



An Idea and a Movement

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Social Mission of Medical Education: Ranking the Schools

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The Social Mission of Medical Education: Ranking the Schools

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Background: The basic purpose of medical schools is to educate physicians to care for the national population. Fulfilling this goal requires an adequate number of primary care physicians, adequate distribution of physicians to underserved areas, and a sufficient number of minority physicians in the workforce.

Objective: To develop a metric called the social mission score to evaluate medical school output in these 3 dimensions.

Design: Secondary analysis of data from the American Medical Association (AMA) Physician Masterfile and of data on race and ethnicity in medical schools from the Association of American Medical Colleges and the American Association of Colleges of Osteopathic Medicine.

Setting: U.S. medical schools.

Participants: 60 043 physicians in active practice who graduated from medical school between 1999 and 2001.

Measurements: The percentage of graduates who practice primary care, work in health professional shortage areas, and are underrepresented minorities, combined into a composite social mission score.

Results: The contribution of medical schools to the social mission of medical education varied substantially. Three historically black colleges had the highest social mission rankings. Public and community-

based medical schools had higher social mission scores than private and non-community-based schools. National Institutes of Health funding was inversely associated with social mission scores. Medical schools in the northeastern United States and in more urban areas were less likely to produce primary care physicians and physicians who practice in underserved areas.

Limitations: The AMA Physician Masterfile has limitations, including specialty self-designation by physicians, inconsistencies in reporting work addresses, and delays in information updates. The public good provided by medical schools may include contributions not reflected in the social mission score. The study was not designed to evaluate quality of care provided by medical school graduates.

Conclusion: Medical schools vary substantially in their contribution to the social mission of medical education. School rankings based on the social mission score differ from those that use research funding and subjective assessments of school reputation. These findings suggest that initiatives at the medical school level could increase the proportion of physicians who practice primary care, work in underserved areas, and are underrepresented minorities.

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For author affiliations, see end of text.

www.annals.org

Medical Schools Social Mission Score, Primary Care, HPSA and Minorities Highest Scores

Rank	School	State	Social Mission Score	% Primary Care [std score]	% HPSA [std score]	URM School State (Nation) Ratio [std score]	School URM%	State (Nation) URM%
1	Morehouse College	GA	13.98	43.7 [1.20]	39.1 [1.40]	3.15 [11.38]	83.3	26.5
2	Meharry College	TN	12.92	49.3 [2.00]	28.1 [0.14]	2.99 [10.78]	79.3	26.5
3	Howard University	DC	10.66	36.5 [0.19]	33.7 [0.78]	2.71 [9.68]	71.9	26.5
4	Wright State University	OH	5.34	49.2 [1.98]	28.0 [0.12]	1.31 [3.23]	19.0	14.5
5	University of Kansas	KS	4.49	45.2 [1.42]	43.9 [1.96]	0.77 [1.12]	11.6	15.1
6	Michigan State	MI	4.13	43.6 [1.20]	26.5 [-0.05]	1.24 [2.99]	23.7	19.1
7	East Carolina University	NC	3.72	51.9 [2.36]	34.2 [0.84]	0.62 [0.52]	17.3	28.1
8	South Alabama	AL	3.15	42.0 [0.97]	52.7 [2.97]	0.29 [-0.78]	8.2	28.7
9	Ponce Medical College	PR	3.02	33.0 [-0.31]	43.8 [1.94]	0.84 [1.38]	82.5	98.8
10	Iowa Carver	IA	2.97	37.1 [0.28]	21.0 [-0.69]	1.35 [3.38]	8.1	6.0
11	OHSU	OR	2.93	43..8 [1.22]	43.8 [1.94]	0.43 [-0.23]	5.5	13.0
12	East Tennessee	TN	2.88	53.5 [2.58]	32.7 [0.67]	0.39 [-0.37]	7.6	19.5
13	University of Mississippi	MS	2.86	33.5 [-0.24]	62.5 [4.11]	0.23 [-1.01]	8.8	38.3
14	University of Kentucky	KY	2.61	39.8 [0.65]	32.5 [0.64]	0.82 [1.32]	8.0	9.8
15	Southern Illinois	IL	2.59	45.0 [1.39]	46.5 [2.26]	0.22 [-1.06]	6.1	28.3
16	Marshall University	WV	2.51	46.8 [1.64]	20.9 [-0.70]	0.89 [1.58]	4.2	4.7
17	University of Mass	MA	2.48	45.9 [1.52]	36.7 [1.12]	0.44 [-0.15]	5.9	13.3
18	University of Illinois	IL	2.27	36.7 [0.21]	35.7 [1.01]	0.75 [1.05]	21.2	28.3
19	University of NM	NM	2.25	46.7 [1.63]	30.7 [0.43]	0.53 [0.19]	28.8	53.9
20	University of Wisconsin	WI	2.24	35.7 [0.07]	19.3 [-0.87]	1.26 [3.03]	13.8	11.0

Medical Schools Social Mission Score, Primary Care, HPSA and Minorities Lowest Scores

Rank	School	State	Social Mission Score	% Primary Care [std score]	% HPSA [std score]	URM School State (Nation) Ratio [std score]	School URM%	State (Nation) URM%
122	Johns Hopkins University	MD	-1.9	24.3 [-1.53]	26.7 [-0.02]	0.40 [-0.35]	10.5	26.5
123	Stanford University	CA	-1.9	27.4 [-1.10]	16.2 [-1.23]	0.59 [0.43]	15.7	26.5
124	Duke University	NC	-1.91	22.3 [-1.82]	23.9 [-0.34]	0.55 [0.24]	14.5	26.5
125	Texas A&M	TX	-1.95	37.0 [0.26]	16.2 [-1.24]	0.24 [-0.97]	10.6	44.7
126	Columbia University	NY	-1.98	20.3 [-2.10]	31.8 [0.57]	0.37 [-0.45]	9.8	26.5
127	Albany Medical College	NY	-2.00	30.7 [-0.63]	24.2 [-0.32]	0.22 [-1.06]	5.7	26.5
128	Medical College of WI	WI	-2.02	33.5[-0.23]	15.9[-1.28]	0.36[-0.51]	9.4	26.5
129	University of Penn.	PA	-2.03	19.1[-2.27]	20.4[-0.76]	0.74[0.99]	19.5	26.5
130	Loyola University	IL	-2.06	33.7[-0.20]	20.7[-0.72]	0.20[-1.14]	5.2	26.5
131	Boston University	MA	-2.12	26.7 [-1.19]	23.3[-0.42]	0.35[-0.52]	9.4	26.5
132	Einstein	NY	-2.13	26.1[-1.28]	24.8[-0.25]	0.33[-0.60]	8.8	26.5
133	Stony Brook University	NY	-2.21	29.1[-0.85]	20.4[-0.76]	0.33[-0.60]	10.5	31.7
134	Thomas Jefferson	PA	-2.34	32.1[-0.42]	20.6[-0.72]	0.18[-1.19]	4.8	26.5
135	Uniformed Services	MD	-2.36	29.6[-0.78]	21.4[-0.64]	0.24[-0.95]	6.5	26.5
136	UMDNJ-New Jersey	NJ	-2.46	23.7[-1.61]	17.8[-1.05]	0.54[0.20]	14.8	27.7
137	NYU	NY	-2.65	24.3[-1.53]	22.1[-0.55]	0.34[-0.57]	9.0	26.5
138	UC – Irvine	CA	-3.02	32.9[-0.32]	14.2[-1.47]	0.17[-1.24]	7.0	41.2
139	Northwestern University	IL	-3.11	24.4 [-1.51]	19.5[-0.86]	0.30[-0.74]	7.9	26.5
140	UT - Southwestern	TX	-3.64	26.8 [-1.18]	15.1 [-1.36]	0.21 [-1.09]	9.3	44.7
141	Vanderbilt University	TN	-3.95	21.9 [-1.86]	20.8 [-0.07]	0.13 [-1.38]	3.6	26.5

Social Mission of Health Professions Schools

The social mission of a health professions school is the contribution of the school in its mission, programs, and the performance of its graduates in addressing the health disparities of the society in which it exists

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Manifestations of Social Mission in Medical Education

- **Community Engagement**
- **Diversity promotion**
- **Disparities reduction**
- **Cost/value concern**
- **Engagement with social determinants of health**



MEDICAL EDUCATION
IN THE
UNITED STATES AND CANADA

A REPORT TO
THE CARNEGIE FOUNDATION
FOR THE ADVANCEMENT OF TEACHING

BY
ABRAHAM FLEXNER

WITH AN INTRODUCTION BY
HENRY S. PRITCHETT
PRESIDENT OF THE FOUNDATION

BULLETIN NUMBER FOUR (1910)
(Reproduced in 1960)
(Reproduced in 1972)

437 MADISON AVENUE
NEW YORK CITY 10022

Flexner's Legacy - Upside

- **Linked medical education to science**
- **Standardized the curriculum**
- **Demanded excellence in teaching**
- **Promoted medical research**

Flexner's Legacy - Downside

- **A formula for large, ultimately less flexible, institutions**
- **Did not contemplate the social determinants of health**
- **Did not envision health as a human right**

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beyond
FLEXNER
Social Mission in Health
Professions Education

Beyond Flexner Alliance

- Promotes social mission in health professions education
- Uses social and conventional media to convey information about social mission
- Stimulates research and innovation in regard to social mission metrics
- Sponsors Beyond Flexner conferences
- Commits to intrerprofessional and collaborative principles in all activities
- Works for equity in health professions education and practice

CORE CONCEPTS AND PRINCIPLES

- Promote a **culture of accountability** in health professions education that values health equity
- Raise **public consciousness** about social mission
- Impact **future leaders'** understanding and commitment to social mission
- Create **social mission standards and metrics**
- Support pathways **to assure a diverse workforce** including leadership



Beyond Flexner 2012

University of Oklahoma – Tulsa School of Community Medicine



Beyond Flexner 2015

University of New Mexico

Albuquerque, NM



Beyond Flexner 2016

Florida International University Miami, Florida









BEYOND FLEXNER DINNER AND
THE JOSIAH MACY JR. FOUNDATION AWARDS



BF 2016 Workshop Sampler

- **Pipeline to Enhance Diversity**
- **SDoH Interventions**
- **Social Mission Accountability and Metrics**
- **Social Mission Research**
- **Teaching Health Center GME: A National Residency Program**
- **Teaching Social Determinants of Health**
- **Admissions and Recruitment to Enhance Diversity Enhancement:**
- **Global Social Mission**
- **Hotspotting to Address SDOH**
- **Interprofessional Education and Health Equity**
- **Medical-Legal Partnerships**
- **New Models for GME funding**

Beyond Flexner 2018

- April 9-11, 2018 -- Atlanta, Georgia
- Hosted by Morehouse School of Medicine and Emory School of Nursing
- Keynote speakers ...
 - Sir Michael Marmot
 - Ambassador Andrew Young
- Do come!
- <http://beyondflexner.org>

**The arc of the moral universe is long
but it bends towards justice**

-- MLK

Health Workforce
Institute

THE GEORGE WASHINGTON UNIVERSITY

Social Mission Metrics Study

Social Mission Metrics Study

Year 1 -- 2016

- **RWJF funding**
- **Interprofessional study (dentistry, medicine and nursing)**
- **Advisory Committee**
- **Consultant metrician**
- **Developed SMM survey based on domains and activities**



Social Mission

Domains and Activities

- **Domains**

A health professional school function that has the potential to promote social mission

- **Activities**

Measurable components of the domain

Domain	Activities	Evidence
Governance	<ul style="list-style-type: none"> • Social mission values explicit in written goals 	<ul style="list-style-type: none"> • Mission statement or strategic plan identifies a specific medically disadvantaged community of commitment
Community Engagement	<ul style="list-style-type: none"> • Meaningful bidirectional community partnerships 	<ul style="list-style-type: none"> • Legal partnerships, CTSA involvement, faith based partnerships, FQHC partnerships/practice or clinical teaching arrangements, school/education partnerships, public health department partnerships, philanthropic organization partnerships
Curriculum	<ul style="list-style-type: none"> • Social mission embedded in curriculum 	<ul style="list-style-type: none"> • Defined competency or domain in value-based care, health equity or disparities, social determinants of health, public health, health policy, advocacy, ethics
Diversity and Inclusion	<ul style="list-style-type: none"> • Establishment and yield of pipeline programs 	<ul style="list-style-type: none"> • Number of minority students impacted, percentage of participating students entering higher education
Research	<ul style="list-style-type: none"> • Community needs impact research agenda 	<ul style="list-style-type: none"> • To what extent is the research agenda/project guided by a community needs assessment
Institutional Culture and Climate	<ul style="list-style-type: none"> • Culture of inclusive excellence 	<ul style="list-style-type: none"> • Cultural competency/cultural humility training

Potential Impact of SMM

- Influence the concept of what good health professions education is – education, service, research and social mission
- Impact the conversation on educational mission, quality and standards
- Stimulate school self studies
- Stimulate IPE engagement around social mission
- Affect accreditation standards for HPE

Beyond Flexner Alliance

<http://beyondflexner.org>