Minutes
UW School of Medicine and Public Health (UWSMPH)
Partnership Education and Research Committee (PERC)
November 9, 2015 at 5 p.m. ~ Harting-Mullins Board Room, 4201 HSLC

Members Present: David Allen, Marc Drezner, Norman Drinkwater (non-voting ex officio), Elizabeth Jacobs, Patricia Keely, Gregory Kennedy, Greg Nycz (phone), Tom Oliver, Pat Remington, James Shull (temporary chair)

Members Absent: Rick Moss (chair), Richard Page, Elizabeth Petty

Staff: Andrea Dearlove, Mike Lauth, Tonya Mathison, Ken Mount, Eileen Smith, Nathan Watson, Kate Westaby

Guests: Elizabeth Feder (UW Population Health Institute), Karen Timberlake (UW Population Health Institute)

1. Call meeting to order

Shull, who was asked to chair the meeting on Moss’ behalf, called the meeting to order at 5:05 p.m.

2. Announcements

a. 2016 PERC meeting schedule

PERC will continue to meet monthly throughout 2016, typically on the second Monday each month from 5 to 7 p.m. in a new location, 3330 HSLC in Ebling Library. There are no meetings scheduled in March or September. Important Collaborative Health Sciences and New Investigator interviews and award decisions are set to take place at meetings in August and December.

3. Decision on October 27, 2015 draft minutes

Remington seconded a motion by Nycz to approve the draft October 27, 2015 minutes. The motion passed by unanimous vote.

4. Overview of agenda for November 18, 2015 joint meeting of OAC and PERC

Smith shared the agenda for the upcoming joint meeting of the OAC and PERC on November 18, 2015, which has as its focus, “Bringing a Health Equity Lens to the Wisconsin Partnership Program.” Dean Golden will participate as well as several panelists who will share their experiences addressing health equity and will respond to questions. Smith added that the meeting will open with an overview of OAC and PERC funding of health equity initiatives to date.

5. Regular reports

a. Oversight and Advisory Committee

Remington reported on OAC meetings in August, September and October 2015. Each of those meetings included action related to the new Community Impact Grants program, which is designed to achieve sustained policy, system and environmental change through support for large-scale, evidence-based, community-academic partnership initiatives. The application process involved three-stages including an
online initial application, an in-person presentation to the OAC, and a final proposal. In October, OAC funded the following four projects, each for approximately $1 million over five years:

- Cultivate Health Initiative: Growing the Wisconsin School Garden Network (Community GroundWorks)
- Advancing School-Based mental Health in Dane County (Madison Metropolitan School District)
- Improving Assisted Living Quality through Collaborative System Change (Wisconsin Department of Health Services)
- From Punishment to Restoration: Reimagining Criminal Justice to Improve the Health of Wisconsin’s Families and Communities. (WISDOM)

In August, OAC unanimously voted to maintain the current allocation for public health and health care provider education, i.e., the 35% / 65% split.

b. PERC Executive Committee

Shull reported on the October 26, 2015 Executive Committee meeting. The agenda included review of the Strategic renewal applications for “Making Wisconsin the Healthiest State” and “Advancing Evidence-based Health Policy in Wisconsin” from Karen Timberlake, Principal Investigator and Director of the UW Population Health Institute. The Executive Committee advanced both applications to PERC for funding consideration and invited Karen Timberlake to present an overview of each, including progress on the current grants.

6. Presentation of Strategic renewal applications and response to questions

a. Making Wisconsin the Healthiest State

Karen Timberlake, PI, presented an overview of the Strategic renewal application for “Making Wisconsin the Healthiest State,” including a progress report on the current grant. The project will continue to produce and disseminate reports used by a variety of stakeholders across Wisconsin and will expand efforts to support local community health improvement, including a new Healthy Communities designation program to recognize local communities for their efforts to improve health.

There were several comments by committee members on the project’s efforts to enhance the engagement of local communities around health improvement. Nycz noted that he has used the resources of this project in his work as the director of a community health center. Allen asked about how the reports and tools are being used by local communities. Timberlake responded that the project staff are learning more about how the data is being used and to what end.

b. Advancing Evidence-based Health Policy in Wisconsin

Karen Timberlake, PI, and Elizabeth Feder, Project Director, presented an overview of the Strategic renewal application for “Advancing Evidence-based Health Policy in Wisconsin (AEBHP),” including a progress report on the current grant. The project is a partnership of the UW Population Health Institute, the La Follette School of Public Affairs and the Wisconsin Legislative Council which connects academic researchers with policymakers through timely and relevant programming designed to advance health and healthcare decision making in the state. The program produces 3-5 expert-led legislative briefings/symposia annually as well as 1-2 smaller method-exchanges. Proposed expansions include: meeting with members of the legislative leadership annually, facilitating small group post-briefing meetings and offering live-stream and video capture of all briefings.
Timberlake responded to a number of questions:

- **Inquiries/information requests.** Timberlake indicated that a graduate student who works at the Capitol fields confidential inquiries of legislators as well as the Legislative Council and its advisors. A system is being developed to track the number and types of inquiries.
- **Lobbying.** Timberlake clarified that the role of AEBHP is solely to inform, not to take a position on an issue nor to advocate on any particular piece of legislation.
- **Outreach.** Nycz suggested using a newsletter to reach out to not only legislators, but other groups that could benefit from the briefings.

7. **Adjournment-Closed Session: Pursuant to Wis. Stat. 19.85(1) (c), (e) and (f) to:**

   a. **Discuss and make funding decision on Strategic renewal applications:**
      1) Making Wisconsin the Healthiest State
      2) Advancing Evidence-based Health Policy in Wisconsin
   b. **Discuss the New Investigator Program full applications and select the interview finalists.**

Remington seconded a motion by Keely to adjourn the meeting to closed session pursuant to Wisconsin Statute 19.85(1) (c), (e) and (f) to discuss and make funding decisions on two Strategic renewal applications, “Making Wisconsin the Healthiest State” and “Advancing Evidence-based Health Policy in Wisconsin,” and to discuss the New Investigator Program full applications and select the finalists for interviews. The motion passed by unanimous vote.

Marc Drezner declared a conflict of interest as Karen Timberlake’s supervisor in her role as ICTR’s Dissemination and Implementation Director. He did not participate in the votes on her two renewal applications. Patricia Keely declared conflicts on two of the New Investigator applications. She is a member of Amy Fowler’s mentoring committee and is Barak Blum’s department chair. Keely did not participate in any discussion or vote related to either proposal.

The committee discussed the Strategic renewal applications for and presentations of “Making Wisconsin the Healthiest State” and “Advancing Evidence-based Health Policy (AEBHP).” Remington commented that the UW Population Health Institute is one of the leading applied health institutes in the country. He noted that with WPP’s funding, the Institute has developed the What Works for Health database, which serves as a nation model. PERC discussed the budget requests for each renewal application. Both budgets increased: “Making Wisconsin the Healthiest State” by a total of $55,000 and AEBHP by a total of $80,000. The UW-Madison Office of the Chancellor has provided dollar-for-dollar matching funds for AEBHP since the project’s inception. A request has been made to Chancellor Blank to continue supporting the project. A response from her office is expected soon.

Norman Drinkwater, Review Subcommittee chair, provided an overview of the application and review process for the 2015 New Investigator Program. The Request for Proposals was released in May 2015 and resulted in 37 preliminary applications. Following review by the PERC Executive Committee, PERC invited 17 full applications. Two applicants withdrew. Following an independent review of the applications by PERC’s Review Subcommittee, which includes content experts and community representatives, the Subcommittee met to discuss the applications and developed a ranked list for PERC. Shull reported that the Executive Committee recently reviewed the ranking and recommended inviting the top-six ranked applicants for interviews. The ranking was distributed. Members also had access to the full applications and the summaries of the reviewers’ comments via Box in advance of the meeting.

Remington seconded a motion by Oliver to return to open session, which passed unanimously.
Remington seconded a motion by Jacobs, which passed by unanimous vote, to confirm the following decisions made in closed session:
Making Wisconsin the Healthiest State
Strategic renewal grant awarded for $518,371 over three years, effective December 1, 2015. PERC discussed the various opportunities in the future for the project to interact with the Wisconsin Partnership Program and to expand its work.

Advancing Evidence-based Health Policy in Wisconsin
Strategic renewal grant awarded for $236,924 over three years, effective January 1, 2016. The pending matching support from Chancellor Blank was of particular interest to the committee. If matching funds cannot be provided, PERC asked that Timberlake submit a revised application detailing necessary changes.

New Investigator Program
PERC decided to invite the top-six ranked applicants for interviews at the December 7, 2015 meeting. WPP staff will notify all applicants of the status of their applications.

8. Affirm decision on 2015 Collaborative Health Sciences grant awards
Oliver seconded a motion by Remington, which passed unanimously, to affirm the committee’s decision to award the following four 2015 Collaborative Health Sciences awards:

- **Big Data for Little Kids: The Impact of Prenatal Interventions on Birth Outcomes and School Readiness**
  Principal Investigator: Deborah Ehrenthal, Obstetrics and Gynecology
  Co-PIs: Lawrence Berger, Social Work; Eric Grodsky, Sociology

- **Paradigm shifting, high throughput assay for serial quantification of HIV reservoirs**
  Principal Investigator: Robert Striker, Medicine
  Co-PI: Scott Berry, Biomedical Engineering

- **Screening in Trauma for Opioid Misuse Prevention (STOMP)**
  Principal Investigator: Randall Brown, Family Medicine
  Co-PI: Suresh Agarwal, Surgery

- **Winning the War on Antibiotic Resistance in Wisconsin: the WARRIOR study**
  Principal Investigator: Nasia Safdar, Medicine
  Co-PIs: Federico Rey, Bacteriology; Ajay Sethi, Population Health Sciences

9. Discuss and decide on no cost extension requests for 2012 Collaborative Health Sciences Program awards
Smith noted WPP’s policy on no cost extensions requires that requests over 25 percent of the total budget be reviewed by the committee. Two such requests were recently submitted. Two PERC members who have regularly reviewed the related annual progress reports have been asked to share their recommendations.

   a. **Wisconsin Breast Cancer Screening Collaborative: Advancing Shared Decision-Making, Elizabeth Burnside**
Remington seconded a motion by Jacobs to approve the no cost extension request from Elizabeth Burnside for $135,124 over one year, beginning January 1, 2016. The two reviewers, Remington and Jacobs, commented on Dr. Burnside’s progress overall and her success leveraging additional funding. Staff turnover is the primary reason a no cost extension is necessary. The motion passed with eight affirmative votes. Drezner was not present for the vote.
b. Bisphosphonates and Breast Cancer Prevention: Mechanistic and Clinical Analyses, Michael Gould

Jacobs seconded a motion by Keely to approve the no cost extension request from Michael Gould for $231,198 over one year, beginning January 1, 2016. The two reviewers, Keely and Drinkwater, commented that the project is making adequate progress, but that additional time is needed, in particular due to IRB delays. The motion passed with eight affirmative votes. Drezner was not present for the vote.

10. Consent agenda

Subsequent to the recommendation by the reviewers, the following resolution passed with seven affirmative votes. Drezner was not present for the vote and Remington abstained due to a conflict as the Principal Investigator of the “UW Preventive Medicine Residency Program Development Grant:”

Resolution, acceptance of the following interim progress and final reports:

- Once 'Stepping On' Ends: Continuing a Group Falls Prevention Program via the Internet (2663, 12 month, CHSP)
- Wisconsin Center for Infectious Diseases, Bruce Klein (1367, final, Strategic)
- Discharge Order Completeness and 30-Day Rehospitalizations in Rural Wisconsin Nursing Home Patients, Amy Kind (2560, 24 month, NIP)
- UW Preventive Medicine Residency Program Development Grant, Pat Remington (2656, 12 month, Strategic)

11. Discussion and decision on 24-month progress report for Transforming Medical Education 2.0: Healthcare System Improvement, Community Engagement and Advocacy (2708, 24-month, Strategic)

The 24-month progress report for “Transforming Medical Education 2.0” was favorably reviewed by the two assigned reviewers. Both reviewers were impressed with the substantial progress made on all three specific aims of the project. However, one of the reviewers suggested inclusion of more specific information in the final report on why the transformation of medical education was necessary, along with a description of how medical graduates will be better equipped as a result of the transformation. Additionally, it was suggested that the final report should closely link the explanation of TME activities to the expected outcomes identified in the TME application abstract. Oliver made a motion to accept the report and to have WPP staff follow-up with Christine Seibert, Principal Investigator, to discuss these requests regarding the final report and how they relate to the anticipated renewal request in 2016. The motion passed with eight affirmative votes. Drezner was not present.

12. Adjourn

Shull adjourned the meeting at 6:45 p.m.

Recorder, Tonya Mathison