

Association of American Medical Colleges

About AAMC

“The Association of American Medical Colleges (AAMC) has as its purpose the improvement of the nation’s health through the advancement of medical schools and teaching hospitals. As an association of medical schools, teaching hospitals, and academic societies, the AAMC works with its members to set a national agenda for medical education, biomedical research, and health care, and assists its members by providing services at the national level that facilitate the accomplishment of their missions. In pursuing its purpose, the Association works to strengthen the quality of medical education and training, to enhance the search for biomedical knowledge, to advance research in health sciences, and to integrate education into the provision of effective health care. Today the Association carries out a broad range of programs and studies to represent its constituents.”¹

“The Association of American Medical Colleges represents the 125 accredited U.S. medical schools; the 16 accredited Canadian medical schools; some 400 major teaching hospitals, including 74 Veteran’s Administration medical centers; 91 academic and professional societies representing nearly 88,000 faculty members; and the nation’s 67,000 medical students and 102,000 residents.”²

Mission of AAMC

The mission of the Association of American Medical Colleges is to improve the health of the public by enhancing the effectiveness of academic medicine. The AAMC pursues its mission by assisting academic medicine’s institutions, organizations and individuals in carrying out their responsibilities for:

- Educating the physician and medical scientist workforce;
- Discovering new medical knowledge;
- Developing innovative technologies for prevention, diagnosis and treatment of disease;
- Providing health care services in academic settings.

Journal: *Academic Medicine*

“*Academic Medicine*, a peer-reviewed monthly journal, serves as an international forum for the exchange of ideas and information about policy, issues, and research concerning academic medicine, including strengthening the quality of medical education and training, enhancing the search for biomedical knowledge, advancing research in health services, and integrating education and research into the provision of effective health care.”³

Special Issues/ Sections:

- September, 2000 Volume 75, Number 9: Special Issue on “Expanding the View of Scholarship” See below for more information.

Council of Deans Administrative Board 2004-2005

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**Executive Council Members*

AAMC Councils, Groups and Task Forces

Governance:

- Council of Deans
- Council of Academic Societies
- Council of Teaching Hospitals and Health Systems
- Organization of Student Representatives
- Organization of Resident Representatives

Professional Development Groups:

- Government Relations Representatives
- Graduate Research, Education and Training Group
- Group on Business Affairs
- Group on Educational Affairs
- Group on Faculty Practice*
- Group on Information Resources
- Group on Institutional Advancement*
- Group on Institutional Planning
- Group on Regional Medical Campuses
- Group on Research Advancement and Development

Group on Resident Affairs

Women in Medicine

Interest Areas:

Task Force on Financial Conflicts of Interest in Clinical Research

**Groups relevant to the work of the Collaborative*

Future Meetings

2005 Annual Meeting:

Washington, DC November 4-9, 2005

2006 Annual Meeting:

Seattle, WA October 27- November 1, 2006

2007 Annual Meeting:

Washington, DC November 2-7, 2007

2008 Annual Meeting:

San Antonio, TX October 31- November 5, 2008

2009 Annual Meeting:

Boston, MA November 6-11, 2009

Association Activities Relevant to the Work of the Collaborative

1. Definition of Scholarship

Although AAMC has not adopted clearly defined definition of scholarship, their publications, particularly the September 2000 issue of *Academic Medicine*, recognize an “evolving definition of scholarship” that is rooted in the work of Boyer, Glassick and Diamond. It is hoped that encouraging dialogue around the issue of scholarship and its assessment in medical school settings, through publications and meetings of the Council of Academic Societies will lead to an expanded view of scholarship in medical education.

2. Special Issue on “Expanding the View of Scholarship”

The publication of special issue on “Expanding the View of Scholarship” in the journal *Academic Medicine* represents an important effort of AAMC, and in particular the Council of Academic Societies (CAS) task force to increase awareness of, and expand the dialogue around the concept of scholarship within the field of medical education. The issue included several papers discussing the areas of scholarship: discovery, teaching, integration and application, as defined in Boyer’s work and their application to medical education and the work of medical school faculty. Additionally a number of case studies from medical schools seeking to produce changes in their definitions of scholarship and in review, promotion and tenure (RPT) policies give practical insight into the facilitators and barriers to expanding the view of scholarship.

See the attached press release on the special issue of *Academic Medicine*, and an index of articles that appeared in that issue.

3. AAMC President's Address 2004 ⁴

Jordan J. Cohen, M.D., President of the Association of American Medical Colleges address entitled "Promising Change" on November 7, 2004 in Boston focused on needed changes in the medical education system and medical establishment to face future challenges to the field.

Excerpts:

"The question is this: Are we in academic medicine ready for the fundamental changes that are coming? Do we have a culture conducive to making the changes needed to prepare our students for the revolutionary new medicine of tomorrow; to refashion our research mission to fully exploit the new frontiers of science; and to transform our patient care systems to provide cost-effective, universally accessible, and high quality health care?"

"Individual investigators initiating their own studies remain our most revered model of research, even though the state of science now begs for more multi-disciplinary research involving the collaborative efforts of multiple investigators. Our promotion and tenure criteria still place the highest value on individual research accomplishments, despite the clear need to reward those who contribute prominently to successful team efforts, and despite the increasing importance of recognizing the excellent teachers and world-class clinicians whose academic contributions are no less important to the success of their institutions."

"No doubt about it, compelling arguments can be made that major changes are needed in the way we carry out each of our core missions to meet the demands of the 21st century. Not nibbles around the edges, but basic changes in the way we educate, in the way we perform and reward research, and in the way we care for patients. And not just change for the sake of change, but positive change that responds to the significant shortcomings we all know exist, and that address the rapidly evolving needs of the society we're pledged to serve."

4. AAMC Outstanding Community Service Award⁵

AAMC honors members for outstanding achievement in community service. The press release (attached) outlines the activities of the 2004 recipient, Rochester Medical Center, which include service learning and "community-based research projects."

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University of Rochester Medical Center Receives AAMC Outstanding Community Service Award

Press Release

For Immediate Release

Contact: Nicole Buckley
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BOSTON, November 6, 2004 - In recognition of its institutional commitment to community service and to improving the health of upstate New York's most disadvantaged residents, the University of Rochester Medical Center has been awarded the Outstanding Community Service Award from the Association of American Medical Colleges (AAMC). The award was presented tonight, in Boston, at a special ceremony during the Annual Meeting of the AAMC.

The national Outstanding Community Service Award, established in 1993, recognizes one medical school for exceptional community service programs in communities whose needs are not being met through the traditional healthcare delivery system. The University of Rochester Medical Center (URMC) was selected not only for its numerous community health programs, but also for the commitment it has made to educate and train caring and culturally competent physicians by weaving community service into its curriculum.

URMC is the major provider of primary care for Rochester, New York, and serves as the major referral center for the western and central areas of the state. The school was founded with the hope of creating in Rochester "one of the healthiest communities in the world." The URMC philosophy--that a healthy community is more than just the absence of disease--is shared by the medical center's 400 medical students and 400 graduate, public health, and doctoral students.

The leadership of URMC has formed partnerships with city, county and community officials to create a plan for a healthier community. Particular attention is focused on eliminating disparities in health care among the most disadvantaged racial and ethnic groups in their community - the urban Hispanic and African-American residents of Rochester. Medical school faculty and staff now align the medical center's research, education and patient care efforts with community-based needs. Faculty members from at least 20 medical center departments help to manage more than 70 community service programs and interventions each year. URMC has an additional 150 community-based research projects ongoing in fields such as population-based research, health outcomes, ethics, and health policy.

The community service mission is completely integrated into every level of the medical school curriculum. The Community Health Improvement Clerkship, for example, is a unique service-based patient care experience required of all fourth-year medical students. Students who complete an additional 40 hours of community service each year, beyond the requirements of the clerkship, receive a "distinction in community service" honor on their medical diploma. The institution's emphasis on service is integrated into residency training at URMC as well. The Pediatric Links with the Community Program, a partnership with community-based agencies that serve children and families, is a formal component of the pediatric residency experience that trains new physicians to care and advocate for underserved and high-risk youth and families.

Some examples of the medical center's community involvement are:

Health-e-Access

Urban children in inner-city Rochester are three to five times more likely to seek emergency room care for complications from asthma, bronchitis, and gastroenteritis/dehydration than suburban children. Health care access issues may play a role in preventing these children from getting care before it becomes an emergency. The URMC Department of Pediatrics developed Health-e-Access - through the use of technology - to help the working poor get easy access to the care they need for their children. The program places tele-health units in inner city childcare centers, allowing trained assistants to examine children with special equipment and send the imagery to nurse

practitioners at URMC for diagnoses, treatment, and follow-up visits. Since it began in 2001, clinicians have completed almost 1,400 tele-visits. The program has eased the burden of working parents, decreased the number of school absences due to illness, and helped to avoid emergency room visits.

Lazos Fuertes

The suicide and alcohol abuse rates in the Hispanic population of Rochester are three times higher than in the rest of the community, and Hispanics receive fewer mental health services due to geographical and language barriers. To address the need for access to mental health services in this particular community, and to train bi-lingual medical students and residents, the URMC Department of Psychiatry partnered with the area's largest Hispanic advocacy organization to create Lazos Fuertes (Strong Ties). The program delivers behavioral and mental health services to more than 300 patients a year.

Jay/Orchard Street Neighborhood Programs

The medical center has created a unique partnership with the Jay/Orchard Street neighborhood, an impoverished area in the city of Rochester. Medical center staff members are working to combat barriers to access, poor health outcomes and lack of health education faced by the residents. URMC faculty and volunteers, including many medical students, are making progress toward eliminating the hazards of lead poisoning that have plagued the Jay/Orchard neighborhood for years.

University of Rochester Medical Center includes the School of Medicine and Dentistry, the School of Nursing, the Eastman Dental Center, Strong Memorial Hospital, Golisano Children's Hospital at Strong, Highland Hospital, adult nursing facilities and a visiting nursing service.

Medical schools and teaching hospitals provide health care resources to the more than 70 million uninsured and underinsured Americans. For more information about the role medical schools and teaching hospitals play in caring for the uninsured, visit www.aamc.org/uninsured.

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The Association of American Medical Colleges is a nonprofit association representing all 125 accredited U.S. and 17 accredited Canadian medical schools; nearly 400 major teaching hospitals and health systems, including 68 Department of Veterans Affairs medical centers; and 94 academic and scientific societies. Through these institutions and organizations, the AAMC represents 109,000 faculty members, 67,000 medical students, and 104,000 resident physicians. Additional information about the AAMC and U.S. medical schools and teaching hospitals is available at www.aamc.org/newsroom.

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Definition and Assessment of Faculty Scholarship the Focus of *Academic Medicine*

Council of Academic Societies Explores Evolving Definition of Scholarship

Washington, D.C., September 19, 2000 -- The evolving definition of scholarship and its assessment at U.S. medical schools are the focus of the September issue of AAMC's [Academic Medicine](#). At the invitation of AAMC's Council of Academic Societies (CAS) Task Force on Scholarship, more than a dozen leading faculty members and administrators authored pieces on topics related to the evolving definition of scholarship within the academic medical community that are published in the journal's theme issue entitled, "Expanding the View of Scholarship." Diana S. Beattie, Ph.D., West Virginia University School of Medicine, chairs the CAS task force.

The four areas of scholarship as defined by Ernest L. Boyer and Charles Glassick of the Carnegie Foundation, are the scholarship of discovery, the scholarship of integration, the scholarship of application, and the scholarship of teaching. The scholarship of discovery-research-has for decades been the primary focus for promotion and tenure of medical school faculty, even though the faculty also have major and critical activities in the other areas of scholarship. In this special edition of *Academic Medicine*, five case reports describe different approaches to applying the four areas of scholarship to the evaluation of faculty activities in medical schools.

"We hope that the ideas put forth in this special theme issue will produce a continuing dialogue as faculty and administrators at medical schools reflect on the value of these different forms of scholarship, their application by medical school faculty, and their contributions to the individual missions of each medical school and teaching hospital," writes Dr. Beattie. "The CAS hopes that these articles will provide a stimulus for continuing discussions of this important area of academic life."

The AAMC's CAS represents the faculty leadership of U.S. medical schools and teaching hospitals through representation from 91 member professional organizations. CAS' mission is to assist faculty in pursuing their research, education, and patient care responsibilities. The CAS Scholarship Task Force was formed in 1998. Founding members of the task force discovered that as scholarship in medical schools has changed, the traditional reward measurement systems have not kept up and are in need of review. For example, most promotion and tenure committees still view research papers printed in standard journals as the only real measure of scholarship.

AAMC's *Academic Medicine* is the oldest English-language peer-reviewed journal devoted to issues related to the training of physicians.

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Contents of September 2000 Issue of the Journal
Academic Medicine: “Expanding the View of Scholarship”

National Policy Perspectives

Evolving the Faculty Reward System

Kenneth R.R. Gros Louis

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Expanding the View of Scholarship: Articles

Expanding the View of Scholarship: Introduction. Diana S. Beattie. Acad Med 2000 75: 871-876.

Boyer’s Expanded Definitions of Scholarship, the Standards for Assessing Scholarship, and the Elusiveness of the Scholarship of Teaching. Charles E. Glassick. Acad Med 2000 75: 877-880.

Breaking Down the Walls: Thoughts on the Scholarship of Integration. Dale Dauphinee and Joseph B. Martin. Acad Med 2000 75: 881-886.

Scholarship in Teaching: An Imperative for the 21st Century. Ruth-Marie E. Fincher, Deborah E. Simpson, Stewart P. Mennin, Gary C. Rosenfeld, Arthur Rothman, Martha Cole McGrew, Penelope A. Hansen, Paul E. Mazmanian, and Jeffery M. Turnbull. Acad Med 2000 75: 887-894.

The Scholarship of Application. Eugene D. Shapiro and David L. Coleman. Acad Med 2000 75: 895-898.

Scholarship in the Medical Faculty for the University Perspective: Retaining Academic Values. Robert L. Barchi and Barbara J. Lower. Acad Med 2000 75:899-905.

Integrating Clinician-Educators into Academic Medical Centers: Challenges and Potential Solutions. Wendy Levinson and Arthur Rubenstein. Acad Med 2000 75: 906-912.

Expanding the View of Scholarship: Case Studies

Revising Appointment, Promotion, and Tenure Procedures to Incorporate an Expanded Definition of Scholarship: The University of Kentucky College of Medicine Experience. Lois Margaret Nora, Claire Pomeroy, Thomas E. Curry, Jr., Nancy S. Hill, Phillip A. Tibbs, and Emery A. Wilson. Acad Med 2000 75: 913-924.

Adoption and Failure of the “Boyer Model” at the University of Louisville. Laura Schweitzer. Acad Med 2000 75: 925-929.

Valuing Educational Scholarship at the Medical College of Wisconsin. Deborah E. Simpson, Karen Wendelberger Marcdante, Edmund H. Duthie, Jr., Kathleen M. Sheehan, Richard L. Holloway, and Jonathan B. Towne. Acad Med 2000 75: 930-934.

Defining Scholarship at the Uniformed Services University of the Health Sciences School of Medicine: A Study in Cultures. Eric S. Marks. *Acad Med* 2000 75: 935-939.

The Mayo Clinic's Clinician-Educator Award: A Program to Encourage Educational Innovation and Scholarship. Thomas R. Viggiano, Clarence Shub, and Robert W. Giere. *Acad Med* 2000 75: 940-943.

References:

¹ Association of American Medical Colleges Website. Available at: www.aamc.org Accessed 10/15/04.

² AAMC Press Release. Available at: <http://www.aamc.org/newsroom/pressrel/2000/000919.htm> Accessed 10/15/04.

³ Academic Medicine Online Journal Webpage. Available at: <http://www.academicmedicine.org/misc/about.shtml> Accessed 12/7/04.

⁴ AAMC President's Address "Promising Change" Available online at: <http://www.aamc.org/newsroom/pressrel/2004/041107.htm> Accessed 12/7/04.

⁵ AAMC Press Release. Available at: <http://www.aamc.org/newsroom/pressrel/2004/041106b.htm> Accessed 12/7/04.