Meeting Minutes
Wisconsin Partnership Program
Lifecourse Initiative for Healthy Families Steering Committee
Beloit Rotary River Center
1160 Riverside Drive Beloit, WI 53511
Wednesday July 11, 2012 11:30 a.m. to 1:30 p.m.

Members present: Fritz Broekhuizen, Georgia Cameron (by telephone), Ron Cisler, Deborah Embry (by telephone), Phil Farrell (co-chair), Cindy Hayq (by telephone), Mark Huber (by telephone), James Ivy, Tito Izard, Cheryl Jackson, Murray Katcher, Katherine Marks (co-chair), Betty Stinson (by telephone), Jack Waters and Lora Wiggins (by telephone)

Members Absent: Sheri Johnson, Veronica Lawson Gunn and Stephen Ragatz

Staff: Quinton Cotton, Cathy Frey and Eileen Smith

Invited Guests: Nancy Eberle and Paul Moberg

Guests: Eloiza Altoro, Tonya Evans, Donna Johnson, Marilyn Kilgore, Clarene Mitchell, Angela Moore, Patrice Onheiber and Carole Wickersham

1. Welcome

Cathy Pollard, Director of the Beloit Housing Authority at the City of Beloit, welcomed the Committee to Beloit and read a proclamation from the City Manager.

2. Review of Agenda

Farrell called the meeting to order at 11:40 am. Cathy Pollard, Director of the Beloit Housing Authority at the City of Beloit, welcomed the Committee to Beloit and read a proclamation from the City Manager.

3. Decision on May 9, 2012 meeting minutes

After a motion made by Jackson and seconded by Broekhuizen, the meeting minutes were approved.

4. LIHF Collaborative Update

Cotton provided a summary of the current activities of the LIHF collaboratives, which included strengthening project work plans and refining their governance models.

Cotton introduced the topic of the Lifecourse Initiative as a regional program and Committee members reviewed principles of regional collaboration that would facilitate achieving goals and objectives of the Initiative. Committee members also deliberated on supports and resources available to LIHF collaboratives that would support a regional program design, noting the following:

- It will be critical to provide technical assistance to LIHF collaboratives in the areas of strategic thought and vision and that we explore using existing resources like the Healthier Wisconsin Leadership Institute to build capacity of the collaboratives.
- LIHF collaboratives require training on ways to increase the involvement of medical professionals; this expertise is currently under-utilized.
• Some Medicaid Health Maintenance Organizations (HMOs) have already aligned with the goals of the Lifecourse Initiative but there is still an opportunity to engage more HMOs.
• Leveraging of funds is extremely important and new paradigms of how to systematically pool resources together for a common purpose are needed for project grants and collaboratives.
• The level of involvement with the LIHF collaboratives may require additional involvement from WPP staff to support this new partnership model with its grantees (for example, increasing the frequency of site visits to semi-annual).

5. Discussion on Request for Partnerships for Development and Implementation Project Grants

Cotton provided an overview of the Request for Partnerships (RFP) for Development and Implementation project grants (please see attachment). To increase public awareness about the opportunity to apply for grant funds, he noted that grant information sessions were scheduled in Beloit, Kenosha, Milwaukee and Racine. Efforts were also being made to use electronic message alerts, webinars, print advertisements, website announcements and handouts available to provide information and support to interested community organizations.

Cotton noted that the Lifecourse Initiative was a component of WPP’s Community-Academic Partnership Fund (CAPF) and that the process to review applications would be similar to WPP’s community grants program. This two-phase review process includes a technical and content review at both the Notice of Intent and full application stages of review. Efforts will be made to draw from the Oversight and Advisory Committee, LIHF Steering Committee members, public health experts and representatives from each of the four LIHF communities to assist with the review of funding applications. Cotton pointed out that the Request for Partnerships provided additional information on the review process. CAPF requires that each of its projects pull on both the strengths of community organizations and utilize a UW system Academic Partner. Cotton noted that efforts were being made to identify Academic Partners and encouraged Steering Committee members to submit names of potential Academic Partners.

6. Presentation of LIHF Evaluation Plan

Moberg and Eberle provided an overview of the evaluation plan for the Lifecourse Initiative. In summary, the evaluation includes three focus areas: (1) evaluation of the overall initiative; (2) evaluation of LIHF collaboratives, and; (3) evaluation of project grants (please see attachment). The presentation included a review of process and outcomes measures. Additionally, Eberle provided a summary of survey results from Community Action Plan launch events that asked about community awareness of the issue of infant mortality and community leadership on the issue.

7. State/Federal Maternal and Child Health Update

MCH Team Katcher noted that a Wisconsin Team has joined the Health Resources and Services Administration effort to improve health birth outcome through the Region V office.

Association for State and Territorial Health Officials Katcher pointed out that the President’s Challenge: the Healthy Babies Initiative aims to improve birth outcomes by reducing prematurity in the United States by eight percent by 2014. Wisconsin is currently not participating in this challenge.

Medicaid Waivers for Pre-Conception Health Katcher noted that efforts were being put in place to decrease the number of elective deliveries before 39 weeks and increase pre-natal regionalization.
Strong Start for Mothers and Newborns Onheiber provided a description of Strong Start, a Centers for Medicare and Medicaid Services (CMS) program designed to reduce the risk of significant complications and long-term health problems for expectant mothers and newborns. Approximately, $41 million has been made available to support enhanced pre-natal care interventions. The Wisconsin Department of Health Services (DHS) intends to apply for funds through the Strong Start program.

8. Announcements and Member Updates

Waters noted that the Kenosha Community Health Center and its partners were hosting an informational discussion with DHS Secretary, Dennis Smith, to provide information on the issues of behavioral health, African-American infant mortality and oral health. Committee members are welcome to attend the discussion, which will be held in Kenosha.

9. Open Forum

- It will be important that sites have tools to evaluate collaborative activities and that the role of evaluation is understood and embraced (Kilgore).
- The Wisconsin Partnership Program should be mindful of evaluation expectations placed on LIHF collaboratives given the limited resources (Altoro).
- The Wisconsin Partnership Program might consider connecting community organizations with academic partners through networking opportunities (Mitchell).

10. Adjourn

The meeting was adjourned at 1:30 pm.

Recorder, Quinton Cotton