	CHAMBER ACTION Senate House
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11	Senator King moved the following amendment:
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13	Senate Amendment (with title amendment)
14	Delete everything after the enacting clause
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16	and insert:
17	Section 1. Florida State University College of
18	Medicine
19	(1) CREATIONThere is established a 4-year
20	allopathic medical school within the Florida State University,
21	to be known as the Florida State University College of
22	Medicine, with a principal focus on recruiting and training
23	medical professionals to meet the primary health care needs of
24	the state, especially the needs of the state's elderly, rural,
25	minority, and other underserved citizens.
26	(2) LEGISLATIVE INTENTIt is the intent of the
27	Legislature that the Florida State University College of
28	Medicine represent a new model for the training of allopathic
29	physician healers for the citizens of the state. In accordance
30	with this intent, the governing philosophy of the College of
31	Medicine should include the training of students, in a humane
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environment, in the scientific, clinical, and behavioral practices required to deliver patient-centered health care in the 21st century. Key components of the College of Medicine, which would build on the foundation of the 30-year-old Florida State University Program in Medical Sciences (PIMS), would include: admission of diverse types of students who possess good communication skills and are compassionate individuals, representative of the population of the state; basic and behavioral sciences training utilizing medical problem-based teaching; and clinical training at several dispersed sites throughout the state in existing community hospitals, clinics, and doctors' offices. The Legislature further intends that study of the aging human be a continuing focus throughout the 4-year curriculum and that use of information technology be a key component of all parts of the educational program.

- dedicated to: preparing physicians to practice primary care, geriatric, and rural medicine, to make appropriate use of emerging technologies, and to function successfully in a rapidly changing health care environment; advancing knowledge in the applied biomedical and behavioral sciences, geriatric research, autism, cancer, and chronic diseases; training future scientists to assume leadership in health care delivery and academic medicine; and providing access to medical education for groups which are underrepresented in the medical profession.
- (4) TRANSITION; ORGANIZATIONAL STRUCTURE; ADMISSIONS

 PROCESS.--The General Appropriations Act for fiscal year

 1999-2000 included initial funding for facilities and

 operations to provide a transition from the Program in Medical

 Sciences (PIMS) to a College of Medicine at the Florida State

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University. For transitional purposes, the Program in Medical
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    Sciences (PIMS) in the College of Arts and Sciences at the
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    Florida State University shall be reorganized and
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    restructured, as soon as practicable, as the Institute of
    Human Medical Sciences. At such time as the 4-year educational
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    program development is underway and a sufficient number of
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    basic and behavioral sciences and clinical faculty are
    recruited, the Institute of Human Medical Sciences shall
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    evolve into the Florida State University College of Medicine,
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    with appropriate departments. The current admissions procedure
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    utilized by the Program in Medical Sciences (PIMS) shall
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    provide the basis for the design of an admissions process for
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    the College of Medicine, with selection criteria that focus on
    identifying future primary care physicians who have
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    demonstrated interest in serving underserved areas. Enrollment
    levels at the College of Medicine are planned to not exceed
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    120 students per class, and shall be phased in from 30
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    students in the Program in Medical Sciences (PIMS), to 40
    students admitted to the College of Medicine as the charter
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    class in Fall 2001, and 20 additional students admitted to the
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    College of Medicine in each class thereafter until the maximum
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    class size is reached.
          (5) PARTNER ORGANIZATIONS FOR CLINICAL INSTRUCTION;
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    GRADUATE PROGRAMS. -- To provide broad-based clinical
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    instruction in both rural and urban settings for students in
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    the community-based medical education program, the College of
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    Medicine, through creation of nonprofit corporations, shall
    seek affiliation agreements with health care systems and
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    organizations, local hospitals, medical schools, and military
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    health care facilities in the following targeted communities:
31 Pensacola, Tallahassee, Orlando, Sarasota, Jacksonville, and
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1	the rural areas of the state. Selected hospitals in the target
2	communities include, but are not limited to, the following:
3	(a) Baptist Health Care in Pensacola.
4	(b) Sacred Heart Health System in Pensacola.
5	(c) West Florida Regional Medical Center in Pensacola.
6	(d) Tallahassee Memorial Healthcare in Tallahassee.
7	(e) Florida Hospital Health System in Orlando.
8	(f) Sarasota Memorial Health Care System in Sarasota.
9	(g) Mayo Clinic in Jacksonville.
10	(h) Lee Memorial Health System, Inc. in Fort Myers.
11	(i) Rural hospitals in the state.
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13	The College of Medicine shall also explore all alternatives
14	for cooperation with established graduate medical education
15	programs in the state to develop a plan to retain its
16	graduates in residency programs in Florida. To this end, the
17	Florida State University is directed to submit to the
18	Legislature, no later than November 30, 2001, a plan to
19	increase opportunities for Florida medical school graduates to
20	enter graduate medical education programs, including
21	residencies, in the state.
22	(6) ACCREDITATION The College of Medicine shall
23	develop a program which conforms to the accreditation
24	standards of the Liaison Committee on Medical Education
25	(LCME).
26	(7) CURRICULA; CLINICAL ROTATION TRAINING SITES
27	(a) The pre-clinical curriculum shall draw on the
28	Florida State University's Program in Medical Sciences (PIMS)
29	experience and national trends in basic and behavioral
30	sciences instruction, including use of technology for
31	distributed and distance learning. First-year instruction

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shall include a lecture mode and problem-based learning. In the second year, a small-group, problem-based learning approach shall provide more advanced treatment of each academic subject in a patient-centered context. Various short-term clinical exposures shall be programmed throughout the pre-clinical years, including rural, geriatric, and minority health, and contemporary practice patterns in these areas.

- (b) During the third and fourth years, the curriculum shall follow a distributed, community-based model with a special focus on rural health. Subgroups of students shall be assigned to clinical rotation training sites in local communities in roughly equal numbers, as follows:
 - 1. Group 1 Tallahassee.
 - 2. Group 2 Pensacola.
 - 3. Group 3 Orlando.
 - 4. Group 4 Sarasota.
 - 5. Group 5 Jacksonville.
- 6. Group 6 To be determined prior to 2005, based on 20 emerging state needs.
 - 7. Group 7 Rural Physician Associate Program (RPAP).
 - (8) MEDICAL NEEDS OF THE ELDERLY. -- The College of Medicine shall develop a comprehensive program to ensure training in the medical needs of the elderly and incorporate principles embodied in the curriculum guidelines of the American Geriatric Society. The College of Medicine shall have as one of its primary missions the improvement of medical education for physicians who will treat elder citizens. To accomplish this mission, the College of Medicine shall establish an academic leadership position in geriatrics, create an external elder care advisory committee, and

implement an extensive faculty development plan. For student recruitment purposes, the current Program in Medical Sciences (PIMS) selection criteria shall be expanded to include consideration of students who have expressed an interest in elder care and who have demonstrated, through life choices, a commitment to serve older persons.

- the medical needs of the state's rural and underserved populations, the College of Medicine shall develop a Department of Family Medicine with a significant rural training track that provides students with early and frequent clinical experiences in community-based settings to train and produce highly skilled primary care physicians. The College of Medicine shall consider developing new, rural-based family practice clinical training programs and shall establish a partnership with the West Florida Area Health Education Center to assist in developing partnerships and programs to provide incentives and support for physicians to practice in primary care, geriatric, and rural medicine in underserved areas of the state.
- GROUPS.--To increase the participation of underrepresented groups and socially and economically disadvantaged youth in science and medical programs, the College of Medicine shall continue the outreach efforts of the Program in Medical Sciences (PIMS) to middle and high school minority students, including the Science Students Together Reaching Instructional Diversity and Excellence (SSTRIDE), and shall build an endowment income to support recruitment programs and scholarship and financial aid packages for these students. To develop a base of qualified potential medical school

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candidates from underrepresented groups, the College of
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    Medicine shall coordinate with the undergraduate premedical
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    and science programs currently offered at the Florida State
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    University, develop relationships with potential feeder
    institutions, including 4-year institutions and community
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    colleges, and pursue grant funds to support programs, as well
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    as support scholarship and financial aid packages. The College
    of Medicine shall develop plans for a postbaccalaureate,
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    1-year academic program that provides a second chance to a
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    limited number of students per year who have been declined
    medical school admission, who are state residents, and who
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   meet established criteria as socially and economically
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    disadvantaged. The College of Medicine shall make every
    effort, through recruitment and retention, to employ a faculty
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    and support staff that reflect the heterogeneous nature of the
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    state's general population.
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          (11) TECHNOLOGY.--To create technology-rich learning
    environments, the College of Medicine shall build on the
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    considerable infrastructure that already supports the many
    technology resources of the Florida State University and shall
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    expand the infrastructure to conduct an effective medical
    education program, including connectivity between the main
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    campus, community-based training locations, and rural clinic
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    locations. Additional technology programs shall include
    extensive professional development opportunities for faculty,
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    an on-line library of academic and medical resources for
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    students, faculty, and community preceptors, and
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    technology-sharing agreements with other medical schools to
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    allow for the exchange of technology applications among
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    medical school faculty for the purpose of enhancing medical
   education. The College of Medicine shall explore the
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opportunities afforded by Mayo Clinic in Jacksonville through 2 clerkships, visiting professors or lectures through the 3 existing telecommunications systems, and collaboration in 4 research activities at the Mayo Clinic's Jacksonville campus. 5 (12) ADMINISTRATION; FACULTY.--Each of the major 6 community-based clinical rotation training sites described in 7 subsection (7) shall have a community dean and a student affairs/administrative officer. Teaching faculty for the 8 community-based clinical training component shall be community 9 10 physicians serving part-time appointments. Sixty faculty members shall be recruited to serve in the basic and 11 12 behavioral sciences department. The College of Medicine shall have a small core staff of on-campus, full-time faculty and 13 administrators at the Florida State University, including a 14 15 dean, a senior associate dean for educational programs, an associate dean for clinical education, a chief 16 17 financial/administrative officer, an admissions/student 18 affairs officer, an instructional resources coordinator, a 19 coordinator for graduate and continuing medical education, and several mission focus coordinators. 20 21 (13) COLLABORATION WITH OTHER PROFESSIONALS.--To provide students with the skills, knowledge, and values needed 22 to practice medicine in the evolving national system of health 23 24 care delivery, the College of Medicine shall fully integrate modern health care delivery concepts into its curriculum. For 25 this purpose, the College of Medicine shall develop a 26 27 partnership with one or more health care organizations in the 28 state and shall recruit faculty with strong health care 29 delivery competencies. Faculty from other disciplines at the Florida State University shall be utilized to develop 30 team-based approaches to core competencies in the delivery of

1	health care.
2	(14) INDEMNIFICATION FROM LIABILITY This section
3	shall be construed to authorize the Florida State University,
4	for and on behalf of the Board of Regents, to negotiate and
5	purchase policies of insurance to indemnify from any liability
6	those individuals or entities providing sponsorship or
7	training to the students of the medical school, professionals
8	employed by the medical school, and students of the medical
9	school.
10	Section 2. This act shall be implemented as provided
11	in the General Appropriations Act.
12	Section 3. This act shall take effect upon becoming a
13	law.
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16	========= T I T L E A M E N D M E N T =========
17	And the title is amended as follows:
18	Delete everything before the enacting clause
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20	and insert:
21	A bill to be entitled
22	An act relating to the Florida State University
23	College of Medicine; establishing a 4-year
24	allopathic medical school within the Florida
25	State University; providing legislative intent;
26	providing purpose; providing for transition,
27	organizational structure, and admissions
28	process; providing for partner organizations
29	for clinical instruction in a community-based
30	medical education program; specifying targeted
31	communities and hospitals; providing for

development of a plan for graduate medical 1 2 education in the state; providing for 3 accreditation; providing curricula; providing 4 for clinical rotation sites in local communities; providing for training to meet the 5 medical needs of the elderly; providing for 6 7 training to address the medical needs of the state's rural and underserved populations; 8 providing for increased participation of 9 10 underrepresented groups and socially and economically disadvantaged youth; providing for 11 12 technology-rich learning environments; providing for administration and faculty; 13 providing for collaboration with other 14 15 professionals for integration of modern health 16 care delivery concepts; authorizing the Florida 17 State University to negotiate and purchase certain liability insurance; specifying that 18 the act be implemented as funded; providing an 19 20 effective date.

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WHEREAS, the United States Department of Health and Human Services has identified 67 regions in Florida, including 13 entire counties, most of them in rural North Florida, as Health Professional Shortage Areas; and 40 percent of the state's 67 counties have fewer than 100 doctors per 100,000 population, compared to the national average of 221 doctors per 100,000 population, and

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WHEREAS, in Florida, more than 3.2 million residents are over the age of 60, more than 80 percent of patients who 31 visit a primary care physician are elder persons, and between 2

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29 30 60 percent and 70 percent of persons seeking medical care are age 60 and over; and Florida's continuing population growth, especially among its older residents, is contributing to an increasing shortage of physicians in the state, and

WHEREAS, Florida has large areas of medically underserved minority populations, and

WHEREAS, there are hundreds of highly qualified university students in Florida who seek, but cannot gain, admission to medical school, and

WHEREAS, Florida currently imports a substantial number of its doctors from other states or countries, and ranks third highest, nationally, in the percentage of its total allopathic physician workforce who are international medical graduates, and

WHEREAS, Florida's existing medical education system has an extremely limited capacity to serve the state's rapidly growing population, which leaves the state vulnerable to physician shortages at the national level, while at the same time limiting opportunities for Florida's best students to enter the medical field and serve their communities, and

WHEREAS, a medical school is not required to have its own teaching hospital in order to have a high-quality, accredited medical education program, and

WHEREAS, community-based medical education programs are significantly less expensive than teaching-hospital-based medical education programs, do not involve the financial risks associated with the operation of a hospital, and enable the state to work with local hospitals, and

WHEREAS, a community-based medical education program relies on clinical resources available in each community and 31 | requires support by hospitals, private and public health

clinics, and other health care organizations willing to enter into affiliation agreements to provide clinical education as part of a medical education program, and

WHEREAS, a number of hospitals, private and public health clinics, and other health care organizations in the state have expressed an interest in affiliating with a Florida State University community-based medical education program, and

WHEREAS, the Florida State University's Tallahassee location is near the center of the region of the state with the greatest current shortage of physicians, and

WHEREAS, the Florida State University has, since 1971, successfully operated a first-year medical school program in concert with the University of Florida College of Medicine and is noted for its success in attracting students who eventually become primary care physicians, and

WHEREAS, the Florida State University has strong research programs in the applied biomedical and behavioral sciences, autism, cancer, chronic diseases, and geriatrics, and

WHEREAS, there has been no new medical school established in the United States in two decades despite the large growth in the nation's population, particularly the elderly population, and

WHEREAS, there is now an unusual opportunity to design and operate an innovative medical education program in our state, which takes advantage of the advances in medical and communication technology, NOW, THEREFORE,