Approved Minutes  
UW School of Medicine and Public Health (SMPH)  
Partnership Education and Research Committee (PERC)  
July 29, 2013 at 5:00pm, Room 4201 Health Sciences Learning Center

Members Present: David Allen, David Andes, Marc Drezner, Norman Drinkwater (ex officio), Elizabeth Jacobs, Patricia Keely, Craig Kent (6:00pm arrival), Paul Moberg, Rick Moss (chair), Greg Nycz (phone), Tom Oliver, Elizabeth Petty, Pat Remington (phone), James Shull

Members Absent: Betty Chewning, Jenny Gumperz

Staff: Quinton Cotton, Cathy Frey, Tonya Mathison, Ann McCall, Ken Mount, Eileen Smith, Steve Smith

Guests: Alex Adams, Amy Alvig, Amy Meinen, Moira Urich

1. Call meeting to order

Moss called the meeting to order at 5:05pm.

2. Announcements

The New Investigator Program 2013 RfP was released on June 19, 2013. Preliminary applications are due on August 1, 2013

3. Decision on draft June 10, 2013 minutes

Petty seconded a motion by Allen to approve the draft June 10, 2013 minutes. The motion passed by unanimous vote.

4. Consent agenda:

Moberg seconded a motion by Drezner to pass the following resolution:

Resolution to accept the interim progress report for:

- Engineering Effective Interventions for Tobacco Use: A Translational Laboratory (Fiore, Targeted)

The motion passed by unanimous vote.

5. Discussion of and decision on Wisconsin Partnership Program 2012 Annual Report and PERC nonsupplanting attestation

Annual Report

E. Smith presented the draft of the 2012 Annual Report for approval. The cover is being redesigned to reflect the school’s colors. The draft incorporates revisions and suggestions from PERC and OAC members. The OAC approved the report at the July 24, 2013 meeting. Smith asked for motion for
approval of 2012 Annual Report. Remington seconded Nycz’s motion to approve the 2012 Annual Report. The motion passed by unanimous vote. Smith reported that the Annual Report will be presented to the Board of Regents in October by Dean Golden.

PERC nonsupplanting questionnaire
Mount presented his annual attestation of nonsupplanting for PERC initiatives. All PERC initiatives listed on the 2012 attestation, which includes new awards and active grants, were reviewed to determine whether use of WPP funds have complied with the supplanting prohibition in the Insurance Commissioner’s Order of March 28, 2000. The Senior Associate Dean for Finance has determined that financial support by the Wisconsin Partnership Program of these projects does not result in supplanting. Mount signed the attestation.

6. Monthly reports:

Oversight and Advisory Committee
Remington provided updates from the June 12, 2013 and the July 24, 2013 OAC meetings:

June 12, 2013 OAC Meeting: The OAC voted to postpone the vote regarding the allocation for public health and health care provider education and research to coincide with OAC’sl vote to approve the 2014 – 2019 Five-Year Plan, which will occur at the October 16, 2013 meeting. The OAC also voted to establish a regional Lifecourse Initiative for Healthy Families (LIHF) Program Office in partnership with the Center for Urban Population Health. The Center will provide significant technical assistance and operational support for sustaining the four LIHF Collaboratives in Racine, Kenosha, Beloit and Milwaukee. And the OAC reviewed and discussed the Milwaukee LIHF Transition Team final report dated June 3, 2013 but postponed any decision on recommendations. On behalf of Dr. Alex Adams, Amy Meinen presented the draft recommendations of the WPP targeted Obesity Initiative Planning Committee.

July 24, 2013 OAC Meeting: The WPP staff presented an overview of the 2013 Community Academic Partnership Fund awards. The OAC reviewed 70 Notices of Intent/Letters of Interest and accepted the staff recommendation to invite 36 applicants to submit full applications. The OAC will make the awards in December 2013. In addition, Ron Cisler (from the Center for Urban Population Health) joined the meeting to provide an update to OAC on the establishment of the LIHF Regional Program Office.

7. Presentation of final planning report by WPP Targeted Obesity Initiative Planning Committee on development of a targeted obesity initiative

Moss welcomed Alex Adams, Chair of the WPP Obesity Prevention Planning Committee indicating that she would review the final recommendations of the Planning Committee and address the questions raised by the PERC on the pilot/feasibility study.

Adams presented the final planning report by the WPP Obesity Prevention Initiative Planning Committee. The four primary recommendations were stated:

1. Broad-based infrastructure, including the Wisconsin Obesity Prevention Network (WOPN);
2. A pilot/feasibility study implementing local, multi-level, comprehensive community interventions in several communities;
3. A statewide childhood obesity surveillance system that tracks obesity and related indicators in children 0-18 year olds; and
4. Outreach and community engagement that includes state and local level public messaging indicating positive solutions to obesity.

During the discussion, Keely inquired about whether the planning committee had initial thoughts about which community/communities to target for Prevention Resource Center (PRC). Adams and Meinen responded that high capacity communities that are likely to benefit will be chosen. Examples of communities include: Wood, Marathon, Brown, and La Crosse counties. Nycz suggested that the planning committee connect with existing groups in these areas to strengthen application for the PRC. Allen inquired about chances of funding given the accelerated timeline. Adams mentioned that this opportunity is available only once every five years. Moss inquired if the planning committee is able to think about particular interventions and Adams referred to the matrix for a list of evidence-based interventions, all of which are currently being done in at least one place in Wisconsin. Oliver pointed out that in Figure 1, the government section seems all state-wide and does not include a local component, which seems very top-down. Adams responded that the plan is inclusive of local agencies and is bottom up as well as top down. Drezner inquired about evaluation. Adams mentioned that they have discussed evaluation with national experts. Drezner also asked about campus collaborators. Adams responded WiPod and other investigators across campus.

Discussion and decision on inclusion of planning report in Wisconsin Partnership Program 2014-2019 Five-Year Plan
Moss indicated that no action was required by the committee. The presentation was meant to inform the committee and provide feedback to the planning group.

8. Presentation and discussion of targeted renewal applications:
   a. Health Innovation Program
   b. Transforming Medical Education 2.0: Healthcare System Improvement, Community Engagement and Advocacy

Health Innovation Program

The application is the third renewal request submitted to the WPP. The request is in the amount of $874,545 over a three-year period. The remaining balance: $68,644. Moss asked members to declare conflicts of interest and Drezner declared a conflict. Moss reminded the committee that those with conflicts may listen to the presentations, remain for any questions directed to them, and then will be asked to leave the room during further discussion (and during vote which will take place in closed session later in the meeting). Moss indicated that Maureen Smith will have 15 minutes for a presentation, followed by 10 minutes for questions and discussion. Moss relayed that the PERC Executive Committee discussed the HIP renewal as well as the two external reviews at its recent meeting and asked Smith to address the following in her presentation:
   - Explain how faculty members gain access to the resources of HIP
   - Elaborate on the impact of HIP vis-a-vis the health of the population in communities
   - Describe how the additional sources of funds from UW Health, UWMF, etc., are allocated.
Moss welcomed Maureen Smith, PI and Faculty Director of the Health Innovation Program. Smith reported on the accomplishments and impact of HIP. Grants awarded with full HIP collaboration, ongoing consulting, or Grant Writing Group participation total $29,321,795 and 159 journal articles involving 81 HIP-affiliated authors/co-authors have resulted. In terms of health impact, Smith reported on statewide learning activities, national guidelines, and the availability of free toolkits. Smith outlined the specific aims of the renewal proposal: (1) Better care for individuals requiring preventive screening & chronic condition management; (2) Improved health outcomes for individuals on the obesity-diabetes continuum; (3) Greater healthcare value for individuals by supporting care delivery at home & in the community and reducing unnecessary & expensive hospital readmissions.

Allen congratulated Smith on the tremendous amount of work that HIP has accomplished. He inquired about how HIP is measuring health impact and that measuring BMI alone seems like a weak overall indicator. Smith responded that they are looking at a number of metrics, not just BMI, and the goal is to ensure that all metrics are available to track interventions across the state. Nycz mentioned a concern about number of state residents who see the other 30 percent of physicians who are not connected to large health systems. Smith mentioned initial conversations with Wisconsin Medical Society. Moss commented on the tremendous amount of work done by the program and that the impact on faculty development and project initiation and funding is remarkable. He inquired about the process for faculty to access HIP resources. Smith responded that some resources are available to everyone, but it is not feasible to offer access to everything. They are exploring options, including a cost recovery mechanism and/or limiting some resource availability. She pointed out that many access HIP resources through ICTR CAP. Jacobs inquired about how decisions are made about which investigators gain access to resources. In response, Smith referred to the chart in the slides that indicates contact information for freely available resources and Collaborative Working Group leads.

Transforming Medical Education 2.0: Healthcare System Improvement, Community Engagement and Advocacy

Moss provided background information on the history of PERC’s funding of Transforming Medical Education. The renewal application requests $2,474,587 over a three-year period. Moss asked members to declare conflicts of interest. Petty declared a conflict as co-PI of the proposal. Moss reminded the committee that those with conflicts may listen to the presentations, remain for any questions directed to them, and then will be asked to leave the room during further discussion (and during vote which will take place in closed session later in the meeting). Moss stated that Seibert will have 15 minutes for a presentation, followed by 10 minutes for questions and discussion. He also mentioned that the PERC Executive Committee discussed the TME renewal and the two external reviews at its recent meeting. As a result of the Executive Committee’s review, Seibert was asked to elaborate on how the PI and grant team consult with health systems regarding the reform of the curriculum and the training of future physicians.

Moss welcomed Christie Seibert, Associate Dean for Medical Education and PI of Transforming Medical Education. Seibert’s discussed the accomplishments to date, including: the public health integrative case series, which is a nationally recognized model for teaching; applied public health clerkships across the state; and 13 new highly-rated public health electives. Seibert outlined the specific aims of the renewal proposal, which is to develop and implement a fully integrated, competency-based educational program across the statewide campus that includes three longitudinal curricular threads that will weave
through all three phases of UWSMPH’s new four-year MD training, including: (1) Healthcare system improvement within interprofessional teams; (2) Community engagement; and (3) Advocacy. Seibert discussed specific activities to support each thread and outlined an evaluation plan.

Moss invited PERC members to ask questions. Kent congratulated Seibert on an excellent presentation and inquired about whether cost will be an on-going issue and how it will be covered. Seibert described the high initial start-up costs that will dissipate over time. Oliver asked about the assessment of the impact on graduates. Seibert responded that they are collecting data at one, three, and six years post-graduate to compare with baseline data. They plan to survey satisfaction and outcomes. Oliver also asked about learning from other schools on campus to increase interprofessional partnerships. Seibert responded that students at preceptorship sites will be working in teams. Nycz expressed support for the threads concept, but questioned whether systems around the state with whom they might want to provide training were engaged. Seibert responded that she has made considerable efforts to connect with partners around the state. Remington remarked that proposal was well-written and builds on work done to date and that the presentation did an excellent job addressing the reviewers’ critiques. Nycz raised two points: (1) Raised a question regarding the language on page seven, Appendix A discussing accreditation standards. He suggested amending the language to reflect exceeding expectations rather than simply meeting them; and (2) Emphasized the need for child psychiatry/psychology in this state. Moss supported Nycz’s comment regarding the language on page seven under Appendix A.

9. Adjournment-Closed Session: Pursuant to Wis. Stat. 19.85(1) (c), (e) and (f) to
   a. Determine the faculty finalists to be invited for interviews for the competitive Collaborative Health Sciences Program
   b. Discuss and decide on funding for targeted grants:
      i. Health Innovation Program
      ii. Transforming Medical Education 2.0: Healthcare System Improvement, Community Engagement and Advocacy

The meeting is expected to reconvene into open session.

Shull seconded Oliver’s motion to adjourn into closed session pursuant to Wisconsin Statute 19.85(1) (c), (e) and (f) to consider 9 (a) and (b) above. The motion passed by unanimous vote.

Kent declared a conflict of interest with Wilke’s CHSP application. Drezner declared a conflict of interest with the Health Innovation Program. Petty declared a conflict of interest with Transforming Medical Education.

Following thorough discussion of the PERC executive committee’s recommendation regarding which Collaborative Health Sciences Program applicants to invite for interviews and following a thorough discussion on the targeted renewal applications, Remington made a motion to return to open session. It was seconded. The motion passed by unanimous vote.

Moberg then seconded a motion by Keely to reaffirm the following three votes made in closed session:

Determine the faculty finalists to be invited for interviews for the competitive Collaborative Health Sciences Program
The PERC voted to affirm the PERC Executive Committee’s recommendation to invite seven of the ten applicants to present at the September 9, 2013 PERC meeting.

Health Innovation Program
Approval of the Health Innovation Program’s proposal for an additional three years of funding in the amount of $874,545, with the following three conditions:

1. Within 90 days of the execution of the MOU, the PI must submit a description of the process used to allocate HIP resources, including how an investigator makes a request, the criteria used to evaluate the request, and how a decision is reached to respond to the request.

2. The committee continues to be interested in more details regarding HIP’s impact on health and health care in Wisconsin and is requesting a plan within 90 days of the execution of the MOU describing how impact will be measured.

3. PERC has made a commitment to a major obesity initiative in the Wisconsin Partnership Program 2014-2019 Five-Year Plan. The committee is paying attention to how the obesity initiative can be aligned with its major grants, such as HIP. Therefore, PERC is seeking assurance of collaboration between HIP and the obesity initiative, especially in regard to evaluating the role of health care systems in obesity prevention.

Transforming Medical Education 2.0: Healthcare System Improvement, Community Engagement and Advocacy
Approval for Transforming Medical Education 2.0: Healthcare System Improvement, Community Engagement and Advocacy for an additional three years of funding in the amount of $2,474,587, with the correction to the application on page seven, under appendix A to amend language regarding meeting accreditation standards to read “exceed accreditation standards.”

The motion passed by unanimous vote. Drezner, Jacobs, Kent and Petty were not present for the vote.

10. Adjourn – next meeting August 12, 2013

Moss adjourned the meeting at 7:30pm.

Recorder, Ann McCall