

**Minutes of the Board of Regents
Of the Uniformed Services University of the Health Sciences**

Meeting No. 131

May 19, 2000

The Board of Regents of the Uniformed Services University of the Health Sciences met on May 19, 2000, at the Uniformed Services University of the Health Sciences, 4301 Jones Bridge Road, Bethesda, Maryland. Prior notice of the meeting date and agenda was published in the Federal Register. Lonnie R. Bristow, M.D., Chair, called the meeting to order at 8:30 a.m. The following members and advisors were in attendance:

Board Members

Lonnie R. Bristow, M.D., Chair
Robert E. Anderson, M.D., Vice Chair
Everett Alvarez, Jr., J.D., Member
John E. Connolly, M.D., Member
Ikram U. Khan, M.D., Member
John F. Potter, M.D., Member
RADM Michael Cowan, representing the Assistant Secretary of Defense (Health Affairs)
James A. Zimble, M.D., President, USU
RADM Kenneth P. Moritsugu, representing the Surgeon General of the United States
MG Harold L. Timboe, representing the Surgeon General, USA
RADM Rodrigo C. Melendez, representing the Surgeon General, USN
Col David Hammer, representing the Surgeon General, USAF

Advisors to the Board

Val G. Hemming, M.D., Dean, School of Medicine
Faye G. Abdellah, Ed.D., Sc.D., RN, Dean, Graduate School of Nursing
GEN Thomas R. Morgan, USMC (Retired), Military Advisor to the Board
COL Michael Dunn, Commander, Walter Reed Health Care Systems
COL Johnie S. Tillman, Commander, Defense Medical Readiness Training Institute
COL John E. Baker, General Counsel, USU

OPENING REMARKS AND CEREMONIES

Dr. Bristow introduced and welcomed Richard J. Johns, M.D., husband of the late Dr. Carol J. Johns, former Vice Chair, Board of Regents. Following heartfelt remarks

concerning Dr. Johns' career and contributions, Dr. Bristow presented the University's Distinguished Service Award in her name. Dr. Richard Johns graciously accepted the posthumous award and thanked the Board members for their kindness. He also received the American flag that was flown half-mast at the University in honor of his wife. Dr. Zimble added personal remarks of gratitude for Dr. Johns' luminary vision concerning student and faculty issues at USU.

After the award presentation, Dr. Bristow brought a proposal for the Carol J. Johns Faculty Award to the Board. This award, initiated by the Faculty Senate, would honor an outstanding faculty member at each USU Commencement Exercise. Dr. Merrily Poth, President, Faculty Senate, reported that University faculty members unanimously voted to present the proposal to the Board since Dr. Johns was a long standing advocate for faculty issues.

The Board, upon motion made and seconded,

Voted by voice vote: To accept the proposal with the condition that the Faculty Senate determine the criteria necessary for award nominations.

MATTERS OF RECORD AND THE CONSENT CALENDAR

Dr. Bristow presented Matters of Record and the Consent Calendar, which included the following items:

Tab A	Notice of Open Meeting, <u>Federal Register</u>
Tab B	Members, Board of Regents
Tab C	University Strategic Plan
Tab D	Minutes from Work Group I, February 7, 2000
Tab E	Minutes from Work Group II, February 7, 2000
Tab F	Minutes from the Executive Committee, February 7, 2000
Tab G	Minutes from Board Meeting No. 99-130, February 8, 2000
Tab I-2	Report to the Board, GSN, June 2000 Admissions
Tab R-1,2,3	Award Nominations
Tab T-1-7	Report to the Board, Administration and Management
Tab U	Report to the Board, Office of Research
Tab V	Report to the Board, University Information Systems
Tab X	Report to the Board, Continuing Education for Health Professionals

The Board, upon motion made and seconded,

Voted by voice vote: To accept those items which indicated they are submitted for information only, as well as those identified as seeking Board approval, and to approve, as submitted, the Minutes of the February 8, 2000, Board of Regents Meeting.

PRESENTATION: OUTCOME MEASURES

Dr. Charles Roadman, Chair, Work Group I, introduced the final presentation of the Metrics Project. Col Gary Gackstetter, USAF, described the methodology used in Part 1, reviewed original results concerning common characteristics among successful

students, and introduced the "epidemic investigation" that involved all 97 individuals who did not complete the four year USUHS medical school curriculum from 1972 to January 2000. The results of the "epidemic investigation" were presented by MPH graduate student, Maj Jayne Stetto, USAF, NC.

Maj Stetto reported that among the 97 students who did not graduate, only gender and deceleration were statistically significant predictors of attrition. The analysis included information on the following:

- Admission criteria for U.S. allopathic medical schools.
- USU medical school matriculation statistics (1978 - 1999).
- USU academic and military criteria for graduation.
- Attrition and comparative demographics.
- Statistical analyses between USU non-graduates and graduates.

The study concluded that females have a 2.5 times greater risk than males of attrition, and that decelerated students have almost a 12 times greater risk.

Short and long term recommendations include recording information into a database that would include admission criteria on all USU matriculants, reviewing the admission interview process, and conducting exit interviews on all students.

Dr. Zimble agreed with Maj Stetto's recommendation of a more standardized admissions interview, but asked if there should be additional questions based on gender. He also spoke of the importance of discovering applicants' expectations regarding life as uniformed physicians.

Admiral Moritsugu cautioned against misreading Part 1's conclusions. Although deceleration was the most vivid predictor of attrition, 80% of the students who decelerated did indeed graduate from the University.

Dr. Roadman commented that the University needs to be mindful of how the "success" of a graduate translates into his/her graduate medical education and then into a career as a uniformed physician. He reminded the Board that although the study was designed using phases of a career, these "divisions" should now be removed. The University is unique compared to other medical schools because it is a closed system and the population can be studied from matriculation through retirement. USU should take advantage of this in order to search for ways to improve.

Dr. Connolly asked how an interview becomes "standardized;" Col Gackstetter replied that aside from being difficult to do, there are some aspects of every interview that are impossible to quantify. Dean Hemming pointed out that the current interview process is standardized to some degree, and discussed the initial effort that was made to do so. He also stated that results are affirmed by interviewing potential students twice and involving a senior-level student in one of them.

Dr. Earl Fauver reported on Part 2 of the project. Tasked with identifying outcome measures of success for graduates of USU related to graduate medical education, the Part 2 team selected the following indicators to examine, based on data availability:

- USMLE scores (Parts 1, 2, and 3).
- Selection for post-graduate year-1 position of choice.
- Board certification.
- Dismissal for cause from training.

For each of the above, Dr. Fauver discussed the value and limitations of the measure, and findings to date. He said the purest objective measure of the influence of medical school on individual success is the USMLE (United States Medical Licensing Examination). The least effective measure, according to Dr. Fauver, is dismissal for cause—the numbers are too small to be meaningful, and it measures only individual performance. Sources for the data discussed are being sought across the Services and mechanisms are being put into place that will allow annual collection and provision to the University. At present, CCQAS seems the most logical database to use as a common collection and dissemination point.

Dr. Zimble stated it would behoove the University to construct a set of recommendations for the Services that suggest how data fields can be improved, made comparable, and the contained information readily retrievable.

Dr. Connolly said information collected on Board certification pass rates at the individual level would assist in assessing the quality of residency programs. Dean Hemming reminded those present that such information is covered under the Privacy Act; hence the Services receive aggregate numbers. Dr. Connolly replied that pass/fail statistics per program would be sufficient.

Additionally, Dr. Zimble added that each uniformed physician be asked to verify his/her personal data annually, enabling the database to remain reliable. RADM Cowan stated he looked forward to working out the issues that remain to be resolved and moving forward with performance measures.

RADM Kenneth Moritsugu reported on Part 3 of the project, which was charged with defining and quantifying uniformed physician success and then comparing the success of USU graduates against that of other doctors in uniform. The Part 3 team (Quad Service Group) focused on longevity and leadership as indicators of uniformed physician success.

Longevity was to be measured by comparing the length of professional service of USU graduates and non-USU graduates from a pre-established baseline date to the present. Data sources included the Defense Manpower Data Center (DMDC), the Division of Commissioned Personnel (Public Health Service), and the USU Office of Alumni Affairs. Raw data from DMDC proved to be difficult and confusing; the files are huge, it is difficult to break out needed elements, and there are numerous confounding factors. Additionally, DMDC is a personnel system, not a database constructed for research. The ability exists, therefore, to look at the longevity of USU graduates, and the University has done that, but comparisons with non-USU uniformed physicians have not been made.

To measure leadership, the Quad Service Group looked at USU graduates compared to non-USU graduates. After defining a sample of comparable leadership billets across Services in academic, clinical, operational and executive tracks, each member of the group filled the billets with occupants, using his own Service data. Findings included the fact that although USU graduates make up 15% of active duty physicians in the military services, they comprise 19% of the leadership billets. (Data is for FY 1998). Confounding factors, however, are numerous:

- Post Medical Education requirements vary by Service and are sometimes a factor in the promotion process.

- There is inconsistent identification of officers in leadership positions across Services.
- There is a potential selection bias by attending USU.

Conclusions and recommendations reached by the Quad Service Group include:

- Clean and accessible data is needed to address Part 3 questions; alternatives include improving DMDC, adding fields to CCQAS, or developing new data sets to be housed in ASD (HA).
- Identify and consistently define leadership billets across all Services.
- Carefully develop prospective common data fields across Services.
- Research established databases regarding available data.
- Develop accurate measure of corps strength by profession, by year.
- Institutionalize data collection.

Points made in discussion following the presentation included:

- Develop a University infrastructure regarding the collection and flow of information as well as the requisite hardware and software.
- Include the specialty consultant to the Surgeon General from each Service in the leadership billet sample.
- Consider excluding the Public Health Service from all analyses to establish a "DoD-only" conclusion, as the University must answer to DoD regarding "return on investment."
- Take accountability for institutional self-examination, corrective actions, and for providing information to decision-makers.

RADM Cowan, Dr. Bristow and Dr. Zimble each thanked Dr. Roadman for his commitment and dedication to the project. Dr. Bristow's concluding remarks included a challenge to the staff and faculty to see that information is collected, reported and analyzed as carefully and as accurately as possible.

STUDENT ISSUES

Admissions

Mr. Peter Stavish, Assistant Dean for Admissions, reported on admissions statistics which continue to reflect the national decrease in applications to medical schools. The School of Medicine, during the last four to five years, has experienced a decline in applications of approximately 40 percent. Based upon current data, this trend will last one or two more years. In response to Dr. Bristow's concern over the size of the decline, Mr. Stavish mentioned the school's recruitment efforts including those by the Office of Recruitment and Diversity Affairs. Dean Hemming added that although applications will probably increase due to demographics, some data suggests cause for concern:

- fewer science students are choosing medicine as a career.
- the family tradition of federal or military service, from which many applicants have come, is declining.
- the military is experiencing difficulty recruiting and retaining young people.

Recruitment

LtCol Carolyn Miller, Vice President, Recruitment and Diversity Affairs, presented statistics on efforts to recruit underrepresented minority students. Twenty-three such students were offered spaces in the Class of 2004, and as of this report, 10 will matriculate in the fall. The current recruiting campaign includes: dispelling myths concerning military life; addressing the special concerns of women; and actively recruiting underrepresented minority students.

General Morgan suggested using campus ROTC offices as organizing forces in recruitment campaigns. ROTC commanders could be responsible for assembling students to hear a presentation, given perhaps by a USU graduate stationed nearby.

Colonel Tillman emphasized the importance of marketing the University as opposed to simply making information available to interested parties.

Student Management

Dean Hemming reported for Dr. Richard MacDonald, who was absent due to graduation rehearsal. In response to a question from Dr. Bristow regarding continuing work by Student Affairs on predictors of USMLE performance, Dean Hemming stated that model work has produced a good start toward the ability to identify and help students at high risk for failing USMLE Step 2. He emphasized this was not a program to, "train individuals to take the test," but rather is an effort to identify qualified but "at risk" students.

DEGREE GRANTING

School of Medicine

Dr. Hemming presented 158 students' names comprising the Class of 2000. Each has completed the requirements necessary to be awarded the degree of Doctor of Medicine.

Upon motion duly made and seconded, the Board

Voted by voice vote: To confer the degree of Doctor of Medicine on each member of the Class of 2000 as presented by Dr. Hemming and recommend to the President and the Assistant Secretary of Defense for Health Affairs that the President implement the actions.

Graduate Education

Dr. Hemming presented for certification 12 individuals to receive graduate degrees in their respective programs; 27 individuals to receive the degree of Master of Public Health; and, seven individuals to receive the degree of Master of Public Health – Health Services Administration.

Upon motion duly made and seconded, the Board

Voted by voice vote: To confer the degrees as presented by Dr. Hemming and recommend to the President and the Assistant Secretary of Defense for Health Affairs that the President implement the actions.

Graduate School of Nursing

Dr. Abdellah presented 14 graduate students for certification to receive the degree of Master of Science in Nursing.

Upon motion duly made and seconded, the Board

Voted by voice vote: To confer the degrees as presented by Dr. Abdellah and recommend to the President and the Assistant Secretary of Defense for Health Affairs that the President implement the actions.

UNFINISHED BUSINESS

USU Board of Regents Bylaws

Dr. Bristow directed the Board's attention to sections in the current draft that are different from those presented at the February 8, 2000 Board meeting. These included: Article IV. A., Duties and Responsibilities; Article VII. B., Additional Meetings, and E., Voting; and, Article VIII. A., Amendments.

Upon motion duly made and seconded, the Board

Voted by voice vote: To accept the Bylaws as currently presented.

AWARD PRESENTATIONS

Board of Regents Award

Following remarks by Dr. Richard MacDonald, Associate Dean for Student Affairs, Dr. Lonnie Bristow, Chair, presented the Board of Regents Award to ENS John R. Ringquist, MC, USNR. The Board of Regents Award is the highest honor a graduating senior can receive.

Distinguished Service Awards

Ira N. Tublin, M.D., Department of Medicine, and Douglas B. Tang, Ph.D., Department of Preventive Medicine and Biometrics, each received the University's Distinguished Service Medal, presented by Dr. Bristow.

USU EXECUTIVE COMMITTEE

Following comments on the usefulness of including the most recent USU Executive Committee minutes in the Board book, Dr. Bristow asked for further explanation of the proposed Foreign Area Medical Specialty Program (FAMS). Dean Hemming said the concept involves training physicians and scientists as specialists in certain geographic areas of the world. These specialists would be knowledgeable about the culture and language of an area as well as its indigenous diseases and other health issues. The University has been discussing such a program for several years--it would involve specific career tracks within the Services, and would create a pool of specialists and consultants available to the Department of Defense as needed. At present, an effort is being made by the Air Force to implement this concept.

PRESENTATION: PATIENT SAFETY

Dr. Bristow presented background information concerning the Institute of Medicine's charge to affect a threshold improvement in the quality of health care in America over the next ten years. One of the first issues being addressed is the extent to which medical errors play a role in retarding the quality of our nation's health care.

Benchmark definitions include:

error – a misuse of the system, either as an error of execution, in which the application of an action in attempting to treat a patient does not eventuate in the fashion intended, or as an error of planning, in which an incorrect action was chosen in the first place.

adverse event – an occurrence resulting in a patient's injury or disability due to the medical or surgical management received, as opposed to the underlying injury or illness.

The Institute has evidence that 44,000 to 98,000 Americans lose their lives each year as the result of preventable errors. Following the publication of this information, President Clinton directed an inter-agency committee to review the report and issue recommendations. In February 2000, an Executive Order was issued beginning the implementation of virtually all of the committee's suggestions amongst federally controlled health systems (such as the DoD and the VA).

Dr. Eric Marks, Department of Medicine, reported on the University's role in DoD's response to the Executive Order. Dr. Sue Bailey, then the Assistant Secretary of Defense for Health Affairs, established a committee to draft a DoD Instruction dealing with patient safety issues. Dr. Marks and two other members of the USU faculty were asked to participate. Currently under Department consideration, the draft instruction covers a broad range of safety issues. Additionally, USU has been charged with developing educational tools with which to cause system change.

Issues and recommendations include:

- establishing a Patient Safety Council within DoD which will review aggregated data on errors and adverse events;
- effecting a cultural change in medicine regarding dealing with errors in a more open arena;
- developing a system for voluntary "close call" reporting of situations where a potential for harm existed, or the existence of a system error was discovered, although no harm occurred; and
- looking at patient safety issues in telemedicine.

Educational concerns include:

- ways and means of educating medical school faculties of both the issues and new requirements, and
- methods of placing patient safety issues into a medical school curriculum

Dr. Bristow stated there is a need to have peer review protection at the Federal (rather than state) level added to this effort. He also stated that the systems (or processes) of care we use at the present time often serve to enable mistakes rather than deter them.

Dr. Maura McAuliffe, Department of Nurse Anesthesia, briefed the Board on initiatives taken by the Graduate School of Nursing in response to errors in anesthesia. Changes include technological advancements and improvements in guidelines and

protocol. Within the department standards of care are taught, and an anesthesia simulator as well as an anatomical model is used. Vigilance in practice and staying "connected" to the patient are stressed and thesis research often includes patient safety issues.

Dr. Anderson suggested reading the work of Rene Fox, at the University of Pennsylvania, who has written extensively on medical uncertainty.

UNIVERSITY ADMINISTRATION

Budget

Dr. Bristow complimented Mr. Dexter on his budget presentation under Tab S in the Board book. A year-to-date "snap shot" of the Department of Surgery and the Department of Microbiology and Immunology accompanied the usual documents comparing annual appropriations and quarterly obligations as well as this year's budget distribution by department.

Following remarks by Dr. Zimble regarding budget challenges, Dr. Bristow suggested a retreat at the winter meeting where the Board could discuss broad issues and concerns, one of which is long-term funding for the University.

Henry M. Jackson Foundation for the Advancement of Military Medicine

Dr. Bristow asked Dr. Potter to represent the Board of Regents at the annual meeting of the Council of Directors for the Foundation, which will be held on June 7, 2000, on Capitol Hill.

2000 ANNUAL REPORT TO THE SECRETARY OF DEFENSE

Dr. Anderson reported that editing work is ongoing and focused on making the report concise and therefore shorter in length. He reminded the Board of the decision to focus on specific areas each year. This year's report highlights the metrics project, the University's recruitment program and School of Medicine's review by the Liaison Committee on Medical Education. Ideas for next year include a description of the Graduate School of Nursing and an in-depth review of the University's research program.

FACULTY ISSUES

Appointments and Promotions

Dean Hemming presented recommendations made on April 13, 2000, by the Committee of Appointments, Promotion and Tenure. Sixteen recommendations for faculty appointments and promotions were forwarded.

Following a general discussion concerning tenure and other differences between the military and civilian faculty, and

Upon motion duly made and seconded, the Board

Voted by voice vote: To concur with the recommendations of the Committee. Following spelling corrections in the name of LtCol Gael J. Lonergan, USAF, MC, (Proposed Faculty Recommendations, Department of Anesthesiology, Page 1), and COL Rhonda L. S. Cornum, MC, USA (Department of Surgery, Page 2), the Board recommends to the President and the Assistant Secretary of Defense for Health Affairs that the President implement the actions.

Dean Hemming brought two names before the Board with a recommendation for Emeritus status: Rodney L. Levine, M.D., Ph.D., and Peter H. Abbrecht, Ph.D.

Upon motion duly made and seconded, the Board

Voted by voice vote: To concur with the recommendation of the Dean and recommend to the President and the Assistant Secretary of Defense for Health Affairs that the President implement the actions.

NEW BUSINESS

Report of the Surgeon General

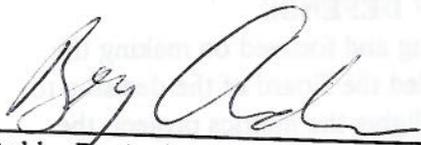
RADM Moritsugu noted that *Oral Health: A Report of the Surgeon General*, will be released in June, and that an additional report on reducing tobacco use will also be released before the September meeting. These reports will both be available on the Internet at www.surgeongeneral.gov.

ADJOURNMENT

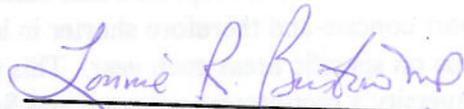
There being no further business, Dr. Bristow adjourned the meeting at 3:40 p.m.

SUBMITTED:

APPROVED:



Bobby D. Anderson
Executive Secretary, Board of Regents



Lonnie R. Bristow, M.D.
Chair, Board of Regents

Prepared by Jan Taylor
Board of Regents Staff