AGENDA

ADMINISTRATIVE BOARD
of the
COUNCIL OF DEANS

February 3, 1972
7:00 pm - 10:00 pm

Room PDR 5
Palmer House
Chicago, Illinois

I. Minutes of the Previous Meeting

II. Review of BOS Professional Advancement Program
   Guests: Thomas A. Fitzgerald
          Marvin H. Siegel

III. Proposed Organization of Sub-Council Activities

IV. Meeting with the Administrative Board of the
    OSR

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ASSOCIATION OF AMERICAN MEDICAL COLLEGES
MINUTES
ADMINISTRATIVE BOARD OF THE COUNCIL OF DEANS
December 16, 1971
Chancery II
Embassy Row Hotel
Washington, D. C.
12:00 pm - 3:00 pm

Present

(Board Members)
Carleton B. Chapman, M.D.
J. Robert Buchanan, M.D.
Ralph J. Cazort, M.D.
Clifford G. Grulee, M.D.
William F. Maloney, M.D.

(Guest)
Larry Holly

(Absent)
William Mayer, M.D.
Sherman M. Mellinkoff, M.D.
Emanuel Papper, M.D.
David E. Rogers, M.D.
Harold C. Wiggers, Ph.D.

(Staff)
John A. D. Cooper, M.D.
John Danielson
Joseph S. Murtaugh
Marjorie P. Wilson, M.D.
Roy K. Jarecky, Ed.D.
James R. Schofield, M.D.
Joseph A. Keyes
Katherine L. Keyes
Ann Anderson

I. Call to Order

The meeting was called to order at 12:30 pm.

II. The Minutes of the October 29, 1971 Meeting

The minutes of the previous meeting were approved as written.

III. Program Proposal of the Business Officers Section

The program proposal submitted by the Chairman of the BOS, Thomas A. Fitzgerald, which appeared in the Agenda book was discussed at length. Staff was directed to communicate the tone, thrust and conclusions of that discussion to Mr. Fitzgerald and request that he review with the Board the proposed professional development activities in greater detail at the next Board meeting. (See letter from Dr. Wilson to Mr. Fitzgerald, Attachment I to these minutes.)
IV. Relationship of the Council of Deans to the Organization of Student Representatives

A. Report of the OSR Chairman

Larry Holly, Chairman of the OSR, submitted a report on the OSR to the Chairman of the COD, a copy of which appeared in the Agenda book. At the meeting he expanded on the written report and discussed the attitude of the students, their frustration with resolutions, and plans for the February meeting. Dr. Cooper explained that resolutions of the OSR, as with any other body of the Association, are required by law and tax implications to relate specifically to the Association's mission and purpose, the advancement of medical education. Resolutions, therefore, must be ruled out of order if they are political in nature or not related to medical education.

Mr. Holly communicated his understanding that the students are willing to work within these constraints as part of the organization because to a large extent their goals are consistent with those of the AAMC.

B. Planning for the February Meeting

In order to increase the communication between the COD and the OSR which is related to it, it was decided to schedule an hour joint meeting of the two bodies at the conclusion of the COD Business Session.

V. Relationship of the AAMC to Related Health Organizations

As a follow-up to the tabled Assembly resolution proposed by the OSR concerning the relationship of the schools of osteopathic medicine to the AAMC, staff prepared a paper tracing the history of the Association's relations with other health organizations. The recommendation of the paper that the OSR seek to develop an interdisciplinary student forum under the aegis of Federation of Associations of the Schools of the Health Professions was accepted by the Board and will be transmitted to the OSR.

VI. Future Meetings of the COD

A. The February Meeting of the COD

The morning session will be a joint CAS-COD Program Session in two parts: "Selection Processes for Medicine: Are Current Policies Rational?" and "Current Concepts of a Three-Year Curricula." This program is in response to the recommendation of several deans that topics related to academics should be considered more thoroughly at meetings of the deans.

The Business Meeting will be in the afternoon and the following
topics will be discussed:

1. The "Fifth Pathway." The Administrative Board agreed that it is essential that this be taken up.
2. Admissions will be covered if there is unfinished business from the morning session.
3. Faculty Roster Survey Status Report which should only take a short time.
4. A report from the Business Officers Section will probably receive some comment.
5. A report from the Executive Council from the Airlie House Retreat. Some discussion will be included here regarding faculty representation.
6. Medical schools and VA hospital affiliation. The Board was informed by Dr. Cooper that the extent to which it will be necessary to cover this matter will be more apparent after the AAMC/VA Liaison Committee Meeting to be held in January.

B. The Spring Meeting

Dr. Wilson explained that the location had been changed to the Biltmore Hotel in Phoenix because transportation to Phoenix is more convenient and the weather should be better at that time of the year. Dr. Wilson explained a five hour bus ride is required to reach Aspen and there existed the possibility of melting snow on the highway at that time of the year. The Board agreed that the Hotel Biltmore would be a preferable site. A steering committee will meet on January 4, 1972 to discuss the theme, speakers and format of the 2 1/2 day meeting.

VII. Adjournment

Dr. Chapman pointed out the information item regarding the Nominating Committee and then adjourned at 2:30 pm.
December 22, 1971

Thomas A. Fitzgerald
Assistant Controller
New York University Medical Center
New York, New York 10016

Dear Mr. Fitzgerald:

The Administrative Board of the Council of Deans reviewed the proposed Business Officers Section Program for 1972, which you submitted for their consideration. The Board has asked that I convey to you the substance of their deliberations and the actions resulting therefrom.

I was specifically instructed to convey to you the Board's recognition of the substantial contribution of the Business Officers Section to the Association and its member schools. In particular, the Board noted the important role that the Section has played and proposes to continue with respect to the professional development of its membership. It is this function which the Board considers the Section uniquely well-suited to perform.

The Board considered itself at something of a disadvantage in their endeavor to review your proposal, not in any case because of the nature of your submission, but rather because it had been informed that as a result of the Airlie House Retreat, a formal statement was being drafted for the approval of the Executive Council defining the nature and function of organizations of the Association not presently provided for in the Association Bylaws. Such an action by the Executive Council, anticipated for their meeting of February 5, 1972, will obviously require that existing sections and groups bring themselves into conformance with such guidelines as are adopted. Thus the dilemma, and the potential for any action taken at this time to be considered inappropriate. Nonetheless, because of the commitment of the Board to review the proposal of the BOS, the Board determined not to delay such interim action as it considered feasible. In any event, the actions of the Board will undoubtedly be considered by the Executive Council in its deliberations on this topic.

Initially, the Board specified its understanding of the purposes of the sections related to the Council of Deans as follows:

1. The professional development of the membership;
2. The provision of expert advice and consultation to the Association on matters within the functional areas under the purview of the membership;

3. The identification of problems or potential problem areas within the functional areas under the purview of the membership, and participation in the design and implementation of programs directed toward their solution.

The Board then proceeded to review the program proposal in light of these purposes, and determined it appropriate to endorse the program to the extent that it conforms to the following guidelines:

1. The financial and statistical standards activities should be concentrated on supporting the efforts of the AAMC staff and appropriate Association-wide committee to make appropriate revisions in the LCME Annual Medical School Questionnaire, Part I - Financing.

2. Recognizing that the professional development activities are uniquely appropriate endeavor for the Section, the Board counsels a modest start for the programs to be conducted in conjunction with the Annual Meeting. It therefore recommends that these be sharply focused on the functional areas directly within the cognizance of the business officers, and be limited to several areas of primary concern to the BOS. The Board further requests the opportunity to review at its February 4 meeting, more specific plans for the programs to be conducted at the Annual Meeting.

3. External relations activities of the BOS should be conducted only with respect to those activities formally communicated to and planned in conjunction with the President of the Association.

4. Information resources activities are related to and result from further AAMC decisions concerning the further development of medical center information systems.

5. Internal governance committee activities such as those relating to bylaws and nominations should be deferred pending the approval of the Executive Council of the statement specifying the nature and function of organizations of the Association other than those provided for in the current Association Bylaws.
Finally the Board agreed to recommend to the Executive Council that the Association reimburse the expenses incurred in conducting one meeting annually of the BOS Executive Committee held in Washington, D.C. at the Association headquarters, providing such expenses do not exceed the sum of $3000. The limitation with respect to the location of the meeting was designed to facilitate the attendance of appropriate staff at minimal additional expense. The Board agreed to waive this limitation with respect to this year's meeting in recognition of the imminence of these meetings and the advance planning which has already been undertaken.

I hope that the Board's perspective is adequately communicated by the above paragraphs. I think that it is quite evident that the Deans are supportive of the BOS activities, and are highly desirous of integrating them more closely with the other organs of the Association. It is because of this view that the Board acted in a manner which may seem to impinge on the autonomy of the BOS. Their primary concern is that the Association speak with one voice in its dealings with outside agencies and that all relevant inputs are made prior to such contacts. With respect to internal policy matters, they have indicated a similar concern: that there be an orderly and rational process by which all relevant expertise and perspectives are considered prior to the determination of an appropriate course of action.

Tom, I regret that I will be unable to be present for your January 28th meeting. I have asked my Deputy, Dr. James Schofield, to attend in my stead and I am certain that you will find that I am well represented.

I hope your meeting proves as productive as its promise. In the meantime, Happy Holidays.

Best regards,

Marjorie P. Wilson, M.D.
Director
Institutional Development

cc: Carleton Chapman, M.D.
Thomas Campbell
Joseph S. Murtaugh
James R. Schofield, M.D.
III. PROPOSED ORGANIZATION OF SUB-COUNCIL ACTIVITIES

The Executive Council will be considering the following proposal relating to the organization of AAMC sub-council groups and activities. In order to facilitate that set of deliberations, the Administrative Boards of each Council have been asked to review and discuss the proposal.
PROPOSED ORGANIZATION OF SUB-COUNCIL ACTIVITIES

Background

The bylaws of the AAMC provide that the voting membership of the Association shall be represented in three Councils which shall be organized in a manner consistent with rules and regulations approved by the Executive Council. There is no provision in the bylaws for any subordinate or subcouncil membership organization, with the exception of the Organization of Student Representatives. The rules and regulations of the three councils, however, do provide that standing committees can be created or other major actions taken by the councils after approval of such recommendations by the Executive Council. This latter provision appears to be the only valid official means, outside of bylaw revision, by which subordinate council organizations can be brought into being.

At the present time there are four general classifications of such sub-council entities:

1. The committees of the Executive Council, both standing committees for purposes of governance, and ad hoc committees for the examination of specific issues;

2. The committees of the constituent Councils (COD, CAS, COTH), both standing and ad hoc;

3. Membership organizations involved in the governance of the AAMC, and therefore established by bylaw revision (OSR);

4. Functional or professional organizations which seek to advance their specialized subject matter interests rather than participate in governance (Group on Student Affairs, Business Officers' Section);

In addition, there are four other putative sub-council entities in various stages of development:

1. Organization of Faculty Representatives
2. Development Officers' Section
3. Planning Coordinators' Section
4. Public Relations Section

None of these four groups have any "de jure" status in the AAMC. With the exception of the faculty organization, the other three groups have a varying degree of "de facto" status and are seeking formal and valid identification within the AAMC as professional components fitting into classification #4 above. The proposed Organization of Faculty Representatives, if approved, would be involved in the governance of the AAMC (classification #3 above) and could therefore only be established through a revision of the Association bylaws.
The Issues

A sub-council structure encompassing functional elements of the institutional membership of the AAMC has developed on an ad hoc incremental basis without overall design or agreement upon the relationship of the sub-council activities to the Councils. Two of these groups have a formally approved status within the AAMC -- GSA and BOS. Three others do not have such formal status, but have some organization and present programs at the AAMC Annual Meeting -- DOS, PCS, and PRS.

For the most part these groups are concerned with three overall matters:

1. Their professional advancement;
2. The provision of consulting expertise;
3. The identification of problems and development of means for their solution.

Their present status and their pressures for further development present a set of issues that require either better clarification or resolution:

1. How and by what terminology should the formal organizational status of these groups be described?
2. What role and function should they serve within the AAMC?
3. What should be their organizational, functional, and program relationships with the governing structure of the AAMC and the AAMC staff structure?
4. What limits should be set upon their activities, internal organization and functioning, and further development?
5. What should be the policy toward further replication of such groups?
6. How should their activities be financed?

Recommendations

The proliferation of these groups, sections, and committees necessitates the formulation of an official AAMC policy encompassing all sub-council entities. This policy must differentiate among the various types, state the mechanism for their authorization, and establish clear and yet adaptable guidelines for their activities and relationships to the Councils and to the staff. Attached is a set of proposed "Guidelines for Sub-council Organization" for your review and approval.
GUIDELINES FOR SUB-COUNCIL ORGANIZATION

There shall be the following classes of sub-council entities, organized in accordance with the definitions and specifications listed below:

A. ORGANIZATIONS -- an Organization of the AAMC is defined as a membership component, associated specifically with one Council of the Association, and having voting participation in the governance of the AAMC.

1. Its establishment requires a bylaws revision approved by the AAMC Assembly.

2. The Association shall assume responsibility for staffing and for basic funding required by the Organization.

3. The Organization shall be governed by rules and regulations approved by the parent Council.

4. All actions taken and recommendations made by the Organization shall be reported to the parent Council.

B. GROUPS -- a Group of the AAMC is defined as a functional component, representing a specific area of staff interest and activity, and not involved in the governance of the Association.

1. Chartering of a Group must be approved by the Executive Council and is valid for three years (subject to review and renewal at that time).

2. Commitment of AAMC staff support must precede the establishment of a Group.

3. Groups shall be informally organized; they may select a national chairman but should not develop formal rules and regulations.

4. AAMC funds shall not be used to support Group activities, except as specifically authorized by the Executive Council.

C. SECTIONS -- a Section of the AAMC is defined as a professional component, representing the interests of a professional group within the academic medical center, specifically associated with one Council of the Association, and having no involvement with the governance of the AAMC.

1. The establishment of a Section must be approved by the Executive Council upon referral from the prospective parent Council.

2. Each Section will be assigned one principal staff person, who will coordinate the activities of the Section with the parent Council and with the goals and objectives of the Association.
3. Each Section must report all programs and activities to the parent Council through the principal staff person relating to the Section.

4. The Association shall provide no additional staff support or funding, except as specifically authorized by the Executive Council.

5. Each Section may develop rules and regulations which must then be approved by the parent Council.

D. COMMITTEES -- a Committee of the AAMC is defined as a standing body reporting directly to one of the official components of the Association (Executive Council, Councils, Organizations, Groups, Sections), charged with a specific continuous function.

1. Committees of the Executive Council may be charged with roles related only to governance, program, liaison, and awards.

2. Committees of the Councils and Organizations may be charged with roles related only to governance and program.

3. Committees of the Groups may be charged with roles related only to program.

4. Committees of the Sections may be charged with roles related only to the program and internal governance of the Section.

E. COMMISSIONS -- a Commission of the AAMC is defined as a body charged with a specific subject matter function, assigned for a definite term of existence, and reporting directly to one of the official components of the Association. All previous "ad hoc committees" shall become known as Commissions.

1. A Commission may be charged by the AAMC component to which it is to report, or by the Executive Council.

2. No Commission may be charged for a term longer than 2 years, at the end of which it shall be re-charged or dissolved.