Minutes
UW School of Medicine and Public Health (UW SMPH)
Wisconsin Partnership Program Education and Research Committee
October 10, 2011 at 5:00PM – Room 4201 Health Sciences Learning Center

Members Present: Betty Chewning, Marc Drezner, Norm Drinkwater, Jenny Gumperz, Craig Kent, Paul Moberg, Rick Moss, Greg Nycz, Tom Oliver, Elizabeth Petty, Pat Remington, James Shull

Members Absent: Rob Lemanske

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

1. Call meeting to order

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

2. Decision on draft minutes of September 12, 2011

Chewning seconded a motion by Remington to approve the draft minutes of September 12, 2011. The motion passed by unanimous vote.

3. Announcement

Joint OAC/PERC meeting on Oct 19 to be rescheduled

Moss reported that the joint meeting of the PERC and the Oversight and Advisory Committee (OAC) is being rescheduled in Spring 2012. This will give each committee an opportunity to hold a strategic planning meeting in preparation for the joint meeting.

4. Oversight and Advisory Committee (OAC) report

Remington provided updates to PERC on the following programs:

Wisconsin Population Health Service Fellowship Program
In July, Cindy Haq, chair of the joint OAC/PERC Population Health Service Fellowship Subcommittee, reported on the Subcommittee’s discussions and recommendation. The Subcommittee was impressed with the outcomes of the Fellowship Program, and agreed that it is a high-priority program within the WPP’s mission, but one best placed with the PERC. OAC voted unanimously to ask PERC to consider accepting funding responsibility for the Fellowship Program, beginning July 1, 2012. Moss indicated that although no formal action will be taken by PERC today, the Fellowship Program will be discussed later during the strategic planning session.

Community-Academic Partnership Fund
In July, OAC considered the Notices of Intent for the Community-Academic Partnership Fund. Of the 93 applicants (35 implementation and 58 development), the OAC invited ten implementation and 20 development applicants to submit full applications. The OAC plans to fund up to four implementation and ten development grants for up to $2.7 million.
Lifecourse Initiative for Healthy Families (LIHF)

In July, the OAC approved a Request for Application for continuation planning funding for the four LIHF Collaboratives (Beloit, Kenosha, Milwaukee, and Racine). OAC agreed that additional time and funding was necessary to ensure that the Collaboratives complete their community action plans and achieve broad community support. In September, the OAC approved all four continuation planning applications, each for $50,000 over six months. The planning phase will conclude in March 2012.

5. Discussion and approval of support for faculty leader for the Healthy Birth Outcomes Initiative (i.e., Lifecourse Initiative for Healthy Families)

As a follow-up to Philip Farrell’s presentation to PERC in September, Moss distributed a proposal for “Faculty Recruitment in Maternal and Child Health”. The objective is to recruit a senior faculty member who will provide leadership and build capacity in maternal and child health research, education, clinical care, and community service. This effort will contribute to the School’s transformation goals and the WPP Healthy Birth Outcomes Program, and aligns with OAC’s and PERC’s objective to form joint collaborations in community engaged work. The budget includes a request to PERC of $100,000 per year over three years for salary and research support. The SMPH will provide additional funding. Moss clarified that PERC’s funding will be guaranteed through the end of the current Five-Year Plan in March 2014 with the expectation that funding will be continued based on a successful review of the results of the position.

Kent was concerned that the start-up funds may not be adequate to recruit a clinician. Moss responded that the School’s commitment will ensure adequate funds to recruit a national leader with a PhD and/or MD. Drezner indicated that several SMPH departments are in a good position to provide departmental support through funding, resources, and personnel. Nycz questioned the change in rationale on how best to provide funds for this effort. Initially, it was proposed that the WPP would set aside $2 million from the endowment. Moss responded that stable funding for this position is critical, and it was decided that the best approach would be to make the funding part of the annual budget for the distribution of interest income. Since approximately 50% of this position will be focused on providing leadership for the Healthy Birth Outcomes Program, Moberg raised a question about additional funding. Moss clarified that in addition to PERC’s funding, the SMPH’s commitment and departmental and research support will help ensure adequate support. Oliver encouraged convening the Search Committee as soon as possible given typical annual academic recruiting patterns. Remington seconded a motion by Nycz to provide $100,000 per year through the end of the current Five-Year Plan on March 26, 2014. Remington indicated that this will serve as a recruitment model to address other WPP priority areas. The motion passed by unanimous vote.

6. Strategic planning discussion

Monthly report on endowment value and cash balances

Mount presented the financial projections for the WPP through September 30, 2011. The value of the endowment was projected to have dropped by almost 5% in September to a value of $286 million – 1.6% above its original value. There is a total cash balance of $33 million, $20.6 million of which is allocated to PERC.
Endowment growth and distributions policy
Mount reviewed the WPP policy on endowment growth and distributions. In December 2011, the PERC and OAC will set the endowment distribution rate for 2012. If the endowment continues to decline in value, the PERC and OAC may have to consider reducing the annual distribution rate to maintain the value of the endowment. Mount clarified that even with a reduction in the distribution, PERC would be able to meet its multi-year commitments to grantees by withdrawing from the cash balance. Drezner stressed the importance of leaving some funds available so PERC has the flexibility to respond to spontaneous, high-impact proposals.

Discussion of proposed initiatives
Moss explained that the purpose of this strategic planning discussion is to introduce and share ideas for future consideration. He initiated the discussion with an overview of the following programs and proposals, and referred the committee to the list in the meeting materials. He also directed the committee to the list of current grants and emphasized that many are ending in 2012. He cautioned the committee that it will be not possible to continue the current portfolio of grants, and at the same time add new initiatives given budgetary constraints.

New Investigator Program / Collaborative Health Sciences Program
Drinkwater introduced discussion of PERC’s two competitive Request for Proposals programs, the New Investigator Program (NIP) directed to junior faculty and the Collaborative Health Sciences Program (CHSP) directed to senior faculty. The NIP has successfully met its purpose of enhancing the career development of new SMPH faculty while also addressing the mission and vision of the WPP. Applicant interest in the program has remained steady since the program’s inception in 2005, and the quality of proposals is high with projects advancing novel and innovative approaches to improve health and health care in Wisconsin.

The CHSP has also met its purpose and objectives overall, but more recently there has been less applicant interest. Drinkwater shared his opinion that in recent funding cycles the quality of applications has been lower with projects less broad in scope. Expert reviewers noted during the 2010-11 funding cycle that there were a number of existing collaborations that lacked diversity. He proposed increasing the value of the award, and/or targeting priority topics. Kent spoke in favor of continuing the CHSP given that extramural funding opportunities are limited, and recommended expanding efforts to promote this opportunity to faculty. He preferred to keep the topic areas broad. Gumperz recommended allowing existing collaborations to apply to help strengthen them, or to give them an opportunity to address a new topic area. She noted that in times when funding opportunities are limited, it is difficult to form new collaborations. Drezner reported that ICTR’s pilot program has requirements similar to the CHSP, but there has been no reduction in the number of applications. He acknowledged that eligibility for the pilot program is extended to faculty outside of the SMPH, but most applicants are from the SMPH. The pilot awards are $50,000 per year, so he suggested considering reducing the amount of the CHSP award. Moss indicated that their ideas would be discussed further. PERC will review the draft RFP in December.
**Obesity and Diabetes Initiative**

Moss recalled that at the joint meeting in 2010, PERC and OAC had identified obesity and diabetes as a high priority health issue. A call for proposals requiring a one- or two-page letter of interest will be drafted for PERC’s review at a future meeting.

**Faculty development/recruitment**

Moss indicated that PERC’s earlier decision to fund the recruitment of a maternal and child health expert will set a precedent for future recruitments. He reminded the committee of the Five-Year Plan commitment to faculty development in the SMPH.

**Wisconsin Population Health Service Fellowship**

Remington reported on the successes of the Wisconsin Population Health Service Fellowship program. The Fellowship program supports up to eight master-trained fellows per year who provide direct service to communities and agencies working to improve population health. The program leveraged additional support from HRSA for an additional two fellows each year. It is a unique education and service program that has successfully contributed to workforce development in the state. Kent questioned why OAC is proposing to move the program’s oversight and funding. Remington indicated that the program is highly regarded by OAC, however, the committee sees PERC’s funding and oversight as more appropriate given PERC’s charge. Moss indicated that PERC will have a detailed discussion of the Fellowship program at a future meeting, including consideration of OAC’s request for PERC to accept funding responsibility beginning July 1, 2012.

**Healthy Wisconsin Leadership Institute**

Remington reported that the Healthy Wisconsin Leadership Institute (HWLI), which is jointly funded by the OAC and the Medical College of Wisconsin (MCW), develops transformational leaders who engage in innovative community health improvement activities. The HWLI offers a community teams program, regional workshops, and online learning. He noted that a member of the Wisconsin United for Health Foundation (WUHF) recommended that consideration be given to funding this education program through PERC.

**Expansion of public health programs**

Oliver reported that well over 60 faculty and practitioners are involved in the Master of Public Health (MPH) program. Given the diverse interests and background of potential students, Oliver proposed expanding the MPH program to include: (1) a distance MPH program parallel to the campus program to reach those outside of Madison, (2) an on-campus public health certificate program for graduate students interested in gaining public health skills, but not necessarily able to pursue a full degree, and (3) a distance public health certificate program for public health professionals, including SMPH faculty and staff. Oliver mentioned that with HRSA’s funding of the Public Health Training Center, some work has commenced related to development of the distance MPH program.

**Community-Academic Partnership Grants Research Supplement**

Remington proposed the development of a WPP Community-Academic Partnership Fund (CAPF) Grant Research Supplement to provide an opportunity for SMPH faculty and staff who are Academic Partners on a CAPF implementation grant to build upon their community partnerships by
receiving additional funding to increase their opportunities for extramural funding to expand their activities related to the partnership. He shared examples of SMPH faculty who successfully supplemented their CAPF grants with a PERC New Investigator Program grant, and went on to leverage extramural funding for their work.

7. Open discussion

Additional thoughts and ideas from members
Members shared the following thoughts and ideas for potential proposals for PERC’s consideration at a future meeting:

Simulation Center
Given that medicine changes rapidly, there is a growing need in the state for a training and retraining site to ensure physicians and health care professionals are well-trained in the most current technology and techniques. Kent proposed supporting a centralized Simulation Center. He indicated that current training efforts are fragmented due to limited infrastructure support. With such support, Kent believes the SMPH could become the epicenter of training and retraining efforts. Remington recommended working with the Office of Continuing Professional Development.

Transforming Medical Education
Nycz questioned whether the two grants made by PERC to reform the medical school’s curriculum – Innovations in Medical Education, 2004-09; and Transforming Medical Education (TME), 2009-2012— had incorporated education and training on the oral cavity. Research shows that oral cancers are often discovered at later stages. Nycz commented that this is a problem because physicians are not trained to examine the oral cavity.

Remington commented on the many successes of the innovative changes to the curriculum, but continuing support for TME is critical to ensure institutionalization of these changes. He noted that the American Journal of Preventive Medicine highlighted the curriculum changes of the SMPH.

Behavioral and mental health system
Nycz mentioned consideration of the poor state of and dwindling support for the behavioral and mental health system in the rural parts of Wisconsin, especially for low-income residents.

Program evaluation
Given growing demand, Moberg proposed developing an evaluation training and service program for SMPH faculty and staff, and community organizations. He reminded the committee that the current Five-Year Plan mentions this need. Much of this demand is tied to grant programs of the WPP and ICTR which require an evaluation component as a way to measure the success of individual projects as well as the grant programs. He noted that through the Collaborative Center for Health Equity (CCHE), an expert was hired with 50% effort dedicated to providing evaluation services to constituencies of the WPP, ICTR, and CCHE. However, this is not sufficient to meet the demand.
Library resources
In order to strengthen the School’s partnerships, Nycz proposed extending the availability of the University’s library resources to external partners, such as former HWLI participants.

SMPH health services research infrastructure
Kent suggested consideration of building the School’s capacity in health services research. He indicated that the Health Innovation Program (HIP) is the only program currently addressing this research area.

Clinical Fellowship Program
Since there are few faculty in the SMPH with MD’s who conduct research on a full-time basis, Gumperz proposed providing support for MD’s interested in dedicating some of their effort to doing basic research in the lab.

Concluding statements
There was general agreement on the importance of continuing to support a balanced portfolio of basic science, clinical and translational science, and applied public health research, and education. PERC will consider its current and future investments and achievements along the full continuum. Moss indicated that a list of the proposed initiatives would be developed for the committee’s attention at an upcoming meeting.

8. Adjourn – next meeting **November 7, 2011, 5:00-7:00PM, 4201 HSLC**

Remington made a motion to adjourn the meeting at 7:05pm.

Recorder, Tonya Mathison