Minutes
UW School of Medicine and Public Health (UW SMPH)
Wisconsin Partnership Program Education and Research Committee (PERC)
June 11, 2012 at 5:00PM – Room 4201 Health Sciences Learning Center

Members Present: Betty Chewning, Marc Drezner, Norman Drinkwater (ex officio), Jenny Gumperz, Paul Moberg, Rick Moss, Greg Nycz, Tom Oliver, Elizabeth Petty, Pat Remington, James Shull

Members Absent: Craig Kent, Rob Lemanske

Staff: Quinton Cotton, Cathy Frey, Mary Jo Knobloch, Tonya Mathison, Ann McCall, Ken Mount, Karen Roach, Eileen Smith, Steve Smith

1. Call meeting to order

Moss called the meeting to order at 5:05 p.m.

2. Decision on draft minutes:

April 9, 2012
Remington seconded a motion by Shull to approve the draft minutes of April 9, 2012. The motion passed by unanimous vote.

May 14, 2012
Nycz seconded a motion by Petty to approve the draft minutes of May 14, 2012. The motion passed by unanimous vote.

3. Announcements

PERC Executive Committee
Moss reported that the following PERC members have agreed to serve on the new executive committee: Moss (chair), Nycz, Oliver, Petty, and Shull. Lemanske will also be asked to join the executive committee. The executive committee, which will meet monthly beginning August 2012, will set agendas, make recommendations regarding proposals, and discuss grantee reports and policy issues.

PERC strategic planning meeting
An upcoming PERC meeting will be dedicated to strategic planning. WPP staff will be in contact regarding the date. A discussion guide will be distributed in advance.

Consent agenda
Moss reported that PERC agendas will include consent resolutions, as appropriate. The consent agenda will include action items, such as interim progress and final reports, reviewed by committee members who agree that discussion by the full committee is not necessary.

4. Consent agenda

Remington seconded a motion by Nycz to accept the following interim progress and final reports. The motion passed by unanimous vote.

- Advancing Evidence Based Health Policy in Wisconsin (Jonathan Jaffery, Targeted, 2nd interim progress report)
- Clinical and Public Health Data Exchange (Theresa Guilbert, NIP, 1st interim progress)
- Nuclear EGFR and Breast Cancer: Strategies for increasing efficacy of anti-EGFR based therapies in Breast Cancer (Deric Wheeler, NIP, 1st interim progress report)
- Patient-Specific Induced Pluripotent Stem Cell Models for Human Disease (Tim Kamp, CHSP, 3rd interim progress report)
- Probiotics for prevention of infection by multiresistant bacteria (Nasia Safdar, NIP, revised final report)
- Wisconsin Infectious Disease Drug Discovery (Bruce Klein, CHSP, final report)

Remington seconded a motion by Drezner to require submission of revised final report by December 31, 2012 for Genetic and environmental predictors of serum levels of 25-hydroxyvitamin D (Corinne Engelman, NIP, final report). The motion passed by unanimous vote.

5. Discussion and decision on no cost extension requests

Transforming Medical Education: Integrating Public Health in the Curriculum
Christine Seibert submitted a no cost extension request for the targeted grant Transforming Medical Education: Integrating Public Health in the Curriculum for $795,237 over nine months, beginning June 1, 2012. Drezner seconded a motion by Oliver to approve the no cost extension. The motion passed by unanimous vote.

Reducing Cancer Disparities through Comprehensive Cancer Control (Noelle LoConte, Targeted)
Noelle LoConte submitted a no cost extension request for the targeted grant Reducing Cancer Disparities through Comprehensive Cancer Control for $107,969 over 12 months, beginning July 1, 2012. Chewning seconded a motion by Shull to approve the no cost extension. Since PERC’s funding of this project is match for a state cancer control grant, there was general agreement that WPP leadership should meet with the UW Comprehensive Cancer Center to discuss the future of this project as a strategic partnership of PERC and the UW SMPH. In addition, other funding sources in place of PERC’s support should be sought. The motion passed by unanimous vote.

6. Presentation and discussion of targeted renewal application for Institute for Clinical and Translational Research

Marc Drezner, MD, presented an overview of the targeted renewal application for Institute for Clinical and Translational Research (ICTR), including progress on the current grant. ICTR is a partnership of the UW health sciences schools and Marshfield Clinic designed to change the culture of biomedical and health sciences at both institutions with a focus on the transfer of research findings into Wisconsin communities. The ICTR structure is made up of nine cores which provide services for clinical and translational research. PERC funds have contributed to the support of multiple cores, primarily: administration, clinical and translational research, biostatistics and research design, biomedical informatics, community academic partnerships and collaborative center for health equity. The activities in these cores contribute to type 2 translational research (T2TR) and type 1 translational research (T1TR).

Drezner is requesting $10,200,003 over three years to further strengthen and expand the support systems for the translational research continuum at UW, which extends from investigation through discovery to translation into practice, while also developing new researchers who can flourish in interdisciplinary team science with the following aims: (1) strengthen the academic home for clinical
and translational research, (2) train a cadre of clinical and translational scientists, (3) optimize the environment for clinical and translational research and productivity, and (4) further extend the infrastructure for community engagement.

At the conclusion of the presentation, Moss reported that two PERC members, Drinkwater and Remington, were asked to conduct a detailed review of the renewal application and to lead the question/answer period.

Drinkwater indicated that the “braided” funding model depicts all of the “ropes” (i.e. funding sources) as having the same weight, which is not the case since funding amounts vary. He asked for ICTR’s overall budget as well as a summary of projected contributions from each of the funding sources. Drezner indicated that ICTR’s total annual budget is approximately $18 million, and he listed annual contributions from several sources.

Drinkwater noted that the community academic partnership core provides funding for a number of entities, including LaFollette, SEIPS, Sondregger Research Center, WREN, and Community Health Connections. He wanted to know more about the contributions of these entities, as well as a description of the process used to determine the appropriateness of supporting such entities and at what level. Drezner responded that the CAP core created a federation of 19 organizations and partners to provide the infrastructure to build skills among investigators and community partners. This support, to date, has engaged 42 researchers in T2TR who had not done such research before. Drezner, along with Maureen Smith (CAP Director) and Alex Adams (CCHC Director), evaluate each entity annually and allocate the overall budget among the appropriate entities. He noted that an important consideration is the number of contacts the entity has with investigators.

Remington asked for details on Community Health Connections, in particular, the vacancy of the staff director position. Drezner responded that CHC is responsible for all community interactions. The vacant position is pending the recruitment of an individual in the Department of Family Medicine. If the recruitment is successful, this person would eventually fill John Frey’s position when he retires. Remington questioned why the salaries of the federation leaders are being covered by the CTSA grant instead of PERC. Drezner indicated that leadership positions are covered by the CTSA.

Nycz asked how PERC’s funding of ICTR is unique and distinguished from that of NIH, as the WPP has a unique mission to advance health in Wisconsin. Drezner indicated that the pilot grants are an important example of PERC’s support of T2TR. He added that the pilot grantees would not be successful without the extensive ICTR infrastructure, which is also supported in part by PERC. Nycz was concerned that the overhead per pilot award may be high. Drezner replied that ICTR’s infrastructure is diverse to support many types of projects. He added that PERC grantees also benefit from this infrastructure. Nycz concluded with a request to see the infrastructure associated with the pilots, and a clarification regarding the use of PERC funds versus other sources of funding. Drezner spoke to the critical value of PERC’s funding throughout ICTR’s infrastructure, with a particular focus on community engagement and T2TR.

Drinkwater asked for the timeline for implementing the hybrid data warehouse. Drezner reported that the budget from UWMF and UWHC has not been finalized. The data warehouse is roughly 60% complete at this time, with hope that in the next six to nine months i2b2 will be in place, and fully operational within two years.
Remington questioned the increase in support of BMI faculty. Drezner clarified that there has been a decrease in biostatistics and an increase in BMI in order to serve the entire enterprise.

Remington commented that despite past recommendations to do so, there is still little, if any, recognition of the WPP by the ICTR programs funded by PERC. Of particular importance is PERC’s support of the pilots. Drezner acknowledged that this has been a problem for ICTR overall, and that effort will be made to improve this in the future.

Oliver shared his concern that ICTR has led to a decrease in faculty participation in teaching in the UW SMPH. Drezner responded that the research education and career development core has a KL2 program, a TL1 program, a MS/PhD graduate program in clinical (translational) research, certificate programs, and a health equity education leadership institute.

Moss concluded the question/answer session, and asked those with conflicts of interest to leave the room. The following members declared a conflict of interest and left the room:
- Marc Drezner, Principal Investigator
- Betty Chewning, Supervisor, Sondregger Research Center
- Paul Moberg, provides evaluation services for ICTR

Drinkwater and Remington provided an overview of their independent written reviews of the renewal application. With consideration of Drezner’s presentation as well as the review write-ups, there was general agreement by PERC to share the following feedback with Drezner, and to request additional information and clarification, as follows:

- **General comments:**
  - ICTR has made important strides toward achieving its goals, and PERC funding has been instrumental in that effort. The high quality of ICTR’s activities are documented in the most recent report of its External Advisory Committee and in the pink sheets for the CTSA renewal from October 2011.
  - The narrative of the renewal application is broad; fortunately, the appendices provide a wealth of information that make assessment of ICTR’s progress and its PERC-funded components more clear.

- **Partnership:** PERC is interested in developing a partnership with ICTR with better integration and branding. In support of this partnership, acknowledgement of the WPP’s funding is very important. The committee was disappointed that the Dean’s Corner in a recent edition of the Wisconsin Medical Journal highlighting ICTR did not indicate the significant support provided by the WPP. Outline plans for improving acknowledgement of WPP’s support by ICTR as a whole, and in particular by the pilot grantees.

- **Supplanting:** In order to better understand the scope of PERC’s funding, it would be helpful to see a summary of the annual budget for ICTR, including support from NIH and “local” funding sources, and, as applicable, the breakdown of the percentage of PERC’s funding for each core.

- **Federations:** Drezner indicated that the CAP core created a federation of 19 organizations and partners. Describe the goals and objectives of the organizations supported by PERC, detail the proportion of funding provided by PERC compared to the annual budget for each, explain how performance is evaluated, and describe plans for sustainability.

- **Impact:** The renewal application describes publications and participation in each of the cores, which are important outcome measures. However, the WPP must ultimately show impact on the health of the public. Now that ICTR’s infrastructure is well established, describe how ICTR has and will improve health in Wisconsin.
Moss and Eileen Smith will meet with Drezner to share PERC’s feedback, including providing the reviews developed by Drinkwater and Remington. Drezner will be asked to provide a written response to PERC’s questions. His response will be shared with PERC in advance of the July meeting when it is expected that the committee will make a funding decision.

7. Decision on New Investigator Program 2012 Request for Proposals

Drinkwater reported that PERC’s discussion of the draft 2012 Request for Proposals for the New Investigator Program last month led to an additional revision encouraging faculty in all UW SMPH departments, including basic science, to apply. Moss will discuss this funding opportunity with UW SMPH basic science department chairs, as well. Petty seconded a motion by Nycz to approve the release of the New Investigator Program 2012 RFP on June 19. The motion passed by unanimous vote. Preliminary applications are due August 1.

8. Discussion of draft Wisconsin Partnership Program 2011 Annual Report

Eileen Smith provided an overview of the draft Wisconsin Partnership Program 2011 Annual Report. She asked members to review the report and share feedback in the next few weeks, so it may be incorporated into the final report. PERC’s approval will be sought in July, along with acceptance of PERC’s annual nonsupplanting attestation.

9. Quarterly financial report: WPP endowment value and cash balances

Mount presented the most recent financial projections for the WPP through March 31, 2012. The projected first quarter return on the endowment is 6.8%. The projected value of the endowment is $310 million; 10% above its original value. There is a total cash balance of $34.1 million, $20.6 million of which is allocated to PERC.

10. Oversight and Advisory Committee report

Remington reported on the May 16, 2012 OAC meeting. OAC reviewed the resubmission of the Beloit Lifecourse Initiative for Healthy Families (LIHF) Collaborative Implementation grant, and approved funding $249,999 over two years with a number of stipulations. Nycz commented that OAC is using a collaborative approach with the LIHF collaboratives which has been quite successful.

The Community-Academic Partnership Fund community grants RFP was released on May 7. Notices of intent, including a letter of interest, are due June 14.

11. Adjourn – next meeting July 9, 2012

Moss adjourned the meeting at 7:05pm.

Recorder, Tonya Mathison