

Wisconsin Partnership Program

University of Wisconsin School of Medicine and Public Health



2009-2014 Five-Year Plan



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Executive Summary

For the past five years, the Wisconsin Partnership Program (WPP) has been dedicated to improving the health of Wisconsin residents through investments in research, education and community partnerships that have spanned the state.

The new five-year plan provides the direction and categories of investments going forward. Our goal is to build upon our most successful efforts and strategically focus investments in areas that will result in the greatest improvements in health and the reduction of health disparities.

The WPP was created in 2004 with funds stemming from the conversion of Blue Cross/Blue Shield United of Wisconsin that were distributed between the University of Wisconsin School of Medicine and Public Health (School) and the Medical College of Wisconsin (MCW). Since the beginning, the WPP has received valuable direction and guidance from the state health plan, *Healthiest Wisconsin 2010*, in working toward its goal of making Wisconsin a healthier state for all.

The first five years have focused on establishing a foundation for significant and sustainable changes in health and health care, and on helping to build the capacity of community organizations throughout the state. From 2004 to 2008, the WPP awarded 176 grants totaling nearly \$69 million to university faculty and staff and community organizations from around the state. Through these awards, the WPP has worked to:

- Establish baseline data on Wisconsin's health status and health disparities and evaluate opportunities for improving Wisconsin's health through its support of programs such as, the Survey of the Health of Wisconsin and the production of the companion reports, Health of Wisconsin Report Card and Opportunities to Make Wisconsin the Healthiest State.
- Build the capacity of community organizations dedicated to improving the health of the public. The WPP has supported the development of 100 community-academic partnerships statewide that are working to implement initiatives resulting in improvements in health policy, practice and interventions.

- Support training opportunities for medical and public health practitioners and train new practitioners. The WPP supported the creation of a Master of Public Health degree that will produce 50 public health professionals annually, the development of the Wisconsin Academy of Rural Medicine, designed to meet acute physician shortages in rural areas of the state, and effected changes in the education of medical students to provide a more comprehensive approach to addressing the health challenges of the 21st century. Collaboratively with MCW, the WPP also supported the establishment of the Healthy Wisconsin Leadership Institute which has reached more than 700 public health practitioners throughout the state.
- Invest in research designed to address both short- and long-term health issues. The WPP has supported a range of basic, clinical, translational and applied public health research including projects investigating antibiotic resistance, iron deficiency, patient-specific therapeutic strategies for breast cancer, and improving birth outcomes for African-American women. Emphasis has been placed on effecting collaborations with faculty throughout the UW System and with state and community organizations in order to achieve a broader approach to important health and health care issues.

Another continuing priority of the WPP is the transformation of the School. Based on a strategic plan created by Dean Robert Golden, this transformation will enhance the missions of the School by incorporating the principles and practices of public health into education and research and by expanding the School's engagement with communities in support of the Wisconsin Idea.

Outlined in this document are the respective plans of the WPP's two governance committees – the Oversight and Advisory Committee (OAC) and the Medical Education and Research Committee (MERC). The 2009-2014 Five-Year Plan reflects extensive stakeholder input and a continuing commitment to many of the core programs and directions established in the first five years. Additionally, several new programs and emphases have been included, such as OAC's Targeted Funding Initiatives and Collaboration Sustainability Grants and MERC's new targeted competitive program and commitment to community engagement. These programs and areas of emphasis provided a clear direction for both committees over the next five years and underscore the significance of community engagement and collaborations to the WPP's future endeavors.

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While the future holds great promise for achieving success in addressing some of Wisconsin's public health challenges, it must be noted that this is a long-term process. Changes in public health and the success of the WPP's efforts are affected by many factors, including federal and state policy, economic conditions, and individual choices and behaviors. But the WPP has set the direction for making substantial and measurable improvements in the health of the public. The WPP will rely on feedback from its valued stakeholders through surveys, forums, interviews and written evaluations to ensure that this unique partnership maintains its commitment to making Wisconsin a healthier state for all.

A solid foundation has been set over the past five years, resulting in a better defined statement of purpose. Through education and research initiatives and partnerships with community organizations, and as a result of the significant changes taking place within the School to embrace public health, the WPP is building healthier communities for all of the people of Wisconsin.

Introduction

The University of Wisconsin School of Medicine and Public Health (School) is proud to present the 2009–2014 Five-Year Plan of the Wisconsin Partnership Program (WPP). The second five-year plan for this unique program, created solely to improve the health of the public in Wisconsin, follows the successful implementation of the inaugural five-year plan, approved by the UW System Board of Regents and the Wisconsin United for Health Foundation, Inc. (WUHF).

The challenge to improve the health of the public is formidable and requires a firm foundation of policies and procedures to implement the WPP's goals. The first five years since 2004 have been invested in building this foundation.

Operation of the WPP is guided by its foundation documents: the Insurance Commissioner's Order of March 28, 2002; the Grant Agreement of March 24, 2004, between the WUHF, the University of Wisconsin Foundation, and the University of Wisconsin System Board of Regents; and the current Five-Year Plan of the WPP.

The WPP's two governance committees, the Oversight and Advisory Committee (OAC) and the Medical Education and Research Committee (MERC), have crafted a comprehensive course for improving Wisconsin's health. The committees have approached their work with dedication to the WPP mission, vision and goals.

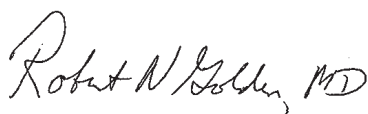
This remarkable program came about because Blue Cross/Blue Shield United of Wisconsin converted to a for-profit entity. The conversion was approved with the provision to distribute the proceeds from the sale of the company to the two Wisconsin medical schools with the expressed purpose of improving the health of the public. The UW School of Medicine and Public Health is grateful for the confidence placed in its stewardship of this critical resource.

The presentation of the 2009-2014 Plan begins with the Statement of Purpose, detailing the mission, vision and guiding principles of the WPP. This is followed by an overview of the past five years, citing goals, objectives, strategies and accomplishments. The overview discusses the considerations for identifying future investments to be made in the coming five years by the two committees – OAC and MERC. It concludes with the categories of funding opportunities to be supported by each committee.

Complementary to these sections, readers will find a review of the processes used to gather advice from the many stakeholders on the past, current and future activities of the WPP. An important component of this discussion is the comprehensive evaluation plan to ensure the program is focused on progress towards achieving its goals. The Five-Year Plan ends with a review of the programmatic and financial management of the WPP, including a description of the processes required to comply with the foundation documents.

The challenges are great, but these resources provide an extraordinary opportunity for the WPP to expand the Wisconsin Idea and the WPP's service to the state. What has been accomplished to date is the development and implementation of a program which has set the direction for making substantial and measurable improvements in the health of the public.

The 2009-2014 Plan provides a description of the activities of the efforts of the WPP since its inception and goals for the future. It is a roadmap for making Wisconsin a healthier state for all.



Robert N. Golden, M.D.
Dean, University of Wisconsin School of Medicine and Public Health
Vice Chancellor for Medical Affairs, UW-Madison

Statement of Purpose

The Wisconsin Partnership Program (WPP) is dedicated to improving the health and well-being of the public through investments in research, education, prevention practices and interventions, and policy development. The goal during the next five years is to show progress in improving the health of individuals, families and communities in Wisconsin.

To provide guidance and accountability for WPP investments, a mission, vision and guiding principles defining goals and funding priorities were developed. These statements and guiding principles are the framework for forming partnerships and collaborations to make Wisconsin a healthier state for all.

Mission:

The WPP will serve the public health needs of Wisconsin and reduce health disparities through initiatives in research, education and community partnerships.

Vision:

Making Wisconsin a healthier state for all.

Guiding Principles:

Prevention: Promote health and prevent disease, injury and disability

Partnership: Seek out, encourage and support community-University partnerships

Enhancement: Advance and replicate innovative and transformational population health programs

Responsiveness: Accelerate existing and stimulate new initiatives with the greatest potential to improve population health

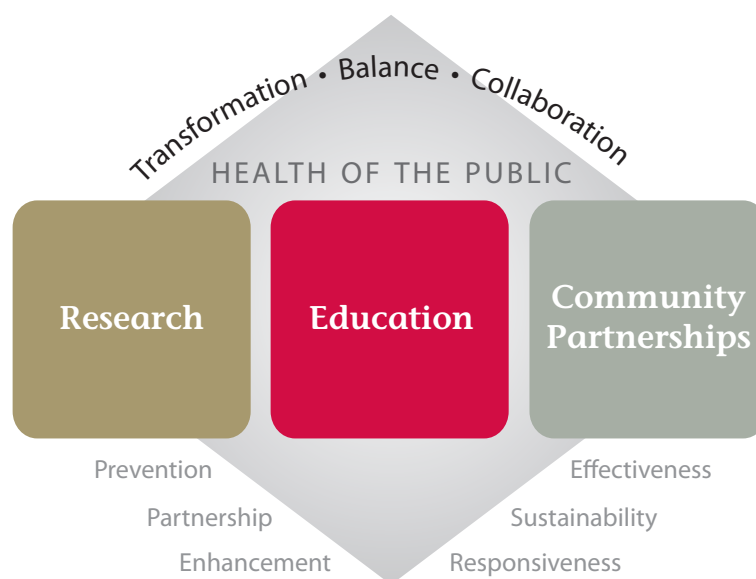
Effectiveness: Support the translation and application of evidence-based practices and policies

Sustainability: Enhance and leverage other resources to help programs evolve and become self-sustaining

Health improvement in Wisconsin is defined in two ways: improving health indicators (i.e., decreasing morbidity and mortality) and health related quality of life, and reducing health disparities. Progress will be determined through effective health policies, interventions, and practices over the short-term, and through improvements in health care, health behaviors, socioeconomic factors, and the physical environment over the long-term.

To accomplish the mission and vision, the WPP will invest in a balanced portfolio of community partnerships, education and research initiatives, and community engagement strategies, and support the transformation to an integrated school of medicine and public health.

The greatest strength of the WPP is the connection of the UW School of Medicine and Public Health (School) with people, partners and resources statewide. Through collaboration and partnerships, the people of Wisconsin will benefit from the shared knowledge, experience and resources of the School and communities.



Overview of the 2004-2009 Five-Year Plan

Background

The establishment of the Wisconsin Partnership Program (WPP) provided the UW School of Medicine and Public Health (School) with an unparalleled opportunity to address Wisconsin's growing and complex public health challenges – by linking the resources of the WPP with the expertise of the School.

With that linkage as the backdrop, the WPP formed to improve the health of the public by promoting health, preventing and treating disease and eliminating health disparities. Since its start, the WPP's themes have been the promotion of the Wisconsin Idea through community engagement, innovation and balance in education and research, and the transformation of the School into an integrated school of medicine and public health. The transformation has inspired the WPP to embrace the Wisconsin Idea with a focus on public health, as the School collaboratively reaches out throughout the state with programs to promote healthier communities.

Incorporating public health into the core missions of the School is a founding principle of the WPP. The first visible step toward fulfilling this principle was the decision to change the School's name to the UW School of Medicine and Public Health. The School's leadership recognized that the WPP's mission and vision could not be achieved without providing opportunities and support to faculty and staff to address the state's public health challenges. The School's goal is to integrate biomedical sciences with public health to benefit Wisconsin residents in lasting ways. The WPP has provided the direction, resources, structure and processes to link communities with the School to accomplish that goal. The connection between the WPP and the School's transformation is an underpinning of the program. Without this connection, the potential to achieve healthier communities would be diminished.

Throughout its existence, the WPP has received valuable direction and guidance from the state health plan, *Healthiest Wisconsin 2010*. To that end, the WPP has worked diligently to fund community projects and initiatives aligned with the public health priorities mandated in the state health plan, while simultaneously supporting innovative education and research initiatives aimed at transferring knowledge and discovery to communities statewide. The WPP has accomplished this by establishing the following three broad areas of focus:

Community-Academic Partnerships

Working towards building an effective public health system that values the needs of all requires strong partnerships. Community-based approaches and collaboration among individuals, organizations and state and local institutions are vital to developing and implementing interventions to improve public health. Through an emphasis on community-academic partnerships, the School collaborates with local and state partners to share its expertise and to learn from communities how to apply the best approaches to satisfy health needs. The WPP views the establishment of these partnerships as a foundation for improving the health of Wisconsin communities.

Public Health Education and Training

With the growing public health workforce shortage at local, state and national levels, there is an increasing need for a cadre of highly skilled public health professionals to protect the public's health and well-being. Long-term and sustainable programs to train the workforce and cultivate strong public health leaders are a central WPP focus. The WPP provides substantial support to alleviate the workforce shortage and address future public health challenges through education and training programs.

Medical Education and Research

The University of Wisconsin-Madison is known for educating leaders in science, education and other areas crucial to addressing the state's pressing issues. The UW School of Medicine and Public Health's education and research efforts are central to improving the health of the public. The challenge is to support the creation and dissemination of knowledge that can be translated into interventions that help people lead healthier lives.

The WPP has been instrumental in expanding the research opportunities for faculty to achieve a more balanced portfolio of basic, clinical, translational and applied public health research with a focus on engaging communities. In addition, the WPP has supported reforming the medical education curriculum to train future physicians to deal with Wisconsin's public health challenges, such as obesity, smoking and drug and alcohol abuse. The WPP has promoted a balance between the teaching of acute and chronic care management and the prevention of disease and has also focused on being responsive to the health needs of rural populations.

Organizational Strategies

The WPP applies its three focus areas through the following organizational strategies by:

- ▶ Promoting community engagement through partnerships with community organizations, local and state governmental units, American Indian Tribes and health care providers.
- ▶ Supporting the Wisconsin Idea by promoting health, improving health care and reducing health disparities across the state.
- ▶ Encouraging faculty and staff collaborations beyond the traditional boundaries of the School to include the UW-Madison, UW System, and government and community organizations.
- ▶ Maintaining a balanced portfolio of investments in education and research, and a continuum of basic, clinical, translational and applied public health research.
- ▶ Supporting initiatives with proven practices and data specific to Wisconsin's public health issues.
- ▶ Promoting leveraging of the WPP's resources to sustain and replicate successful programs.
- ▶ Evaluating the WPP's performance and short- and long-term impact of awards.
- ▶ Accelerating the sharing of knowledge with communities to close the gap between what we know and what we do.
- ▶ Advancing the transformation of the school to an integrated school of medicine and public health.
- ▶ Seeking advice from stakeholders and the general public on the WPP's activities.

These strategies enable the WPP to gain the most from its considerable investments. This includes promoting and replicating initiatives shown to have the greatest impact and the greatest potential to improve Wisconsin's health and health care.

Governing Committees

The work of the WPP is carried out by its two major governance committees - the Oversight and Advisory Committee (OAC) and the Medical Education and Research Committee (MERC). Both committees provide oversight, advice and programmatic balance, and emphasize innovation, creativity and excellence in processes for awarding grants and evaluating outcomes. The two committees carefully exercise their fiduciary responsibilities with keen awareness of the high expectations for the WPP to improve the health of the public.

The OAC is a nine-member panel including representatives of urban and rural areas, the Office of the Wisconsin Commissioner of Insurance and the School. The OAC directs and allocates funds for community-based public health initiatives across the state and for public health education and training programs. The OAC also provides advice and comment on the expenditures of the MERC, which is composed of School leadership, faculty and OAC representatives. The MERC directs and allocates funds to support medical education and research initiatives with an emphasis on health promotion, prevention and the diagnosis and treatment of disease. Both committees oversee competitive, targeted and strategic initiatives directed toward health and health care.

Communication between the OAC and MERC is a high priority. The committees regularly share information regarding activities and awards. Two OAC members serve as full voting members of MERC; regular committee updates are presented at both committee meetings; the MERC chair presents quarterly reports to OAC; and OAC and MERC meet jointly twice annually.

As indicated, the OAC has the responsibility to comment and advise regarding MERC expenditures. As part of the development of this five-year plan, OAC prepared a detailed report for MERC on the relationship between both committees, and on MERC's activities during the past five years, and made suggestions for future collaborations and interactions. OAC commended MERC's efforts in building a culture conducive to community engagement within the School through its support of the transformation.

OAC's advice and comments can be found in the Appendix of this plan.

Wisconsin Partnership Program Accomplishments

The sole purpose of the WPP is to improve the health of the public. Over the last five years, the WPP built the foundation to meet this challenge. It is from these beginning efforts that the WPP has structured a comprehensive program for the next five years. The WPP is proud to highlight its accomplishments, made possible by the dedication and collaboration of the two governing committees - OAC and MERC.

- ▶ Created 100 community-academic partnerships statewide to support the Wisconsin Idea with a focus on public health improvements.
- ▶ Bolstered community-faculty ties with support for community-based research and interventions.
- ▶ Partnered with state and local groups on health interventions.
- ▶ Forged collaborations on public health issues between School faculty and staff and their counterparts at the UW-Madison, UW System, and state government.
- ▶ Implemented a Master of Public Health degree program, public health fellowships and leadership training to respond to the needs of the state for a sufficient and competent public health workforce.
- ▶ Effected changes in the medical education curriculum to integrate the practices and principles of public health.
- ▶ Responded to the shortage of physicians in rural areas by establishing a rural medical education program.
- ▶ Designated transformation of the School as a top objective of the WPP by developing a strong link between medicine and public health.
- ▶ Provided training, technical assistance and grant-writing workshops to help applicants develop strong community-academic partnerships.
- ▶ Developed transparent, accessible and objective grant processes, resulting in 176 grants totalling approximately \$69 million to community organizations, faculty and staff.
- ▶ Implemented a comprehensive evaluation plan to measure progress on outcomes and impact on the health of the public.

Specific accomplishments of OAC and MERC are described in the next two sections.

Oversight and Advisory Committee Accomplishments

The OAC launched two major programs in the last five years - the Community-Academic Partnership Fund, and Public Health Education and Training Initiatives. Since 2004, OAC has awarded 100 grants to community organizations that promote community-academic partnerships and supported 3 major educational programs to train the public health workforce.

The OAC established relationships with communities throughout the state and has gained a better understanding of what is needed to support the development of successful community-academic partnerships. Together with community partners, and in collaboration with the Medical College of Wisconsin Consortium on Public and Community Health, Inc., OAC has made significant contributions toward building the state's public health capacity and advancing the vision of *Healthiest Wisconsin 2010* of healthy people in healthy communities.

The OAC has awarded more than \$22 million in grants to governmental and non-profit community-based organizations in Wisconsin. The partnerships represent new and developing collaborations on a broad range of health promotion and disease prevention programs. Although many of these programs are still evolving, OAC expects them to generate lasting effects on population health.

A major component of the original five-year plan was to enhance and connect the on-campus education programs in public health with practitioners in the state. To help improve leadership skills and ensure an adequately trained public health workforce, OAC made the following three major public health education and training awards for a total of \$3 million.

- The OAC and the Medical College of Wisconsin Consortium on Public and Community Health, Inc. jointly established the Healthy Wisconsin Leadership Institute. The Institute supported collaborative leadership training and learning sessions for local coalitions and the public health workforce. Since 2004, more than 700 public health leaders and practitioners have participated in the Leadership Institute programs.

- The Wisconsin Population Health Fellowship program was formed to provide two-year intensive public health training experiences for recent graduates in public health-related disciplines. Since 2004, the program has matched 15 population health fellows with local and state organizations to provide direct public health service on local health problems.
- The School's Office of Continuing Professional Development in Medicine and Public Health collaborated with the Wisconsin Division of Public Health and others to improve access to quality continuing public health education and training for practitioners in the state.

These training programs have widespread support among statewide partners for building and sustaining a sufficient and competent workforce in Wisconsin.

Medical Education and Research Committee Accomplishments

During the past five years, MERC launched major programs that linked with the five focus areas articulated in the 2004-2009 Five-Year Plan: Innovations in Medical Education, Wisconsin Population Health Research Network, Emerging Opportunities in Biomedicine and Population Health, Human Proteomics and Regenerative Medicine, and Molecular Medicine and Bioinformatics.

These focus areas were designed to provide the education and research direction and essential infrastructure to optimize the transfer and application of knowledge to communities to advance population health. Within this context, the Dean of the School collaborated with MERC to provide start-up funding for strategic programs supportive of the transformation to an integrated school of medicine and public health.

Most of these programs are ongoing and some still are building their capacity and the structure necessary to achieve their aims. Nevertheless, because of these programs, important changes are already happening in the education and research direction of the School through incorporation of the purpose and objectives of the WPP and through support of the transformation. Some highlights of the multi-year targeted education and research awards are highlighted in the following boxes:

Targeted Programs

EDUCATION PROGRAMS - More than \$7 million was awarded to respond to Wisconsin's health workforce needs:

▶ **Innovations in Medical Education:**

Redesigned medical student curriculum promoting a new approach to medical education that integrates principles and practices of public health with traditional medicine; added new courses and content to curriculum in ethics, professionalism, population health and cultural competence; enhanced the use of simulations and standardized patients in the Clinical Training and Assessment Center to assess medical student skills.

▶ **Master of Public Health (MPH):** Created the MPH program to help meet the state's workforce needs; graduated 30 students to date with an anticipated class size of up to 50 students by 2010.

▶ **Wisconsin Academy of Rural Medicine (WARM):** Founded WARM to respond to rural health needs by increasing the number of School graduates who practice in rural areas; enrolled 18 students in the program with an anticipated annual enrollment of 25 students by 2010.

▶ **Health Sciences Library:** Expanded the Library's resources to support the incorporation of public health into the core missions of the School.

▶ **Distance Education:** Developed an extensive video library available to the public as well as faculty and staff, highlighting health research and education events; received more than 400,000 visits to the website since January 2007.

Targeted Programs

RESEARCH PROGRAMS - More than \$28 million was awarded along a continuum of basic, clinical, translational and applied public health research focused on health promotion and the diagnosis and treatment of disease. Examples of awards are:

- ▶ **UW Institute for Clinical and Translational Research:** Transfers knowledge and discovery to clinical practice in communities; a collaborative effort with the UW-Madison’s Schools of Nursing, Pharmacy and Veterinary Medicine, the College of Engineering, and the Marshfield Clinic.
- ▶ **Wisconsin Network for Health Research:** Collaborations between Aurora Health Care, Gundersen Lutheran, Marshfield Clinic and UW Health to link researchers and health care organizations across the state to improve patient care.
- ▶ **Health Innovation Program:** Development of a model to improve health care delivery, including integration of research with practice; creates an infrastructure to encourage translational research and promote improvements in the coordination of care, patient safety, use of technology and the reduction of health disparities.
- ▶ **Survey of the Health of Wisconsin:** Identifies issues and trends by collecting data on environmental, biological and behavioral factors affecting public health for use of health care providers, researchers, state officials and policy makers.
- ▶ **Center for Urban Population Health (CUPH)-Public Health Development Plan:** Responds to urban health needs in Milwaukee by building CUPH’s capacity to engage in community-based research with an emphasis on underserved populations.
- ▶ **Reducing Cancer Disparities Through Comprehensive Cancer Control:** Supports two-part program of community-based partnerships with underserved populations, and development of a Milwaukee Cancer Care Network to promote access to care.
- ▶ **Making Wisconsin the Healthiest State:** Informs the WPP and state and local decision-makers about future investments to improve the health of the public through the development of the companion reports: the *Health of Wisconsin Report Card* and *Opportunities to Make Wisconsin the Healthiest State*.
- ▶ **Advancing Evidence-Based Health Policy in Wisconsin:** Supports stronger links between worlds of policy-making and scholarly research with timely, nonpartisan evidence for crafting solutions to health issues.
- ▶ **Human Proteomics and Regenerative Medicine:** Develops a research facility to identify molecular markers of health, disease and risk factors; establishes a program to overcome obstacles to using stem cells to treat human disease.
- ▶ **Wisconsin Center for Infectious Diseases:** Creates a campus wide effort of physicians and scientists through the establishment of a Center focusing on combating the spread of infectious diseases due to the overuse of antibiotics.
- ▶ **Preclinical Alzheimer’s disease in African Americans:** Supports design and testing of interventions to delay or prevent the onset of Alzheimer’s disease in underserved populations.

Competitive Request for Proposals

MERC also created two competitive programs for faculty: the New Investigator Program (NIP) and the Collaborative Health Sciences Program (CHSP), each supporting innovative education and research ideas that align with the goals and objectives of the WPP. NIP awards have covered topics ranging from shedding light on how Alzheimer’s disease develops and advancing novel therapies targeting influenza to preventing infection by drug-resistant bacteria through the use of dietary supplements. CHSP awards have supported programs ranging from correcting Vitamin D inadequacy in rural populations and developing a new smoking cessation treatment tailored for American Indians to improving birth outcomes in the

African American community in Racine. Awards for the NIP and CHSP total more than \$7 million.

While it is premature to fully assess the impact of the awards, it is not premature to conclude that the availability of these awards has broadened the research scope of the School’s faculty to include more projects focusing explicitly on public health. The awards also have focused on medical education reform to ensure a physician workforce trained to address Wisconsin’s health challenges in an increasingly diverse population. By embracing the Wisconsin Idea, these grant programs have fueled far more collaborations and partnerships beyond the School than had previously existed.

Grant Awards 2004 - August 2008

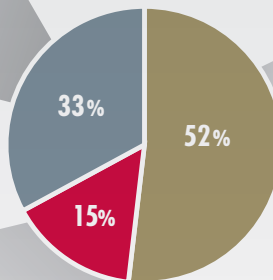
Figure 1. WPP Grant Awards by Category

Community-Academic Partnerships

Collaboration Development Grants	\$2,169,030
Collaboration Implementation Grants	\$20,501,876
	\$22,670,906

Total Awards
\$68,887,681

- Oversight and Advisory Committee (OAC)
- Medical Education and Research Committee (MERC)



Research

MERC Focus Areas	\$23,537,279
New Investigator Program	\$2,882,810
Collaborative Health Sciences Program	\$4,285,535
Strategic Initiatives	\$5,020,074
	\$35,725,698

Education

Innovations in Medical Education	\$3,414,780
Master of Public Health	\$2,682,977
Wisconsin Academy for Rural Medicine	\$846,504
Education and Conference Resources	\$305,560
Medical Resident Education	\$299,726
Public Health Education and Training	\$2,941,530
	\$10,491,077

Figure 2. WPP Grant Awards by Year

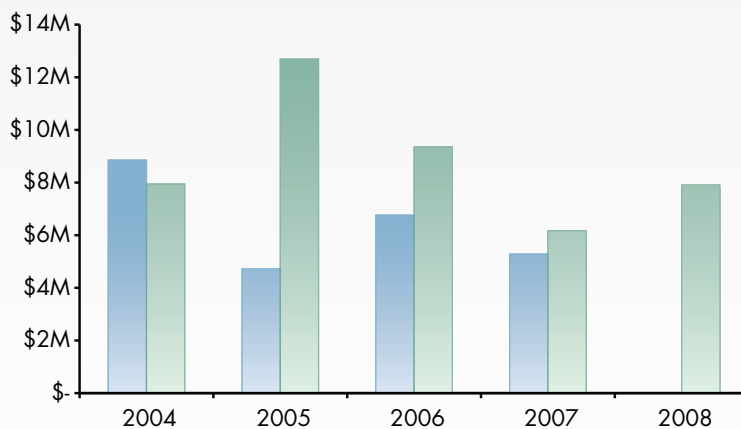


Table 1: WPP Applications and Funding by Competitive Program

Competitive Grant Program	Number of Proposals Received	Amount of Request	Number and Percent Funded	Amount Funded
Collaborative Health Sciences Program	82	\$22,798,877	12 (15%)	\$4,585,261
New Investigator Program	158	\$9,826,915	29 (18%)	\$2,882,810
Collaboration Development Grants	203	\$8,044,397	52 (26%)	\$2,169,030
Collaboration Implementation Grants	295	\$112,642,743	48 (16%)	\$20,501,876

Figure 3: WPP Statewide Collaborations and Partnerships

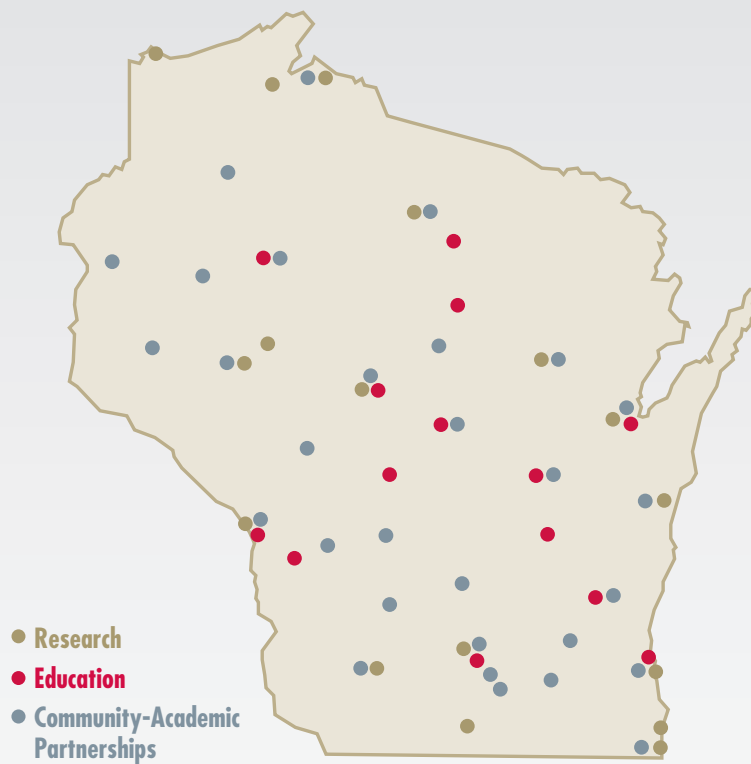


Table 2: WPP Grant Awards by State Health Plan and Research Priorities

Health Priorities	# of Grants	\$ Amount	% of Total
Access to primary and preventive health services	26	\$9,623,221	14%
Adequate and appropriate nutrition	6	\$1,409,318	2%
Alcohol and other substance use and addiction	9	\$2,408,028	3%
Existing, emerging, and re-emerging communicable diseases	10	\$2,610,926	4%
Environmental and occupational health hazards	4	\$1,225,000	2%
High-risk sexual behavior	1	\$25,000	<1%
Intentional and unintentional injuries and violence	12	\$3,636,155	5%
Mental health and mental disorders	8	\$1,595,559	2%
Overweight, obesity, and lack of physical activity	20	\$3,687,881	5%
Social and economic factors influencing health	8	\$2,298,345	3%
Tobacco use and exposure	10	\$2,598,474	4%
System (Infrastructure) Priorities			
Integrated electronic data and information systems	4	\$5,038,368	7%
Community health improvement processes and plans	10	\$3,271,594	5%
Coordination of state and local public health system partnerships	6	\$1,296,264	2%
Sufficient, competent workforce	13	\$12,033,547	17%
Research Priorities			
Other MERC Funded Research	29	\$16,130,001	23%
	176	\$68,887,681	100%

Considerations in the Development of the 2009-2014 Five-Year Plan

To be responsive to the needs of the state and ensure achievement of health improvement goals, the Wisconsin Partnership Program (WPP) developed an inclusive and multifaceted approach for internal and external stakeholder input into the development of the five-year plan. These approaches include the UW School of Medicine and Public Health (School) transformation plan and strategic discussions from the two governing committees, the Oversight and Advisory Committee (OAC) and the Medical Education and Research Committee (MERC). The outcomes of the strategic discussions are described in the relevant sections of this plan.

To assure considerable opportunity for external stakeholder participation, the WPP also provided numerous options for public input on perceived state and local health needs and priorities for the five-year plan. A comprehensive evaluation of the WPP's past efforts and reliable health data from a statewide needs assessment were also major contributions.

Transforming the School: The Strategic Plan

A major consideration for this plan is detailed in *Transforming the School of Medicine and Public Health: The Strategic Plan*. Created by the Dean of the School, Robert Golden, MD, this document describes the goals and strategies guiding the transformation to an integrated school of medicine and public health. The objective is to create a superior education, research and community engagement enterprise integrating biomedical sciences, care of individual patients and the health of diverse populations to address the evolving health and health care needs of Wisconsin.

The WPP is central to a transformed school through its support for community partnerships, research and education initiatives with an increasing emphasis on public health. Consistent with the goals of the initial plan, the SMPH transformation will continue to be a central focus of the WPP.

The strategic plan outlines the steps toward transformation over the next five years. Key criteria for selecting priorities, goals and strategies include the following:

- Determine Wisconsin's greatest needs as defined by disease burden, potential for health impact and geography.

- Leverage strengths and seek collaborative opportunities.
- Focus on issues of underserved populations.

Learning from the Community: Stakeholder and Public Response

The WPP recognizes that communities have significant expertise to inform its program priorities. Learning from the community and seeking input about their needs and views is an important strategy to help shape the development of WPP's funded initiatives. To obtain a comprehensive perspective of stakeholders and assure that the WPP is responsive to the people of Wisconsin, the program implemented three approaches to assure opportunities for public comment on plans for the next five years: a public comment questionnaire, community forums and stakeholder interviews.

Detailed results are described in the companion report, *Measuring our Progress: The Wisconsin Partnership Program Evaluation*.

Public Comment Questionnaire

The UW Survey Center issued an anonymous general Public Comment Questionnaire in 2008, resulting in more than 550 responses. The survey asked respondents to answer four questions on program priorities for the WPP's next five-year plan. The distribution included an extensive list of School faculty, staff and individuals having contact with the WPP during the last five years.

The survey asked for:

- Suggestions on how best to use the WPP's resources.
- Health areas in which the WPP should invest to advance public health.
- Recommendations for research or projects to best meet the goals of the *WPP Healthy Birth Outcomes Initiative*.
- General suggestions for WPP's five-year plan.

Community Forums

Two community forums were held – Waukesha and Stevens Point – in Spring 2008. The audience provided valuable insights into the activities and efforts of the WPP and requested support in the three areas listed below:

- Community access to academic partners
- Technical assistance in program evaluation
- Sustained funding for successful programs

Stakeholder Interviews

The UW Survey Center conducted 41 interviews with stakeholders of the WPP. Those interviewed were equally divided between members of the faculty of the School and members of external groups. The joint OAC/MERC Evaluation Implementation Subcommittee selected the stakeholders to be interviewed and developed the format and questions. Interviews addressed three basic questions:

- How is the WPP helping to advance the transformation of the School?
- How should the WPP align with Wisconsin's strategic plan for health, *Healthiest Wisconsin 2010*?
- What should be the WPP's priorities going forward?

Measuring Progress: Wisconsin Partnership Program Evaluation

The comprehensive evaluation of WPP's progress as described in the companion report, *Measuring our Progress: The Wisconsin Partnership Program Evaluation* was another major consideration for this plan. Three levels of progress assessment evaluation were used: evaluation of broad strategic activities, grant-making processes and individual grant evaluations. A brief description of each follows.

Strategic Evaluation

The WPP conducted a strategic evaluation in 2008 to track progress on goals and strengthen program-wide implementation. The two governing committees (OAC and MERC) identified central elements of a five-part framework to assess progress in advancing the program's mission and guide the five-year plan development. The evaluation considered the following five strategic focus areas:

- **Advancing the Public Health System:** Considered how the program is helping to advance the capacity of Wisconsin's public health system through directed grants to advance the goals and objectives of the state health plan.
- **UW School of Medicine and Public Health Transformation:** Considered how the WPP is helping to advance the School's transformation to an integrated school of medicine and public health.
- **Balanced Research and Education Portfolio:** Determined how expenditures reflect a range of research and education initiatives by time and approach with a timeline for results.
- **Community-Academic Partnership Model:** Determined how the WPP is promoting successful and effective collaborations, and how they are contributing to improvements in population health.

- **Governance and Stewardship:** Provided an assessment of the program's governance and stewardship responsibilities.

Process evaluations

To assure that funds are being used effectively, the two Committees annually examined how they solicit, review and make grant awards. The WPP has also devoted attention to finding ways to gather feedback from stakeholders, including grantees, grant-seekers and key leaders in Wisconsin by using anonymous surveys, interviews and forums. These evaluations help refine and revise the grant-making process as needed, providing continuous quality improvement. Process evaluations were helpful in directing WPP grant-making activities for this five-year plan.

Individual grant evaluations

The WPP's resources are devoted to making grants to faculty and community organizations to advance the program's mission and goals. Individual grant evaluations assess the impact of awards, and help direct program improvement. To assess progress and outcomes, grantees submit regular progress reports reviewed by WPP staff and committee members. At project completion, grantees submit final reports outlining results and outcomes that are reviewed by the WPP staff and by the appropriate committee.

Statewide Health Assessment – Making Wisconsin the Healthiest State

A major consideration in the development of this five-year plan is the MERC-funded initiative, *Making Wisconsin the Healthiest State*. The findings of this project are available in two companion reports -- the *Health of Wisconsin Report Card* and *Opportunities to Make Wisconsin the Healthiest State*. The WPP will use the results of this project to direct and focus resources during the next five years.

Making Wisconsin the Healthiest State project aims:

- Characterize the population health of Wisconsin (including disparities) and compare to the nation.
- Identify evidence regarding the most effective policies and programs in altering determinants to improve outcomes.
- Develop recommendations for a balanced health investment portfolio of policies and programs to guide Wisconsin toward becoming the healthiest state.

2009-2014 Five-Year Plan Program Framework

Oversight and Advisory Committee Future Investments

The goal of the Oversight and Advisory Committee (OAC) is to improve the health of the people of Wisconsin by making grant awards for health promotion, disease prevention and public health workforce development, and to close the gap in health disparities through targeted initiatives in partnership with the UW School of Medicine and Public Health (School).

The OAC held a strategic planning session in February 2008 to develop a framework for allocating and directing resources to strengthen future grant programs and initiatives. OAC members reflected on the effectiveness of past efforts, recommended strategies and actions to improve established programs, and identified collaborative opportunities to work with the Medical Education and Research Committee (MERC). OAC also focused on its WPP stewardship responsibility and the importance of ensuring due diligence in the allocation of funds.

During the strategic planning process, OAC identified and committed to a major new funding initiative to reduce maternal and infant health disparities in Wisconsin. Over the next five years, OAC may identify other targeted initiatives to complement broad transformational efforts in response to the greatest health needs of the state. The purpose is to identify focused funding priorities that balance investments and maximize impact. However, the OAC will continue to respond to local needs by supporting programs in areas that advance the state health plan overall.

The OAC strongly supports the partnership model as embodied in the Community-Academic Partnership Fund, where public health practitioners, community leaders, and faculty work collaboratively to identify health issues facing communities. Those connections greatly increase the state's capacity to improve health through the collaborations and partnerships between the University and community-based organizations.

The OAC agreed that the key attributes of the Community-Academic Partnership Fund include the following:

- A formal structure to connect communities with faculty from the School, UW-Madison and other campuses throughout the UW System.
- Critical financial resources for communities to implement programs that address the priorities of the state health plan.
- Promotion of the School as a statewide resource through faculty expertise.
- Promotion of the WPP's mission to respond to the health needs of the state and reduce health disparities.

OAC Initiatives

Guided by the annual survey of applicants, the public comment survey and communication with stakeholders, the OAC reviewed past grant-making practices and identified the following four objectives for improving the Community-Academic Partnership Fund over the next five years:

- ▶ Improve the balanced portfolio by:
 - Increasing statewide reach and access across geographic regions and size of organizations
 - Supporting successful programs that show promise of sustainability
 - Emphasizing targeted initiatives that will result in the greatest improvements in the public's health
- ▶ Create stronger community-academic partnerships by:
 - Increasing access to and making connections between academic and community partners
 - Supporting networks to engage and offer incentives to faculty working with communities from the School and throughout the UW System
 - Advancing opportunities for faculty development in community partnerships
 - Incorporating program improvement elements identified through periodic grant evaluations to support partnership development
- ▶ Enhance learning and sharing by:
 - Convening partners working in common areas to facilitate shared learning
 - Increasing access to evidence-based and best-practice knowledge on community practices and policies
 - Disseminating grant results that offer promising solutions to community problems
- ▶ Strengthen community capacity by:
 - Increasing practical skills of individuals working in community-based organizations to design and implement their own research and program evaluation
 - Increasing use of evidence-based and best-practice knowledge on community practices and policies
 - Improving sustainability through technical assistance on grant writing and other resource development
 - Improving learning through collaborative leadership development

Community-Academic Partnership Fund (CAPF)

Goal: Support a range of community-based partnerships and initiatives to improve health policies, practices and interventions at the individual and community level.

Strategy: Foster an environment that promotes innovative solutions to critical public health problems through collaboration and community-academic partnerships.

Funding Priorities: Projects must align with the WPP mission, vision and guiding principles and goals and objectives of the existing state health plan to transform the public health system, to eliminate health disparities, and to promote and protect health for all. (See Appendix for *Healthiest Wisconsin 2010 Framework*.)

To guide investments and maximize health improvement opportunities, the OAC will also establish funding priorities for programs that align with the framework for *Opportunities to Make Wisconsin the Healthiest State*. This framework involves three major components, the social and physical environment, individual health behaviors, and the broad public health and health care system. (See Figure 4 below.)

Community-Academic Partnership Fund (CAPF): Grant Categories

To achieve multiple goals, the CAPF will continue to support collaboration development and implementation grants and create a new sustainability grant category. The CAPF also will develop one or more targeted funding initiatives. Grant categories follow a continuum of community-directed programs to more focused and proactive initiatives responding to the greatest needs of the state. This “family” of grant programs progresses from the generation and testing of partnerships and ideas to strong evidence-based programs and focused efforts necessary to achieve improvements in population health.

Collaboration Development Grants are small discretionary awards supporting a range of programs from the development of community academic partnerships, capacity-building initiatives, needs assessment, evaluation or demonstration projects to smaller implementation programs.

Collaboration Implementation Grants are more expansive awards to implement evidence-based programs in health promotion, disease, injury, or disability prevention, or programs that reduce health disparities. This grant category supports transformational projects with strong evidence of need and the potential for significant impact, and application or replication. For this grant category, evidenced-based practices are interventions for which scientific evidence consistently shows that the practice improves outcomes.

Collaboration Sustainability Grants are awards to support the continuation of successful implementation grants where sustainability is likely but further support is required. Programs are more likely to become sustainable when they can demonstrate measurable improvements in health outcomes. Therefore, a strong evaluation and the dissemination of findings across a wide audience are important outcomes of this new award category. For this grant category, sustainability includes the long-term viability of programs or services through statewide or local health system or policy changes.

Targeted Funding Initiatives

The OAC will create a fourth CAPF award category for program-defined initiatives to support WPP’s strategic goals. Already under way is the *WPP Healthy Birth Outcomes Initiative* – a long-term commitment to reducing birth outcome health disparities in Wisconsin. During the next five years, OAC may periodically consider other focus areas, weighing funding availability with priority public health needs. These initiatives may consider a variety of approaches including innovative partnerships, policy and advocacy, capacity building,

Figure 4: Opportunities to Improve Wisconsin Health

Social & Physical Environment	Health Behaviors	Health Care & Public Health Systems
<ul style="list-style-type: none"> • Education • Employment • Environmental contamination • Healthy child development • Housing • Income/poverty • Social connectedness 	<ul style="list-style-type: none"> • Nutrition • Physical Activity • Risky sexual behavior • Substance use and abuse • Unintentional injuries • Unsafe driving • Violence 	<ul style="list-style-type: none"> • Access to healthcare • Cost of health care • Governmental public health • Health care coverage • Health care quality

Source: *Opportunities to Make Wisconsin the Healthiest State*, UW School of Medicine and Public Health, UW Population Health Institute, Department of Population Health Sciences, February 2008.

evaluation and communication activities. Targeted funding initiatives provide further opportunities for collaboration with MERC in strategic areas. These strategically directed initiatives should result in measurable improvements in the health of individuals and communities.

WPP Healthy Birth Outcomes Initiative

The *WPP Healthy Birth Outcomes Initiative* is a multi-year, multi-million dollar initiative to reduce health disparities in the state by focusing on immediate needs of African American women and their families. Working with targeted Southeastern Wisconsin communities, the WPP seeks to improve birth outcomes and reduce infant mortality disparities while developing statewide capacity to sustain this effort long-term.

The disparity of outcomes between white and non-white births is one of Wisconsin's most critical health problems. Although Wisconsin is a leader among states for its low white infant mortality rate (number of infant deaths per 1,000 live births), the infant mortality rate for African Americans in Wisconsin is the country's highest. Infants born to African American women in Wisconsin are three to four times more likely to die before their first birthday than infants born to white women. During the past 20 years, virtually no decline has occurred in Wisconsin's African American infant mortality rate. Further, Wisconsin's national ranking for African American infant mortality has fallen from among the best (lowest) rates in the country to the worst (highest). Of the 40 states reporting infant mortality data in 2000-2002, Wisconsin had the worst African American infant mortality rate.

Development of the WPP Healthy Birth Outcomes Initiative

OAC conducted extensive planning with other experts in an exploration of where to best target resources to develop the *WPP Healthy Birth Outcomes Initiative*.

The year-long effort involved:

- Commissioning a comprehensive research study and white paper
- Convening local and national leaders for a "Wisconsin Infant Mortality Summit" at the Wingspread Conference Center in Racine
- Consulting with communities through public forums and surveys
- Dedicating a full-time *WPP Healthy Birth Outcomes* senior program officer and,
- Creating a steering committee to provide direction and expert consultation

Planning and Implementation – Through local community development coalitions, OAC will invest in multiple strategies for conditions that support healthy birth outcomes for women and their families in targeted communities. Planning grants, followed by more extensive implementation grants, will look beyond individual behaviors and health care for solutions supporting healthier birth outcomes known to reduce health disparities. Development coalitions in eligible communities may apply for planning funds to develop local partnerships, mobilize the community, build capacity and create a strategic implementation plan. Planning will also include a needs assessment and analysis of programs and strategies that have been successful and promising practices.

The OAC recognizes the importance of community partners in laying the groundwork for this work. By collaborating to address the interdependent conditions that influence health, OAC will work in partnership with communities and will engage academic expertise to support community efforts. A steering committee will engage the community in the design of the initiative, and will serve as a permanent liaison between the OAC, School and community.

Public Health Education and Training

In the first five-year plan, WPP identified the *Healthiest Wisconsin 2010* infrastructure priority, “sufficient, competent workforce”, as a framework for developing public health education and training initiatives.

Wisconsin communities need an adequately trained workforce to address critical public health issues. To accomplish this, the workforce must be skilled in multiple intervention approaches, with a focus on population-based health improvement strategies. The WPP will continue to address the state health plan workforce priority and emerging needs through population health fellowships, continuing public health education and leadership training opportunities for public health professionals.

Public Health Education and Training Subcommittee (PHET)

In April 2008, OAC and the PHET subcommittee held a joint five-year plan strategy session to provide recommendations on core programs, identify areas for program improvement and consider new initiatives. Important discussion topics included an assessment of current programs, evaluation criteria, and the role of the PHET Subcommittee. Members also considered potential collaborations with the MERC.

OAC and PHET members recognized the important developmental work accomplished during the first plan in identifying needed skills and developing new training opportunities. Funded programs provided a crucial structure to connect the workforce with the academic resources in the School, the Medical College of Wisconsin and other higher education institutions. Following this discussion, the OAC enthusiastically agreed to ongoing support for the Healthy Wisconsin Leadership Institute, Wisconsin Population Health Fellowship program and Continuing Public Health Education.

The OAC and PHET members identified the following criteria to guide their decision on program modifications over the next five years:

Criteria for PHET Program Refinements

- Increase statewide reach and access across a variety of geographic regions and organizations.
- Improve the diversity among trainees to reflect the diversity of the population.
- Assure public health competencies and values into training initiatives.
- Focus training and curriculum on cultural competencies.
- Increase the number of UW SMPH MPH students receiving fellowships.
- Increase the number of fellows who intend to live and work in Wisconsin.
- Develop new collaborative partnerships and relationships with the School and other academic institutions.
- Enhance coordination between the education programs in MERC and OAC.

Public Health Education and Training Initiatives

Goal: The goal of PHET is to support education and training opportunities for Wisconsin’s public health professionals and the broad public health workforce to ensure a sufficient and competent workforce.

Strategy: Provide education and training opportunities to strengthen Wisconsin’s public health workforce through improved access to training opportunities in continuing public health education, applied postgraduate service learning, and leadership development.

PHET Core Programs

Healthy Wisconsin Leadership Institute

The Healthy Wisconsin Leadership Institute is an education and training resource jointly supported with the Medical College of Wisconsin. Its aim is to develop community leaders who engage in innovative activities, working across sectors to protect and to promote the health of the public. The Healthy Wisconsin Leadership Institute consists of the following two major program areas:

- Community Teams Program - a year-long applied learning program to facilitate the development of collaborative leadership and public health skills among teams of individuals mobilizing communities to identify and solve health problems. Participants take part in a curriculum delivered through a series of face-to-face workshops and distance-based educational sessions. Team members apply new skills as they work on health improvement projects in their home communities.
- Individual Learning Opportunities - a variety of learning options for individualized education on specialized topics. Through regional workshops, forums, customized training, consultation and technical assistance, online resources and mentoring opportunities, individual learners develop required knowledge and skills to be more effective as leaders in the public health workforce.

The Leadership Institute's goals over the next five years include increasing diversity among participants, improving geographic distribution, enhanced learning models and curricular changes to meet the needs of learners.

The Wisconsin Population Health Fellowship Program

The Wisconsin Population Health Fellowship Program is an intensive two-year service-learning program for Master of Science, Master of Public Health or doctorate graduates in public health or related disciplines. The program provides applicants with practical field assignments in community-based, non-profit, and governmental and health service organizations. The primary goal of the Fellowship Program is to develop the next generation of public health officials and administrators skilled in planning, implementation and evaluation of public health programs. At the heart of the program is a commitment to public service.

Fellows receive direct hands-on training in high quality organizations working on relevant and timely public health issues. By the end of the two-year period, fellows will successfully complete the program's performance requirements. These requirements represent the core set of diverse skill sets necessary for leading and managing public health programs.

Continuing Public Health Education

In the first five-year plan, the School's Office of Continuing Professional Development in Medicine and Public Health developed multiple approaches to address the continuing education needs of public health workers. The program developed tools to identify individual needs and incentives for continuing education. Building on this effort, Continuing Public Health Education will provide new resources to public health practitioners and the broad public health workforce seeking continuing education and training to support local community health improvement plans. OAC may offer small training stipends to governmental or non-profit organizations as incentives to participate in workshops, conferences and other professional activities including programs offered through the Healthy Wisconsin Leadership Institute. The focus is to encourage individuals to obtain skills and competencies necessary to implement and sustain community-wide improvement processes and plans.

Medical Education and Research Committee Future Investments

The goal of the MERC is to improve the health of the public by allocating funds for innovative education and research initiatives dedicated to health promotion, disease prevention, and the diagnosis and treatment of disease. The overall objective is to transfer knowledge and research results to communities to close the gap between what we know and what we do. Since its formation in 2004, the MERC has made 73 awards totaling more than \$43 million.

To prepare for the development of the five-year plan, the MERC began a strategic planning process in September 2007 when members assessed accomplishments, identified potential growth areas and discussed investment strategies. An address from Dean Robert Golden, MD, opened the strategic planning session and set the stage for a comprehensive discussion. The session concluded with a summary document outlining directions to build on the foundation and principles of the initial five-year plan. Community health perspectives were offered by OAC members who joined with the MERC in the discussion of potential collaborations between the two committees. MERC members spent subsequent meetings refining the written summary of the strategic planning session, titled *Strategic Planning Overview and Outcomes*.

The summary includes Dean Golden's goals, objectives and priorities for research and education, as well as strategies to speed the transformation to an integrated school of medicine and public health. In addition, participant suggestions were grouped into categories of education, research, service/outreach, faculty development and OAC/MERC collaboration. Within this context, challenges and issues were identified. These include: achieving balance in research and education initiatives to ensure the greatest return on investments; determining the most effective approaches to community engagement; and developing a decision-making process to determine continued support of projects funded during the initial five-year plan.

To ensure a thorough deliberation of ideas leading to specific recommendations for the plan, the MERC established three subcommittees on education, research and service. The name of the service subcommittee was ultimately changed to community engagement to reflect the importance of partnerships between the School and communities and the significant role community engagement plays in the School's transformation. Membership on the three subcommittees included all MERC members, with the addition of OAC members to the community engagement subcommittee.

Each subcommittee was directed to respond to the respective suggestions and issues in the *Strategic Planning Overview and Outcomes* document, and to identify goals, strategies and initiatives incorporating the themes of the strategic planning session. The objective was to create a list of education, research and community engagement priorities for further consideration.

As a result of the subcommittees' reports, a framework was developed by MERC for education and research initiatives, incorporating the concept of community engagement and the exploration of collaboration and linkages between the OAC and MERC. Recurrent themes were pinpointed, with specific reference to the urgent need for faculty expansion and development in public and community health to achieve the goals of improving the health of the public and of accelerating the School's transformation.

These discussions included the topic of continued funding of multi-year, targeted initiatives approved in the initial five-year plan. Consideration also was given to the structure and membership of MERC – to assure broad representation from faculty as well as the School's leadership and to reflect the focus of the framework of MERC's future investments. Maintaining MERC as an open, accessible and objective decision-making body for the approval and evaluation of innovative education and research initiatives was endorsed.

Building upon the subcommittees' reports, the following framework was developed by MERC to provide a basis for new and ongoing investments, with the objective of promoting health, preventing and treating disease, educating future health professionals and scientists and reducing health disparities. Agreement also was reached to continue the allocation of a percentage of available MERC funds to the Dean of the School for strategic initiatives supporting this framework.

Common priorities identified by each subcommittee

MERC identified common priorities in the subcommittees' reports considered essential to realizing the goals and objectives of the framework. The need for faculty expansion and development and approaches to effect collaborations between OAC and MERC were common themes. Agreement was reached to address them in the following ways:

Faculty Development and Expansion

Growth of applied public health research as well as community engagement through education and research initiatives is hampered by the limited number of faculty and staff with the necessary expertise and interest. Building the School's capacity to become a model of successful community engagement requires both the recruitment of faculty with public and community health expertise and the development of programs and incentives to engage existing faculty in the transformation to an integrated school of medicine and public health.

MERC will support these efforts by providing programmatic resources and by creating professorships and other support mechanisms for faculty focused on the Dean's priority areas aimed at promoting the School's transformation. This initiative will be accomplished by hiring faculty in selected targeted areas, such as public and community health, health services research, health policy and/or community-based participatory research. MERC will also work with the Dean of the School to develop an implementation process for this initiative that includes a commitment to ensuring diversity in the candidate pool.

Collaboration of OAC and MERC

Each subcommittee studied possible OAC and MERC collaborations, with special attention to the potential impact of joint funding on specific long-term public health challenges. Joint funding opportunities include: OAC's *Healthy Birth Outcomes Initiative*; research or evaluation components of OAC's community grants; a special initiative on a public health issue agreed to by both committees; educational projects linking students with community organizations; and educational initiatives including the public health workforce, health care leaders, legislators and other public and private health policy makers. OAC and MERC will work together to determine joint projects in alignment with the above examples.

Subcommittee Reports

Each MERC subcommittee developed initiatives, goals and strategies related to its specific concentration area. These initiatives provide the framework for MERC's investments in the next five years. The framework includes opportunities for the Dean of the School and the MERC to jointly explore initiatives to respond to the needs of underserved populations.

Education

Goal: Promote and implement creative education strategies to prepare Wisconsin's future health professionals, and public health and scientific workforce to meet the health needs of Wisconsin.

Strategy: Initiatives will be based on effective methods of teaching and learning – supported through faculty development – and will incorporate program evaluation.

Emphasis will be on forging new directions in medical and public health education to better meet health care challenges, including the needs of underserved populations. Educational connections between community service and the OAC will be established to benefit future health professionals and to support collaboration between the School and the community.

Education Initiatives

New directions in medical, public health and graduate education will result from the development of the following initiatives:

- ▶ Assess the needs of the public health workforce for a distance education public health certificate program and/or a distance Master of Public Health degree.
- ▶ Redesign the third and fourth medical student clinical years with:
 - a better balance of acute care and chronic care management with the prevention of disease through health promotion and effecting change in individual health behaviors;
 - hands-on experiences for students working in communities on public health challenges, such as drug and alcohol abuse, the needs of the homeless, lead paint abatement and communicable diseases.
- ▶ Develop scholarly concentrations for medical students in areas such as leadership, research and public health, including the availability of certificates.
- ▶ Establish an overarching professional training program for graduate students and post-doctoral trainees focusing on ethics, clinical research, public health and professional development, including secondary degrees or certificates in areas such as public health or statistics.
- ▶ Create opportunities for multidisciplinary student teams to work in communities through collaboration with OAC.

Research

Goal: Support research programs encompassing biomedical sciences, patient care and the health of populations through prevention, diagnosis, treatment and cure of disease, with an emphasis on reducing health disparities.

Strategy: Promotion of a balanced portfolio of investments along a continuum of basic, clinical, translational and applied public health research to benefit the health of individuals, families and communities, and the promotion of OAC/MERC collaborations around targeted initiatives.

Research Initiatives

MERC will continue to support the following two programs, enabling faculty to compete for funding for new research initiatives. This will be accomplished through an annual call for proposals aligned with the WPP's goals and objectives.

- ▶ The Collaborative Health Sciences Program (CHSP), implemented in the initial five-year plan, is a competitive process for associate and full professors and distinguished and senior scientists. The CHSP will continue to emphasize new and innovative collaborations both within and outside the School with the greatest potential to build healthier communities and to leverage other resources.
- ▶ The New Investigator Program (NIP), implemented in the initial five-year plan, is a competitive process for assistant professors beginning their careers who have research interests in addressing Wisconsin's public health issues. The NIP supports preliminary work on important health issues, which, if successful, is likely to result in leveraging other funds.

MERC also will develop a targeted competitive program parallel to the Collaborative Health Sciences Program. This program will bridge basic to clinical to translational to applied public health research and emphasize the following:

- ▶ Areas identified by the Dean of the School to promote the transformation to an integrated school of medicine and public health. These include obesity, neurosciences, aging, alcohol abuse and health policy development.
- ▶ Other areas, driven by available health data, including processes or systems, such as access to care, reducing health disparities and quality of care improvements.
- ▶ Specific diseases, such as cardiovascular conditions and cancer, that are significant health issues in Wisconsin.

Community Engagement

Goal: Foster and strengthen partnerships between the School and Wisconsin communities to enhance the School's impact through community-based research, education and service - thereby advancing the transformation to an integrated school of medicine and public health.

Strategy: Strengthen the School's capacity in public and community health, recognizing the vital role community engagement plays in supporting the transformation to a school of medicine and public health and in ensuring a balanced portfolio of investments.

Community Engagement Initiatives

The following initiatives will support the School's objective to become a model of successful community engagement resulting in substantial and measurable improvements in the health of the people of Wisconsin:

- ▶ Expand community-based research capacity through faculty expansion and development.
- ▶ Partner with existing UW centers and link with external organizations to improve the health of communities.
- ▶ Develop support services, such as a shared service to support faculty, staff and students interested in conducting community-based research, and an evaluation research shared service where technical assistance, program planning, evaluation services and library resources are available to communities.
- ▶ Support and expand community education that engages students in assessing and addressing community health needs.

Support for Targeted Initiatives Funded in the Initial Five-Year Plan

MERC discussions also focused on the significant support of targeted initiatives – a core component of the education and research awards in the initial five-year plan. These initiatives are related to the following five focus areas: Innovations in Medical Education; the Wisconsin Population Health Research Network; Human Genomics and Regenerative Medicine; Molecular Medicine and Bioinformatics; and Emerging Opportunities in Biomedicine and Population Health.

Some of these initiatives are long term and may require continued funding from MERC for an undetermined period to show results. A number remain in early development stages, yet to be fully operational. Some have been building the necessary infrastructure. Others are further along in their development but need time to achieve sustainability. Please refer to pages 8 and 9 for examples of these initiatives.

MERC has designed a thorough review process to evaluate these initiatives to determine if additional funding is warranted beyond the conclusion of the award. Moreover, MERC recognizes continuation funding of existing projects cannot be unlimited without affecting the committee's capacity to support new initiatives. An important consideration in the process will be an evaluation of the Principal Investigator's plan to seek additional sources of funding. MERC is mindful of the need to preserve its funding flexibility in order to be responsive to the range of new initiatives fitting the plan's framework.

Reorganization of the Medical Education and Research Committee

As part of the plan's development, a review of the structure and composition of MERC was undertaken with the objective to ensure broad representation and to reflect the focus of MERC's framework for future investments. This review resulted in the following outline for reorganization:

- A nomination process will be held for three faculty positions and one academic staff position. The faculty positions will include one representative from the basic sciences, one from the clinical sciences, and one from population health sciences. MERC will review the nominations and develop a slate of candidates for election by the School faculty or academic staff, as appropriate.
- The Basic Science Caucus and the Council of Clinical Chairs each will recommend to the Dean one candidate from each group.
- The Dean will appoint the representatives from the School's leadership, including the chair of the MERC.
- The OAC will appoint two representatives – the chair of OAC and a public member.
- The Dean will appoint a member from the University or the community with expertise in public and community health.

Terms will be three years and initially will be staggered to ensure continuity.

Conclusion

Within MERC's framework, Wisconsin's public health challenges will be addressed comprehensively through partnerships linking the School with UW campuses, communities, state and local governmental units, and through targeted collaborations between OAC and MERC. These approaches provide unparalleled opportunities to close the gap between what we know and what we do to the ultimate benefit of the health of the people of Wisconsin.

Wisconsin Partnership Program Evaluation

To improve results over the next five year period, the WPP will continue to implement a comprehensive evaluation process that measures progress in both program strategies and outcomes. The evaluation will provide on-going information to help improve the way grants are awarded, monitored and supported. The evaluation will also provide timely information to help guide program improvement efforts to increase effectiveness and ultimately achieve greater impact. The WPP will measure progress and success in three ways:

- Outcome evaluation to assess the impact of individual awards, provide accountability and encourage replication.
- Process evaluation to measure the effectiveness of program implementation and to support better decision making.
- Strategic evaluation to track program-wide progress toward mission, vision and goals.

WPP will use a variety of evaluation approaches for the entire program and each program area as described below.

Population Health Improvement: The project, *Making Wisconsin the Healthiest State* will provide baseline data to the WPP to plan and assess progress in statewide population health improvement. The project identifies and tracks proven policies, recommends the most effective interventions and highlights areas where further research is needed. Health improvement is defined in two ways: improving health indicators (i.e., decreasing morbidity and mortality) and health related quality of life, and reducing health disparities. WPP progress is determined by measuring grant related outcomes that directly or indirectly improve health policies, interventions, and practices over the short-term, and through improvements in health care, health behaviors, socioeconomic factors and the physical environment over the long-term.

Oversight and Advisory Committee Initiatives: The OAC will invest in community-academic partnerships, targeted initiatives and public health workforce development strategies. Core programs include the Community-Academic Partnership Fund and Public Health Education and Training initiatives. OAC will evaluate its work through a broad portfolio of programs that emphasize improvements in overall health and the reduction of health disparities. OAC will define and apply short- and long-term indicators of success and assess those indicators at regular intervals to guide annual and midcourse corrections. Formal evaluation reports will focus on outcomes and progress against plans and specific health improvement objectives using the state health plan priorities as a guide.

Medical Education and Research Initiatives: The MERC committee will invest in research and education activities and community engagement strategies. Core programs include competitive and MERC targeted initiatives. MERC will evaluate its work thorough a conceptual framework for award allocation that emphasizes the improvement of overall health and the reduction of health disparities. The framework will be designed to measure the desired impact, direction and balance of future MERC awards by incorporating the following elements:

- Identify critical areas of concentration.
- Seek to align with the State's most important public health concerns.
- Commit to a routine strategic assessment of the optimal allocation among multiple dimensions.
- Define and apply short- and long-term metrics of success.

The WPP will measure these outcomes on an ongoing basis to assess progress and revise activities and funding decisions accordingly.

Program and Financial Management

Policies and procedures related to management and stewardship of funds of the Wisconsin Partnership Program (WPP) are governed by the following foundation documents: the Insurance Commissioner's Order of March 28, 2002; the Grant Agreement between the Wisconsin United for Health Foundation, Inc. (WUHF), the University of Wisconsin Foundation and the University of Wisconsin System Board of Regents, dated March 24, 2004; and the current five-year plan.

Program Management

The administrative staff of the WPP provides a full range of services. These services range from supporting applicants and grantees to monitoring grants and assessing progress to ensuring compliance with the requirements and responsibilities of the WPP. Led by a director, the WPP staff also benefits from significant in-kind program support from the administration of the UW School of Medicine and Public Health (School).

The in-kind support from the school's administration has held administrative costs through 2007 to approximately 5% of total grant awards, (Administrative costs are funded from the two accounts of Medical Education and Research, and Public Health – 65% and 35% respectively.)

School administrators and staff who have provided support include: Vice Dean/Chair of the Medical Education and Research Committee (MERC), Associate Dean for Fiscal Affairs who oversees the financial management of the Program, Fiscal staff, Human Resources and Payroll staff, Information Technology staff and attorneys from the UW-Madison Office of Legal Services.

WPP staff is mindful of the program's growing requirements and monitors operations for future staffing needs to maintain the capacity to responsibly and effectively manage the program.

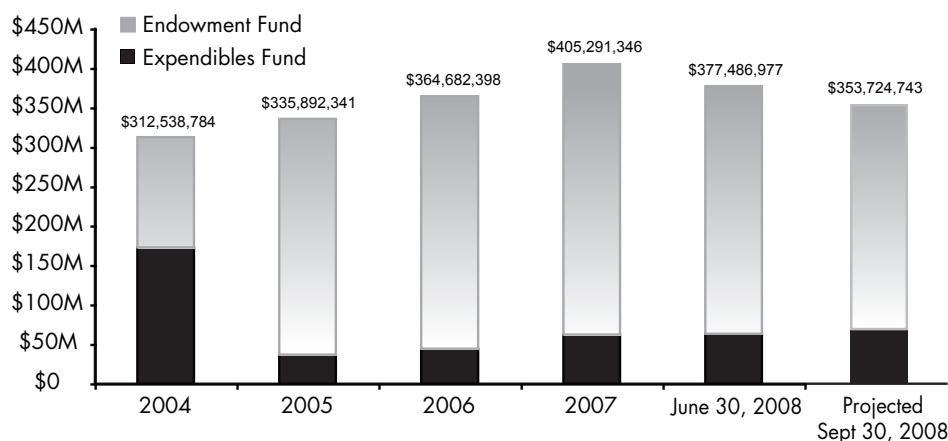
University of Wisconsin Foundation Policies and Investments

The University of Wisconsin Foundation (UWF) manages the investment of all funds for the WPP. As required, separate accounting is maintained for both the Public Health and Medical Education and Research components of the program. For investment purposes, the funds are divided between the Expendables Portfolio and the Endowment Portfolio of UWF. Each portfolio is invested following the policies and allocation guidelines of UWF. Consistent with the Order and Grant Agreement, the WPP funds received from WUHF are treated as a permanent endowment. This means the original principal transfers of \$266,598,534 in 2001 (\$30,000,000 of the original transfer was not endowed) and \$15,229,208 in 2007 must be maintained in perpetuity. These funds have been invested in the Endowment Portfolio. As the endowment earns income, a portion of these earnings is made available for spending, and a portion is retained and reinvested to provide higher levels of spending in subsequent years. Using this model, the income available for programs can increase as costs grow with inflation. The objectives of the Endowment Portfolio are to achieve a long-term annualized return that creates an income stream to fund programs, preserves the real value of the funds and provides for real growth. Specific information regarding the UWF endowment is available at: http://www.uwfoundation.wisc.edu/media/documents/pdf/endowment_2007.pdf

Income made available to spend is invested in the Expendables Portfolio while the original principal and undistributed earnings are invested in the Endowment Portfolio. The original \$30,000,000 of funding that was available for spending also was invested in the Expendables Portfolio. The objective of the Expendables Portfolio is to preserve principal and provide a competitive money market yield.

The following chart shows the total value of funds invested at UWF including the breakdown of funds between the Expendables and Endowment Portfolios. During the first year of the program, the investment of funds into the Endowment Portfolio was made during four quarters following a dollar-cost-averaging model. The chart reflects the lower level of funds in the Endowment Portfolio at that time.

The chart also shows an increase in the Expendables Portfolio in 2007 and through June 30, 2008 of approximately \$15 million. This reflects the 2007 funding from WUHF which will be invested in the Endowment Portfolio when the financial markets regain stability.

Figure 5: WPP Value of Funds Held at the University of Wisconsin Foundation

*As this plan is being written, the stock market is undergoing significant volatility. The WPP will monitor the spending policy closely and may make changes in the annual spending budget based on investment returns at any time deemed prudent.

Spending Policy

The Oversight and Advisory Committee (OAC) and Medical Education and Research Committee (MERC) re-evaluated their spending policies in February 2008 based on the investment returns of UWF since March 2001 and available balances at that time. The WPP had received comments from the public suggesting more income should be made available for programs. Both committees agreed they could establish higher distribution rates from UWF earnings while still maintaining appropriate inflationary growth rates and preserving the original principal. The committees also want to have a predictable revenue stream.

OAC and MERC each elected to set their annual spending budgets at 5% of the total funds held at UWF as of the prior December 31. This rate was within the range of UWF's spending policy and was deemed prudent based on current returns and balances available for expenditure.*

This decision sets the annual amount of funds to be released from the endowment for expenditure. It does not place a cap on total spending and does not preclude special initiatives funded from prior endowment distributions. The program will continue to attempt to balance the responsibility to preserve assets for future funding with the need to address the pressing public health issues facing Wisconsin.

Fund Distribution and Allocation

Throughout WPP's first five years, the allocation of funds between public health initiatives and medical education and research initiatives has been 35% public health and 65% medical education and research. The WPP has

divided all funds received from the WUHF into distinct accounts using this ratio. The value of the permanently endowed accounts also reflects this ratio and will do so unless the allocation is changed. The total balance of funds (endowment and available for spending) will not reflect this exact ratio as the spending of available funds is not identical between the public health and medical education and research initiatives.

Annual Budget

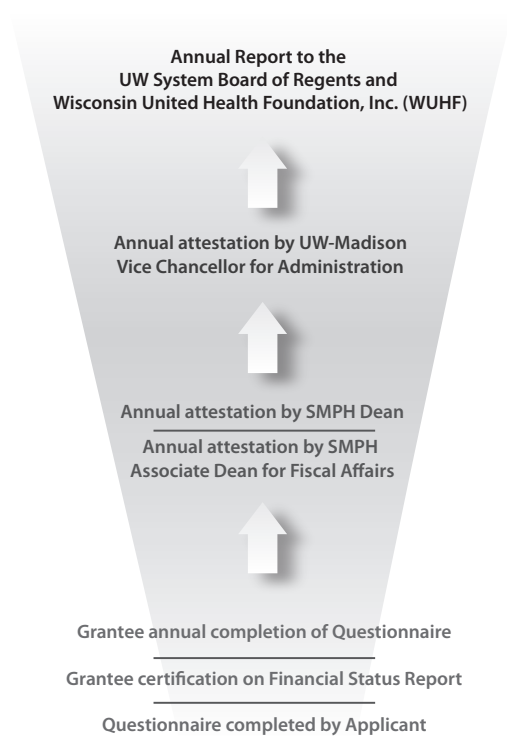
Consistent with the spending policy, both OAC and MERC develop and approve annual budgets. These budgets are used to determine the number and size of awards. They are based on the anticipated funds that will be available and incorporate existing commitments. In addition, the administrative budget undergoes a review and approval process by both OAC and MERC annually. This component is then allocated to each committee's budget based on the existing allocation of funds, which is currently 35% public health and 65% medical education and research.

Supplanting Policy

The Order includes a prohibition of using WPP funds "to supplant funds or resources that are available from other sources." This non-supplanting provision remains a key requirement of the program and all its grantees. The prohibition applies to all layers of the program. A monitoring system has been developed to make sure these funds are not used to replace existing funds, whether at the level of the University of Wisconsin or at the level of an individual grant recipient.

To insure compliance at the University and the School levels, annual written fiscal attestations are required of the Vice Chancellor for Administration of UW-Madison, the Dean of the School and the Associate Dean for Fiscal Affairs of the School. These statements are included in the annual report of the WPP presented to the University of Wisconsin System Board of Regents and WUHF. Individual grant recipients are required to complete questionnaires when applying for funds and with each annual funding cycle, as well as attest to non-supplanting as part of their financial reports. During the first five years of the WPP, the non-supplanting policies have been continuously clarified and strengthened. The WPP monitors the effectiveness of the policies on an ongoing basis and will continue to revise these policies as needed to insure compliance with this provision.

Figure 6: Supplanting Review Process



Financial Monitoring and Reporting

Since its inception, the WPP has done the utmost to create a responsible and transparent reporting process that meets the requirements of both the Order and Grant Agreement. Key elements have included separate financial and accounting for the funds of the program at both UW-

Madison and the UWF. The WPP also has maintained separate accounts for the Public Health and Medical Education and Research allocations of the program.

To monitor individual awards, a series of financial reports were created to be periodically completed by grant recipients. These reports are reviewed by staff members and reported in aggregate to the OAC and MERC. Any questions raised by the reports are investigated. Should a significant question of compliance or appropriateness arise, staff members report the issue to the OAC or MERC as appropriate. Along with the recipient-prepared reports, information on MERC grant expenditures is fully available to the program and the Fiscal Affairs Department of the School. To better monitor external grant recipients of OAC, the WPP has begun a periodic review process using an external consulting firm. Each year a number of external grant recipients will be selected for review. The external consultants provide a summary of their findings to the WPP for each grant being reviewed.

The WPP has prepared an annual financial report for each year of its existence. The report, incorporated into the WPP's annual reports, encompasses the investment activity from UWF as well as the expenditure activity from UW-Madison. The Annual Report is approved by the OAC and MERC, and is forwarded to the UW System Board of Regents. After acceptance by the Board of Regents, it is forwarded to WUHF for review and public comment. The format for the annual financial reports has changed slightly during the initial five years to improve clarity and transparency, and to comply with accounting policies. The WPP will continue to revise the format as needed to meet these goals.

At the writing of this plan, the WPP is planning for the first program and financial audits as proscribed by the Order. These audits must take place at least every five years.

Assessment of the Allocation Between Public Health and Medical Education and Research

The OAC has the authority under the Order to increase or decrease the 35% of funds that are allocated for public health. As stipulated by the Order, a change in the allocation requires a two-thirds vote of all members of the OAC at the time of the approval of the five-year plan. In the first five years of the program, this allocation was reviewed annually by the OAC and the allocation remained at 35% through the entire period. This process has been described each year in the Annual Report and will continue to be reported in future Annual Reports.

Committee Membership

Oversight and Advisory Committee Membership

Health Advocate Appointees

Lorraine Lathen, MA, Secretary

Executive Director, Jump at the Sun Consultants, Inc.
Advocacy Category: Women's Health

Douglas N. Mormann, MS, Vice Chair

Health Officer, La Crosse County Health Department
Advocacy Category: Statewide Health Care

Gregory Nycz

Executive Director, Family Health Center of Marshfield, Inc.; Director, Health Policy, Marshfield Clinic
Advocacy Category: Rural Health

June Martin Perry, MS

President, Access to Success in Nonprofit Management and Succession Planning
Advocacy Category: Urban / Community Health

Insurance Commissioner's Appointee

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Clinical Professor of Law, UW Law School

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Susan L. Goelzer, MD, MS, CPE, Chair

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Board of Regents Liaison

Roger Axtell

Regent Emeritus and Liaison to the Wisconsin Partnership Program, UW System Board of Regents

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Chris Blakey, University Services Associate

Tonya Mathison, Administrative Manager

Shannon Sparks, PhD, Program Officer

Karla Thompson, CPA, Chief Accountant

Members of the Medical Education and Research Committee

Leaders of Focus Areas of Excellence

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Focus Area: Innovations in Medical Education

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Focus Area: Molecular Medicine and Bioinformatics

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Professor and Chair, Department of Oncology, UW SMPH

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Professor and Chair, Department of Medical Microbiology and Immunology, UW SMPH

Clinical Chairs

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Professor and Chair, Department of Medicine, UW SMPH

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Professor and Chair, Department of Radiology, UW SMPH

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