MARCH 2005

Dear School of Pharmacy Family and Friends:

I begin this letter by acknowledging the events that continue to shake the world—the war in Iraq, the tsunami in South Asia, and the continuing devastation of AIDS in Africa and increasingly in Asia. Individually we have our own personal and political feelings about each. Collectively I know we mourn the lives lost and the futures forever changed.

As I thought about this Update against the backdrop of world events, I decided not to offer you my usual six-month status report. Rather, I chose to take the long view with the hope that breadth will put what we do in better perspective. In many ways, this School is clearly making tremendous strides with new insights and activities ultimately designed to improve the health of the public we serve. Increasingly, as our world becomes more intimate and more connected, that public is an international one.

I began my deanship in 1998. In 2003, I came up for my five-year review by a committee of faculty members from across the UCSF campus. As part of that review, I wrote a summary of my first five years as dean that described my journey to date, what I felt had been accomplished, and where I knew I had fallen short.

It takes some time to go through the review process, which is just now coming to a close. As a result, I can only now share my personal summary with you. Why make my review so public? To my way of thinking, I am not only responsible for stewarding the faculty, students, and staff of this School; my responsibility extends to all who receive this letter, including the School’s alumni, friends, donors, UCSF campus leaders, and professional leaders across the nation and around the world.

Because of the lag time between the submission of my personal summary and the finalization of my review, I have taken the liberty of updating the statement for you and adding new developments and new challenges that have arisen since the piece was drafted in June 2003.

I encourage you to read this piece and send me your thoughts.

With warm regards until I write again,

Mary Anne Koda-Kimble, PharmD
Professor and Dean
TJ Long Chair in Chain Pharmacy Practice
School of Pharmacy
University of California, San Francisco
In 1998, I became dean of the nation’s top-ranked pharmacy school. The honor was tremendous and so was the task. My appointment broke a long-standing tradition, for I am the first dean of this School to hold a professional degree as the sole degree. Because of the School’s historical research acumen, it is not surprising that all previous deans had been PhD-credentialed. The appointment of a clinician signaled, I hoped, a recognition on campus of what has long been recognized among pharmacy schools nationwide—the School’s leadership in the clinical arena as well.

I came to UCSF in 1965 as a first-year pharmacy student. After graduating in 1969, I joined a group of pioneer pharmacists on campus that created a new clinical role for pharmacists and transformed the pharmacy curriculum into a model that is widely emulated across the country today. As chair of the department of clinical pharmacy beginning in 1995, I worked closely with faculty members in all three of the School’s departments to, once again, redesign the School’s curriculum. Both the previous and revised clinical curricula were built upon strong science bases.

Nineteen ninety-eight promised turbulent times for the pharmacy profession and for the School.

I do not need to remind anyone of the national backdrop in health care delivery and science five years ago. In terms of the national pharmacy scene at this time, all schools of pharmacy were transitioning to the Doctor of Pharmacy as the sole entry-level degree for pharmacists, if they had not already done so. Several schools had dean’s positions open and many had experienced failed searches. There was (and still is) a severe shortage of pharmacists in all employment sectors, including academia. Large employers were pressuring schools to increase, even double, their class sizes. Several public and private academic institutions were planning new pharmacy schools. Since my deanship began, nearly 20 new schools have been established, the UC San Diego School of Pharmacy and Pharmaceutical Sciences among them. Many of these schools offer curricula based on strong foundations of basic science and academic scholarship.
Here at UCSF in 1998, we were in the throes of the UCSF-Stanford merger, which had major implications for the School because our department of clinical pharmacy had designed and managed pharmaceutical services for UCSF Medical Center.

The faculty had just completed a radical redesign of our Doctor of Pharmacy curriculum in anticipation of continuing and accelerated changes in health care delivery and scientific discovery. Implementation of this new “pathway curriculum” was to begin in the fall of 1998, and new courses had to be designed and delivered using new teaching methods. Faculty members in all three of the School’s departments were involved in this academic sea change.

The School’s basic science faculty members were working in cramped and scattered spaces that had been virtually unchanged since I was a student. They also were in the midst of debating the wisdom of disbanding and reconfiguring the School’s graduate program in pharmaceutical chemistry.

The planned increases in our professional student fees to $5,000 had been prematurely capped at $3,000 under the mandate of a “no-fee” governor. The effect on the School was particularly devastating because the cap meant the School would continue to be severely under-funded for its core missions. The fee increase was seen as a way to begin addressing a portion of the shortfall in state support. Faculty searches had been suspended to accommodate this unexpected event.

On the whole, I found a demoralized faculty that had become fractionated and somewhat cynical. Understandably, many faculty members were in survival mode, attending to their own labs or units, without regard to the School as a whole. I found as well a talented yet isolated staff.

There was much to do. Somehow, I had to pull this small, but widely disparate and dispersed faculty and staff together into a cohesive whole to maximize the School’s productivity. I had to develop my own leadership and advisory structure, cultivate connections at higher levels both within and outside UCSF, and establish a stronger fiscal base for the School. Together with an exceptional group of students, outside friends, and advisors, our faculty and staff have made great strides, which I highlight on the pages that follow.

**Strategic Plan**

In 1998, I initiated a comprehensive School-wide strategic planning process to establish a far-reaching agenda for the School. My intent was to use the plan to maximize the impact of the School’s resources; guide the actions of the School’s citizens toward a common purpose; and inform the School’s internal and external constituents about the School as a whole. The plan, “Unleashing Our Potential,” identifies five major challenges—all to improve health through the appropriate use of medicines:

1. initiate collaborative research programs,
2. educate leaders in pharmacy research and practice,
3. secure adequate space and funding,
4. build a unifying organizational culture, and
5. extend our reach beyond academia.

The plan has served as a flexible guide for everyone within the School community—especially the School’s leaders and faculty.
Assistant Deans Adams, Dare, Grubbs, Kotabe, and Shane provide leadership to site-specific programs within California. Assistant Dean Heard directs the California Poison Control System.
New Leadership

I have appointed several new department chairs and associate deans and have been blessed with an exceptional leadership team and faculty. Together, we take responsibility for setting direction for the School, moving the strategic plan along, and positioning the School favorably both on and off campus.

- Irwin (Tack) D. Kuntz accepted a new position, associate dean for research, in 1998; Ken Dill assumed the position in 2002. Both have been instrumental in setting high standards for research in the School and in representing the School's research agenda on campus. Importantly, both have been generous in mentoring me in science so that I can best represent the interests of our scientists to donors and decision makers.

- Susan Levings joined the School in a new position, associate dean for planning and communications. She is leading our enhanced public relations and communications effort both on and off campus to many audiences. I write two Dean's Updates letters each year to alumni and friends, support an alumni association newsletter, meet with public affairs staff quarterly along with faculty to generate internal and external publicity, and host “roundtable” discussions among alumni when I travel. Susan led the development of an exceptional School Web site, produced a PharmD student recruitment brochure that more accurately reflects our new curricular direction, helped drive our strategic planning process, and co-chaired the self-study for our PharmD program accreditation review.

- Kathy Giacomini assumed the position of chair of the department of biopharmaceutical sciences. Her leadership continues to be spectacular. Together with the late Ira Herskowitz in the School of Medicine, she established pharmacogenomics as a new direction for science in her department. She is co-principal investigator of the largest grant awarded in this field and successfully competed for matching National Institutes of Health funds to create a pharmacogenomics core facility. She worked with faculty members across campus to develop a successful proposal for a new Parnassus-based Program for Genetics of Complex Disease and Therapeutics. A new interdisciplinary graduate program in pharmaceutical sciences and pharmacogenomics has been established under her leadership. Her department has successfully rejuvenated the graduate program for biological and medical informatics.

- Lloyd Young joined the School in 2000 as chair of the department of clinical pharmacy, and he has made exceptional strides. He is enhancing scholarly activity within the department, especially in the areas of pharmacoconomics, pharmacoepidemiology, and health services research; bringing clinical practice into the community pharmacy setting; and improving the access of underserved populations to pharmacy education and care. Under his leadership, faculty members are beginning to successfully compete for National Institutes of Health grants; the Center for Consumer Self Care is developing quickly; new entrepreneurial partnerships with the private sector are providing support for faculty salaries; and two new satellite clerkship programs have been launched successfully in Fresno and the south San Francisco Bay Area.

- Tom James was chair of the department of pharmaceutical chemistry when I assumed the deanship and has remained on throughout my tenure. Tom’s leadership has been stunning as well. He played a critical role in the design of Genentech Hall and the assignment of space there. The School is reminded repeatedly of “how well” it has done with regard to space at Mission Bay, and I attribute much of this success to Tom's efforts. Finally, after too many years, our chemists have the modernized space they so desperately need to do their work. Under his leadership a new graduate program in chemistry and chemical biology, run jointly with the School of Medicine’s department of cellular and molecular pharmacology, is thriving; and a new Center for Chemistry and Disease is becoming a reality (since 2003, known as Bay Area Screening Center).

- Bob Day, associate dean; Rob Duca, associate dean for administration; Brian Aldredge, associate dean for academic affairs; Clifton Louie, associate dean for pharmaceutical services; Lorie Rice, associate dean for external affairs; Chris Cullander, associate dean for student and curricular affairs, information resources and technology; and Cindy Watchmaker, assistant dean and director of student affairs, have been equally critical in advancing the School’s agenda.

- The faculty as a whole exhibits strong leadership. Faculty members remain active citizens in all aspects of campus life and are well represented in key academic and campus committees. They have taken the lead in developing new centers and programs; directing new graduate programs; writing training grants; and creating new scientific publications. Many have been recognized internationally and nationally for contributions to science and leadership within their fields.
Since 2003, the responsibilities of all the School’s leaders have grown. These colleagues are terrific, to a person.

In response to faculty members’ and students’ requests for more guidance in teaching, I appointed Betty-ann Hoener, in 2004, as associate dean of faculty development (teaching and learning). Betty-ann assists faculty members to develop their teaching and testing skills, effectively incorporate educational technologies into their courses, and integrate course material within the Doctor of Pharmacy curriculum. She is also a resource to pharmacy faculty members who teach PhD graduate students.

Leadership Group
I meet twice monthly with a select group of School leaders who serve as my closest advisors and sounding boards for new ideas, issues, and plans. In addition to the department chairs, this group includes the associate dean and the associate deans for research, academic affairs, planning/communications, and administration.

Advisory Groups
I have established and meet regularly with several groups to keep abreast of the points of view held by a broad constituency. These include the Faculty Council, the Student Leadership Group, the Alumni Board, and the Dean’s Board of Advisors. Each group is extremely engaged in the life of the School and has been invaluable in shaping our thinking and direction. I occasionally meet with the department administrative managers and host breakfasts for staff members.

New Doctor of Pharmacy Curriculum
During the past five years, the faculty and students have worked in partnership to successfully implement a new Doctor of Pharmacy curriculum that is designed to better prepare our graduates for emerging opportunities in the new managed care environment, academia, the pharmaceutical industry, and government. This was an extremely labor-intensive effort. All existing courses were redesigned; many courses were developed de novo for the new pharmaceutical policy/management and pharmaceutical science pathways; and teaching methods that emphasize active learning were incorporated. The first class graduated from this new curriculum in 2002, and increasing numbers of applicants are attracted to the program because of its flexibility. In fall 2002, the American Council on Pharmaceutical Education reviewed the Doctor of Pharmacy program for purposes of continued accreditation. The team report was extremely complimentary of the program, and the School was granted the full six-year accreditation term.

Since 2003, we have continued to evaluate and refine the Doctor of Pharmacy pathway curriculum with the essential input of students.

We moved to a national pharmacy school application process in 2004. The quality of our applicants and entering students remains high. The volume of our application pool and the number of hours required to carefully review applications, however, have soared dramatically. In the first year of our participation in this process, our applications rose by 44 percent; we had an amazing 1,229 applicants. This trend is continuing, as applications for fall 2005 are at an all-time high of 1,271.

New Graduate Programs
As I mentioned, our faculty members played key roles in initiating two new graduate programs—one in chemistry and chemical biology and one in pharmaceutical sciences and pharmacogenomics—and in revitalizing another in biological and medical informatics. Training grants were awarded for two of these programs, and one is pending. Additionally, Ken Dill worked with Dave Agard to attract a Burroughs Wellcome Foundation Grant to establish a new graduate program pathway option in quantitative biology. All programs continue to attract a large, highly competitive, and diverse applicant pool.

Since 2003, we have received a third training grant. In addition, fees for graduate students have increased this past year and will continue to increase as a means for the University to offset a decrease in state support. Graduate student fees prior to this year were $5,219 per year. A 20 percent increase of $1,050 for resident graduate academic students occurred and established a total new education and registration fee of $6,269 as of the beginning of the FY 2004-2005 academic year. Additional 10 percent increases are also projected for the next years. Given that our School’s graduate programs have approximately 130 students and our graduate programs have traditionally paid these fees to attract the “best and brightest,” the increase in fees over several years will result in additional expenditures of more than $270,000 for our School.
Faculty Growth

As I have already noted, the School is successfully rejuvenating its faculty through exceptional new hires. In all cases, the department chairs have carefully appointed interdisciplinary search committees, with the objective of hiring individuals of the highest intellectual caliber whose science fits well with UCSF’s collaborative and programmatic culture. Because the new interdisciplinary graduate programs have attracted new graduate students to our campus, three new FTEs were assigned to the School to support these students.

Since 2003, six paid faculty members have left the School and 16 have been hired. This means a net faculty member gain, as follows: three in the department of biopharmaceutical sciences, three in the department of pharmaceutical chemistry, and four in the department of clinical pharmacy. These exceptional new hires are experts in fields from systems biology to asthma genetics and from consumer drug information to structural biology. Eleanor Vogt joined our faculty in July 2004 as UCSF Presidential Chair and visiting professor in the department of clinical pharmacy. Three faculty searches are open as of February 2005: one search in each of our three departments.

While our faculty is growing, keep in mind that in the department of clinical pharmacy, which assumes much of the responsibility for teaching our Doctor of Pharmacy students, most new hires are on “soft” money. In other words, these faculty members do not have state-funded positions and must rely on outside sources of funding to support their salaries. We are forced to hire faculty members under these less than ideal circumstances in order to meet the teaching needs of our curriculum.

Our faculty has not only grown, it has aged. In fact, 43 percent of the paid faculty members in the School are aged 55 and older. We are alerted to this fact and are mentoring our young faculty members to assume academic leadership roles.

Faculty Diversity

Faculty diversity has improved over my tenure as dean, and it continues to be a high priority for me. In 1998 we had a parity goal of two women in one of the faculty categories, and we are now at parity. Importantly, we increased the number of women in the “tenured ladder rank” category from five to nine between 1998 and 2003. Since October 1998, 60 percent of the faculty members hired have been women. I am particularly pleased that a woman was added to the faculty in the department of pharmaceutical chemistry, a field that has been traditionally male-dominated. This department recently offered a faculty position to another woman, who was unable to accept the offer. The department of clinical pharmacy hired a woman of African American descent into the professor of clinical X series.

Since 2003, we have netted eight new women faculty members and eight new faculty members from under-represented minorities.

While we continue to aim for diversity, I have also been concerned since 2003 about equity. Our School, along with the other UCSF professional schools, has conducted a salary survey to evaluate equity among faculty salaries by gender. When we constructed “matched pair” groupings (one man and one woman; each with similar years of service and matched for emphasis in clinical, translational, or basic sciences), our School results were favorable and indicated equity between men and women.
**Student Diversity**

As news of our revamped curriculum has become better known through our outreach activities, the quality, size, and diversity of our applicant pool have increased dramatically. The diversity of our entering classes has also improved. The percentage of underrepresented minorities admitted to our Doctor of Pharmacy program increased from 8.6 percent in 1998 to 18.4 percent in 2003. Underrepresented minorities in our School include African and African American, Native American, Filipino, and Hispanic students. Asian and Asian American students are well represented. African Americans remain underrepresented in both our faculty and student body.

**Since 2003,** we have made progress in this area, but there is still work to do. Fewer underrepresented students entered the program in fall 2004 than in previous years, and we are examining why this is the case. The public served by pharmacists must be reflected more closely by the diversity of the pharmacy workforce and, hence, the students we graduate. I am especially hopeful that a new program being developed in California’s Central Valley will eventually help us in this regard. The Doctor’s Academy was founded by the UCSF School of Medicine at Fresno’s Sunnyside High School to encourage students to consider careers in the health professions. Since 2003, pharmacy has been included as a career option. After only two years, three to five students from each class have told us they are interested in pharmacy careers. It is very encouraging.

Class of 1943 alumnus Vince Isnardi, a Fresno pharmacist, is backing our work with a generous gift of $100,000. We are applying what we learn in Fresno to our other outreach efforts.

**Students**

I am most proud of our students, who astound me with their political savvy, professionalism, and boundless energy for community service, despite their challenging course loads. More than 95 percent are involved in community or professional activities during their years here, 70 percent to a moderate or great extent. In one year, for example, students participated in 12 major health fairs, where they screened and counseled some 1,600 people; and they visited 30 to 40 elementary and high schools where they taught about 1,300 young students about poisons, drug abuse, and smoking prevention. The UCSF Student Chapter of the American Pharmacy Association was recognized as the top chapter in the nation, and many students have received statewide and national recognition for leadership and scholarship.

**Since 2003,** our students have continued to excel locally and nationally through professional organizations. They are out there, visible, and vocal. Take fourth-year student Kathy Pang, for example. Kathy was one of four students in the nation to win the 2004 Student Leadership Award from the American Pharmacists Association (APhA) —Academy of Student Pharmacists (ASP). She is a dynamo. During her tenure as president of our ASP chapter, students developed projects in asthma, geriatric awareness, and herbals. In her “spare” time, Kathy is extremely involved in international pharmacy. Second-year student Daniel Zlott just won the position of national president-elect for APhA-ASP. I have no doubt they both will become agents of change within the profession.

**Profile: First-year PharmD Students**

2004 Academic Year

- 1,229 number of applicants—largest in School’s history
- 96 percent with bachelor’s degrees
- 57 percent from UC campuses
- 10 percent from California State University campuses
- 19 percent from colleges and universities outside California
- 11.5 percent of students from underrepresented groups
- 12 percent from outside California
- 24 average age
- 69.5 percent female

- Biology and biochemistry most common majors.
- Educational backgrounds from economics to history, mechanical engineering to theater.
- Countries of origin outside the United States include Viet Nam, Canada, Fiji, Iran, Mexico, Saudi Arabia, and the Ukraine.

**Refurbished, Consolidated, and Augmented Space**

We modernized research space on Parnassus for seven faculty members and will begin construction for the program in pharmacogenomics this year. With the move of 18 faculty members to Mission Bay, we have made some strides in consolidating our space on the Parnassus campus.
Faculty members who moved to Mission Bay increased their space by approximately one-third, on average, placing them at parity with their peers in the School of Medicine.

Since 2003, three more faculty members have moved to Mission Bay into the second building of this new campus. While the first wave of moves involved faculty members primarily from the department of pharmaceutical chemistry, the second wave relocated faculty members from the department of biopharmaceutical sciences. More reshuffling is under way as a third research building has opened its doors.

Since 2003, our research has continued to flourish. At the close of September 2004, our NIH funding had increased by 25 percent from the previous fiscal year, from $18,107,279 to $22,670,830. Grants from funding sources other than NIH totaled an additional $9,604,746 for the same time period, bringing the total contract and grant funding from all sources to $32 million. This is an impressive increase of 18 percent from the previous fiscal year.

Growth in Gifts, Pledges, and External Funds

Given the School’s precarious fiscal situation, I make fundraising a top priority, focusing on students, alumni, foundations, and pharmacy businesses. I keep our alumni and friends regularly apprised of the School’s work through two Dean’s Update letters per year, and I travel extensively to meet alumni at professional and scientific meetings. The Alumni Board has been instrumental in sponsoring regional receptions, a new homecoming event, and a White Coat Ceremony. We recognize donors at all levels, using a variety of methods. Since 1998, we have added two endowed chairs and our first distinguished professorship, and we have reached 62 percent of our $25 million capital campaign goal. Total private support has grown 249 percent since 1998. The number of alumni donors has almost doubled from 632 in 1998 to 1,135 in 2003.

Since 2003, we have almost reached our $25 million campaign goal, and our terrific giving trends continue. Harry Hind, an alumnus of the pharmacy class of 1939, and wife Diana Hind have honored us with a second distinguished professorship—this one established with a gift of $2.7 million. Because of their generosity, we can now recruit new researchers in both the departments of pharmaceutical chemistry and biopharmaceutical sciences. Carl Lovotti, Class of 1915, left the School an unrestricted bequest in excess of $5 million. The Thomas A. Oliver Endowed Chair in Clinical Pharmacy was due to the generosity of our esteemed Class of 1939 alumnus Tom Oliver.
Expanding the School’s Influence Beyond UCSF

The School has made concerted efforts to become more engaged in policy issues relevant to appropriate medication use. Lorie Rice, Acting Director of the Center for Consumer Self Care, has initiated a series of informational programs for state legislators and their analysts, and we have taken positions on proposed laws and regulations that affect equitable public access to medications. The School has planned and hosted several state-wide and national scientific, clinical, and health policy meetings, and members of our faculty have taken a proactive role in establishing a national program that prepares pharmacy faculty to train health professionals in smoking cessation. Throughout my deanship, I remain active nationally as well. For example, I am an elected member of the Board of Trustees of the United States Pharmacopeia and served as chair of the board for one year. I am vice president of the American Council on Pharmaceutical Education, the agency that accredits schools and colleges of pharmacy as well as continuing education programs for pharmacists. I was elected to the Institute of Medicine of the National Academies and will be serving on a Committee on Crossing the Quality Chasm Summit: Redesigning Care and Improving Health in Priority Areas.

Since 2003, the School has become much more involved internationally. In October 2004 we hosted a conference in Hanoi to address how to expand the role of the pharmacist in managing and preventing HIV/AIDS in Viet Nam. Our Vietnamese partner was Hanoi University of Pharmacy. We were joined in our efforts by UCSF Global Health Sciences, UCSF’s AIDS Research Institute, United States Pharmacopeia through its Global Assistance Initiatives program, and USAID.

Our faculty members have also begun working on HIV/AIDS projects in Malawi and Uganda. In the area of parasitic diseases, pharmacoeconomist Leslie Wilson is studying the cost effectiveness of preventive and potential drug treatments for Chagas disease in Latin America. She is also looking at the relationship between immigration and the risk of Chagas disease in the United States and Mexican blood supplies. Follow-up recommendations could include promotion of the need to test the blood supplies in both countries for the Chagas parasite. Note that our department of pharmaceutical chemistry continues its world-renowned research in parasitic diseases from the labs of C.C. Wang and joint faculty member Jim McKerrow.

Nationally, we are moving forward with the Center for Consumer Self Care, which is dedicated to helping consumers take a central role in their own health care. Bill Soller is on board as the Center’s new director. He is spearheading the California Health Communications Partnership, which is a collaborative effort among health and consumer groups to synchronize the timing of shared health care messages sent to their audiences.
Inadequate Support for the Doctor of Pharmacy Program

The single most important issue I have had to address during my tenure as dean has been inadequate support for the Doctor of Pharmacy program, for it is an issue that truly limits the School in reaching its world-class teaching and research potential. Under-funding for the School's core mission results from a student-to-faculty funding ratio of 11:1 that is particularly unfavorable relative to other health profession schools in the University of California and our peers nationally. A minimum student-to-faculty ratio of 8:1 would require augmentation of permanent funding by approximately $1.6 million in today's dollars and would provide 16 additional faculty members with appropriate staff support. If I use the School of Medicine's 3.5:1 student-to-faculty ratio as the desired goal, the faculty numbers would be augmented by more than 88 and we would need to increase our permanent funding by approximately $8.8 million annually. The chancellor has taken this message to the Office of the President without success and has augmented permanent funding to the School to keep it out of deficit. But we must still garner soft funding to support clinical faculty, and we rely heavily on a cadre of more than 600 volunteer faculty members throughout the state to deliver our robust curriculum. Clearly, the state's horrendous budget deficit and the assigned cuts to the University's budget do not bode well for relief from the state or the University in the foreseeable future. Instead, to achieve greater fiscal stability and flexibility, the School must become ever more entrepreneurial to attract funds for faculty salaries and sufficient discretionary dollars to recruit and retain world-class scientists and clinicians. We already have had one leadership group retreat to begin framing our strategies and have received initial input from my external Board of Advisors.

Since 2003, inadequate funding of the PharmD program has remained our biggest financial problem. In the past year, fees for most UC professional schools, including the School of Pharmacy, have risen steeply. California Governor Arnold Schwarzenegger proposed that professional fees be used to offset significant reductions in state support for professional programs. This will help our budget situation slightly, but it does not solve the problem, and it has placed the financial burden on students. It appears certain that more fee increases are on the horizon. For as far as I can see into the future, there likely will be no further consideration in Sacramento of the inadequate student-to-faculty ratio upon which the School is funded by the state. We look for other solutions everywhere and always.
New Strategic Directions

As the campus and medical center begin to develop their own strategic plans and as a new dean of the School of Medicine articulates his priorities, it will be important for the School to revisit its strategic direction in these new contexts. I believe a key part of our success has been to present our priorities within the context of campus priorities and to take the lead in several areas. While the School's fiscal resources are limited, our intellectual capital and community spirit are boundless. Now that we are experiencing what it means for our scientists to be separated onto two campuses and truly intermingled with faculty from other departments, we will have to rethink our organizational and administrative structures; our teaching responsibilities for both the professional and graduate programs; and the future of our science. The leadership group will begin to frame key questions for faculty subcommittees this summer, which will culminate in a full faculty strategic planning retreat in December. By late spring, a fresh plan for the School should be finalized.

Since 2003, Associate Dean Susan Levings and I have developed a planning process that includes qualitative interviews, focus groups, and two quantitative surveys. The results are compiled. A steering committee of faculty and administrative leaders has met to flesh out the program goals that are clearly emerging. A written document will be ready in spring 2005. Our School plan will be important to the UCSF campus planning process.

Inadequate and Scattered Space

A School of Pharmacy building located in a prominent space is ultimately important to the School's identity. It is the only School that does not have dedicated space to house its core activities, and the opportunity to acquire substantial space at Laurel Heights was lost in the dispute with the neighborhood. There is no question that some of our faculty’s pent-up space needs have been somewhat alleviated by Mission Bay, but their successes have already created even greater space demands. Furthermore, there is great need to decompress our full-time clinical faculty, many of whom continue to “double bunk” in small offices that were once patient examination rooms. Finally, space for our students and student affairs staff is woefully inadequate. As I already noted, we will be able to achieve some consolidation and decompression of School of Pharmacy activities temporarily as a result of reconfigured Parnassus Release Space, but our inadequate space will become urgently apparent when UC Hall is demolished. Space planning for the School of Pharmacy remains high on my list of priorities.

Since 2003, space has remained a challenge. On Parnassus, we have succeeded in consolidating space on the 9th floor of the Medical Sciences building. The Office of Student and Curricular Affairs (OSACA) has made the transition from its abysmal basement enclave to new and expanded space on the 9th floor. Many faculty members relocated in proximity to OSACA. While our basic science faculty members now have the physical space to enable them to work more effectively, many of our clinical faculty members are still trapped in cramped and claustrophobic offices.

Planning for the clinical and research futures of the campus is moving ahead at record pace. There is now agreement that UCSF will continue as a vibrant multi-site campus anchored to the west by the Parnassus campus and to the east by the Mission Bay site. The four Schools and the graduate division will remain headquartered on Parnassus. Patient care will be carried out at both sites. Plans call for the construction of three specialty hospitals at Mission Bay—a Children’s Hospital, a Women’s Hospital, and a Cancer Hospital—as well as an outpatient clinical and translational research center. Inpatient facilities will be phased out at UCSF/Mount Zion, but Mount Zion will remain a hub of ambulatory care. Adult medicine and surgery specialties will be the ultimate focus of Parnassus clinical activities. Parnassus will eventually be home to a new inpatient pavilion and an adult emergency department. I refer you to the Web [http://www.clinicalresearchplanning.ucsf.edu/] for planning details.

Be assured that the School’s plans for a multidisciplinary building at Mission Bay have not changed. UCSF faculty members now at Mission Bay are physically clustered by program, and the arrangement
is proving tremendously successful. I see as a necessary next step a large physical space at Mission Bay that clusters faculty members from many disciplines who, together, will transform the underlying science of drug discovery and development. The mission is not to manufacture drugs. Rather, the mission is to assemble the knowledge required to modernize drug discovery and development. That knowledge includes everything from new ways to model drug targets using advanced technologies to new ways to look at the effectiveness of medication use in specific populations. Ultimately, we want to ensure that people in front of their medicine cabinets are helped by the best and safest medicines possible.

An intellectual workplace such as this requires substantial private money, which I seek.

**Sustaining and Nurturing a Unifying School Culture**

The new interdisciplinary programmatic focus on campus; the recent move of some faculty members to Mission Bay; the scattered nature of our space throughout Parnassus, Laurel Heights, San Francisco General, Mission Bay, and throughout the state; and the widely disparate interests of our faculty members make it ever more challenging to keep us all connected and to sustain the School’s culture and values. This is a key issue the faculty must address at its upcoming retreat this December.

**Since 2003,** and on the recommendation of many faculty members, we have abandoned printed newsletters and flyers to keep the School community up to date and informed on School-wide developments. Rather, we are spending more time on electronic communications. We are developing an email bulletin. Between calendar years 2003 and 2004, we doubled the number of feature stories on our Web homepage. I am gathering faculty members together in smaller groups for dinners and lunches to encourage new partnerships and to orient new faculty members to the School. I have initiated a research awards program to encourage paid faculty members within the School, but from different fields, to work together. These efforts aside, the fact is we are and will remain physically scattered and we need to find additional ways of connecting—especially clinicians with basic scientists.

**Assessment and Revision of the PharmD Curriculum**

Now that the revised curriculum is implemented, we are challenged to upgrade and refine it as determined by student feedback and graduate outcomes. Although initial feedback is positive, we will be comparing and contrasting over time the career outcomes of graduates of this new curriculum with those of our standard clinical curriculum. New opportunities for joint degrees (e.g., PharmD/MPH, PharmD/PhD, PharmD/MBA) are under exploration as well. I am particularly interested in developing a program that prepares clinical scientists who can successfully compete for NIH grants and meet the severe faculty shortage that is widespread in schools of pharmacy.

**Since 2003,** the department of clinical pharmacy has held a retreat to look at new national reports on what health care providers need to know in the future—what we teach, how we integrate courses, and how we can improve the quality of our teaching. We are gearing up for the next accreditation process, which will use new accreditation standards. Clearly, curriculum development is a continuing challenge—as it should be. Pharmacy education is core to our mission. The assessment, development, and refinement of the curriculum will never end because the profession is dynamic.
As I look back on these five fleeting years, I am astounded by the breathtaking accomplishments of our faculty, staff, and students. I can only attribute this to their exceptional intellect, deep commitment to excellence, entrepreneurial spirit, and citizenship. The School also has been broadly supported by many across this campus: the chancellor and vice chancellor’s office; the deans of all other schools; the Program in Biological Sciences; and many, many department chairs and prominent faculty members residing in departments throughout the campus. It has been “Mr. Toad’s Wild Ride” for sure...exciting, unexpected, a bit scary at times, but exhilarating nonetheless.

Since 2003, the ride continues to be wild. I would not have it any other way, for this charged atmosphere in which we work fosters creativity, innovation, and ultimately the best possible work on behalf of the public we serve.

Respectfully Submitted by:

Mary Anne Koda-Kimble, PharmD
Professor and Dean
TJ Long Chair in Chain Pharmacy Practice
School of Pharmacy
University of California, San Francisco