Response of the Wisconsin Partnership Program  
University of Wisconsin School of Medicine and Public Health

We appreciate this opportunity to respond to the Legislative Audit Bureau’s evaluation of the Wisconsin Partnership Program (WPP). We would like to express our appreciation to the auditors who worked diligently to learn about the WPP, resulting in a detailed overview of WPP’s grants management and of selected awards. We are pleased to note the audit found the WPP and its two governing committees have achieved the vision set forth by the Insurance Commissioner in 2000 of promoting “public health initiatives that will generally benefit the Wisconsin population.” The WPP’s work processes and grant monitoring have evolved over time, with each improvement promoting higher levels of performance and a sharpened focus on Wisconsin’s health needs.

LAB’s award-by-award methodology describes a series of initiatives that met all, most, some, or few of their initial objectives. Measurement of award outcomes and evaluation of the WPP’s policies and procedures provides valuable information. Understandably, the audit report does not offer a complete picture of the scope of the Program, its mission, its achievements, and its vision for the future. We believe the WPP is already improving the health and well being of people across the state. We maintain that the support and commitment made by the faculty and staff of the UW School of Medicine and Public Health (UWSMPH) are essential components of the Program’s successful partnerships with communities.

This response will describe how the WPP is helping to achieve the vision of an innovative approach to health promotion and disease prevention for Wisconsin; one that improves access to care, research, education, prevention, and practice in ways that meet the needs of the state’s residents. First, we will discuss the founding vision of the WPP and highlight how its accomplishments meet those goals. Following that, we will address some specific points and recommendations made by LAB in the report.

I. Background of the WPP

The Wisconsin Partnership Program was established in 2003, using funds resulting from the conversion of Blue Cross Blue Shield United of Wisconsin to for-profit status, with the stated goal of improving the health of Wisconsin’s residents.

Since its first funding cycle in 2004, the Program has awarded 201 grants worth more than $91.2 million. Each award represents investment in the health of Wisconsin residents. For instance:

- If you live in rural Wisconsin, you are already building relationships with the next generation of primary care doctors. Through the Wisconsin Academy of Rural Medicine (WARM), a program funded by the WPP, future physicians are in training to alleviate the doctor shortage facing Wisconsin’s rural counties. By 2018, up to 50 WARM graduates could be practicing around Wisconsin, increasing access to health care for the state’s rural communities. WARM was recently highlighted in the Wisconsin State Journal’s special series on rural health.
- If you live in Brown, Columbus, Douglas, Eau Claire, or Outagamie Counties, you have seen the success of the Got Dirt Initiative, which helps schools and childcare providers...
start and maintain community gardens. The WPP-funded partnership between the university, local government agencies, and educational institutions, creates an active learning environment for children, while increasing their awareness and consumption of fresh fruits and vegetables. This may also prove a key intervention in reducing rates of childhood obesity, which are increasingly straining the public health system.

- If you live near Milwaukee, you remember the 1993 outbreak of the water-borne parasite Cryptosporidium, which killed more than 100 people. A WPP grant allowed a UWSMPH researcher to develop and test a potential vaccine against the disease, which is generally fatal for those with compromised immune systems. By the conclusion of the grant, the vaccine had been successfully tested in mice, moving it close to its use in protecting human populations.

These grants, and the 198 like them, aim to realize specific benefits for Wisconsin residents. Individually, each WPP award tells a single story. Together, the awards illustrate the UW School of Medicine and Public Health’s commitment to making Wisconsin a healthier state for all.

**How the WPP Works**

**Through the Health Care System:** Wisconsin’s health care system remains a diverse web of autonomous organizations – each with different goals, methods, and resources. The WPP believes that the forging of coordination and collaboration across the health care system will lead to a stronger system that meets the needs of the state’s resident. The UWSMPH, through its transformed mission to integrate medicine and public health, increasingly finds itself at the intersection points between the health care system’s component parts. WPP grants aim to foster collaborations between these groups to meet the major challenges facing the state.

**Through Community Engagement:** It is a role that suits the UW School of Medicine and Public Health. Its transformed mission to integrate public health and medicine combines the strengths of the University of Wisconsin. UWSMPH is a national leader in biomedical research, an innovative educator and trainer of health professionals, and a recognized provider of high quality patient care. It works with health care systems in communities throughout the state, engages policymakers at all levels of government, and partners with Wisconsin communities to benefit the health of the public. By fostering partnerships across the divergent sectors of the state’s public health system, the WPP breaks down the walls that have traditionally separated research from practice, evidence from policy, and specific populations from health resources.

**Through the Wisconsin Idea:** WPP grants promote the service mission enshrined in the Wisconsin Idea – the belief that the work of the university should benefit every resident of the state. By creating an environment that encourages faculty to work with communities in joining their expertise to generate discoveries, the health care system is strengthened. As we have learned throughout the first six years of the program, progress can be slow. Progress may be measured in number of objectives met, sustainability, policy or practical impact, and increased trust between researchers and communities. Progress is also found in unexpected outcomes, lessons from missed opportunities, and even dead ends. All progress is incremental and yet vital for integrating the public health system so that it is capable of meeting the 21st century challenges facing Wisconsin.
Through Collaborations with Communities: Since 2004, the Oversight and Advisory Committee (OAC) has awarded 111 grants worth $28.2M to support public health in communities. Grants through the WPP’s Community-Academic Partnership Fund give community groups, non-profits, and local governments the opportunity to partner with UW faculty to test or implement health interventions in communities around Wisconsin. Many CAPF grants have led to the creation of lasting local coalitions, bringing the business, religious, and non-profit communities into the process of improving health throughout the state.

Through Collaborations in the Health Care System: The Medical Education and Research Committee (MERC) has made 90 awards worth $63M. Grants to improve medical education are enhancing the way the next generation of Wisconsin physicians is trained. Basic science, clinical, and applied public health research grants are ensuring Wisconsin is a home for innovation.

Through Commitment to Oversight: Both the OAC and MERC balance strong oversight of grant funds with the necessity of flexibility. In research settings, new knowledge does not always follow a timetable. Discoveries by the WPP-funded principal investigator during the course of the grant may alter a grant’s process and objective. In Community Based Participatory Research, study design is subject to continual refinement based on the needs of the participating communities.

Through Working Together: The OAC and the MERC actively seek opportunities to work together on pressing health needs. In November 2009, the OAC designated the promotion of healthy weight and physical activity and the prevention of obesity as its next targeted area of focus. The MERC may fund research into metabolic and other causes of obesity in children. The goal is to find the right combination of research and intervention to effectively address a health issue that is reaching epidemic status.

WPP: Six Years of Accomplishments

Since 2004, more than 80 different community groups and government agencies have received funding through the Community-Academic Partnership Fund. In addition more than 800 members of the state public health workforce have received training through the workforce development program, and 23 new graduates have been placed in community health positions around the state through the Public Health Fellows program. The MPH program has graduated more than 40 people trained to tackle pressing public health needs.

Programs funded by the WPP have been successful in attracting grant funds to Wisconsin, helping the school grow into an epicenter of health innovation. The Institute for Clinical and Translational Research (ICTR) received a $41M grant from the National Institutes of Health to build a research-to-practice continuum at the University of Wisconsin and the Marshfield Clinic. The Survey of the Health of Wisconsin (SHOW) was called by an expert reviewer, “Among the most innovative and far-reaching state level projects in the field of public health today.” It received $5.5M from the NIH in the form of a grand opportunities grant. In all, our grant recipients have used WPP grant funding to leverage over $75M from outside funding agencies. This leveraging confirms that the WPP’s funds have been put to good use, and that the projects and interventions developed will be sustainable.

Here are just a few of the WPP’s key accomplishments.
Taking on Wisconsin’s Most Pressing Challenges: The public health challenges facing the state are large and entrenched. The most effective responses require broad-based mobilization of community stakeholders. The WPP has assumed a leadership role on:

- **Infant mortality:** A black child born in Wisconsin is four times more likely to die before his or her first birthday than a white child. Wisconsin’s infant mortality among African Americans is worse than that of Botswana and Panama. The WPP has pledged $10M to an effort to address this in Milwaukee, Kenosha, Racine, and Beloit, where the problem is worst. Community coalitions representing government, faith-based groups, health providers, and community leaders are coming together to improve access to care that will help more babies live past their first birthday.

- **Obesity prevention:** The rising obesity rate means that life expectancy is going down in Wisconsin. The WPP has embraced a wide variety of interventions and projects aimed at getting a handle on the problem in diverse communities around the state, including a project in La Crosse, *Healthy and Active Lifestyles for Children and Youth with Disabilities*, and a project in three Wisconsin tribal communities, *Healthy Children Strong Families*. Recently, evidence generated through a WPP grant, led the State Legislature to consider requiring fitness testing in Wisconsin schools.

Medical and Public Health Education: The WPP has devoted significant resources to educational efforts for the health professionals of today and tomorrow. With support from the MERC, it has funded changes to curriculum that will train the next generation of Wisconsin health care and public health leaders.

- **WARM:** Wisconsin Academy of Rural Medicine enrollees receive special training in rural medicine and spend their clerkship years in those communities. By 2018, WARM expects that up to 50 graduates will be practicing in rural Wisconsin.

- **MPH Program:** Using WPP funds, the UWSMPH started a Master in Public Health Program that received full accreditation in the shortest possible time. This degree program so far has produced more than 40 graduates trained in the principles and practices of public health. These graduates will be equipped to implement policy and interventions throughout the state.

- **Innovations and Transformation of Medical Education:** This program has funded the overhaul of the medical school curriculum to include a new public health orientation. This will ensure that the next generation of physicians understands the interactions between population and individual health. UWSMPH-trained doctors will be able to apply public health principles in their practices and communities throughout Wisconsin. The program has entered its second phase, revamping the medical student training program to offer more diverse education in public and community health.

Public Health Training and Community Service: The WPP supports training programs to ensure the state’s public health workforce gains access to the most current information. Using funds from the OAC, the WPP supports the Population Health Fellows and the Healthy Wisconsin Leadership Institute. These programs provide direct assistance to communities through the work performed by the fellows and the community teams.

- **Healthy Wisconsin Leadership Institute (HWLI):** This joint project between the WPP and MCW’s Healthier Wisconsin Partnership Program ensures that the current public health workforce is equipped with the most current training. The HWLI supports the work of
community teams throughout the state that focus on specific priority health concerns in their communities, as well as sponsors workshops around the state, at no cost to the participants.

- **Population Health Fellowship Program**: This initiative places MPH recipients in public health positions around Wisconsin. They gain practical experience while providing service to local health departments or community-based organizations. The Milwaukee Health Department has placed nine fellows from the program, and Commissioner of Health Bevan K. Baker pointed to nine key projects fellows completed that would have been left undone otherwise, “These important projects would not – and could not – have been undertaken if not for the fellows,” he said.

Combined, these successes illustrate how the UWSMPH contributes to the health of communities. WPP-funded educational programs anticipate and address the future needs of the health care system. The service learning programs strengthen Wisconsin’s health care system for the state’s residents and future graduates.

**Community Interventions Making a Difference**: The WPP’s signature programs are Community-Academic Partnerships. These initiatives pair the local knowledge of community organizations with the skills of UW faculty to produce health interventions with uniquely beneficial results. Among the success stories are:

- **Milwaukee Homicide Commission**: This collaboration between the Milwaukee Police Department and UW Center for Urban Population Health reviewed data from more than 150 homicides and developed recommendations aimed at prevention, including targeted delivery of social services and criminal justice resources. Police districts where new strategies were implemented saw a 15 percent drop in homicide rates. The work of the Milwaukee Homicide Commission was highlighted in a New York Times article. The project was renewed and expanded.

- **Juneau County**: After finishing near the bottom of the county health rankings for five consecutive years, the Juneau County Health Department used a development grant to convene local stakeholders and craft a community health plan. The small grant was successful in improving health outcomes, as the county moved up the rankings, from last among Wisconsin’s 72 counties to 52nd.

- **Co-Op Care**: WPP funds helped set up the Farmers Health Cooperative, a program that improves access to affordable, quality health insurance coverage for agricultural producers, rural families and small businesses. By developing health benefit purchasing cooperatives, this program has enabled access to care for more than 2,000 families.

**Sharing Knowledge Across the System**: As innovation occurs, it often is not shared across the public health system. Multiple WPP-funded programs devote their resources to making sure best practices are shared throughout the health care system.

- **Health Innovation Program (HIP)**: This program was designed to help grow the School’s capabilities in the field of health services research, the study of how health care is most efficiently and effectively delivered. HIP has joined with the Wisconsin Collaborative for Healthcare Quality to disseminate knowledge of best practices across the health care system.

- **ICTR Community Academic Partnerships**: One of ICTR’s core missions, the core supported by WPP funds, seeks to support research on integrating best practices into
community health settings. For example, one of these initiatives found that, despite the evidence showing its benefits, less than two-thirds of eligible individuals in Wisconsin were obtaining colorectal cancer screening. Dissemination of these findings to local health systems will lead to better screening and more prevention.

**Improving Health Policy Throughout Wisconsin:** WPP-funded projects have focused on ensuring that evidence-based practices are included in policy debates. Projects like the ones listed below, ensure that policy makers have the best information at their fingertips to help make decisions about state priorities. These projects include

- **Advancing Evidence Based Policy:** The goal of this project is to ensure legislators and policymakers have access to the latest medical evidence when forming health policy. This project has developed into a resource for policymakers, researchers, and private sector partners on public health and health policy. As of June 2009, it had hosted 19 briefing sessions — with over 800 participants — on health topics ranging from infant mortality to injury prevention to promoting smart health care decision making.

- **Making Wisconsin the Healthiest State:** This project created a framework to track health and health disparities around Wisconsin. The project has two key components: A report card on health and health disparities and a web-based toolkit for policymakers and community groups to find evidence-based solutions to improve those grades. The regularly updated database contributes to the formulation of the State Health Plan, acts as an impetus for improvement, and provides practical suggestions for improving the state’s health. The WPP has used this project’s findings to help set its funding priorities.

- **SHOW:** The Survey of the Health of Wisconsin is a unique state of the art research program designed to monitor statewide trends in population health. SHOW provides a key resource for policymakers in priority setting, program planning and evaluation including assessment of the state health plan objectives. SHOW also provides an infrastructure to evaluate the effectiveness of community-driven programs and policies. It has partnered with the Wisconsin Department of Health Services, Wood and La Crosse counties to evaluate community-wide obesity and physical activity interventions.

**Breaking Down Walls in Research:** The Collaborative Health Sciences Program offers grant awards to projects that combine basic scientists, clinicians and public health faculty.

- **Menominee Smoking Cessation Clinical Trial:** This collaboration with UWSMPH, the Menominee Indian Tribe of Wisconsin, UW-Milwaukee, and UW Paul P. Carbone Comprehensive Cancer Center tested a smoking cessation treatment program tailored to American Indians. The treatment was designed to be respectful of the sacred, traditional use of noncommercial tobacco while helping American Indian smokers stop using more harmful commercial tobacco.

- **Effects of Environmental Opportunities and Barriers to Physical Activity, Fitness, and Health in Hispanic Children in Wisconsin:** This wide-ranging collaboration is examining how individual, social and environmental factors affect the health of Latino youth on Milwaukee’s South Side. Specifically, it will look at use of the urban landscape and the nutritional environment to gain a greater understanding of the increases in obesity in urban settings. This effort is anchored by the United Community Center in Milwaukee, with participation from the UWSMPH, Wisconsin Departments of Health Services and Public Instruction, and multiple UW-Madison departments.
These are just a few of many examples of the way the WPP is working to help transform the public health system to make Wisconsin a healthier state for all.

II. Response to LAB’s Findings and Recommendations

The LAB report shows the WPP has been generally successful in fulfilling its grant oversight responsibilities. The report indicated:

- The WPP has met the Insurance Commissioner’s goal of using conversion funds “to promote public health initiatives that will generally benefit the Wisconsin population.”
- In examining 20 MERC grants, 12 of 14 projects completed at the time of the audit had met all or most of their objectives. Of the remaining six, five were on track to achieve all or most of their objectives and one was too early to tell.
- In examining 20 Public Health grants, nine of the 12 projects completed at the time of the audit met all, most or some of their objectives. Of the remaining eight, three were on track to achieve all or most of objectives and five were too early to tell.
- There were no findings of supplanting based on the WPP’s working definition.
- All spending by the 40 grants programs reviewed was found to be allowable.
- The WPP endowment is currently projected at $325M, higher than the $297M the program started with in 2004. This increase in value occurred despite the 2008 financial downturn.

The WPP has already adjusted its work processes to ensure even more stringent oversight, and has instituted an automatic e-mail reminder system for grant recipients to file progress and financial reports on a timely basis.

In response to LAB’s comments, the WPP is strengthening its conflict of interest policies. In the past, board members with conflicts were allowed to answer questions during discussion periods while abstaining from final votes. In response to the recommendations, the WPP will revise the policy to require conflicted members to be absent throughout the deliberation and the vote.

We previously have registered our concern that classifying grants simply by the meeting of initial objectives fails to account for the character of research or the unique challenges of community-based health research. Even unmet objectives often provide new knowledge and lead to development of better approaches – such is the nature of discovery. For example, the audit judges the Survey of the Health of Wisconsin as having only met some of its objectives. It is true that SHOW’s sample size did not meet initial recruitment goals. Those lessons led the SHOW team to form partnerships with clinics around the state that will enable it to meet recruitment into the future. SHOW’s demonstrated success and potential attracted an added federal investment of $5.5M.

The above point must be underlined in any discussion of projects supported by the OAC. The Community-Academic Partnership Fund promotes projects that employ the principles of Community-Based Participatory Research (CBPR). CBPR links academic researchers with local stakeholders, the people most directly affected by and most knowledgeable about local health challenges in specific communities. In working together on health interventions, academic and community partners invest in team building, knowledge transfer, and engagement. CBPR requires flexibility and constant redesign based on community feedback. If successful, the lessons learned through CBPR should inform policy and inspire structural changes in
communities. Further, even projects that do not meet their stated aims often produce important new relationships and new knowledge regarding how to engage with communities. The project *Multi-Level Information Systems and Health Promotion Interventions for Milwaukee’s School Children* is listed as having achieved few of its objectives. This project required redesign accommodate the needs of the school district. Following the revisions, the collaboration combined new and existing data to assess the health status of 465 MPS elementary (ages 6-11) students. Over 250 parents of those children were also interviewed. This information provided baseline data and recommendations for improving school health services and measuring health improvement for high risk children.

**Non-competitive Awards**

We disagree with the use of the term “non-competitive” to describe any of the WPP’s grant programs. The term suggests that grant funds are being handed out without review or oversight and without specific objectives or evaluation criteria. All proposals, whether submitted through a request for applications or invited by the Dean of the UWSMPH, must fit all the program requirements and are subject to the approval and oversight of the relevant committee. An invitation to submit a proposal is not a guarantee of an award.

**Institute for Clinical and Translational Research**

The overarching goal of ICTR is to transform clinical research at UW into a continuum from discovery through translation into clinical practice. MERC’s initial award to ICTR was a demonstration of institutional support for the program, which was seeking a Clinical and Translation Science Award from the NIH – an award applied for by most of the major medical schools in the country. MERC’s award was an essential step in ICTR securing a $41M grant that has been vital to the School’s integration of medicine and public health. The MERC’s funding of ICTR has focused on one of the initiative’s four interrelated specific aims. We believe the continuing federal support of this grant, including the favorable annual expert reviews through the NIH, demonstrates that the program is reaching its goals and the MERC’s original and continued investment in the program is well-supported. Further, ICTR’s success in forging partnerships with other health providers in the state and its community connections program provide additional evidence that MERC’s funding was a wise investment.

**LAB’s Recommendations to the Insurance Commissioner**

We look forward to working with the Insurance Commissioner and the Wisconsin United for Health Foundation on clarifying the following issues:

**Supplanting:** The definition of supplanting is standard across most granting agencies. WPP applications make clear that supplanting is “to replace, to take the place of, or to supersede” an applicant’s current funds. This working definition twice has been reviewed and endorsed by WUHF. The audit found no instances of supplanting based on our definition.

The audit report seeks a clarification about whether supplanting refers to funds that “are available” to grantees or “may be available” to grantees. The current standard focuses on what is quantifiable, whether a Principal Investigator or a Community Organization has applied for or received outside funds, and how WPP funds will be used in an allowable way. We believe a “may be available” standard is unquantifiable for WPP staff and would prove an impossible
barrier for most community groups and investigators. An April 14 search of the SPIN database, which tracks research grant funding, showed 90 potential funding sources for breast cancer research; 126 potential funding sources for cardiovascular disease; and 143 for diabetes. This potential standard presumably would require potential grantees to exhaust all of those possibilities. This would turn the WPP into a funding agency of last resort, preventing us from setting priorities in our funding decisions.

We do intend to change our supplanting questionnaire in cases where there is other funding present to seek more detail to determine how a PI determined this mix of funding.

**Faculty Recruitment:** The LAB report raises questions about the use of WPP funds for faculty recruitment. At UWSMPH, state money covers only 31 percent of faculty salary. The remaining 69 percent must be raised through grant awards and clinical service. Use of WPP funds for faculty recruitment lasts for a limited period, giving new hires time to win grants. The intention is to expand the School’s faculty in public and community health and health services research to complement the basic science and clinical faculty. Attracting accomplished faculty would help grow the School’s capability in these disciplines, which are essential to achievement of the goals and objectives of UWSMPH and the WPP.

**Public Health Funds Expended by the School:** The LAB report noted that $4.2M of the public health funds have been expended by the UWSMPH. The vast majority of that sum ($3.1M) went directly into community service through the Healthy Wisconsin Leadership Institute and Population Health Fellows programs. These programs furnish no-cost training for and placement of health professionals in agencies around the state.

The remaining funds go to faculty, academic staff, researchers, and graduate students who are working directly in grant programs. We are committed to the community academic partnership model. Pairing the research and evaluation skills of our faculty and staff with the local knowledge of community groups produces the strongest possible projects. And as noted on page 105 of the report, communities appreciate the input of academic partners, “Several described their partnerships as particularly valuable.”

**III. Conclusion**

We appreciate the opportunity to respond to the report, and are generally pleased with LAB’s findings. We agree with a number of LAB’s suggestions for improvement, and as noted above, we have already started to incorporate them into our work process. These will be important for the continuing evolution of our program. We look forward to discussing the findings and recommendations with the Commissioner of Insurance and the Wisconsin United for Health Foundation Board.

As we have shown in this document, the WPP is already having a positive effect on people of the state through community interventions and health research initiatives. We expect this influence to grow at an ever increasing rate as more WPP-funded projects lead to new community health breakthroughs. The skills and resources of the faculty and staff, and their partnerships with community organizations and involvement in community initiatives are important and essential components of this program. Their contributions illustrate the value UWSMPH brings to the health of the state, and why it is an effective steward of these funds.