

Message from the Executive Vice President for Medical Affairs



This new magazine celebrates the sesquicentennial of our Medical School, its truly remarkable legacy, and its prominent place in academic medicine. Most importantly, it celebrates our ties with you, our alumni/ae and friends.

In September 1997, we began to speak of the "University of Michigan Health System." We explicitly place the Medical School in the Health System because of the importance of the educational and research missions and the essential ways in which they are interlocked with our clinical and technology development missions. We benefit by having a flourishing MCARE, so that our students, residents, faculty, and administrators can appreciate the dynamics and pressures of the health insurance marketplace and so that MCARE can appreciate the capabilities of an excellent health care provider. We have enhanced our outreach to the community — both by extending our clinical services to 30 health centers that are highly accessible to the regional population and by working with the Washtenaw County Health Department, other providers, and the media to improve measures of health throughout the county and the state of Michigan.

It is no secret that pressures have been mounting on academic medical centers during the past decade. The public and private payers for medical care are using their leverage to contract at the lowest prices compatible with decent quality. Calls for "evidence-based medical care" play to our strengths. Yet we must become much more efficient and patient-friendly. Our educational programs need to be better aligned with changing medical practice and information technology. Until recently we feared that the federal budget deficits would undermine research funding from the National Institutes of Health. Within many universities, there were fears that hospitals would generate a lot of red ink, expansion of clinical track faculty would alter the nature of the faculty, that deans and hospital directors could not resolve their conflicts over priorities and values.

Remarkably, we are doing well. The previous 15 departmental practice plans have been unified in the Faculty Group Practice. From its share of the operating margin, the FGP is funding clinical and academic ventures, selected competitively. The administrative and professional staff work together in essentially every forum. Our JCAHO reaccreditation demonstrated a change in culture and earned us a very fine score.

Picker Institute surveys of patients' perception of care show good ratings and patterns of continuous improvement. Greater Detroit Area Health Council ratings of hospitals and health plans place the U-M and MCARE HMO high among the leaders in the state, while national ratings put our hospital, MCARE and the Medical School on the "honor rolls". Most importantly, referring physicians want to send their patients here and appreciate the much-improved communications and partnering attitudes of our staff. We are coping with a wonderful problem, how to accommodate increasing numbers of patients with the present operating rooms, hospital beds, and health center capacities!

Our medical students are receiving a forward-looking education, with emphasis on the advancing edge of science, ethics, and ambulatory settings. Our Ph.D. students are now part of a much more coordinated program sweeping across all of the basic sciences departments and programs. We are poised for a dramatic investment in the life sciences, with the February, 1999, release of a report on "Understanding the Complexity of Living Things" from a 19-member Commission appointed by President Bollinger. During the past 18 months we have invested in Centers for Clinical Investigation and Therapeutics, Gene Therapy, and Organogenesis; initiatives in health services research and bioinformatics; and the Medical School Office for Technology Transfer and Corporate Research. We have had sensational results from our Biological Sciences Scholars Recruitment Program, attracting some of the most sought-after beginning faculty in the nation. And we are retaining our own highly sought-after faculty!

We are excited and confident about proactively shaping a positive future for academic medicine here and influencing the course of academic medicine nationally. Larry Warren, Allen Lichter, Zelda Geyer-Sylvia, and I warmly welcome you to the series of upcoming regional meetings for alumni/ae and friends that help us bring the U-M to you. We similarly welcome you to take advantage of our continuing education, lectures and symposia. And we hope that you view us as your partner in taking care of your own patients and your personal health care needs and in educational, research, and community initiatives over a wide geography.

A handwritten signature in dark ink, appearing to read "Gilbert S. Omenn, M.D." The signature is fluid and cursive.

Gilbert S. Omenn
U-M Vice President for Medical Affairs
and CEO, U-M Health System