Academic Medical Centers Report
Dr. Petersdorf withdrew consideration of this report (see President’s Report).

H. JCAH Accreditation and the Academic Medical Center
Dr. Bentley reported that JCAH concerns with quality assessment (QA) activities in major academic medical centers is a serious issue. He said that JCAH has not been welcome in many major teaching hospitals, who believe in their own quality of care and question the JCAH standards for quality assessment.

JCAH appointed a committee of academic medical center staff to address the problems of accrediting medical center hospitals. The committee recommended that JCAH conduct a study to determine whether the education and research processes of academic medical centers can be used as a substitute for the JCAH quality assessment standards. JCAH has now completed the study and responded that educational and research processes cannot be used as a substitute for quality assessment processes.

JCAH will continue to apply monitoring and evaluation standards for quality assessment, but adequate substitutes might be developed. JCAH would also like to work with AAMC staff to bring
academic medical centers more into appreciation of JCAH goals and more into compliance with JCAH standards.

Dr. Bentley explained that this issue does not require any action at present, but was brought before the Board for discussion before the Division of Clinical Services proceeds with any further activities. He asked the Board to consider whether it would support the staff as it tries to change some attitudes in academic medical centers regarding JCAH goals and standards.

I. Animals
Dr. Sherman reported that at least two lawsuits have been filed recently in which students have challenged actions by institution officials requiring the individuals to participate in experiments or demonstrations involving the use of live animals in order to obtain course credits. He said that it seems probable that these actions are part of an organized campaign to mount challenges of this nature in various institutions. The Board discussed requirements at their own institutions regarding student participation in animal labs. They also discussed at some length the role of the American Medical Student Association (AMSA) concerning this issue. Kirk Murphy (OSR Representative) explained the AMSA position and handed out a list of AMSA principles regarding the use of animals in medical education. The Board requested that senior AAMC staff communicate with OSR and AMSA in order to moderate various positions and attempt to alleviate any potential polarization on this issue.

ACTION: The CAS Administrative Board unanimously adopted the staff recommendation that the Association develop and distribute to its constituent organizations an "alert", stressing the importance of developing and adopting formal internal policies by which such legal challenges can be resolved in an orderly and defensible fashion. The Board decided against giving any substantive guidance to institutions regarding animal policies, but suggested that staff might want to consider referring institutions to pertinent information.

Dr. Sherman reported that Tulane University and the Delta Primate Center had temporarily accepted responsibility for the fifteen Silver Spring Monkeys. He reported that the U.S. Supreme Court rejected an attempt by the People for the Ethical Treatment of Animals (PETA) to gain standing to sue for custody of the animals. He said that efforts have begun to raise funds for Tulane to care for the monkeys, and CAS Societies may be approached in the future for contributions.

ACTION: The CAS Administrative Board unanimously approved the Commendation for Tulane University and the Delta Primate Center for accepting custodianship of the Silver Spring Monkeys.

IV. DISCUSSION ITEMS

A. Gatekeeper Legislation and the Role of Academic Societies
The gatekeeper issue (now moot) was used as an example to stimulate discussion of CAS intersociety communication and the
philosophy of responsiveness to constituent societies and their concerns. Many ideas were proffered about appropriate ways to expand contacts and information exchanges among the societies, and it was the consensus of the Board that this would be an appropriate agenda item for a CAS Business Meeting so that a greater selection of CAS Representatives' ideas about communicating with their societies could be heard. After some discussion, the Board agreed that the Gatekeeper issue needed to be addressed substantively as well, and agreed to have this issue put on the agenda at a later meeting.

B. NSF Proposed Misconduct in Science Policy
The AAMC has sent a letter to the National Science Foundation supporting NSF's misconduct regulations. It is likely that AAMC will write to the Public Health Service encouraging them to consider adapting their guidelines to be more in conformity with the NSF misconduct policies.

C. June 17, 1987 Board Wednesday Evening Meeting
Ideas were expressed about the best use of the CAS Board dinner meeting in June, which included topical ideas as well as suggestions for a guest speaker. [This discussion was later rendered moot by an Executive Committee decision to continue having all 3 Councils meet together to hear one speaker and have dinner.]

V. INFORMATION ITEMS
A. Appointment of AAMC Task Force on Physician Supply
B. Housestaff/Postdoctoral Representation Working Group
C. 1987 AAMC Annual Meeting Schedule
These three items were noted by the Board, and the Department of Government Relations provided a legislative handout.
MINUTES
COUNCIL OF ACADEMIC SOCIETIES
NOMINATING COMMITTEE

May 28, 1987

Committee Members
Douglas Kelly, Ph.D., Chairman, presiding
Paul Bianchi, Ph.D.
Paul Friedman, M.D.
Gordon Kaye, Ph.D.
Jack Kostyo, Ph.D.
Frank Moody, M.D.
Joel Sacks, M.D.

The CAS Nominating Committee met via conference call on May 28, 1987, to select nominees for the Administrative Board. This slate of nominees will be voted on by the full Council at the Fall Business Meeting.

As a result of the customary rotation of the Chairmanship between the basic and clinical sciences, the Committee nominated a clinical scientist to be CAS Chairman-Elect for 1987-88. In addition, the Committee nominated three individuals for 3-year terms (one basic and two clinical), one individual to complete the unexpired term of Gary W. Hunninghake, M.D., who resigned from the Board (clinical), and one individual to complete Dr. Jaffe's unexpired term (clinical, 1-year term).

Potential nominees were chosen from among the representatives of the member societies of the CAS and were selected on the basis of their past experience in CAS/AAMC activities as well as their status with their own disciplines. The Committee attempted to maintain a broad representation of disciplines on the Board. The Committee nominated the following individuals:

CHAIRMAN-ELECT
Ernst R. Jaffe, M.D., American Society of Hematology, Albert Einstein College of Medicine (clinical)

3-YEAR TERMS
Vivian W. Pinn-Wiggins, M.D., Association of Pathology Chairmen, Howard University College of Medicine (basic)
Myron Genel, M.D., American Pediatric Society, Yale University Medical School (clinical)
Joel Sacks, M.D., American Academy of Ophthalmology, University of Cincinnati (clinical)

2-YEAR TERM
S. Craighead Alexander, M.D., Society of Academic Anesthesia Chairmen, University of Wisconsin (clinical)

1-YEAR TERM
Glenn C. Hamilton, M.D., Society of Teachers of Emergency Medicine, Wright State University (clinical)
April 30, 1987

Elizabeth Short, M.D.
Association of American Medical Colleges
1 Dupont Circle NW, #200
Washington, DC 20036

Dear Libby:

I have thoroughly enjoyed my tenure on the administrative board of the Council of Academic Societies. It has been a worthwhile experience. I do not feel, however, that it is in the best interests of the AFCR for me to continue in this capacity. The AFCR needs to bring along a younger member who can interact over a period of time with the CAS. Perhaps, at a later date, I can serve the CAS or AAMC again.

Best regards.

Sincerely,

Gary W. Hunninghake, M.D.
Professor and Director
Pulmonary Disease Division

GWH/tmc