

The Regents of the University of California

**COMMITTEE ON EDUCATIONAL POLICY**

July 16, 2003

The Committee on Educational Policy met on the above date at UCSF-Laurel Heights, San Francisco.

Members present: Regents Atkinson, Bodine, Bustamante, Connerly, Davies, Hopkinson, Johnson, Kozberg, Lansing, Marcus, Moores, Murray, and Sayles; Advisory member Binion

In attendance: Regents Blum, Lee, Montoya, Pattiz, and Seigler, Regents-designate Novack and Ornellas, Faculty Representative Pitts, Secretary Trivette, General Counsel Holst, Treasurer Russ, Provost King, Senior Vice Presidents Darling and Mullinix, Vice Presidents Broome, Doby, Drake, and Gurtner, Chancellors Berdahl, Bishop, Carnesale, Cicerone, Córdova, Dynes, Greenwood, Tomlinson-Keasey, Vanderhoef, and Yang, and Recording Secretary Nietfeld

The meeting convened at 12:25 p.m. with Committee Chair Kozberg presiding.

1. **APPROVAL OF MINUTES OF PREVIOUS MEETING**

Upon motion duly made and seconded, the minutes of the meeting of May 14, 2003 were approved.

2. **OVERVIEW OF THE UNIVERSITY OF CALIFORNIA SCHOOLS OF MEDICINE**

Committee Chair Kozberg explained that the impetus for today's presentation had come from Faculty Representative Pitts, who saw the need for information on the University's Schools of Medicine from an educational rather than a financial perspective.

Vice President Drake recalled that the University operates 15 health sciences schools and four major programs on seven campuses. Included among these are schools of optometry, veterinary medicine, dentistry, nursing, public health, and pharmacy. These programs enroll 12,000 students who are taught by 2,200 ladder-rank faculty. The University has 3,000 other full-time faculty and 10,000 volunteer faculty across the medical schools. There is a \$700 million annual instructional budget, which is supplemented by more than \$1.7 billion in annual research funding. Funding for instruction and research is augmented by more than \$3.1 billion in clinical activity, resulting in a total annual expenditure of \$6 billion, or 40 percent of the University's total budget.

Vice President Drake presented data on the rankings of research-oriented medical schools, noting that **U.S. News and World Report** had ranked several of the University's campuses among the top schools in the country, with UCSF at number 6, UCLA at number 14, and

UCSD at number 16. In addition to the rankings that schools have as research-oriented schools of medicine, they are also ranked as primary-care institutions. In this category, UCSF, UCLA, UCSD, and UCD all fall within the top twenty, with UCSF being the only school of medicine in the nation that is ranked in the top ten as both a research and primary-care oriented institution. Dr. Drake discussed National Institutes of Health funding as a measure of the productivity of the faculty. He reported that the San Diego campus ranked first in terms of dollars awarded, at an average of \$258,000 per faculty member, while UCSF ranks second. He provided further data concerning other schools, in particular noting that the School of Public Health at the Berkeley campus receives the most funding per faculty member on a national basis.

Vice President Drake commented that the University's influence is felt widely on a national and international scale. The Director of the Centers for Disease Control, the President of the National Academy of Science, and the Director of the National Institutes of Health are all UC faculty serving their nation while on leave.

Looking at educational quality, Dr. Drake observed that UC's campuses are competitive with private, single-campus schools for excellence of education and research. In addition, the University of California provides broad access to professional and health sciences education. UC takes an unusual level of responsibility for the outcomes of its policies.

Vice President Drake provided some comprehensive data on the medical schools and their students. The five schools admit 629 students each year from 8,500 unduplicated applications, resulting in an admission rate of four to seven percent. By contrast, Harvard admits 11 percent of the high school students who apply as undergraduates, and Berkeley and UCLA admit 23 to 25 percent. The students who are admitted to the schools of medicine have outstanding grades and test scores, strong letters of recommendation, in-depth experience, and a strong record of community service. They are characterized as having maturity, intellectual curiosity, and compassion.

Dr. Drake provided an outline of the new themes that are being woven into the medical school curriculum. They include the following:

- Complementary and alternative medicine
- Cultural competence
- Ethics
- Evidence-based medicine
- Geriatrics
- Health behaviors
- Informatics
- Managed care
- Nutrition

Vice President Drake concluded with a discussion of the long-term issues facing medical education at the University of California. Although California's population has grown by approximately 10 million people since 1980, UC trains fewer medical students and approximately the same number of residents as it did in 1982. Physician work force needs must be met by the immigration of doctors from other states, as well as those from foreign countries. California ranks 38th among the 46 states with medical schools in the number of medical school graduates per 100,000 people. He noted that planning for the future must encompass a long-term vision, as medical students devote 14 to 18 years to training before entering the work force. While the state currently produces approximately 1,400 physicians per year, 2,600 are needed to maintain the doctor-patient ratio. This lag may be seen in the primary care health professional shortages that exist in many locations throughout the state.

Dr. Drake continued that medical education in California, while of the highest quality, suffers from insufficient quantity and poor distribution. The health status of Californians reflects this fact. The potential solutions include expanded medical school enrollments with focused programs of excellence and specialized curricula. The University will begin a series of programs in medical education (PRIME) which will complement the current curriculum. They will produce culturally and linguistically competent physicians trained to address the needs of underserved communities. The program will be launched at the Irvine campus in fall 2004, with opportunities at other campuses to follow. Vice President Drake commented that the Office of the President expects to receive a report from a three-year work force study by the Health Sciences Committee in spring 2004. This study will assist with data-based enrollment planning. He hoped sometime in the future to be able to report to the Board that medical education in California, while still of the highest quality, also ranked high in quantity and distribution.

Regent Bodine requested more detail on the concept of cultural competence as a topic of instruction. Vice President Drake explained that it trains physicians to treat patients with a wide variety of cultural backgrounds and belief systems.

In response to a question from Regent Kozberg regarding the immigration of doctors who have received their medical education elsewhere, Dr. Drake observed that in the 1980s and 1990s it was seen as positive because California was a destination that was able to attract physicians. As California's economy has changed and the cost of living has risen, the state is now losing physicians. In addition, California's diversity is greater than in other parts of the country; the University has taken steps to ensure that the physicians it trains are capable of caring for this diverse population. He believed that the University had the capacity to increase medical school enrollment by about ten percent over the next five to seven years. Looking further into the future, the University will need to consider whether or not to undertake the capital commitment that will be needed to accommodate additional enrollments.

Following comments by Regent Kozberg and Regent-designate Novack, Dr. Drake noted that the most pressing need in the state is for primary-care physicians to locate in

underserved areas such as the Central Valley. There is also a continued need for doctors who practice in specialized fields.

The meeting adjourned at 12:50 p.m.

Attest:

Secretary