

# The State of the Medical School - 1996: Emergence as a National Leader

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The past year has been a banner one for Wright State University School of Medicine in accomplishing its prime directive within a major metropolitan university. Our mission and vision are clear and have been discussed extensively with students, staff, faculty and many actively involved partners in the community. Succinctly stated, the School of Medicine's mission and vision are:

**Mission** - To provide for the general professional education of physicians, with an emphasis on primary care, in an environment that advances life-long learning and research and is responsive to and an integral part of the community which we serve.

**Vision** - To progress as a preeminent community-based medical school that advances new models of academic excellence and community health care.

Meeting these directives has required the creativity and energy of many talented people in the university and community. Together, we help to make our region and nation a vital and productive one for health care education, research and service. This fact has not gone unnoticed. Our consultation is often sought at the national level. In past discussions with President Clinton and key Congressional leaders, it was clear that they have come to appreciate the quality and cost-effectiveness of Wright State's model for a community-based medical school.

The School of Medicine's top performance indicators in 1995, the culmination of continual trends over the past five years, demonstrate how we are meeting our mission in medical education, research, and service. The outcomes discussed below also point to important new directions for medical education in the U.S.

## *EDUCATION*

Medical educators across the nation are attempting to keep pace with rapid changes in both the

health care delivery system and the nation's demographics. The medical education experience at Wright State has anticipated many of these changes, and our graduates demonstrate excellence in clinical skills and physician-patient relationships.

**Career choices:** 73% of our 1995 graduates selected primary care residencies, placing Wright State in the 97th percentile nationally. 54% of the graduates were women and 21% were minorities (ranking over the 90th percentile in each category).

**License exam:** 99% of our graduates passed their board exams with 95% passing Step 1 the first time. These success rates are better than those at most medical schools nationwide.

**Employer ratings:** 95% of Wright State's graduates are rated equal to or better than their peers in evaluations by residency directors in both university- and community-based programs.

## *RESEARCH*

Amid concerns about federal deficit reduction and budget cuts, biomedical research remains a national priority that is highly valued by most Americans. It is clear that federal research funding is a finite resource. Wright State's research development efforts position us to remain competitive and cost-effective in the pursuit of new medical knowledge.

**Growth rate:** Research funding at the School of Medicine has increased 98% over the past five years, enabling Wright State University to achieve the third largest research funding level among state universities in Ohio.

**Benefit/cost ratio:** Wright State has the highest ratio of research funding per state appropriations among community-based medical schools in the U.S. The ratio holds for both basic and applied research.

## *SERVICE*

As a community-based medical school, Wright State is committed to developing community partnerships that strengthen the health care delivery system in our region. The flexibility and responsiveness of our community-based system yields new approaches to both professional education and patient care.

**Ambulatory care:** Wright State has one of the largest multi-site systems among community-based medical schools nationwide. Last year, we provided care for about 500,000 patient visits, many of whom are urban and rural poor.

**Trauma care:** In our region, trauma patients have a 92% survival rate; nationally, the rate is 85%. The Greater Dayton Area Injury Prevention and Research Center, coordinated by faculty in Wright State's Department of Surgery, was nominated for a national award.

In 1995, Wright State School of Medicine also received seven years of full accreditation from the Liaison Committee on Medical Education (LCME), the maximum length allowable. LCME reviewers noted the medical school's extraordinary partnerships in the community, including our dedicated voluntary faculty and diverse health care affiliates. The LCME also noted strong interdisciplinary programs and research efforts among departments and colleges at Wright State that have achieved national and international stature:

- Aerospace Medicine Residency
- Center for Healthy Communities
- Division of Human Biology - Fels
- Function of Cell Membranes
- Institute for Rehabilitation Research and Medicine
- Legal and Ethical Issues in Elder Care
- Pregnancy Loss Prevention
- Primary Health Care Education
- Structure of Nerve Cells
- Substance Abuse Intervention
- Greater Dayton Area Injury Prevention and Research Center

In 1996, we look forward to continued growth in the School of Medicine's community partnerships. Our plans anticipate changes that are likely to occur in the health care delivery system, including an increased penetration of managed care, evolution of hospital mergers, movement of care from inpatient to ambulatory settings, and the changes in graduate medical education funding.

In education, we plan to implement a systems-based curriculum following a blueprint developed in the past year. Pilot programs in neuroscience have been very well received by students and faculty. In research, we intend to expand opportunities for interdisciplinary collaboration through the use of electronic mail (E-mail) and Internet access for all departments. We will implement innovative faculty development programs and guidelines for research centers of excellence. In service, we will continue to expand ambulatory training in urban and rural sites, with a continued examination of the role of telemedicine and the evolution of a seamless system for patient care.

As our 1995 performance outcomes indicate, Wright State University School of Medicine is well positioned to meet the challenges of emerging national trends in medical education. We look forward to continued collaboration with our partners in the community. The future for community-based medical education here indeed looks bright and exciting.