Minutes
UW School of Medicine and Public Health (UWSMPH)
Partnership Education and Research Committee (PERC)
July 13, 2015 at 5 p.m. ~ Harting-Mullins Board Room, 4201 HSLC

Members Present: David Allen, Marc Drezner, Norman Drinkwater (ex officio), Patricia Keely, Gregory Kennedy (phone), Rick Moss (chair), Greg Nyocz, Richard Page, Pat Remington

Members Absent: Elizabeth Jacobs, Tom Oliver, Elizabeth Petty, James Shull

Staff: Andrea Dearlove, Lisa Hildebrand, Tonya Mathison, Ken Mount, Richard Reynolds, Eileen Smith, Kelly Thompson, Nathan Watson

1. Call meeting to order

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

2. Decision on draft May 11, 2015 minutes

The draft May 11, 2015 minutes were unanimously approved following a motion by Remington which was seconded by Page.

3. Announcements

   a. Legislative Audit Bureau audit
   Smith reported that the financial and programmatic audits of the Wisconsin Partnership Program by the Legislative Audit Bureau are reaching a conclusion.

   b. Declaration of conflicts of interest
   The PERC Conflict of Interest policy was distributed and members were asked to complete the related questionnaire. The questionnaire is required annually and is filed with the UW-Madison outside activities report.

   c. Joint PERC/OAC meeting November 18, Noon-4pm, Fluno Center
   The joint meeting of the PERC and the OAC is set for November 18 from Noon to 4 p.m. at the Fluno Center. This will be a strategic retreat to review accomplishments and lessons learned and to discuss future directions. More details will be provided at future meetings of both committees.

   d. Principal Investigator change for PERC Strategic “Lifecourse Initiative for Healthy Families (LIHF) Faculty Leader”
   Moss notified the committee of a change in Principal Investigator (PI) for the Lifecourse Initiative for Healthy Families (LIHF) Faculty Leader grant. Dr. Deborah Ehrenthal will replace Dr. Laurel Rice, who served as Interim PI while Dr. Ehrenthal went through an extensive orientation period and built her team for the LIHF Program Office.

   e. Welcome new PERC member
   Moss welcomed Gregory Kennedy, MD, PhD, Associate Professor of Surgery, Vice Chairman of Quality, and Associate Chief of the Section of Colorectal Surgery. Dr. Kennedy replaced Dr. Andes, whose term ended in April, as a representative of the clinical faculty.
4. Monthly reports

a. Oversight and Advisory Committee (OAC)
Remington reported on the May 13 and June 10 OAC meetings. In May, OAC made the decision to release its new Request for Proposals for Community Impact Grants. This grant program is designed to achieve sustained policy, system and environmental change through support for large-scale, evidence-based, community-academic partnership initiatives. Awards are $1 million over five years. The application process involves three stages including an online initial application, an in-person presentation to the OAC, and a final proposal.

In June, OAC heard a presentation by Liz Petty on PERC’s and the School’s investments in educational initiatives showing a growing orientation of students to public health. OAC renewed funding for the Lifecourse Initiative for Healthy Families (LIHF) Pregnancy Risk Assessment and Monitoring System which surveys women who give birth. OAC’s funding supports oversampling of underserved minorities, predominantly African American moms. This project is led by Deborah Ehrenthal, LIHF Faculty Leader. OAC also approved funding for 11 Community Opportunity Grants. These grants for $50,000 over two years and primarily support implementation and/or evaluation strategies that address community health priorities identified through Community Health Improvement Plans or Community Health Needs Assessments.

b. PERC Executive Committee
Moss reported on the May 19 meeting of the PERC Executive Committee. The focus of the meeting was discussion of the Strategic renewal application from Marc Drezner for the Institute for Clinical and Translational Research. The committee was impressed by the progress made by ICTR over the past three years and was supportive of the renewal proposal, but asked for supplemental information for PERC’s consideration regarding: examples of impact of PERC supported ICTR activities; evaluation program within ICTR and if it informed decisions on continuing or discontinuing activities with PERC funding; update on efforts by ICTR to ensure stakeholders are aware of PERC support of ICTR activities. The supplemental information was provided to PERC along with the renewal application and the evaluation report by the External Advisory Committee.

5. Presentation of Strategic renewal application for Institute for Clinical and Translational Research
Marc Drezner, MD, presented an overview of the Strategic renewal application for the Institute for Clinical and Translational Research (ICTR), including progress on the current grant. The goal of ICTR is to strengthen and expand the transformation of research at the University into a continuum, extending from investigation to discovery to translation into practice, linking even the most basic research to practical improvements in human health. He requested an annual budget of $3.4 million from PERC over three years and nine months in support of three of ICTR’s four overall aims:

- **Specific Aim 1.** To further strengthen the academic home for clinical and translational research and to develop evaluative strategies to gauge the success of empowering programs to catalyze the cultural changes needed to translate new knowledge into practical improvements in human health.
- **Specific Aim 3.** To optimize the environment for clinical and translational research and productivity by further improving the coordinated infrastructure (e.g. biomedical informatics, biostatistics, clinical and translational research resources) that makes available to scientists the critical resources required, while continuing to minimize the regulatory burden for clinical research.
Specific Aim 4. To further extend the infrastructure for community engagement, focusing on training academic investigators and community partners in Types 2-4 Translational Research, the results of which are disseminated and implemented to improve health and reduce disparities.

Moss thanked Drezner for the informative presentation as well as the comprehensive supplemental documents and opened for questions. Nycz asked for more information about ICTR’s mentoring programs, which he acknowledged are not supported with PERC’s funding, but would be of value to PERC’s New Investigator Program applicants and grantees, for example. Drezner clarified that ICTR will be initiating a new mentee training program, but past programs have focused on training mentors using a “train the trainer” approach. Remington commented on the successful transition from the Community Health Connections program to the more structured Dissemination & Implementation program. Keely asked about retention of those who participate in ICTR’s graduate program. Drezner indicated that records show successful retention overall.

Drezner declared a conflict as the Principal Investigator and left the meeting during the discussion and vote on ICTR’s renewal application.

6. Adjournment—Closed Session: Pursuant to Wis. Stat. 19.85(1) (c), (e) and (f) to discuss and making a funding decision on Strategic renewal application for Institute for Clinical and Translational Research

Nycz seconded a motion by Remington to adjourn the meeting to closed session pursuant to Wisconsin Statute 19.85(1) (c), (e) and (f) to discuss and make a funding decision on the Strategic renewal application for Institute for Clinical and Research (ICTR). The motion passed with eight affirmative votes. Drezner was not present and did not vote.

After discussing the application materials, supplemental information, presentation and ICTR’s External Advisory Committee letter, Nycz made a motion which was seconded by Remington to return to open session. The motion passed with eight affirmative votes. Drezner was not present and did not vote.

Remington seconded a motion by Nycz to confirm the following motion made in closed session: Motion to fund the Institute for Clinical and Translational Research (ICTR) Strategic renewal application for a total of $12.75 million over three years and nine months, effective July 1, 2015. In addition, PERC encouraged stronger alignment of the activities of ICTR with those of the Wisconsin Partnership Program and required regular reporting to PERC on related progress in annual interim and final reports. Specifically, ICTR’s training program for mentees and how it could be supportive of the New Investigator Program and ICTR’s dissemination and implementation activities and a possible relationship with the OAC’s new Community Impact Grants program were cited as examples. The motion passed with eight affirmative votes. Drezner was not present and did not vote.

Drezner returned to the meeting and was informed of PERC’s decision to fund the ICTR renewal application.

7. Discussion of draft Wisconsin Partnership Program 2014 Annual Report

Smith reported that a draft of the Wisconsin Partnership Program 2014 Annual Report was posted with the meeting materials. She anticipates sending an updated draft within the next week which will include the financial section and the grant outcomes report which is published with the annual report. Smith asked for feedback on the draft annual report. Drezner noted that past reports have provided
information on ICTR, including a list of ICTR pilots. He suggested including them in the 2014 Annual Report.

8. **Consent agenda**

Subsequent to the recommendation by the reviewers, the following resolution passed by unanimous vote following a motion by Page which was seconded by Remington.

Resolution, acceptance of the following interim progress and final reports:
1) Cholecystokinin in the survival of human pancreatic islets, Dawn Davis (24-month, #2557)
2) Faculty Recruitment in Maternal and Child Health, Philip Farrell (final, #2307)
3) Improved Health Care Delivery to Wisconsin Amish Infants, Christine Seroogy (12-month, #2857)
4) Preparing Health Educators to Address Behavioral Health Determinants through Health care Settings, Richard Brown (final, #2070)

9. **Adjourn**

Moss adjourned the meeting at 6:15 p.m.

Recorder, Tonya Mathison