

Admissions Process for the Regional Campus Regional Campus Expansion Admissions Subcommittee

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I. Charge:

The Regional Campus Expansion Admissions Subcommittee is charged with developing the infrastructure for regional campus recruiting and interviewing, determining the standards and allocation for admission to regional campuses, and finalizing faculty and staff needs at local and regional campuses.

II. Background

Application Trends:

Although the total applicant pool has risen dramatically from 2,500 in 2007 to nearly 4,000 in 2016, the increase has been largely from out-of-state applicants. In-state applications, in contrast, have been fairly stagnant - averaging 452 per year during this time. Rural Physician Leadership Program (RPLP) applicants have been more variable, ranging from 25 to 61 from 2009 to 2016. However, a significant percentage of applicants (20-26%) fail to return the required secondary application, and cannot be considered for admission. These percentages are consistent across total applicants, Kentucky residents, and Kentuckians from Western Kentucky. RPLP applicants are more likely to submit a completed application.

Kentucky residents with completed files vary widely in Medical College Admissions Test (MCAT) scores. Of the 379 completed applications for the 2016 entering class cycle, 203 (54%) had scores above the 70th percentile, with an additional 61 (16%) falling within the 60-69th percentiles. The majority (65%) of these applicants has undergraduate grade point averages (GPA) \geq 3.5. An additional 48 had GPAs of 3.3 or 3.4.

For Kentucky residents, the current criteria for invitation to an interview are MCAT \geq 61st percentile and GPA \geq 3.4 - as well as demographics, activities, leadership, exposure to the profession, and letters of recommendation.

Based on these data, the subcommittee felt the clear need to expand the pool of qualified applicants with careful attention to current standards and, in particular, providing incentives for applicants to consider UKCOM regional campuses. Consideration of a broader array of applicant aptitudes and characteristics other than MCAT scores and GPA may be required.

III. Recruitment:

Learning Communities:

With the comparatively flat level of in-state applications, it is clear that we must nurture and recruit more from within. One strategy, similar to that used by the Medical College of Wisconsin-Green Bay, involves the statewide creation of collaborative pipeline programs between health systems and educators. For example, local learning communities could be created which bring together health professions education with community engagement (e.g., WKU's "ALIVE" Center for Community Partnerships). Eventually, these learning communities could become self-sustaining - with successful "recruits" returning to help coach and continue these efforts. However, faculty and administrative resources will be required to start such a program.

Early Assurance Program

Despite increasing applicant interests in medical careers, additional incentives to apply to UKCOM and consider the regional campuses may be needed. Toward this end, many medical schools have developed Early Assurance Programs (EAP) to target and attract certain applicants. These programs are opportunities for students who have excelled in their coursework to be assured early admission to medical school (sophomore/junior) as long as certain criteria are met. Most of these programs include significant support prior to matriculation including supplemental classroom activities, hands-on learning, and even financial considerations. There are multiple models – some of which, like Mt. Sinai's "Flexmed" and the University of Toledo's "Medstart" programs, do not require completion of the MCAT. Loyola's Stritch School of Medicine offers an EAP to certain eligible Loyola sophomores. Similarly, Michigan State University College of Human Medicine has partnered with multiple in-state undergraduate institutions to seek out applicants from disadvantaged backgrounds interested in high-need medical specialties, and Boston University has a long-standing EAP charged with increasing the diversity of the physician workforce. Locally, the University of Cincinnati has a similar EAP with residency restrictions that include Ohio and some Kentucky counties. At the University of Kansas School of Medicine, in-state applicants are assured admission pending completion of shadowing time, case reports, and a manuscript related to rural health service. The Kansas program may represent a similar mission to UKCOM and serve as an appropriate model. (See University of Kansas School of Medicine attachment). A subgroup of the subcommittee including Andrew Hoellein, Dexter Speck, Nathan Vanderford, Rachel Saunders, Tony Weaver, and Kim Scott of UKCOM, Ken Crawford of WKU, Dean of Morehead State University, Wayne Miller, Dean of Transylvania University, Laura Bryan, and Eva Cshai of Transylvania was charged with further exploration of an EAP.

The UK Early Assurance program would provide selected students with an assured admission to a designated regional campus pending completion of the program requirements and graduation from their undergraduate institution. The goal of the Early Assurance Program is to expand the numbers of applicants to the regional campuses and to provide early and significant bonding with the regional campuses and the communities in which they reside. The subgroup agreed that EAPs may be more accurately conceptualized as early *interview* assurance programs.

Sophomore students wishing to attend medical school at either Bowling Green or Morehead would be recruited in the spring of 2017. To be eligible, the applicants should be a resident of Kentucky or bordering state, have experience living in a rural setting, an ACT/SAT score \geq the 75th percentile, 1 year of both biology and inorganic chemistry. Requirements for continuation in the program would be a premedical science GPA of \geq 3.7 and satisfactory score on the MCAT. A regional committee will monitor progress and potential irregularities; a local pre-medical committee is a logical body for this task. Target numbers of Kentucky EAP students would be 5-7 students annually who are interested in each regional program.

Special courses, electives, mentoring, and shadowing experiences developed at regional campuses would become an integral part of the Kentucky EAP curriculum during college students' junior and senior years. So, for example, twice each semester Kentucky EAP students might participate in special events coordinated by regional campus faculty and staff. Events could include classes such as Basic Life Support, a wide variety of clinical activities such as shadowing in private offices and in free clinics (e.g. "The People's Clinic" in Morehead), community engagement projects in cooperation with existing outreach groups (WKU's ALIVE Center), and social events such as special dinners. The shadowing need not be entirely medical and could take advantage of interprofessional settings such as nursing, pharmacy, physical therapy, respiratory therapy and translator.

A core enrichment initiative within the Kentucky EAP is an "on site" summer residential experience – which might occur between students' sophomore/junior and junior/senior years and provide exposure to the regional campus, local community, and program faculty. Summer activities could build upon the AHEC Health Career Camps in Bowling Green and the RPLP Medical School Admission Boot Camp.

Institutions involved should be limited until a solid model is available. Morehead State and Western Kentucky are clearly our partners in this venture (and probably represent a unique model as most regional campuses are not in collaboration with regional undergraduate institutions). Transylvania University is very interested and may be able to help develop academic enhancements for their students. The group is less clear about the UK undergraduate programs but discussed possibly approaching the Robinson Scholars, Honors College, PEPP, and UK premedical advisors.

Marketing:

Along with the development of regional campus websites, social media (e.g., Facebook, Twitter, etc.) should be used to promote student interest in the regional programs and expand the potential applicant

pool – with updates on Kentucky EAP facilities, community resources, faculty profiles, curriculum development, etc., posted regularly.

Scholarships:

A committed source of scholarships for the regional programs should be identified, and tuition and fees for the Lexington, Bowling Green, and Morehead programs should be uniform. It is anticipated that a four-year scholarship award of \$5,000 per year will be available to all regional campus students.

Although loan forgiveness may be available at the federal and state levels, such an offer from regional hospital or groups may seem more concrete to applicants.

IV. Interview Criteria and Logistics:

Without question, academic standards should remain high for applicants to all medical campuses. Admission to regional campuses should favor in-state applicants from those or other rural and/or underserved areas. Out-of-state applicants may be considered if they display a genuine interest in practicing medicine in Kentucky. The subcommittee acknowledges that below a certain threshold, there are little data for predicting medical school performance based on MCAT and GPA.

All applicants to UK medical campuses should be screened using the same academic criteria – including (but not limited to) exposure to the medical field, service activities, leadership experiences, etc. The tenets of holistic review used in applicant screening can recognize each individual's unique opportunities, challenges, and social circumstances. For the regional campuses, additional considerations will be given to the candidate's background, county of residence, and desire to practice in Kentucky.

Per our current practice, secondary applications will be sent to all Kentuckians and out-of-state applicants meeting the specified academic criteria (i.e., ≥ 3.7 GPA and MCAT score $\geq 85^{\text{th}}$ percentile). Qualified out-of-state applicants with demonstrated ties to the state or its medical campuses may also be sent a secondary application.

Preference may be given to applicants from contiguous states who indicate a sincere interest in regional campus missions.

To maximize a proper fit, academic criteria and the holistic admission process should be supplemented with more explicit measures of applicant's non-cognitive characteristics. One such potential instrument is the Cambridge Personal Styles Questionnaire® - a validated on-line instrument that takes 20-30 minutes to complete. It assesses the healthcare-related competency areas of caring and compassion, person-centered communication, working with others, self-management, safe practice, coping with demands, and engagement with learning. The instrument might be useful in identifying applicant attributes most relevant to institutional missions. The subcommittee is very interested in supplemental personality information if time and cost are not prohibitive.

Every effort will be made to ensure that formal interviews with applicants are conducted at the specific program of interest. However, in rare events, circumstances may preclude the interview process from physically occurring “on site.” Regardless, applicants are strongly encouraged to visit in-person the program being considered or, at very least, to discuss their interests and aspirations with local representatives. Admissions committee staff will provide guidance in arranging either of these options.

V. Proposal:

The subcommittee proposes developing and/or adopting:

- Regional learning communities – partnering (when possible) with existing community engagement groups;
- A coordinated, jointly-administered Early Assurance Program (EAP) targeting prospective in-state applicants attending regional colleges/universities;
- A local interviewing process similar to RPLP;
- The addition of the Cambridge Personal Styles Questionnaire to the interview process; and
- Special consideration for regional applicants and/or those attending regional undergraduate institutions;
- Scholarships for students at regional campuses; and
- Information technology (IT) funding for website and social media platforms.

We hope the Implementation Committee finds our exploration and recommendations useful as they plan the campus expansion.