# The Regents of the University of California

# **COMMITTEE ON EDUCATIONAL POLICY** July 20, 2000

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

- Members present: Regents Bagley, Connerly, Davies, Fong, S. Johnson, Montoya, and Sayles; Advisory members Morrison and Seymour
- In attendance: Regents O. Johnson, Kohn, Kozberg, Lee, Miura, and Moores, Faculty Representatives Coleman and Cowan, Secretary Trivette, Associate Secretary Shaw, General Counsel Holst, Provost King, Senior Vice Presidents Darling and Kennedy, Vice Presidents Drake, Gomes, Gurtner, and Hershman, Chancellors Cicerone, Dynes, and Yang, Vice Chancellor Bainton representing Chancellor Bishop, and Recording Secretary Nietfeld

The meeting convened at 2:55 p.m. with Committee Chair Montoya presiding.

# 1. ESTABLISHMENT OF THE SCHOOL OF PHARMACY, SAN DIEGO CAMPUS

The President recommended that effective immediately, Section 14(a) of The Regents= provisions as covered under Standing Order 110.1--Academic Units and Functions, Affiliated Institutions, and Related Activities of the University, be amended as follows:

additions shown by underlining

\* \* \*

14. Professional Schools

(a) There are established the following schools, with curricula based on two or more years of undergraduate work:

\* \* \*

School of Pharmacy, at San Diego, with curricula leading to the degrees of Doctor of Pharmacy and Doctor of Philosophy.

\* \* \*

Chancellor Dynes informed the Committee that the San Diego campus proposes to establish a School of Pharmacy that builds on a 25-year partnership with UCSF in clinical pharmacy education, recognized excellence in scientific research in pharmacology and related disciplines, an outstanding School of Medicine, strong teaching hospitals, and its location in a region which has the third largest biotechnology industry in the country. The mission of the proposed School of Pharmacy is to provide pharmacy education, pharmaceutical sciences research, and public service programs in San Diego of the highest quality that advance the science of pharmacy and the clinical care and therapeutic counseling provided by pharmacists.

## **Educational Programs**

Educational activities of the school will include the following:

- \$ A Doctor of Pharmacy program, which is the entry-level degree offered in the state for the practice of pharmacy. Some courses in the basic sciences and some aspects of clinical education will be offered jointly with the School of Medicine.
- \$ A seven-year joint B.S./Pharm. D. program in cooperation with UCSD's Department of Chemistry and Biochemistry.
- \$ Continuing as the training site for 18 UCSF students in their clerkship year, exchanging Pharmacy students with UCSF for particular elective or specialty areas and sharing access to courses with UCSF using distance learning modes.
- \$ Education and research training in pharmaceutics, pharmaceutical chemistry, and pharmacology leading to the Ph.D. degree.
- \$ Continuing and expanding pharmacy residency and fellows training programs.
- \$ A continuing education program for practicing pharmacists.

The campus envisions enrolling the first 20 Doctor of Pharmacy students in 2001-02. At steady state, the School will have an entering class of 60 and a total of 240 students in the Doctor of Pharmacy program, 60 Ph.D. students, and 30 residents.

## Need for the School

Pharmacy practice is rapidly changing from traditional compounding and dispensing responsibilities to expanded roles in collaboration with other health professionals in the use and management of drug information, management of chronic disease therapy, pharmacoeconomics, therapeutics, ambulatory care, palliative care, patient education and counseling, pharmaceutical formulation, and clinical testing of the products of biotechnology. Training of pharmacists for the future will require breadth in the basic biomedical sciences and will become computationally intense. Pharmacists will play increasing roles in monitoring drug interactions, adjusting drug doses, consulting in complex

therapeutic and formulation issues, and overseeing the development and testing of new drugs in pharmaceutical and biotechnology companies.

This changing nature of pharmacy practice has resulted in the need for more and bettertrained pharmacists in retail pharmacies, hospital pharmacies, pharmacy outpatient and ambulatory care services, and home care. Both the National Association of Chain Drug Stores and the American College of Pharmaceutical Education report that there is a shortage of pharmacists in southern California. Salaries are high, and many pharmacists are recruited from out of state, but shortages persist. The growing need of biotechnology firms in the San Diego area is of equal importance. Both individual companies and regional industry associations have expressed a need for pharmacy graduates from UCSD and have urged the campus to move speedily to establish the school. It is anticipated that graduates of UCSD's School of Pharmacy will be highly sought after.

The accrediting body for Doctor of Pharmacy programs, the American Council on Pharmaceutical Education, requires that professional programs in pharmacy leading to the Doctor of Pharmacy degree be part of a School of Pharmacy.

The school will advance the economic development of San Diego and California. California is a national leader in biotechnology, and the San Diego area has the third largest concentration of biotechnology companies, most of which are located near to UCSD. As biotechnology products mature into pharmaceuticals, local needs for pharmacists will continue to increase because the FDA requires that pharmacists supervise formulations and production of pharmaceuticals for human consumption.

San Diego is the largest metropolitan area in the U.S. without a pharmacy school. California, with 36 million people, has one state-supported pharmacy school. States such as Washington and South Carolina have two state-supported pharmacy schools for populations of fewer than 5 million people.

#### Research Programs

Research programs in the School of Pharmacy will build on the success of the UCSD campus and the School of Medicine as one of the nation-s top research universities. The research programs will benefit from and enhance the campus research base in structural biology, environmental health sciences, toxicology, and analytical technologies. The school will also benefit and contribute to four unusual research resources at UCSD: (a) the Scripps Institution of Oceanography for drugs of the sea, (b) the San Diego Supercomputer Center for computational studies in pharmacogenomics, (c) the National Institute of Environmental Health Sciences-EPA Fund Center for environmental health research, and (d) the burgeoning biotechnology industry in the immediate campus environs.

#### Academic and Long-Range Development Plan

The establishment of the School of Pharmacy is consistent with the campus= academic plan and long-range development plan.

## Reviews and Approvals

UCSD has been visited by the American Council on Pharmaceutical Education for preaccreditation review of the program. The School of Pharmacy has been approved by the San Diego Division of the Academic Senate and endorsed by the University of California Academic Council. The California Postsecondary Education Commission reviewed the proposal and raised no concerns with its establishment.

## **Resources**

Appropriate funding will be provided consistent with standard University budgetary practice. As with other new professional schools, the Office of the President will provide some supplemental funding for start-up requirements. Funding at this level is expected to be sufficient to achieve a distinguished school of pharmacy.

The State-funded Capital Improvement Program for 2000-2005 proposes funding for a pharmaceutical sciences building, with completion scheduled for 2005-06. This building of approximately 44,000 assignable square feet is programmed to accommodate the steady-state numbers of students and faculty.

Regent Montoya asked that the issue of long-term funding for the school be addressed. Vice President Hershman recalled that all of the University-s campuses receive an allocation related to enrollment growth. The San Diego campus will fund the proposed school of pharmacy using its allocation from the State. With respect to the operating budget, the San Diego campus has an enrollment plan for the coming ten years, and the school will be funded within that enrollment plan. Chancellor Dynes added that the campus is aggressively pursuing support from industry.

Upon motion duly made and seconded, the Committee approved the President-s recommendation and voted to present it to the Board.

# 2. PROGRESS REPORT ON THE CALIFORNIA DIGITAL LIBRARY AND E-SCHOLARSHIP

The Committee was informed that Vice Provost Lucier had had to leave the meeting and that the presentation would be deferred to the September meeting.

# 3. UPDATE ON STUDENT HEALTH CARE

Vice President Drake informed the Committee that the Office of Health Affairs is dedicated to health sciences education, research, and patient care, and has a long-standing interest in student health issues. Campus-based health centers play an important role in providing health services to students when they are away from home. He noted that a **Special Report on Student Health Services** had been provided to the Regents as background for the discussion.

Mr. Steve Lustig, Executive Director of University Health Services at the Berkeley campus, recalled that the University began its tradition of campus-based health care in 1906 when the Berkeley campus opened the nation's first student infirmary. Since then, UC student health services staff have worked diligently to respond to the changing health care needs of students while adjusting to major transformations in the organization of health care. In recent years, managed care and other market-driven changes in the financing and delivery of health care services have posed added challenges to both providers and to students seeking access to health services when they are away from home. The presence of significant and growing numbers of uninsured and underinsured students on the University's campuses, reflective of the swelling ranks of uninsured in California and the nation, represents a serious challenge. College students without access to affordable health care beyond that offered in the student health centers are at risk of not seeking medical help when needed and developing more serious medical problems that can place them at academic risk through missed classes, poor academic performance, and withdrawal from the University.

#### Mission and Scope of Services

The promotion and preservation of student health supports learning, personal growth, and academic achievement. Within this context, the mission of the University's student health centers is to help enable students to successfully pursue their academic goals through treatment and prevention services that address the physical, emotional, and social factors affecting their health.

The core services provided by all student health centers include primary and urgent care, health education, and access to clinical laboratory, radiology, and pharmacy services. The student health centers also coordinate the provision of voluntary and mandatory student health insurance plans. Mental health services also are provided by the student health centers or other campus departments. In addition to these core services, some campuses offer expanded resources. For example, six campuses offer physical therapy, five offer vision care and optometry services, and four provide dental care. On-campus care is complemented by specialty care provided through contractual arrangements with physicians in the community or consulting specialists on staff at some campuses. Emergency services, hospitalization, and complex laboratory and x-ray services also are provided off campus. These services may be necessary to treat a sudden illness or accident or for students with chronic conditions.

Under the current system, on-campus services are supported through a combination of registration fees, fee-for-service payments, and other sources of income. Over time, registration fees have comprised a declining portion of the revenue base for all student health

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services. For example, in 1998-99, 57 percent of funding came through registration fees, 34 percent through "out-of-pocket" payments, and 9 percent from other sources. Across all campuses, the student health services receive approximately 19 percent of the total registration fees paid by students for an average of \$146 per student per academic year. Off-campus services are supported by private insurance or on a fee-for-service basis. <u>Utilization Trends</u>

Between 55 percent and 90 percent of all students use the student health services while they attend the University. In 1997-98, the nine student health centers provided more than 376,000 medical and mental health visits, filled more than 164,000 prescriptions, processed over 260,000 laboratory tests and x-rays, and reached over 124,000 students with health education efforts. In support of this endeavor, the campus employs more than 560 full-time equivalent student health services staff at the nine campuses, including 50 board-certified physicians, 44 licensed nurse practitioners/physician assistants, and 45 nurses.

# Clinical Trends

While the traditional health concerns of the college population such as colds and flu, sports injuries, and contraception account for the majority of visits, clinicians are treating increasing numbers of students with chronic and complex medical and mental health conditions, as well as conditions that are associated with the older adult population. Recreational sports injuries resulting from activities such as in-line skating and skateboarding; asthma, allergies, and other chronic conditions; and repetitive strain injuries are emerging health issues among college students nationwide. Other major health risks for student populations include alcohol and other drug use, suicide, sexual assault, relationship violence, eating disorders, unintended pregnancy, and sexually transmitted diseases. Student health centers also offer services to meet the health needs of growing numbers of single parents, first generation immigrants, students with physical or psychological difficulties, and older students.

## Current and Future Challenges

Campus health centers face complex challenges resulting from both changes in the health care marketplace and their unique role in caring for a large student population. Physicians and other providers are increasingly faced with meeting heightened patient expectations in the era of the Internet, direct-to-consumer pharmaceutical advertising and advances in medical and pharmaceutical technology. Physician group and hospital mergers in the community continue to affect the University's ability to provide referrals to off-campus specialists, laboratory and x-ray services, and may interrupt coordination of care and reduce access to provider networks. In some regions of the state, the University is also facing difficulties recruiting and retaining qualified professional staff for the student health centers.

In response to these challenges and growing needs, graduate students at all campuses, as well as undergraduates at Berkeley and Santa Cruz, have approved mandatory fees through student referenda to provide students with major medical insurance. This approach has the advantages of providing coverage to all students who are members of the defined group and

improved benefits at lower annual costs because pooling larger numbers of students provides negotiating leverage with insurers.

Although undergraduate students at the other seven campuses have the option of purchasing a comprehensive student health insurance plan, an estimated 40 percent of UC undergraduates are currently uninsured or underinsured. If faced with an unexpected illness or injury, students without health coverage may be at high risk for interruption of their studies. In these circumstances, students often face significant difficulties in gaining acces off-campus health care, as well as unplanned s to financial obligations. Systemwide, an estimated 25 percent of withdrawals are for medical reasons, a significant portion of which are linked to inadequate or no insurance.

Associate Vice President Galligani reported that concerns regarding the number of uninsured or underinsured UC students had led the University's Student Health Insurance Advisory Committee to recommend that the University ensure that all students have access to comprehensive health insurance. Consistent with the committee's recommendation, in May 1998 the Council of Vice Chancellors for Student and Undergraduate Affairs, with the endorsement of the University of California Student Association, recommended that the University take steps to require all UC undergraduates to show proof of adequate insurance coverage as a non-academic condition of enrollment. This action would ensure that programs such as those already in place at Berkeley and Santa Cruz would be established for all UC undergraduates. The committee's recommendation has been widely reviewed by University constituents and has received broad endorsement. It is anticipated that this measure will be brought to The Regents for action at the September meeting.

[The **Special Report on Student Health Services** was mailed to all Regents in advance of the meeting, and a copy is on file in the Office of the Secretary.

## 4. **QUARTERLY REPORT ON PRIVATE SUPPORT**

In accordance with the Schedule of Reports, the **Quarterly Report on Private Support** for the period January 1 through March 31, 2000 was submitted for information.

[The report was mailed to all Regents in advance of the meeting, and a copy is on file in the Office of the Secretary.]

The meeting adjourned at 3:15 p.m.

Attest:

Secretary