



UC PRIME: Training doctors and nurses for California's under-served communities

As the state's population becomes larger and more diverse, increasing numbers of Californians lack access to quality health care, resulting in a growing disparity between well-served and underserved communities. California will have a doctor shortage of almost 16% by the next decade, exacerbating current health care disparities. Yet California has not expanded medical education in the state in almost 30 years; the University of California, which trains about 60% of the state's medical students, educates few medical centers and about the same number of medical residents as it did in 1982.

A 10-year plan begun in 2005 to increase UC medical school enrollments by 10%, the University's "PPrograms in Medical Education" (PRIME) will produce an additional 250-300 physician-leaders committed and trained to serve California's underserved communities, including inner-city areas, rural communities, the Inland Empire and the Central Valley.

A PRIME program is already in its second year of operation at UC Irvine. PRIME programs are also being developed at other UC campuses with a medical school (Davis, Los Angeles, San Diego and San Francisco).

Launched in fall 2004 at Irvine, the UC Program in Medical Education for the Latino Community, or PRIME-LC, is the first program of its kind in the nation and designed to address the critical shortage of quality health care for California's growing population of underserved, at-risk patients. PRIME-LC combines medical-school training focused on Latino health issues with post-graduate work in environmental health, science and policy. Graduates will earn both a medical degree and master's degree.

(www.ucihs.uci.edu/som/meded/primelc and video at www.universityofcalifornia.edu/everyday/primelc)

The initial PRIME-LC students represented the first increase in medical student enrollment at UC in a quarter-century.

At UC Davis, the PRIME-Rural effort includes a telemedicine program that reaches more than 65 sites across California, providing immediate access to specialty consultation which facilitates faster referrals when needed, but allows patients to stay in their hometown for care when it's safe to do so. It also features tele-pharmacy and tele-education components as well as partnerships to test new home-based technologies.

For more background on California's need for health-care professionals:

Report on UC Health Sciences Education: Workforce Needs and Enrollment Planning (April 2005)

www.ucop.edu/healthaffairs/UC%20binder_final_9.1.pdf

Report on "California Physician Workforce: Supply and Demand through 2015" (Dec. 2004)
ucop.edu/healthaffairs/reports/Final%20Report%20-%20California%20Physician%20Workforce_12_20042.pdf