

**THE REGENTS OF THE UNIVERSITY OF CALIFORNIA
MEETING AS A COMMITTEE OF THE WHOLE**

April 11, 2001

The Regents of the University of California met on the above date at the University of California, Davis, Medical Center, 2315 Stockton Blvd., Sacramento.

Present: Regents Davies, Fong, O. Johnson, S. Johnson, Kohn, Lee, Marcus, and Preuss

In attendance: Secretary Trivette, General Counsel Holst, Associate Secretary Shaw, Senior Vice President Mullinix, and Executive Vice Chancellor Grey representing Chancellor Vanderhoef

The meeting convened at 3:45 p.m. with Chairman S. Johnson presiding.

1. PUBLIC COMMENT PERIOD

Chairman Johnson explained that the Board had been convened as a Committee of the Whole in order to permit members of the public an opportunity to address items on the afternoon's agenda. The following individuals addressed the Board:

- A. Ms. Kathy Buchanan, a member of the American Federation of State, County, and Municipal Employees, expressed concern that while the University of California, Davis, Medical Center (UCDMC) was expanding its facilities, reductions in staffing levels in some departments have resulted in fewer employees responsible for a greater patient load.
- B. Ms. Pilar Barton, representing the University Professional and Technical Employees Union, believed that patient care at the medical center is greatly understaffed. To attract and retain good employees, wages must be above the middle range for similar jobs in the community which, she claimed, in many cases they are not.
- C. Ms. Karen Maxon, the labor representative for the California Nurses Association, stated that the 1,500 registered nurses at UCDMC were in the collective bargaining process with the University and she hoped a resolution will come quickly.

2. UC DAVIS HEALTH SCIENCE EDUCATION AND CLINICAL PROGRAMS

UC Davis Provost Grey welcomed the Regents to the medical center and introduced the Dean of the School of Medicine, Dr. Joseph Silva. Dr. Silva reported that the medical center and medical school together are committed to outreach to the community in the areas of education, research, and patient care. He stated that while primary care education was the basis of the medical school's founding, in the last ten years there has been an

emphasis on developing first-rate programs in research. Much of the research is derived from valuable connections to the faculty at UC Davis in areas such as veterinary medicine, social sciences, biological sciences, and agriculture. Research funding is currently \$63 million from about 250 grants and over 160 contracts and is growing. New research programs have been shaped, in part, by the medical school's interactions with campus researchers and include a genomics project, a cancer biology program, a neurosciences program, and the transplantation program.

Dean Silva explained that the core curriculum of the medical school is the medical doctorate; there are currently 408 students enrolled in that program. The school also educates many Ph.D.s, has large a family nurse practitioner program, and is enlarging its M.D.-Ph.D. enrollment. About 60 percent of the graduates remain in the state, many serving the communities of northern California. One characteristic of the medical school since its founding has been the large number of students involved in outreach and public service. The admissions committee considers an applicant's history of volunteering prior to entering medical school as an important factor to becoming a student at the medical school.

Dr. Silva introduced medical student Thomas Bui who, under the auspices of the School of Medicine, organized a conference on Vietnamese women's health. Mr. Bui described the Vietnamese Cancer Awareness, Research, and Education Society, which is a student-initiated and student-run effort to raise awareness in the Vietnamese community about cancer. He had learned that Vietnamese women have the highest rate of cervical cancer in the United States. Through a survey that he and other students conducted of the Vietnamese community in Sacramento, it was determined that there was a very low level of cancer awareness and methods of early detection among that ethnic group. The American Cancer Society has expressed interest in replicating this study nationwide for various ethnic groups. The conference, entitled "Vietnamese Women's Health Month," was successful in its goal of scheduling over 200 appointments for clinical breast exams, mammograms, and Pap smears. This was the first conference in the nation dedicated to culturally-specific, language-specific patient care. Mr. Bui expressed his thanks to UC Davis for providing him the opportunity to give back to his community through this conference.

Ms. Martha Marsh, Director of the UC Davis Medical Center, addressed the clinical vision of the medical center, which is "that the UC Davis Health System (UCDHS) will be nationally recognized as a health system that excels at translating scientific discoveries and new technology into improved patient care and community-wide health." Ms. Marsh described the UCDHS service area, noting that the medical center receives referrals from patients in 33 counties reaching to the Oregon border. Demand for services is growing as the population in this area is expected to increase by 25 percent between 2000 and 2010. The medical center will be focusing on clinical initiatives which include expanding the cardiology/cardiac surgery program, both adult and pediatric; developing the split liver transplantation program; expanding obstetrics/gynecology services; achieving National

Cancer Institute designation for the cancer program; and expanding research in the neurosciences through the development of the M.I.N.D. Institute.

Ms. Marsh reported on facilities planning to achieve SB 1953 compliance and provide additional space to address capacity limitations, teaching needs, and other physical plant deficiencies. The medical center is working on improving physical space for physician practices, particularly for specialists, and building new primary care sites in some of the service areas where demand is growing. There is also a need to invest in the development of a clinical information system that will provide a fully electronic medical record system for the faculty. She noted that the challenge in achieving the clinical vision is to close the gap between the capital plan and the capital budget for the medical center. This can be done by supporting continued growth of selected programs and sites, further strengthening the medical center's financial position, enhancing access to inpatient and outpatient services at UCDMC, and developing a more efficient and customer friendly organization.

Mr. Dennis Matthews, Program Leader of the Medical Technology Program at Lawrence Livermore National Laboratory and Associate Director of the Integrated Cancer Program at UCDMC, described the collaborative partnership between the Laboratory, UC Davis, and UCDMC, which he referred to as "medicine without boundaries." This has provided the opportunity for scientists, mathematicians, and engineers to work with medical researchers. One area of collaboration is medical device development which is receiving funding not only from government sources but also the private sector. The basic science, research, and discovery elements that go into the development of a product is done at the University. At that point the technology is turned over to the private medical and health care industries for creation of a commercial product. Other examples of collaboration are the Integrated Cancer Center, which combines basic research with a biomedical technology program, and the Center for Medical Devices and Technology, a collaborative effort of LLNL, the School of Medicine, the Division of Biological Sciences, the College of Engineering, and the College of Letters and Science at Davis. Mr. Matthews highlighted some examples of new LLNL-UC Davis technology that is being developed, including photomechanical devices for stroke treatment and infrared light use for diagnosing and treating cancer.

Dr. Thomas Nesbitt, Assistant Dean for Regional Outreach for Telehealth and Continuing Medical Education, explained that while it is clearly the University's mission to develop new medical science, it is also important to see that medical science applied to populations who need it. Because of the exponential rise in medical knowledge and information that is occurring, there is a growing disparity in health care available to various segments of the population. Development of a primary care network to deliver University-level care to some of the rural areas in Sacramento County and adjacent counties is one part of the University's strategy for addressing this disparity. Efforts to build a regional network of community hospitals whereby UCDMC is the referral center for tertiary and quaternary care is also in progress. Dr. Nesbitt described the three components of the Telehealth program: the Applied Medical Informatics, which is an on-line medical information

system for clinicians and nurses; distance learning using interactive videoconferencing for lectures and presentations to hospitals and clinics; and the Telemedicine Program which provides video-based consultations. The Telemedicine Program allows the medical center to make available its medical expertise to the large geographic rural area in northern California that is dependent upon UC Davis for speciality care. The program began in 1992 with a fetal monitoring project at Colusa Community Hospital, which had closed its obstetrics unit. Since then the program has provided over 4,000 video consultations in more than twenty different specialties to 50 different sites. Through the Telemedicine Learning Center at UC Davis, many clinicians and nurses throughout the state are being trained in how to do telemedicine. The Telemedicine Program has state and national recognition and is regarded as one of the best such programs in the country.

Mr. Robert Chason, Chief Operating Officer for the medical center, recalled that in 1998 The Regents approved the formation of a limited liability company (LLC) to create a partnership between Mercy Merced Hospital and UCDMC for the purpose of providing coordinated cancer care for the residents of Merced. In 1999, The Regents approved a similar LLC with Fremont-Rideout Hospital in Marysville. In the strategic plan for UCDMC, cancer has been identified as a major clinical and research priority. The regional cancer centers initiative is an important part toward achieving National Cancer Institute (NCI) designation, increasing the number of patients who participate in UCDMC-sponsored clinical drug trials and other advanced therapies, providing additional training venues for residents and fellows, and increasing patient visits to the medical center and the Cancer Center at Davis. Mr. Chason provided an overview of the Mercy Cancer Center and the Fremont-Rideout Cancer Center. The number of patient visits to both centers has exceeded expectations, and this has been realized without a marketing campaign. Both communities are very happy to have a University presence in their region. In addition, the resulting increased patient referrals from these centers to UCDMC has meant increased revenue to the medical center.

The Medical Investigation of Neurodevelopmental Disorders (M.I.N.D.) Institute was described by its Director, Dr. Randi Hagerman. Dr. Hagerman explained that the Institute, which was established in 1998 by the parents of children with autism, is a collaborative, international research center committed to the awareness, understanding, prevention, care, and cure of neurodevelopmental disorders. Children who come to the Institute have a broad range of disorders, from mild learning disabilities to severe disabilities such as autism. The Institute has a particular focus on autism because it was through the efforts of four fathers who were frustrated that they could not find adequate treatment in the Sacramento area for their children that the Institute was established. These parents felt that there was not adequate communication between individuals doing basic research in autism and the clinicians and teachers who were in contact with the children. They approached the University to establish a partnership and were able to obtain funding in the form of two endowed chairs and support from the legislature. The ultimate goal is to find a cure for autism, but on the way to a cure, better methods of treatment are being developed. Dr. Hagerman has recruited two of the leading researchers in autism to the Institute, both of

whom are resubmitting their applications to the National Institutes of Health through UC Davis to establish a center of excellence in autism at Davis.

In response to a question from Regent Davies about what persuaded her to come to Davis from the University of Colorado, Dr. Hagerman stated that it was the ability to talk to great scientists and thereby expand her research abilities.

Regent Lee was impressed with the cancer research performed at Davis. He asked if there were studies on improving the quality of life for cancer patients undergoing treatments. Dean Silva responded that the Chair of Medicine, Dr. Fred Meyers, is one of the nation's leaders in this area.

Regent O. Johnson asked about the extent of clinical trials in optical scanning for breast cancer. Mr. Matthews said that medical center had just entered into an agreement with a private company to perform clinical trials and was hopeful that trials will begin soon. This particular type of technology resulted from the collaboration among UC Davis, LLNL, and NASA.

The Regents toured the medical center campus by bus.

The meeting adjourned at 5:40 p.m.

Attest:

Secretary