



ASSOCIATION OF AMERICAN MEDICAL COLLEGES
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NEWSLETTER #2

TO: OSR Representatives

FROM: Richard Seigle

Feedback on my last newsletter was good considering that it went out when many of you were on vacation. I was concerned that some of you had misinterpreted my comments in the preparatory remarks concerning whether or not the OSR should present a dissenting view from the AAMC. In clarification I would first point out that at the Retreat I did not gamble away a right of this body to such dissent; it was not my right to do that. In fact, I had decided to notify the National Labor Relations Board of our dissenting view on the housestaff issue but not to send our position on HML to the Congressional Subcommittees. The crucial factor, as I presented it at the Retreat, was whether sufficient and recognized input to Association policy had been made. I thought my actions clearly set a precedent that on those issues on which we did not have input to AAMC policy, we would retain the right to present a dissenting view. If we had sufficient input on an issue that had been duly considered, we would not make an independent, public statement, but continue to press our dissenting view to AAMC. With the assurance of Dr. Cronkhite, Chairman of AAMC, that OSR will be granted the opportunity for sufficient input and that our input will be carefully considered, I felt that I could agree that the OSR will not find the need to make a dissenting opinion known to public bodies.

At the Administrative Board meeting in January, an Executive Session was called to discuss these two controversial resolutions passed at the Annual Meeting. The final actions as I mentioned above were 1) to carry out the housestaff resolution including sending a letter to NLRB and 2) to present our stand on HML to the Association through a letter to the Executive Committee without sending a letter directly to the Congressional Health Subcommittees. A questionnaire had been sent to the OSR asking for their feedback on these actions. The responses, a summary of which is included with this newsletter, were considered in the Board's discussions.

I was charged by the Board to summarize for you the statements made in the Executive Session based on a transcript of that portion of the meeting. I opened the session by stating that in coming to a decision before the Retreat, I weighed three considerations: The intent of the OSR members in approving the resolutions; the effectiveness of the resolutions; and the actions which would best satisfy the resolutions in light of the negative effect certain actions would have on the OSR as a constituent of the AAMC.

The Board members made the following points which I have grouped under four questions:

WHAT WAS THE INTENT OF THE OSR AT THE NATIONAL MEETING? The OSR wanted the HML resolution sent to Congress requesting increased scholarships and loans with an end to capitation. Some of the Administrative Board members felt that this was passed in a wave of uninformed emotion at the end of our meeting and questioned whether the OSR representatives knew about the Association's position and how that position was already being presented to the Subcommittees. Others felt that the mandate was clear and inviolate. John Barrasso had pointed out the previous day that it had been his understanding that the resolution would not be sent to the subcommittee verbatim but rather that a letter expressing the OSR's views in general terms would be sent. Tom Rado pointed out that while the housestaff resolution required the OSR to communicate and clarify a dissenting opinion, the HML resolution required that the OSR disseminate the resolution verbatim with the omission of the last clause regarding tuition levels. The inflexibility of the HML resolution made the mandate difficult to carry out.

HOW GOOD WAS THE RESOLUTION? It was agreed that the resolution was poorly worded and difficult to defend. The request for scholarships for everyone who wanted them was economically infeasible. Asking for no capitation meant that the resolution would have to be accepted as a package since the elimination of capitation coupled with no increase or only a slight increase in student aid would mean a dangerous increase in tuition. The specifics about National Health Service Corps changes were not economically or politically feasible. The AAMC position was consistent with the OSR resolution on increasing loans, scholarships, and special project funds. The difference in agreement between AAMC and OSR was on the continuation of capitation.

WHAT WAS THE OSR AND AAMC INTERACTION ON THE RESOLUTION? The OSR had input into the Association's policy which had been discussed at length and agreed upon. We did not agree on every point but this did not seem to be a reason to go public. To publicize an issue that was not clear-cut and that might not achieve the intended goals against the strongest urging of AAMC would weaken the capacity to operate as a strong, constructive, sometimes strongly dissenting, voice within AAMC. At the Retreat, the Chairman of AAMC agreed with the Chairperson of OSR that in the case of the amicus brief, the Association failed to obtain input from the OSR and that this was regrettable--an oversight that would not be repeated. It was further agreed that when a council or organization had had sufficient input but did not completely agree with the final position, the group would not take a stand outside the Association. Distributing this resolution would be interpreted as a breach of confidence.

WHAT ACTION SHOULD BE TAKEN BY THE BOARD? The board felt that it had a full range of options to consider. A motion for a vote of confidence for the actions taken prior to the Administrative Board meeting was introduced and passed unanimously. However, it was felt by some that the board should work on a way to

carry out the original mandate on HML without being embarrassed or having our cause undermined. Other members felt that they did not know where the OSR would stand today. There was a motion that I work with John Barrasso to draft a letter to be sent to Senator Kennedy. There was a consensus that sending such a letter would not be in the best interests of the OSR and the motion was defeated.

After lengthy discussion, it was the conclusion of the board that we had had extensive input to the AAMC position on HML, that we did not differ significantly with that position, that Congress was through with hearings, and that we should move on to other issues. In light of these considerations, the board passed a motion to postpone indefinitely current discussions of health manpower legislation and moved on to other issues.

In addition to our discussions about the HML and housestaff resolutions, the OSR Administrative Board addressed several priority issues at its first meeting. Each board member had been assigned an issue to research and assess and was asked at the meeting to provide a report and present a plan for addressing the issue. I wish to commend the board on their effort, time and results on the issues. Our main thrust on the board this year will be studying stress in medical education, reevaluating where women in medicine are now, and an approach to continued evaluation of curriculum. Besides these we will be working closely with other AAMC councils on how students finance their medical education, educational programs in the ambulatory care setting, and other student-related issues.

I want to call your attention to a motion giving the OSR members the option to receive AMSA Chapter officer mailings. Jessica Fewkes is reviewing other publications that may be of interest to OSR members. When these are compiled we will be offering this choice to you.

Our next board meeting is March 23 and 24. The first order of business will be the disposition of resolutions passed at the National meeting. Please review these and if you have ideas or comments write to your regional chairperson. Check the dates of your regional meetings and make plans now to attend.