Minutes
UW School of Medicine and Public Health (SMPH)
Oversight and Advisory Committee
July 16, 2014, 1:00 p.m., 4201 Health Sciences Learning Center

Members Present: Philip Farrell, Susan Goelzer, Cindy Haq, Katherine Marks, Doug Mormann, Greg Nycz, Pat Remington (chair), Ken Taylor, Barbara Zabawa

UW System Board of Regents Liaison: Tim Higgins (phone)

LIHF Faculty Leader: Deb Ehrenthal
LIHF Regional Program Office: Ron Cisler

WPP Staff: Quinton Cotton, Lisa Hildebrand, Mary Jo Knobloch, Jim Krueger, Tonya Mathison, Ken Mount, Eileen Smith, Amanda Price, Dane Lindholm

Guests: Amy Meinen (Department of Family Medicine), Brian Christens (School of Human Ecology), Alex Adams (Department of Family Medicine), Pat Alea (Alea and Associates), Claude Gilmore (Community Health Systems), Richard Perry (Community Health Systems), Chelsea Zess (UWSMPH - student), Lezli Redmond (Department of Obstetrics & Gynecology), Shannon Corrcinan (ABC for Health), Nancy Eberle (UW Population Health Institute), Renee Kramer (UW Population Health Institute)

1. Call meeting to order

Remington called the meeting to order at 1:05 p.m.

2. Discussion and decision on draft minutes:

Farrell seconded a motion by Nycz to approve the draft May 7, 2014 minutes. The motion passed by unanimous vote.

3. Announcements

   a. Introduce Dr. Deb Ehrenthal, LIHF Faculty Leader

   Farrell introduced Dr. Deb Ehrenthal as the new LIHF Faculty Leader. He indicated that, as an expert in women’s health, Ehrenthal is ideal for the position and was grateful for the support that PERC provided for her recruitment. Remington expressed that this is an excellent example of OAC and PERC working together. Ehrenthal is looking forward to building on the foundation that has already been put into place for LIHF.

   b. CDC Site Visit-Division of Reproductive Health

   Farrell summarized the July 9th meeting between CDC site visitors from the Division of Reproductive Health and the LIHF program. The visit was successful and may lead to future collaborations between the LIHF program and the CDC.

   c. Expiration of OAC membership terms

Four members have terms expiring in October 2014: Doug Mormann, Katherine Marks, Susan Goelzer, and Cindy Haq. Mormann and Goelzer will be leaving the committee while Marks and Haq have agreed to be reappointed. This leaves one public member vacancy and one faculty vacancy. The call for public member nominations is in place and nominations are due in early August. A recommendation for the
public member appointment will be made by the nominating committee consisting of Marks, Nycz, Taylor and Zabawa. Dean Golden will recommend an appointment for the faculty position. Both the public and faculty member appointments will be made by the Board of Regents.

4. Monthly Reports

a. Partnership Education and Research Committee

The Partnership Education and Research Committee met on Monday July 14, 2014. The committee increased the budget for the third year of Advancing Evidence Based Health Policy. Michael Fiore presented his renewal application, Optimized Chronic Care for Smokers: A Comparative Effectiveness Approach. Funding for the renewal application was approved. Marc Drezner presented a progress report on the Institute for Clinical and Translational Research. The 2013 Wisconsin Partnership Program annual report draft was discussed.

5. Strategic Planning Discussion

Pat Alea (Strategic Planner), Cotton, and Knobloch presented on strategic planning. Alea summarized the April 16th OAC strategic retreat and encouraged members to consider their vision for the future and how they will ensure that the OAC reaches that vision. In addition, she summarized the theme and core values discussed at the retreat. Knobloch provided an overview of the new programs being considered based on strategic planning: small opportunity grants, large grants, and the convening model. Taylor inquired about the details of these new initiatives and how they will be funded. Smith indicated that staff continues to work on financial projections to answer that question. Projections will be discussed at a future meeting. Alea also mentioned that the current meeting structure will be reviewed and members will have an opportunity to discuss enhancements.

6. Discussion of Wisconsin Partnership Program 2013 Annual Report

Smith provided an update on development of the 2013 Annual Report. The draft report was posted for public comment and the comments received will be shared with the members prior to the next meeting. Smith asked the members to send in their comments on the annual report as soon as possible so comments can be incorporated into the final draft. In August, the final draft report will be brought to OAC and PERC for approval. Dean Golden will present the report to the Board of Regents in October.

a. Discussion of allocation for public health and health care provider education and research

Remington explained that next month when the annual report is accepted by OAC, the committee will also have their annual vote on the split of funding between OAC and PERC. Currently 65% of the allocation is distributed to PERC and 35% to OAC. Members were encouraged to ask any questions they have about the allocation before the next meeting. Farrell asked about the effectiveness and sustainability of each program (OAC and PERC) and about the difference in leveraging between the two programs. Smith indicated that staff continue to work on updating this information and hope to have updated leveraging totals before the next OAC meeting. However, Mormann noted that leveraging may not be the best way to measure impact of OAC’s community grants. Smith also stated that Rick Moss will send a report on PERC’s work to the OAC members before the next meeting. Following this overview, there were questions and discussion regarding the allocation. Zabawa asked about the number of community grants could be funded if the split changed to 50%, for example. Remington and Nycz both
emphasized that it would be important to look at the opportunity costs for both PERC and OAC if the split changed. Zabawa added that if the split remains the same, work should be done to more clearly communicate to the public how PERC’s support contributes to the public health of Wisconsin.

7. Presentation of Strategic application for “Wisconsin Obesity Prevention Initiative”

Remington reported on PERC’s April 2014 decision to provide $1.5 million annually to the Wisconsin Obesity Prevention Initiative over a period of five years beginning July 2014. As outlined in the Five-Year Plan, this initiative is led by PERC in collaboration with OAC. He introduced Amy Meinen (Family Medicine) and Brian Christens (Human Ecology) who gave a presentation on the upcoming strategic application to OAC for the “Wisconsin Obesity Prevention Initiative.” The presentation highlighted the community engaged collective impact model that will be used and explained the different phases planned for the initiative. The first phase will focus on Marathon and Menominee counties. Expansion of the project to other counties will occur in phase two.

Following the presentation there was time for OAC members to ask questions. Alex Adams, Principal Investigator of the PERC grant, was present by phone to help respond. Haq inquired who the community partners were and how they were selected. Adams responded that Marathon and Menominee counties were chosen because they have shown interest in collective impact and already have a working relationship with the initiative’s leaders. Nycz was interested in how this initiative would tie in with health workforce training and Adams responded that by training communities to use the collective impact model they will be able to apply it to other health issues in their community. Mormann asked if there was enough time to put together this proposal. Adams and Remington were confident that the proposal would be ready because it builds on work that has already been done with two current Wisconsin Partnership Program grants and for a CDC prevention center application.

Remington and Knobloch commented how this proposal will exemplify the Wisconsin Idea and connect with the strategic plan. The OAC will make a decision on the “Wisconsin Obesity Prevention Initiative” application at the September meeting.

8. Lifecourse Initiative for Health Families

a. Presentation of and funding decision on strategic application for “LIHF Regional Program Office”

Cisler presented the “LIHF Regional Program Office” strategic application. He reviewed the history of LIHF grants for the RPO, progress that has been made, and models that will be used to move forward. Following the presentation, Goelzer made a motion to approve funding of this application for the duration of the next five-year plan. Haq seconded this motion and then it was discussed. Nycz discussed the great progress that has been made over the last year and Remington emphasized the importance of having a Regional Program Office. Marks asked Ehrenthal about her thoughts on the work plan, and Ehrenthal indicated that due to her very recent arrival, she is still learning about LIHF and its components and will be sharing her ideas with the program’s leadership. When the discussion concluded, a vote on the motion to approve funding was made. The motion passed with eight affirmative votes and no conflicts were declared. Zabawa was not present for the vote.

b. Funding decision on Beloit LIHF Collaborative Implementation Grant application
Cotton gave an overview of the work completed with the prior grant, the application, and reviewer comments. Mount provided an explanation of the financial considerations for this application. The organization, Community Health Systems, has filed for chapter 11 bankruptcy. Mount explained the additional work that was done in preparation for this decision. Mount and Smith discussed this proposal with UW Legal Affairs and Regent Higgins. The result of these meetings was additional grant conditions to accommodate the additional risk involved. These contingencies are as follows:

1) Award is for one year in amount of $150,000, effective August 1, 2014
2) Monthly invoices with supporting documentation for grant expenditures will be required
3) Expenditures beyond $15,000 in any given month will require prior approval of WPP accountant in consultation with program officer
4) WPP accountant and program officer will conduct quarterly onsite reviews of implementation of project aims
5) Subsequent funding beyond one year will be dependent upon successful review prior to the end of the grant

Remington asked the two representatives from Community Health Systems, Claude Gilmore, COO, and Richard Perry, CEO, to comment on the proposal and accompanying contingencies. They indicated awareness of the ongoing discussions and their organization is supportive of the conditions and contingencies accompanying the grant. Gilmore emphasized that he is passionate about this work and expressed appreciation for the effort that has been made to ensure that this work can continue.

A motion to approve the proposal and contingencies was made by Farrell and seconded by Marks. During discussion of the motion Marks asked about the final contingency, specifically when does the review that will be used to decide on subsequent funding begin. Remington responded that the review must occur prior to the end of the first year so that the subsequent funding decision can be made before current funding would expire. He clarified the grant will be reviewed during the year so a clear assessment of progress has been made before the funding expires. Finally, Nycz emphasized the difficulties that can occur with health centers and explained that many centers that go through bankruptcy come out stronger. He thanked everyone for the preparation that was done so that the OAC would be able to support the proposal. The motion passed with seven affirmative votes and no conflicts were declared. Zabawa and Goelzer were not present for vote.

Adjourn – Next meeting August 20, 2014

Remington adjourned the meeting at 4:00 p.m.

Recorder, Amanda Price
Secretary, Ken Taylor