

Recruiting, Training, and Retaining a Medical Student Workforce to Meet the Needs of California

Tonya Fancher MD MPH

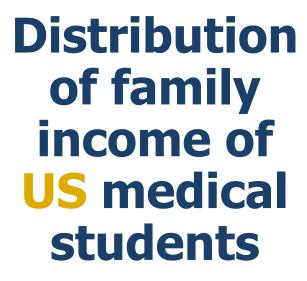
Director, Center for a Diverse Healthcare Workforce
Associate Dean, Workforce Innovation and Education Quality
Interim Head, General Internal Medicine and Bioethics
Vice Chair, Workforce Diversity
Professor, General Internal Medicine
TLFancher@UCDavis.edu

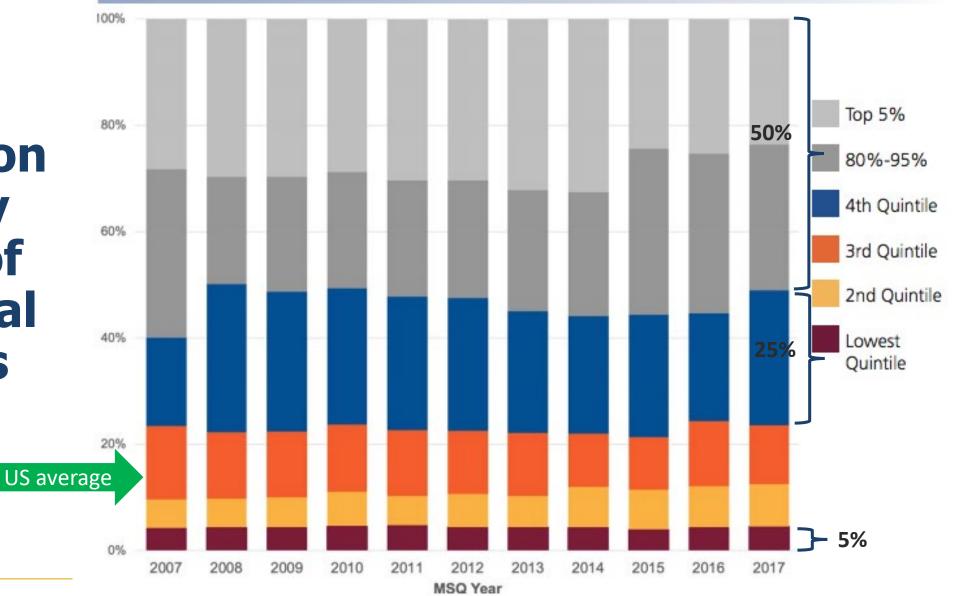


Charting Outcomes : Demographic Characteristics of Applicants in the Main Residency Match® and SOAP® report







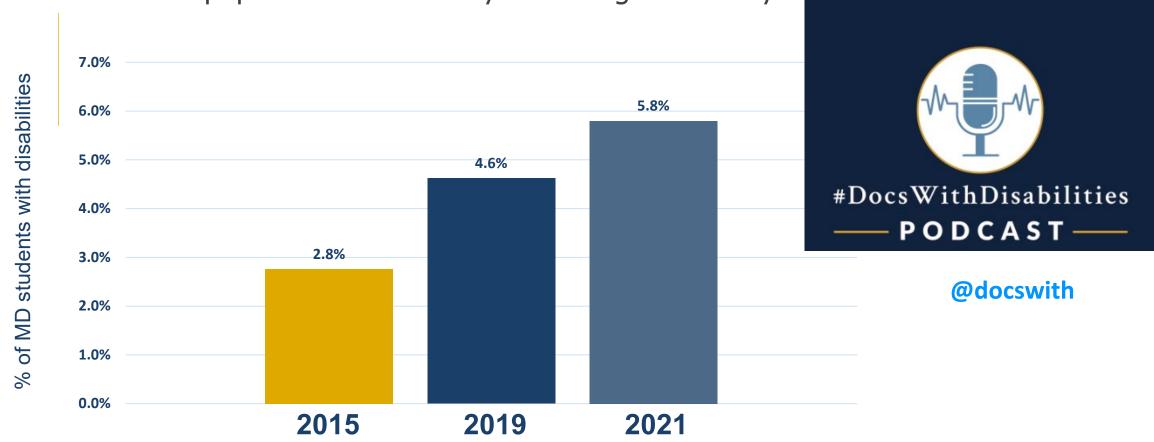






Disability Representation in Medical Education

18.7% of the US population self-identify as having a disability



Sources: Why Increasing Numbers of Physicians with Disability Could Improve Care for Patients with Disability, Lisa I. Iezzoni, MD, MSc, AMA J Ethics. 2016; Health Professionals with Disabilities: Motivating Inclusiveness and Representation, Sarah Waliany, AMA J Ethics. 2016



Language Concordance

Figure 1. Glycated Hemoglobin Levels in LEP Latino Patients With Diabetes Before and After Switching Primary Care Physicians

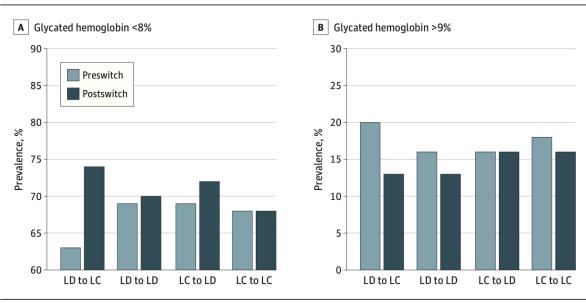
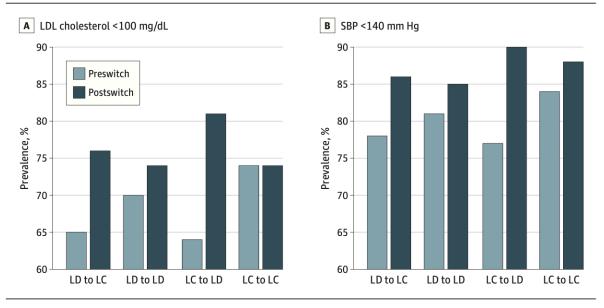


Figure 2. LDL Cholesterol and SBP in LEP Latino Patients With Diabetes Before and After Switching Primary Care Physicians



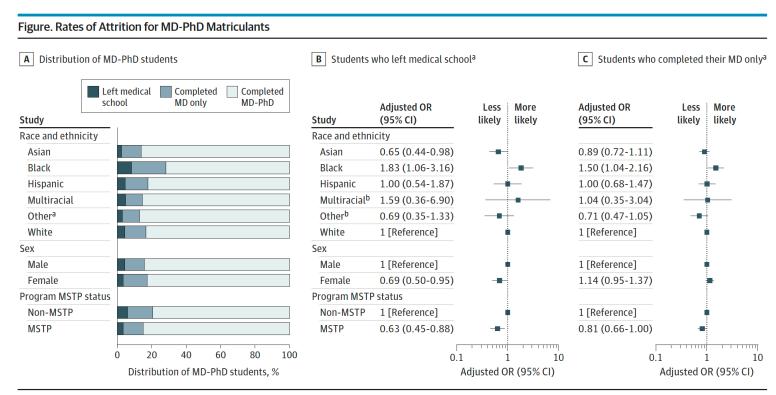
Parker MM, Fernández A, Moffet HH, Grant RW, Torreblanca A, Karter AJ. Association of Patient-Physician Language Concordance and Glycemic Control for Limited–English Proficiency Latinos With Type 2 Diabetes. *JAMA Intern Med.* 2017;177(3):380–387. doi:10.1001/jamainternmed.2016.8648



MD-PhD Students Attrition

Table. Characteristics of MD-PhD Matriculants, 2004-2012

Characteristic	No. (%)		
Total No. of MD-PhD students	4702		
Race and ethnicity			
American Indian/Alaska Native or Hawaiian Native/ Pacific Islander	9 (0.2)		
Asian	1011 (21.5)		
Black or African-American	215 (4.6)		
Hispanic	265 (5.6)		
White	2724 (57.9)		
Multiracial	164 (3.5)		
Asian and White	122 (2.6)		
American Indian/Alaska Native or Hawaiian Native/ Pacific Islander and White	19 (0.4)		
Black and White	14 (0.3)		
Other multiracial	9 (0.2)		
Other ^a	314 (6.7)		
Sex			
Female	1803 (38.3)		
Male	2899 (61.7)		
MCAT score quartile ^b			
≤30	1132 (24.1)		
31-33	1153 (24.5)		
34-36	1284 (27.3)		
≥37	1133 (24.1)		
Program MSTP status			
Non-MSTP	1093 (23.2)		
MSTP	3609 (76.8)		



MSTP indicates Medical Scientist Training Program.

Indian or Alaska Native or Hawaiian Native or Pacific Islander were grouped with other race and ethnicity, and multiracial students are shown in aggregate.



^a Adjusted for Medical College Admissions Test quartiles.

^b Due to underrepresentation in the cohort, students identifying as American

Training the Doctors that California Needs

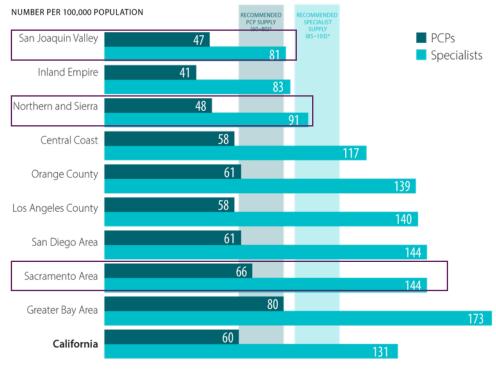


California Health Outcomes 2023

www. County Health Rankings. com

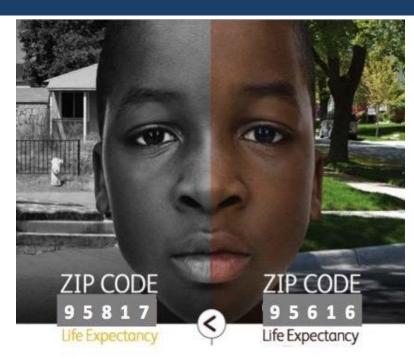
Concordant care improves health outcomes

Primary Care Physicians and Specialists, by Region California, 2020



California Health Care Foundation

More and diverse primary care docs improves life expectancy



77

87

Place matters (grow up and train)



Center for a Diverse Healthcare Workforce



#3 in Diversity #5 in Family Medicine #6 in Primary Care

Med School Pathways that reflect community needs

- Northern California, rural, and frontier: Rural PRIME
- **Urban Sacramento:** Transforming Education and Community Health (TEACH)
- **Central Valley (agricultural and urban):** REACH
- Tribal, Urban, and Rural from Sacramento to Portland: COMPADRE with OHSU
- **5-year Research**: ARC-MD
- **Accelerated 3-year MD to Primary Care**: ACE-PC
- American Indian, Native American, Alaska Native and Tribal Communities: Tribal PRIME
- Community College to Medical School: Avenue M













Central Valley















Rural















Urban















Center for a Diverse Healthcare Workforce



Exemplars

3-Year MD to Residency



- Primary Care
- Direct progression from medical school to residency
- 85% first-generation
- 80% URiM
- Older
- Lower metrics than 4-year

Community College to Medical School



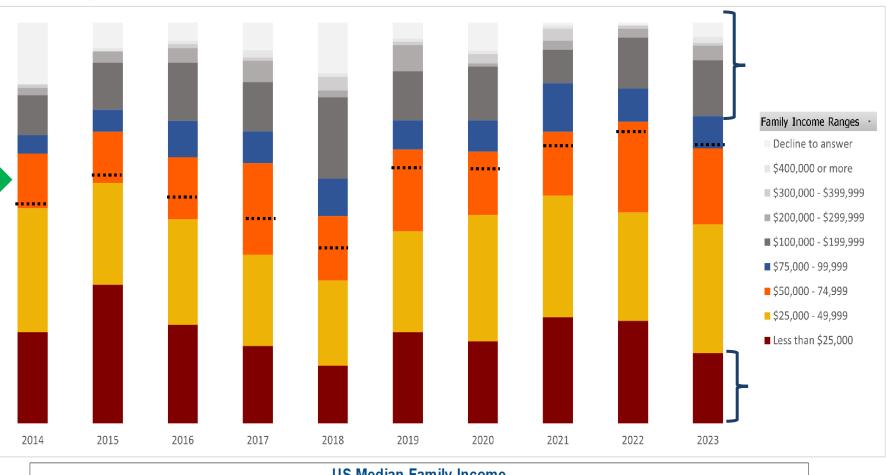
- 51% Latino, 33% Black/AA Family Medicine residents attended CC
- In CA, 2.5% transfer within2 year and 23% within 4years

Tribal Health across Region



- UC Davis, OHSU, WSU
- Wy'east Post-Bac
- Conditional acceptance
- UC tuition waiver
- Tribal nations & tribalfocused non-profits

US average **Distribution** of family income of **UC DAVIS** students



US Median Family Income										
2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	
\$53,657	\$56,516	\$59,039	\$61,136	\$63,179	\$68,703	\$68,010	\$70,784	\$73,666	\$76,665	
2022 L 2022 L 2022 H										

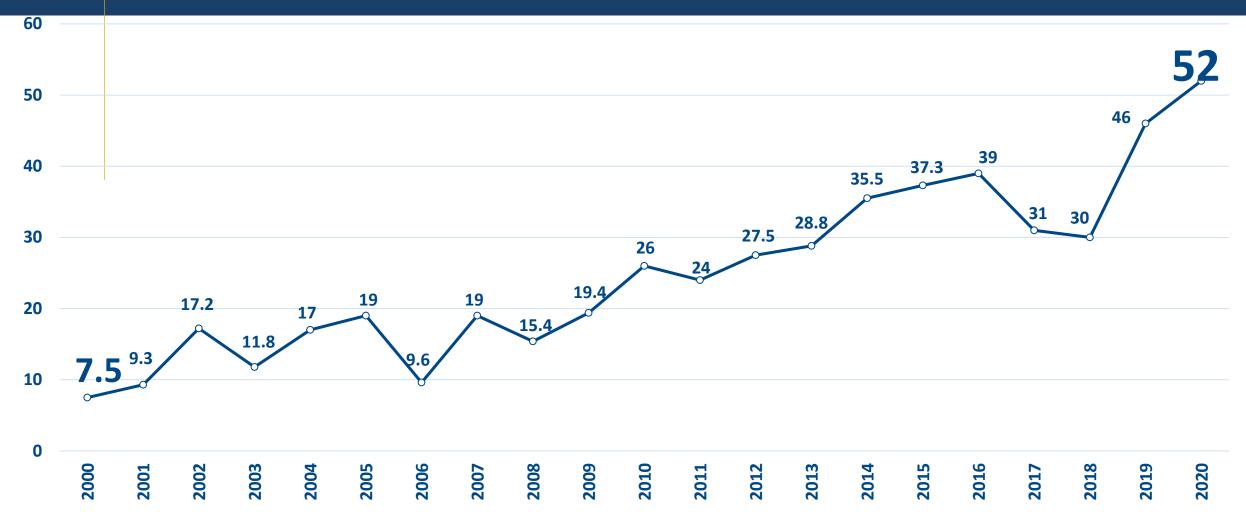
www.census.gov, 2022 and 2023 are the average percentage increase from 2014-2021 which is 4.07%





Center for a Diverse

% of UC Davis SOM Matriculants From Groups Underrepresented in and Historically Excluded from Medicine* (2000-2020)









Facilitators of Success (Selected)

Admissions AND Retention

Leadership support

Scholarships and Financial Aid

- NAOP: Tuition and Fees are fully covered for California students who are also enrolled in federally recognized Native American, American Indian, and Alaska Native tribes.
- Mission-focused scholarships

Policies, Practices, and Partnerships

- Grade equity
- Accessible accommodations
- Clinics, health plans

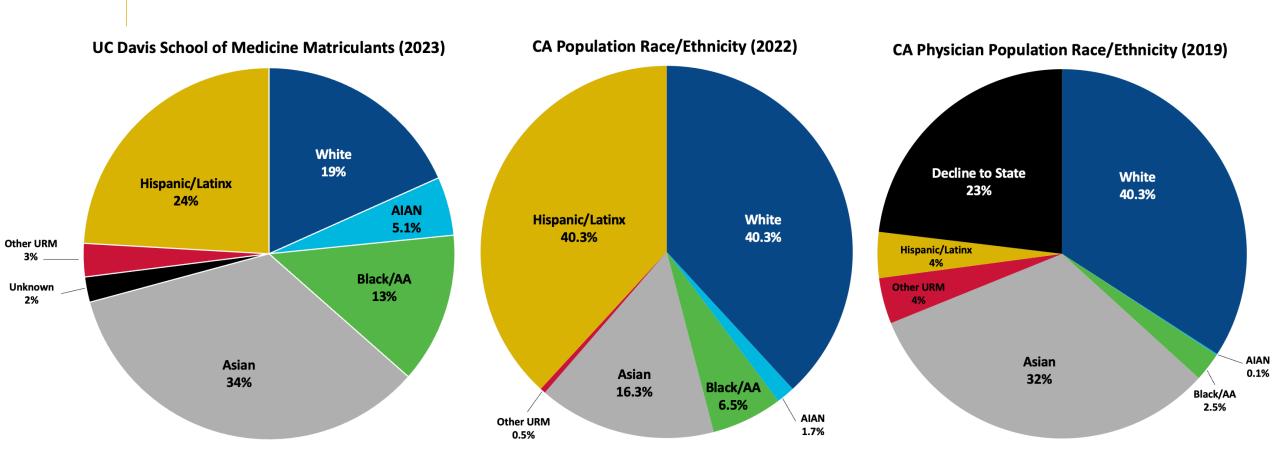
https://admission.university of california.edu/tuition-financial-aid/types-of-aid/native-american-opportunity-plan.html.





#6 in Primary Care

Racial and Ethnic Breakdown of UC Davis Matriculants, CA Population, and CA Physicians



https://www.aamc.org/data-reports/students-residents/interactive-data/2021-facts-enrollment-graduates-and-md-phd-data https://www.census.gov/quickfacts/fact/table/CA/PST045222

