

**Wisconsin Partnership Program**  
University of Wisconsin School of Medicine and Public Health

# Partnerships for a Healthy Wisconsin

**2008 ANNUAL REPORT**



education



research



community



health



University of Wisconsin  
**SCHOOL OF MEDICINE  
AND PUBLIC HEALTH**



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## A Message from the Dean

The Wisconsin Partnership Program (WPP) concluded its fifth year in 2008. From all perspectives, its efforts have been incredibly successful. In its first five years, the WPP has awarded nearly \$70 million, through 180 initiatives, to faculty, nonprofit organizations, and government agencies. The WPP's impact has been notable—both to the people and programs supported by its grants, and to our transformation into a School of Medicine and Public Health.

My optimism about the future impact of the WPP is unwavering, despite the economic crisis our country has been facing. While we saw a marked decline in the value of the WPP's endowment by the end of 2008, because of the good stewardship of the UW Foundation, the decline has been less severe than that experienced by endowments at other institutions. Wise decision-making by the two governance committees of the WPP, combined with thoughtful strategic planning, will enable the Program to continue to push forward with an innovative agenda.

During 2008 the WPP awarded 13 new grants, totaling \$7,381,345, through the Medical Education and Research Committee (MERC). (See page 12.) Six grants were approved later in the year by the Oversight and Advisory Committee (OAC). By the end of 2008, the OAC opted to delay its decision on funding the six new grants pending a comprehensive financial assessment in the summer of 2009. Such decisions, as difficult as they are, illustrate the WPP's commitment to maintain the long-term strength and viability of the endowment. This approach will assure the availability of this resource in perpetuity to support a healthier Wisconsin for all.

Even though the OAC faced difficult financial choices, it wisely decided to move ahead with its support of the Healthy Birth Outcomes Initiative. In partnership with community organizations, this initiative will address the alarmingly high infant mortality rates among African American communities in Milwaukee, Racine, Kenosha, and Beloit.

The OAC launched this initiative by hosting the Wingspread Conference, entitled the Wisconsin Infant Mortality Summit, where national and state experts brought ideas and plans to the table. This was followed by the establishment of a steering committee co-chaired by two OAC members, Lorraine Lathen, MA, community health consultant and Executive Director of Jump at the Sun Consultants, Inc., and Philip Farrell, MD, PhD, former Dean of the UW School of Medicine and Public Health (UW SMPH) and Professor of Pediatrics and Population Health Sciences.

This Healthy Birth Outcomes Initiative is a high-priority project. I hope it will be the first in a series of focused efforts to significantly improve health in Wisconsin. Such efforts will provide countless opportunities for the OAC and MERC to join forces to address Wisconsin's challenging public health

issues. This program exemplifies the concept of "Partnership" that is both desirable and essential to the WPP's success.

*"The WPP's impact has been notable—both to the people and programs supported by its grants, and to our transformation into a School of Medicine and Public Health."*

Another important effort in 2008 was the collaborative work of both committees to produce the WPP's *Measuring Our Progress* evaluation report, a blueprint for measuring both progress and impact. This required analyzing input from more than 60 in-depth interviews with stakeholders and academic partners, as well as analyzing the results from a public survey with over 560 responses. This work was particularly valuable to the creation of the *2009-2014 Five-Year Plan*. It required considerable commitment from both committees, and in the end it led to a solid vision of making Wisconsin a healthier state for all.

We are beginning to see tangible evidence of the WPP's support leveraging external funding. To give just one example, the Geriatrics Section of the Department of Medicine recently received \$6.9 million from the National Institutes of Health (NIH) to create an Alzheimer's Disease Research Center. Earlier WPP grants for Alzheimer's disease—first in 2004 and later in 2008—helped build the research infrastructure that contributed to the success in competing for NIH funding. Other UW SMPH faculty, whose prior awards from the MERC funded initial research and education efforts, also received external funding: an additional \$3 million in 2008 alone, for a total of over \$5 million since 2004. In addition, the community-academic partnerships supported by the OAC leveraged \$5 million in additional funding in 2008, for a total of over \$22 million since 2004.

Another major milestone in the transformation of the School is the selection of Patrick Remington, MD, MPH, to become the first Associate Dean for Public Health. In his new role, he fulfills a mission central to the WPP and the UW SMPH: fully integrating public health and medicine. His background in the practice of public health and in academic medicine, coupled with his outstanding reputation in Wisconsin's public health community, will serve us well.

We spent our first five years establishing the WPP's foundation. In the second five years, our goal is to build upon the WPP's most successful efforts. In so doing, we will strategically focus investments in areas that will result in the greatest improvements in health and the reduction of health disparities in Wisconsin.

### **Robert N. Golden, MD**

*Robert Turell Professor in Medical Leadership  
Dean, UW School of Medicine and Public Health*

## Introduction

The UW School of Medicine and Public Health (UW SMPH), in coordination with the Oversight and Advisory Committee (OAC) and the Medical Education and Research Committee (MERC), is pleased to present the 2008 annual report of the Wisconsin Partnership Program (WPP)—representing the successful conclusion of the first *Five-Year Plan*.

Covering activities and expenditures from January 1, 2008, through December 31, 2008, the annual report was prepared in accordance with the *Insurance Commissioner’s Order*, the *Agreement\**, and the *2004-2009 Five-Year Plan*, all of which were created to guide the distribution of the funds resulting from Blue Cross and Blue Shield United of Wisconsin’s conversion to a for-profit corporation.

During 2008, the WPP, through its two governance committees, the OAC and the MERC, devoted significant time and effort to the development of the *2009-2014 Five-Year Plan*. Simultaneously, the WPP also assessed its past accomplishments through the development of an evaluation report, *Measuring Our Progress*. As a companion piece to the new *Five-Year Plan*, the evaluation report included recommendations, which set the direction and objectives of the WPP going forward.

Unfortunately, the Program’s grant-making activities were constrained during the last quarter of 2008 as it became apparent that the economic downturn had significantly affected the value of the WPP’s endowment. Consequently, the WPP was faced with the difficult decision of how best to manage its endowment in a period of declining resources. Nevertheless, the WPP is optimistic that, through prudent financial management, the Program will achieve the full implementation of the new *Five-Year Plan*, although at a slower pace than originally anticipated.

Through the development of the new *Five-Year Plan*, the WPP renewed its mission and vision to serve the public health needs of Wisconsin and to reduce disparities through research, education, and community partnerships—thus making Wisconsin a healthier state for all.

## Governing Committees

The WPP fulfills its charge through the work of two governing committees, the OAC and the MERC.

The primary responsibilities of the OAC are to:

- Direct and approve 35% of the available funds for Public Health Initiatives.
- Provide public representation through the OAC’s four community health advocates.
- Comment and advise on the MERC’s expenditures.

The primary responsibility of the MERC is to:

- Direct and approve 65% of the available funds for Medical Education and Research Initiatives that advance population health in Wisconsin.

Both committees are guided by their stewardship responsibility and by the Program’s mission and vision. For detailed information about the WPP, please visit the program’s Web site at [wphf.med.wisc.edu](http://wphf.med.wisc.edu).

*\*Also known as the Agreement between the Wisconsin United for Health Foundation, Inc. (WUHF), the University of Wisconsin Foundation, and the University of Wisconsin System Board of Regents.*

## Members of the Oversight and Advisory Committee (OAC)

The OAC is a nine-member committee with four community members, four representatives of the UW SMPH, and an appointee of the Insurance Commissioner.

The Executive Committee carries out functions delegated by the OAC, such as discussing or reviewing grants and making recommendations to the OAC. The Public Health Education and Training (PHET) Subcommittee provides advice and recommendations to the OAC regarding public health education and training programs.

### Health Advocate Appointees

#### Lorraine Lathen, MA, Secretary

Executive Director, Jump at the Sun Consultants, Inc.  
*Advocacy Category:* Women’s Health

#### Douglas N. Mormann, MS, Vice Chair

Health Officer, La Crosse County Health Department  
*Advocate Category:* Statewide Health Care

#### Gregory Nycz

Executive Director, Family Health Center of Marshfield, Inc.;  
Director, Health Policy, Marshfield Clinic  
*Advocacy Category:* Rural Health

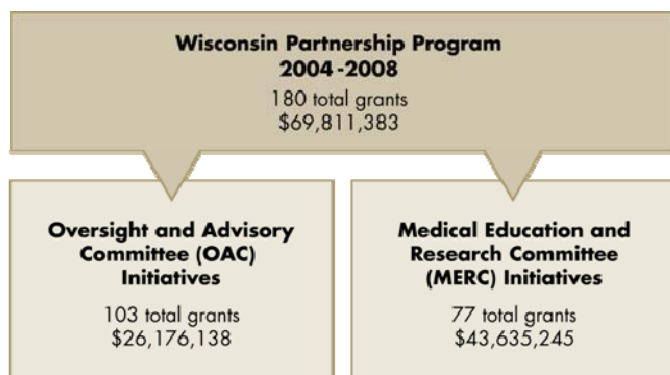


Figure 1: Wisconsin Partnership Program Organization and Funding Distribution, 2004-2008



**June Martin Perry, MS** (resigned October 2008)  
President, Access to Success in Nonprofit Management and Succession Planning  
*Advocacy Category:* Urban / Community Health

### Insurance Commissioner's Appointee

**Martha E. Gaines, JD, LLM**  
Director, Center for Patient Partnerships; Clinical Professor of Law, UW Law School

### UW School of Medicine and Public Health

#### Appointees

**Philip M. Farrell, MD, PhD**  
Professor, Departments of Pediatrics and Population Health Sciences, UW SMPH

**Michael Fleming, MD, MPH** (resigned June 2008)  
Professor, Department of Family Medicine, UW SMPH

**Valerie J. Gilchrist, MD** (appointed August 2008)  
Professor and Chair, Department of Family Medicine, UW SMPH

**Susan L. Goelzer, MD, MS, CPE, Chair**  
Professor, Departments of Anesthesiology and Population Health Sciences, UW SMPH

**David A. Kindig, MD, PhD**  
Professor Emeritus, Department of Population Health Sciences, UW SMPH

#### OAC Executive Subcommittee

**Susan L. Goelzer, MD, MS, CPE, Chair**  
**Douglas N. Mormann, MS, Vice Chair**  
**Lorraine Lathen, MA, Secretary**  
**June Martin Perry, MS**

#### Public Health Education and Training (PHET) Subcommittee

**Kristin Hill, MSHSA**  
Director, Great Lakes EpiCenter, Great Lakes Inter-Tribal Council, Inc.

**Jan Klawitter**  
Public Affairs Manager, Wisconsin State Laboratory of Hygiene; Board Member, Wisconsin Public Health Association

**Lorraine Lathen, MA**  
Executive Director, Jump at the Sun Consultants, Inc.

**Nancy McKenney, RDH, MS**  
Director, Workforce Development, Division of Public Health, Wisconsin Department of Health Services

**George C. Mejicano, MD, MS (Ex Officio)**  
Associate Dean, Continuing Professional Development; Director, Office of Continuing Professional Development in Medicine and Public Health

**Douglas N. Mormann, MS, Chair**  
Health Officer, La Crosse County Health Department

**Martin Schaller, MS**  
Executive Director, Northeastern Wisconsin Area Health Education Center

**Lora Taylor de Oliveira, MPH, MBA, RD**  
Director, Partnerships for Healthy Milwaukee, UW-Milwaukee College of Health Sciences

**Pa Vang, MUP**  
Program Manager, Center for Urban Community Development, School of Continuing Education, UW-Milwaukee

### Members of the Medical Education and Research Committee (MERC)

The membership of the MERC is broadly representative of the faculty, staff, and leadership of the UW SMPH, and also includes representatives from the OAC. The MERC Executive Subcommittee offers advice and comment on proposals and policy to the full committee.

#### Leaders of Focus Areas of Excellence

**Cynthia Czajkowski, PhD**  
Professor, Department of Physiology, UW SMPH  
*Focus Area:* Emerging Opportunities in Biomedicine and Population Health

**Richard Moss, PhD**  
Professor and Chair, Department of Physiology, UW SMPH  
*Focus Area:* Disease Genomics and Regenerative Medicine

**Javier Nieto, MD, PhD, MPH**  
Professor and Chair, Department of Population Health Sciences, UW SMPH  
*Focus Area:* Wisconsin Population Health Research Network

**Susan Skochelak, MD, MPH**  
Professor, Department of Family Medicine; Senior Associate Dean for Academic Affairs, UW SMPH  
*Focus Area:* Innovations in Medical Education

**George Wilding, MD, MS**  
Professor, Department of Medicine; Director, UW Paul P. Carbone Comprehensive Cancer Center, UW SMPH  
*Focus Area:* Molecular Medicine and Bioinformatics



## UW School of Medicine and Public Health

### Administrators

#### Paul DeLuca, PhD, Chair

Professor, Department of Medical Physics; Vice Dean; Associate Dean for Research and Graduate Studies, UW SMPH

#### Jeffrey Grossman, MD, Vice Chair

Professor, Department of Medicine; Senior Associate Dean for Clinical Affairs, UW SMPH; President and CEO, UW Medical Foundation

#### Gordon Ridley

Senior Associate Dean for Administration and Finance, UW SMPH

#### Jeffrey Stearns, MD

Professor, Department of Family Medicine, UW SMPH; Associate Dean, Medical Education, Milwaukee Clinical Campus, UW SMPH; Director, Medical Education, Aurora Health Care

### Basic Science Chairs

#### Norman Drinkwater, PhD

Professor, Department of Oncology, UW SMPH

#### Rodney Welch, PhD

Professor and Chair, Department of Medical Microbiology and Immunology, UW SMPH

### Clinical Chairs

#### William Busse, MD

Professor and Chair, Department of Medicine, UW SMPH

#### Thomas Grist, MD

Professor and Chair, Department of Radiology, UW SMPH

### Faculty with Population Health Experience

#### Cindy Haq, MD

Professor, Departments of Family Medicine and Population Health Sciences, UW SMPH

#### Patrick Remington, MD, MPH

Professor, Department of Population Health Sciences; Director, UW Population Health Institute; Faculty Director, MPH Program, UW SMPH

### Faculty at Large

#### Sanjay Asthana, MD

Professor, Department of Medicine, UW SMPH

#### Molly Carnes, MD, MS

Professor, Department of Medicine, UW SMPH; Director, UW Center for Women's Health

### Academic Staff

#### Mary Beth Plane, PhD

Senior Scientist, Department of Family Medicine, UW SMPH

### Oversight and Advisory Committee (OAC)

#### Appointees

#### Susan L. Goelzer, MD, MS, CPE

Professor, Departments of Anesthesiology and Population Health Sciences, UW SMPH

#### Greg Nycz

Executive Director, Family Health Center of Marshfield, Inc.; Director, Health Policy, Marshfield Clinic

### MERC Executive Subcommittee

#### Paul DeLuca, PhD, Chair

#### Jeffrey Grossman, MD, Vice Chair

#### William Busse, MD

#### Norman Drinkwater, PhD

#### Susan L. Goelzer, MD, MS, CPE (Ex-Officio)

#### Cindy Haq, MD

#### Patrick Remington, MD, MPH

#### George Wilding, MD, MS

### Wisconsin Partnership Program Staff

Eileen Smith, Assistant Dean and Director

Cathy Frey, Associate Director

Christine Blakey, Administrative Assistant

Tonya Mathison, Administrative Manager

Shannon Sparks, Program Officer

Karla Thompson, Accountant

### Board of Regents Liaison

#### Roger E. Axtell

Regent Emeritus and Liaison to the Wisconsin Partnership Program, UW System Board of Regents



## Diversity Policy

The WPP is subject to and complies with the diversity and equal opportunity policies of the Board of Regents of the University of Wisconsin System and UW-Madison. The OAC and MERC developed a policy to ensure diversity within the programmatic goals and objectives of the WPP. The policy emphasizes the importance of a broad perspective and representation for the Program's goals, objectives, and processes.

The commitment to diversity is integral to the WPP's mission to serve the public health needs of Wisconsin and to reduce health disparities through initiatives in research, education, and community partnerships—thus making Wisconsin a healthier state for all. A broad perspective helps the WPP understand the most effective means to address population health issues and to improve the health of the public. The policy is available on the WPP's Web site, [wphf.med.wisc.edu](http://wphf.med.wisc.edu).

## Open Meetings and Public Records Laws

The WPP conducts its operations and processes in accordance with the State of Wisconsin's Open Meetings and Public Records laws. Meetings of the OAC, the MERC, and their respective subcommittees are open to the public, in accordance with the law. Agendas, minutes, and approved documents are posted on the WPP's Web site, [wphf.med.wisc.edu](http://wphf.med.wisc.edu).



## Oversight and Advisory Committee (OAC) Initiatives

The Oversight and Advisory Committee (OAC) provides public representation and direction to the Wisconsin Partnership Program (WPP) on the funding of public health initiatives.

The OAC funds three categories of initiatives:

- Community-Academic Partnership Fund (CAPF) (below).
- Public Health Education and Training Initiatives (page 9).
- Healthy Birth Outcomes Initiative (page 10).

### Year in Brief

Since its inception in 2004, the OAC has awarded a total of \$26,176,138 to support 103 community-academic partnerships. Twenty-four of these funded projects concluded in 2008 (see the Appendix).

Two of the OAC's Public Health Education and Training (PHET) Initiatives awarded in 2004 also entered their final year. The Wisconsin Population Health Fellowship Program has recruited 20 fellows to date who have served 14 organizations across the state. Since its inception the Healthy Wisconsin Leadership Institute (HWLI) has delivered continuing education in public health to more than 700 government and private sector professionals. In the *2009-2014 Five-Year Plan*, the OAC committed to continue its support of the HWLI and the Fellowship Program. The committee also awarded supplemental funding to carry these two initiatives through March 2009, the end of the first *Five-Year Plan*.

There were several changes to the composition of the OAC throughout the year. Michael Fleming, MD, MPH, who had served as UW School of Medicine and Public Health (UW SMPH) appointee since 2006, stepped down from his position on the OAC in June 2008. June Martin Perry, MS, who had served as Health Advocate appointee since 2006, stepped down from her position in October 2008.

Joining the committee in 2008 was Valerie Gilchrist, MD, Professor and Chair of the Department of Family Medicine, UW SMPH. As chair of one of the largest departments of Family Medicine in the country, Dr. Gilchrist provides leadership to more than 700 faculty, residents, and staff across Wisconsin. Dr. Gilchrist is uniquely qualified to serve on the OAC with her experience as a family physician focusing on public and community health as well as her extensive experience as a leader in academic medicine.

The OAC invested significant time during 2008 in developing the *2009-2014 Five-Year Plan*. OAC members opened the year with a strategic planning session and for several months

continued in-depth discussions on the most effective means to enhance its stewardship responsibility, to strengthen established programs, and to identify collaborative opportunities with the Medical Education and Research Committee. The new *Five-Year Plan* reaffirms the OAC's commitment to the partnership model and maximizes health improvement by adding: (1) a sustainability grant category and (2) program-defined targeted funding initiatives that support the WPP's strategic goals.

The committee's first targeted funding initiative, the Healthy Birth Outcomes Initiative, gained significant momentum during the year. OAC members reviewed the commissioned white paper *Elimination of Racial and Ethnic Disparities in Birth Outcomes in Wisconsin* prepared by Richard Aronson, MD, MPH, which outlined a plan of action for the OAC. This report provided the basis for the Wisconsin Infant Mortality Summit, sponsored by the Johnson Foundation and co-sponsored by the UW SMPH, which took place in May. This summit successfully convened state and national experts to discuss infant mortality and created a coalition of partners to support an action plan for improving birth outcomes in Wisconsin.

Building upon this momentum, the OAC worked expeditiously to develop a work plan for the Healthy Birth Outcomes Initiative. Moreover, the committee pledged to commit up to \$10 million for the initiative over the next five years. OAC members Philip Farrell, MD, PhD, and Lorraine Lathen, MA, agreed to serve as co-chairs of the newly created Healthy Birth Outcomes Steering Committee, along with an additional 15 highly qualified committee members. (For more information on the Healthy Birth Outcomes Initiative, see page 10.)

Toward the end of the year, as the OAC was in the final stages of reviewing applications for the Community-Academic Partnership Fund (CAPF), the full impact of the economic crisis on the WPP's endowment became apparent. The OAC decided to approve but not immediately fund six CAPF applications. Members also began discussing budget reductions for ongoing CAPF grants. The OAC will reassess the availability of funding for the six approved 2008 applications in June 2009.

### Community-Academic Partnership Fund (CAPF)

The Community-Academic Partnership Fund (CAPF) fosters partnerships between community-based organizations and UW SMPH faculty and staff, combining the strengths and skills of each partner. The premise of the program is that health issues in community settings can benefit from a collaborative approach to formulating local solutions.



## Initiatives

The CAPF administers two types of grants:

- **Collaboration Development Grants** support small implementation programs, development or evaluation activities, community-needs assessment, capacity building initiatives, partnership development and pilot or feasibility projects. (Maximum grant amount of \$67,000.)
- **Collaboration Implementation Grants** fund more expansive population and public health projects that address priority health issues. (Maximum grant amount of \$475,000.)

## Training and Technical Assistance

The OAC uses a standard, competitive Request for Partnerships (RfP) process. Training and technical assistance are available to ensure the greatest potential for success in developing and submitting proposals. In addition to the grant writing resources available on the WPP's Web site, WPP staff assist with capacity building. They also provide a connection between those in communities and in academic settings who share a common commitment to specific health issues.

## Multi-Step Review

All CAPF grant applications undergo a uniform review, including (1) a technical review verifying eligibility and compliance with proposal requirements, (2) an external review consisting of independent and anonymous assessment and scoring by faculty and expert reviewers, and (3) a full committee review by the OAC of top-ranked proposals. As noted previously, the OAC in 2008 concluded its review of applications and decided to approve but not immediately fund six projects. Funding decisions will be made in June 2009.

## Grant Monitoring

Funded partnerships are required to provide regular financial and progress updates which are reviewed by Program staff and reported to the OAC quarterly. Staff also conduct site visits of active grants.

## Grant Outcomes

The 24 community-academic partnership grants that concluded in 2008 are listed below. The concluded projects are summarized on page 8, and detailed outcome reports on each project are available in the Appendix.

### Implementation Grants:

- *Allied Drive Early Childhood Initiative*, Dane County Department of Human Services
- *At-Risk Adolescent Health Outreach, Prevention, and Services Collaborative Program*, Access Community Health Centers, Inc.

- *Beyond Lip Service: Integrating Oral Health into Public Health*, Division of Public Health, Wisconsin Department of Health Services
- *Breaking the Barriers to Health Care & Domestic Violence Prevention for Latino/Hispanic Immigrants*, UNIDOS Against Domestic Violence, Inc.
- *Co-op Care*, Wisconsin Federation of Cooperatives
- *First Breath: Enhancing Services to Healthcare Providers and Clients*, Wisconsin Women's Health Foundation, Inc.
- *Healthy and Active Lifestyles for Children and Youth with Disabilities: A Comprehensive Community-Based Partnership*, School District of La Crosse
- *Healthy Children, Strong Families*, Great Lakes Inter-Tribal Council Inc.
- *Milwaukee Homicide Review Commission*, Milwaukee Police Department
- *PeriData: A Rural/Urban Information Network*, Wisconsin Association for Perinatal Care
- *Safe Mom, Safe Baby: A Collaborative Model of Care for Pregnant Women Experiencing Intimate Partner Violence*, Aurora Sinai Medical Center
- *The Milwaukee Birthing Project: Improving Birth Outcomes for Mothers and Children*, Milwaukee Birthing Project

### Development Grants:

- *Childhood Obesity Wellness Campaign*, Jefferson County Health Department
- *Development of a Wisconsin Public Health Laboratory Network*, Madison Department of Public Health
- *Family Teaming to Improve Health Outcomes in Youth*, Aurora Family Service
- *Fit Kids, Fit Cities*, Wisconsin Sports Development Corporation
- *Fluoridation for Healthy Communities*, Coulecap, Inc.
- *Green City, Active People*, Center for Resilient Cities
- *Health Care Task Force on Pre- and Inter-Conception Care: Optimizing Women's Health and Increasing Access to Primary and Preventive Health Services*, Aurora Women's Health Services
- *Increasing Breastfeeding Rates in Milwaukee County*, Milwaukee County Breastfeeding Coalition
- *Noj Zoo, Nyob Zoo (Eat Well, Live Well) – A Hmong Community Health Promoter Project*, Hmong American Women's Association, Inc.
- *Northern Wisconsin Child and Adolescent Psychiatry Access Project (CAPAP)*, St. Mary's Hospital
- *Planning a Multicultural Women's Education Program to Eliminate the Stigma of Depression*, Wisconsin United for Mental Health
- *Preventing Substance Abuse Among LGBTQ Youth in Wisconsin*, Diverse and Resilient, Inc.



## Summary of Community-Academic Partnership Grant Awards that Concluded in 2008

<b>Program Type</b>		<b>Baseline Progress in State Health Plan Objectives</b>	
■ Implementation .....	12	■ Yes .....	6
■ Development .....	12	■ Not measured .....	18
<b>Grant Duration</b>		<b>Measured in the Following Areas</b>	
■ 12-24 months .....	11	■ Access to primary and preventive health services .....	4
■ 25-36 months .....	6	■ Intentional and unintentional injuries and violence .....	1
■ > 36 months .....	7	■ Tobacco use and exposure .....	1
<b>Grant Expenditures</b>		<b>Academic Partner Role</b>	
■ < 75% .....	2	■ Clinical services in community settings .....	1
■ 75-99% .....	15	■ Community-based research or evaluation .....	4
■ 100% .....	7	■ Community or social advocacy .....	2
<b>Use of Funds</b>		■ Consultation/technical assistance .....	13
■ Coalition development .....	2	■ Data collection/analysis .....	1
■ Data/information systems .....	2	■ Development of materials, curricula, survey or evaluation instruments, training manuals, clinical care tools, dissemination tools .....	3
■ Direct client services .....	1	<b>Total Funds Awarded</b> <b>\$ 2,171,303</b>	
■ Evidence-based program .....	8	<b>Total Matching Funds</b> <b>\$ 2,194,000</b>	
■ Health education .....	1	<b>Additional Funding Leveraged</b> <b>\$ 5,020,000</b>	
■ Implementation of national program model .....	1	<b>Dissemination</b>	
■ Needs assessment/plan .....	4	■ Abstracts/poster sessions .....	4
■ New partnership alliance .....	1	■ Publications/presentations to policy makers, media, or public .....	16
■ Pilot program .....	4	■ Scholarly presentations .....	7
■ Public advocacy and policy .....	1	■ Scholarly publications .....	4
■ Workforce training .....	1	■ Training materials .....	1
<b>Results/Outcomes</b>		<b>Sustained Project</b>	
■ Adoption of evidence-based practices .....	3	■ Yes .....	17
■ Community action plan .....	1	■ No, seeking funding .....	7
■ Curriculum and training materials .....	2		
■ Implementation plan .....	2		
■ New interventions implemented .....	9		
■ Organization formed .....	1		
■ Policies enacted and implemented .....	3		
■ Quality improvement program .....	2		
■ Research/data report .....	2		



## Public Health Education and Training Initiatives

The Public Health Education and Training (PHET) Subcommittee offers advice and recommendations to the OAC in supporting education and training opportunities for Wisconsin's public health professionals and the broad public health workforce to ensure a sufficient and competent workforce. The subcommittee works closely with the Wisconsin Public Health Association, the Wisconsin Department of Health Services, and other public health education programs.

The PHET Subcommittee continues to be guided by four goals: (1) seek engagement from the broad public health workforce, (2) collaborate with the UW SMPH Office of Continuing Professional Development in Medicine and Public Health, the Medical College of Wisconsin, and other educational institutions, (3) develop programs in collaboration with community partners, and (4) review proposals and make recommendations as needed.

### Initiatives and Outcomes

Three training programs are currently under way: the Wisconsin Population Health Fellowship Program, the Healthy Wisconsin Leadership Institute (HWLI), and Continuing Public Health Education. The Fellowship Program and HWLI, originally awarded in 2004, were both awarded supplemental funding in June 2008 for support through the end of the *2004-2009 Five-Year Plan*. The Fellowship Program received \$445,156 for the period July 1, 2008, to March 31, 2009. HWLI received \$118,546 for the period October 1, 2008, to March 31, 2009.

#### Wisconsin Population Health Fellowship Program

The Wisconsin Population Health Fellowship Program is an intensive two-year service-learning program for MS, MPH, or PhD graduates in public health or allied sciences. Its goal is to develop the next generation of public health practitioners who are skilled in planning, implementing, and evaluating public health programs. The third cohort of fellows graduated in 2008, and the program continues to facilitate retention of recent graduates within the Wisconsin public health workforce.

The Fellowship Program has the following outcomes:

- To date, the program has enrolled 20 fellows, and four of the 11 who completed the program have been employed in Wisconsin.
- Fellows in the program are intensively working with community organizations and contributing to public health in numerous ways. For example, fellows are engaged in projects aimed at:
  - Improvements in perinatal Hepatitis B vaccination and follow-up.
  - Analysis of public financing for public health.
  - Reducing STDs and teen pregnancy among African American youth.

- Quality improvement plans for local health departments.
- Nutrition and physical fitness.

#### Healthy Wisconsin Leadership Institute (HWLI)

The HWLI is an education and training resource supported by the UW SMPH and the Medical College of Wisconsin. Program components include the following:

**Community Teams** – Annually teams from around the state receive public health and collaborative leadership training during this one-year program as they mobilize their communities to address local health issues. The seven teams in the 2008 cohort are working on a range of issues including physical activity and nutrition, underage drinking, improving birth outcomes, and increasing access to mental health care.

**Health Policy and Lifelong Learning and Mentoring** – HWLI made the decision during 2008 to merge the Health Policy and the Lifelong Learning and Mentoring programs. Programming in 2008 included sessions on conflict management and collaborative leadership training.

The HWLI has the following outcomes:

- To date, there have been more than 700 participants in HWLI programs focused on improvements in public health practice.
- The second cohort completed the Community Teams program in 2008 and the 35 participants continue to work on their community health priorities. The third cohort is on track to complete the program in 2009.
- Distance modules in community health improvement, social marketing, and grant writing basics are helping to meet the needs of the broader public health workforce.

#### Continuing Public Health Education

As part of the UW SMPH, the Office of Continuing Professional Development in Medicine and Public Health (OCPD) focuses on education of the public health workforce.

A number of OCPD outreach efforts are ongoing:

- Collaborating with the Wisconsin Department of Health Services to compile a public health education inventory.
- Developing the learning concierge/educational counselor plan to facilitate professional development of the public health workforce.
- Providing logistical, technical, and educational support for continuing public health learning activities offered by HWLI.

Among 2008 outcomes, the OCPD:

- Conducted usability testing for TRAIN, a web-based learning management tool for public health professionals.
- Completed a scenario-based learner assessment plan in conjunction with the National Public Health Foundation



## Healthy Birth Outcomes Initiative

In 2008, the OAC committed up to \$10 million over a five-year period to launch a long-term initiative to reduce infant deaths and birth outcome disparities for Wisconsin's African American women. This effort, called the Healthy Birth Outcomes Initiative, is the WPP's largest initiative since the Program's inception.

Data from the past several decades reveals that, relative to other states, Wisconsin's ranking based on African American infant mortality has fallen from among the best rates in the country to the worst. Earlier this decade, an African American baby born in Beloit, Kenosha, Milwaukee, or Racine had worse odds for survival than a baby born in Sri Lanka or Central America.

The initiative's goals include: (1) improving conditions that support healthy birth outcomes for African American women and (2) decreasing racial and ethnic health disparities in birth outcomes. To ensure broad-based support and implementation, the initiative is a joint project of UW SMPH faculty, other academic and community partners, and health experts at the state, county, and city levels.

In May, the OAC hosted the Wisconsin Infant Mortality Summit. Participants, who represented a broad range of public health expertise, created a framework for a strategic action plan and identified seven key priorities to help ensure success. As one of the first steps in implementing the plan, the WPP has become a key player in widespread public education and awareness efforts, which continue in 2009 and beyond.

The OAC also formed a 15-member Healthy Birth Outcomes Steering Committee chaired by Philip Farrell, MD, PhD, Professor of Pediatrics and Population Health Sciences, and

Lorraine Lathen, MA, Executive Director of Jump at the Sun Consultants, Inc. The Steering Committee consists of experts in maternal and child health related fields, experts in the health care provider and payer communities, and leaders in the targeted communities. Drawing on the combined expertise of the members and collaborating partners, the Steering Committee provides leadership and acts as a catalyst to generate public awareness and financial support for the initiative.

Through a request for proposal process, the Steering Committee plans to release funds for targeted communities in southeastern Wisconsin to define the scope of their problem, create broad links with community stakeholders, and design comprehensive community-wide plans. A key strategy is to maximize cooperation and coordination of efforts among diverse agencies and stakeholders.

Communities can receive implementation funds for an array of projects. Extending beyond traditional health promotion and disease prevention, these projects will emphasize improved access to high-quality health care, educational programs, and outreach interventions.

In addition, the Steering Committee has established a strong collaborative relationship with the Wisconsin Department of Health Services. By aligning the initiative with broader statewide efforts—and by taking to scale successful but largely under-funded services to improve the health of African American women—the WPP is seeking a significant reduction in preventable infant deaths within five to ten years.

The WPP will continue to provide long-term support for this initiative as a means of both addressing Wisconsin's health disparities and improving survival for the state's African American newborns.



Healthy Birth Outcomes Steering Committee

Left to right: Top row: Philip Farrell, Lorraine Lathen, Murray Katcher, Georgia Cameron, Ron Cisler  
Bottom row: Tito L. Izard, Katherine Marks, Betty Stinson, Gwendolyn M. Perry-Brye  
Members not photographed: C.C. Henderson, Sheri Johnson, Marilyn Kilgore, Tina Mason, Stephen C. Ragatz, Laurel Rice, Bill Solberg



## Medical Education and Research Committee (MERC) Initiatives

The Medical Education and Research Committee (MERC) allocates funds to faculty for innovative education and research initiatives directed toward health promotion, disease prevention, and the diagnosis and treatment of disease. The MERC is committed to supporting a balanced portfolio of basic, clinical, translational, and applied public health research and education initiatives. Underlying the committee's work is the resolve to advance the transformation to a fully integrated School of Medicine and Public Health.

The MERC allocates two-thirds of the available funding to the following:

- Targeted Programs, which are a core focus of the MERC.
- Competitive Programs—which include the New Investigator Program and the Collaborative Health Sciences Program—awarded through a Request for Proposals process.

The remaining one-third of the funding is allocated by the Dean of the UW School of Medicine and Public Health (UW SMPH) to Targeted Strategic Programs responsive to emerging opportunities requiring immediate or short-term action.

The MERC and the Dean of the UW SMPH ensure that awards are in alignment with the overall mission, vision, and guiding principles of the Wisconsin Partnership Program (WPP) and are directed toward advancing population health.

### Year in Brief

The MERC had an active year making awards, developing the *2009-2014 Five-Year Plan*, contributing to the evaluation of the WPP, and reorganizing the committee. There were many occasions for both discussion of future plans and assessment of progress and direction going forward. Because of the unexpected economic downturn, the MERC was also faced with planning for a decline in the value of the Program's endowment.

MERC awards were made early in 2008. So even though the economic outlook worsened toward the end of the year, the MERC was able to award 13 new grants to fund innovative research and education topics. Supplemental funding was also awarded to *Making Wisconsin the Healthiest State* for support through the end of the *2004-2009 Five-Year Plan*. Since its inception in 2004, the committee has allocated more than \$43 million and made a total of 77 awards aimed at benefiting the people of Wisconsin.

The 2008 awards, which included MERC's Targeted and Competitive Programs, ranged widely from reducing infant

mortality disparities in Wisconsin to creating disease-specific stem cell lines. In making these awards the MERC was intent on supporting a balanced portfolio of research and education initiatives that will impact individual and population health. Additionally, 10 grants successfully concluded in 2008 and are summarized on page 16. Many of these concluded grants received external funding to sustain the research and/or produced outcomes that were published in peer-reviewed journals.

The committee also spent considerable time and effort on the development of the new *Five-Year Plan*. After a productive strategic planning session in late 2007, the MERC began 2008 with the formation of three subcommittees focused respectively on research, education, and community engagement. The subcommittees ensured a thorough deliberation of ideas leading to specific recommendations for the plan.

The Community Engagement Subcommittee was of particular significance to the MERC. It emphasized the importance of partnerships and collaborations between the School and communities, as well as the critical role of community engagement in the transformation. The presence of Oversight and Advisory Committee (OAC) members on this subcommittee highlighted the objective of OAC/MERC collaborations as described in the new *Five-Year Plan*.

Simultaneously with the development of the *Five-Year Plan*, the MERC worked with the Evaluation Implementation Subcommittee to assess progress in the WPP's mission of improving the health of the people of the state. This activity, along with gathering feedback from key stakeholders, was helpful in developing the new *Five-Year Plan* and in discussing future priorities and long-term efforts to gauge the WPP's impact on improving health.

Assessment of the committee's structure, composition, and operations to determine its effectiveness and efficiency and to ensure maximum participation was also a high priority. The committee recommended decreasing its size from 20 to 13 members and designating an external member with expertise in public and community health. This reorganization was endorsed by the Dean of the UW SMPH with the expectation that a new committee would be appointed in early 2009.

As the year drew to a close, the impact of the declining value of the WPP's endowment was a central focus of the committee. With the aid of financial projections, the MERC opted to reduce existing grants and to give careful attention to ensuring resources for the reapplications of the core targeted grants scheduled for review during 2009. Emphasis was placed equally on honoring existing obligations to current grantees and on ensuring funding for the implementation of the *2009-2014 Five-Year Plan*, although at a reduced level than originally anticipated.



## Categories of MERC Allocations

**Targeted Programs** – Targeted Programs (page 13) are typically multi-year projects designed to develop new approaches to health and health care issues. Decisions regarding allocation of grants are guided by the committee’s goals and objectives outlined in the *2004-2009 Five-Year Plan* and focus on the following five areas: (1) Innovations in Medical Education, (2) the Wisconsin Population Health Research and Clinical Trials Network, (3) Disease Genomics and Regenerative Medicine, (4) Molecular Medicine and Bioinformatics, and (5) Emerging Opportunities in Biomedicine and Population Health.

**Competitive Programs** – This category encompasses two types of competitive awards (page 14).

- **The New Investigator Program** is available to UW SMPH Assistant Professors. Emphasis is on education or research projects spanning the spectrum of basic, clinical, translational, or population health science and supporting innovative approaches leading to improvements in health. In 2008 funding was awarded to four initiatives from the 25 proposals submitted. (Maximum grant amount of \$90,000.)
- **The Collaborative Health Sciences Program** is available to UW SMPH Professors and Associate Professors, and Senior or Distinguished Scientists. Collaboration across the traditional boundaries of basic science, clinical science, social science, and/or population health science is required. The collaborations may be within the UW SMPH; or they may be with other UW-Madison schools or colleges, UW System campuses, the Medical College of Wisconsin, state agencies, or community organizations. In 2008 the MERC invited 21 full proposals from among 48 submitted preliminary proposals, and it awarded funding to five initiatives. (Maximum grant amount of \$500,000.)

Award Type (2004-2008)	# of Grants	\$ Amount	% of Total
<b>Research</b>			<b>82%</b>
Applied Population Health Research	20	\$10,983,295	25%
Clinical & Translational Research	20	\$16,023,734	37%
Basic Science Research	26	\$ 8,792,372	20%
<b>Education</b>			<b>18%</b>
Medical Education	5	\$ 4,583,510	11%
MPH Program	1	\$ 2,682,977	6%
Continuing Professional Education	5	\$ 569,357	1%
<b>Total</b>	<b>77</b>	<b>\$43,635,245</b>	<b>100%</b>

Table 1: MERC Awards by Type, 2004-2008. This breakdown of the award categories—by research and education—pertains to all MERC grants since 2004. The table demonstrates that significant funding is applied toward research and education projects that bring discovery and the transfer of knowledge to patient care and into communities.

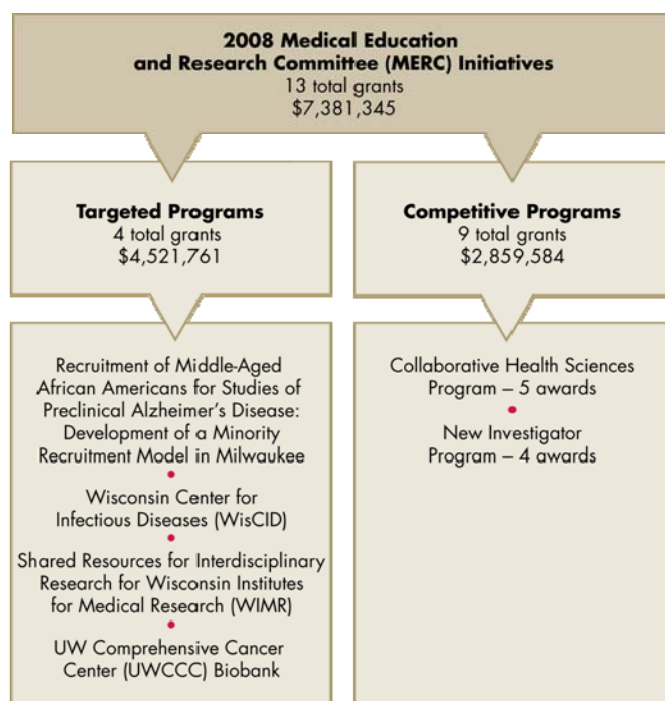


Figure 2: MERC Funding Categories and Awards for 2008



## Multi-Step Review

All MERC grant applications undergo a rigorous review, including (1) a technical review verifying eligibility and compliance with proposal requirements, (2) an external review consisting of independent and anonymous assessment and scoring by faculty and expert reviewers, and (3) a full committee review of top-ranked proposals.

## Grant Monitoring

For those proposals receiving funding, grant monitoring begins with financial and progress reports. The reports are reviewed by the MERC and feedback, if necessary, is provided. In addition, the recipients of awards over \$500,000 are required to make an annual presentation to the MERC highlighting their achievements and progress towards realizing goals. Detailed final reports are submitted at the completion of the project and discussed with MERC.

## Targeted Program Awards in 2008

### Wisconsin Center for Infectious Diseases (WisCID)

Bruce Klein, MD, Professor, Pediatrics, Internal Medicine, and Medical Microbiology and Immunology  
Award: \$1,511,306 over four years

Despite advances made in reducing infectious diseases over the past hundred years, the overuse of antibiotics has driven the evolution of microbes that are resistant to the major antibiotics. The WPP funding will create a Wisconsin Center for Infectious Diseases (WisCID) that will investigate microbiological areas of public health importance and will then translate the research discoveries into preventive measures and novel therapies. The center will be designed to integrate the work of physicians and scientists to more easily apply the tools of microbiology, immunology, and public health when combating infectious and inflammatory disease. WisCID will link its efforts to those of state health professionals and agencies, including the Wisconsin Department of Health Services and the State Laboratory of Hygiene.

### Recruitment of Middle-Aged African Americans for Studies of Preclinical Alzheimer's Disease: Development of a Minority Recruitment Model in Milwaukee

Mark A. Sager, MD, Professor, Department of Medicine  
Award: \$90,000 over one year

This project will design and test interventions to delay or prevent the onset of Alzheimer's disease in at-risk populations. Funding provided by the MERC and its collaborative partners, the Center for Urban Population Health and the UW Institute for Clinical and Translational Research (ICTR), matches a sig-

nificant contribution by the Helen Bader Foundation. The aim of the project is to expand the Wisconsin Registry for Alzheimer's Prevention (WRAP) recruitment and baseline testing to include adult children of African Americans with Alzheimer's disease living in Milwaukee County. WRAP is designed to identify neuropsychological, genetic, and lifestyle markers of incipient Alzheimer's disease in asymptomatic adult children of parents with Alzheimer's disease.

### UW Comprehensive Cancer Center (UWCCC) Biobank

Catherine Leith, MB, BChir, Associate Professor, Department of Pathology and Laboratory Medicine; Director UW CCC Biobank  
Award: \$450,108 over two years

The goal of this project is to establish a global Biobank for the UW SMPH. This will begin with developing a centralized location for collection and storage of human tissues and other human biological material. The UWCCC Biobank will be used as a platform for an expansion that will incorporate samples from non-cancer related programs, such as the Survey of the Health of Wisconsin (SHOW) and the Wisconsin Network for Health Research (WiNHR). Instituting a single Biobank instead of multiple banks provides advantages in terms of specimen quality and accessibility, regulatory issues, and cost. In addition, access to high-quality tissue, blood, and other human biological material is essential to a wide variety of research—from cancer studies to population health.

### Shared Resources for Interdisciplinary Research for Wisconsin Institutes for Medical Research (WIMR)

Robert N. Golden, MD, Robert Turell Professor in Medical Leadership; Dean of UW School of Medicine and Public Health; Vice Chancellor for Medical Affairs, UW-Madison  
Award: \$2,470,347 over two years

WIMR will be the interdisciplinary research platform for the future, giving the UW SMPH the opportunity to implement research from basic discoveries to clinical and population health applications. The MERC's funding supports the first phase of WIMR by providing molecular biology resources and equipment to be shared by investigators, along with ancillary equipment necessary to operate the vivarium. These shared resources and services will help to implement the full capability of interdisciplinary research within WIMR, which is critical to the School's transformation to an integrated school of medicine and public health.



## Competitive Program Awards in 2008

### New Investigator Program

#### **Evaluation of *Cuidándome*: A Communitywide Intervention to Promote Breast and Cervical Cancer Screening among Latinas**

Ana P. Martinez-Donate, PhD, Department of Population Health Sciences

Award: \$90,000 over two years

The Principal Investigator will study the effectiveness of *Cuidándome*, a community program that promotes breast and cervical cancer (BCC) screening among Latinas in Dane County. *Cuidándome* combines small-group education, a media campaign, and cultural-competency training for health care providers. This study will also estimate BCC screening rates among Latinas in Dane County and identify factors that contribute to Latinas' underuse of BCC preventive services. Results will shape future programs, with the goal of reducing BCC cases and deaths in this underserved population.

#### **Genetic and Environmental Predictors of Serum Levels of 25-hydroxyvitamin D**

Corinne D. Engelman, MSPH, PhD, Assistant Professor, Department of Population Health Sciences

Award: \$90,000 over two years

The Principal Investigator will use data from 300 people enrolled as part of the Survey of the Health of Wisconsin (SHOW)—which is also funded by the WPP—to check vitamin D levels of people of different skin colors and from different environments. Vitamin D is critical for health, and low levels in the blood are associated with bone disease, cancer, autoimmune diseases, infectious diseases, and type 2 diabetes. Sunlight absorbed through the skin is an important source of vitamin D, yet there is little data on how skin color and genetics affect levels of vitamin D in the blood.

#### **Computed Tomography (CT) with Reduced Radiation Dose Using Prior Image Constrained Compressed Sensing (PICCS) Reconstruction**

Christopher J. Francois, MD, Assistant Professor, Department of Radiology

Award: \$90,000 over two years

The Principal Investigator will test a technique invented at UW SMPH that could reduce the radiation dose needed for computed tomography (CT) by 90% or more. While CT scans have revolutionized the practice of medicine in the past 40 years, there is growing concern over patients' radiation exposure from these examinations. Since more than 60 million CT scans are performed every year in the United States, the technique could improve health care for many people, especially coronary patients undergoing angiography as well as pediatric patients.

#### **Positron Emission Tomography Imaging of Tumor Angiogenesis**

Weibo Cai, PhD, Assistant Professor, Department of Radiology

Award: \$90,000 over two years

The Principal Investigator aims to create new positron emission tomography (PET) scan markers that will allow radiologists to create personalized therapy to attack tumors. The intention is to create molecular imaging agents that will target a protein important for cancer progression. The new method will help identify patients who can benefit from a particular type of therapy, as well as guide the administration of the right drug at the right time. PET scans will show doctors whether the therapy is effective. This "personalized medicine" approach will also have applications for diseases or events such as heart attack and stroke.

### Collaborative Health Sciences Program

#### **Wisconsin Children's Lead Levels and Educational Outcomes**

Marty Kanarek PhD, MPH, Professor, Department of Population Health Sciences

Award: \$500,000 over three years

Childhood lead poisoning is a key concern: it is estimated that elevations in blood lead for children in Wisconsin are more than twice the national average. The levels commonly seen in Wisconsin are not widely associated with serious health problems, but they may be linked to cognitive and behavioral problems. This study will examine the relation between early childhood lead poisoning and achievement in elementary school. Data from the Wisconsin Childhood Lead Poisoning Prevention Program will be linked to children's scores on the Wisconsin Knowledge and Concepts Examination. This cooperative study, developed by the UW SMPH Department of Population Health Sciences, the Wisconsin Department of Health Services, and the Wisconsin Department of Public Instruction, will serve as the foundation for studies examining the role of environmental exposures on childhood development and well-being.

#### **Reducing Infant Mortality Disparities in Wisconsin**

Gloria Sarto, MD, PhD, Professor Emeritus, Department of Obstetrics and Gynecology

Award: \$500,000 over three years

A new alliance, the Infant Mortality Collaborative (IMC), will investigate the factors in improved birth outcomes over the past several years within Dane County's African American community. In the second stage, the partners will direct the lessons learned toward improving birth outcomes in the African American community in Racine and other areas of Wisconsin that have inordinately high infant mortality rates. The IMC will engage partners within the local African American



communities. By bringing together the diverse strengths of community, government, and academic partners, the IMC aims to reduce infant mortality in Wisconsin. This program is a collaborative effort of UW SMPH faculty and those from the School of Social Work, the LaFollette School of Public Affairs, the Wisconsin Department of Health Services, the Department of Public Health for Madison and Dane County, and the City of Racine Health Department.

### Menominee Smoking Cessation Clinical Trial

Stevens Smith, PhD, Associate Professor, Department of Medicine

Award: \$499,591 over three years

American Indians smoke at a much higher rate—32% nationally and 39% in Wisconsin—compared with the overall population rate of 20%. Smoking is the leading preventable cause of illness and death, but there is very little research into cessation programs for American Indians, who suffer higher rates of smoking-related illnesses. Dr. Stevens Smith and collaborators at the Menominee Indian Tribe of Wisconsin, UW-Milwaukee, and the UW Paul P. Carbone Comprehensive Cancer Center will test standard treatment versus a new smoking cessation treatment tailored for American Indians. This new study will recruit 150 smokers and will offer free smoking cessation medication as well as cessation counseling (either the standard treatment or the enhanced treatment that is tailored to be culturally appropriate). The goal is to learn how best to help Indian people quit smoking, in order to reduce smoking-related illness.

### Closing the Gap on Pediatric Health Disparities: Discerning the Causes and Consequences of Iron Deficiency in Infancy

Pamela Kling, MD, Associate Professor, Department of Pediatrics

Award: \$500,000 over three years

Approximately 5,000 Wisconsin infants become iron-deficient annually. Although treatment is straightforward, there may be permanent health issues—a defect in brain development, or greater long-term risk for high blood pressure or heart disease. Hypothesizing that iron deficiency predisposes a child to genetic changes, the researchers will examine whether this deficiency can be predicted by risk factors during pregnancy or tests of iron status at birth. This partnership team brings together clinical and basic researchers and joins an existing screening program run by the Wisconsin Department of Health Services Maternal and Child Health Program. Newborn screening for iron status could be a cost-effective and minimally invasive public health strategy that prevents iron deficiency and improves both cognitive and health outcomes.

### Patient-Specific Induced Pluripotent Stem Cell Models for Human Disease

Timothy Kamp, MD, PhD, Professor, Department of Medicine

Award: \$499,993 over three years

Co-principal investigators Kamp and James Thomson, PhD, and a team of co-investigators will create patient- and disease-specific induced pluripotent stem (iPS) cell lines. The iPS cells are similar to embryonic stem cells in their ability to differentiate into essentially any cell type in the body, but iPS cells can be generated from fibroblasts from a simple skin biopsy. Researchers will obtain skin biopsies from patients with a wide range of genetic diseases—from sickle cell anemia to inherited heart arrhythmias. The iPS cells harboring a specific genetic defect will then be differentiated into the cell types of interest and provide a model for human disease. These models can then be studied to advance understanding of the disease and potentially to develop new treatments.

## Grant Outcomes

Of the 77 MERC grants that have been awarded since 2004, ten concluded in 2008 and are listed below. The concluded projects are summarized on page 16 and detailed outcome reports on each project are available in the Appendix.

### Targeted Program:

- *Wisconsin Academy for Rural Medicine (WARM)*, Byron Crouse, Department of Family Medicine, UW SMPH

### New Investigator Program:

- *Androgen Receptor as an Immunological Target for the Treatment of Prostate Cancer*, Douglas McNeel, Department of Medicine, UW SMPH
- *Cellular and Viral Determinants of Human Cytomegalovirus Lytic and Latent Replication Cycles*, Robert F. Kalejta, Department of Oncology, UW SMPH
- *Creation of a Bovine Cryptosporidium Vaccine to Reduce Outbreaks in Human Populations*, Laura J. Knoll, Department of Medical Microbiology and Immunology, UW SMPH
- *Does Treatment of Hypovitaminosis D Increase Calcium Absorption*, Karen E. Hansen, Department of Medicine, UW SMPH
- *Epidemiology of Antibiotic Resistance in Wisconsin Nursing Homes*, Christopher J. Crnich, Department of Medicine, UW SMPH
- *GLI2 Protein Stabilization in the Activation of Hedgehog Signaling Pathway in Prostate Cancer*, Vladimir Spiegelman, Department of Dermatology, UW SMPH
- *Molecular Mechanisms of Lung Organogenesis, Tumorigenesis, and Asthma*, Xin Sun, Department of Medical Genetics, UW SMPH
- *Novel Exploratory Approaches to Elucidating the Role of GRAIL in CD25+ T Regulatory Cell Biological Function*, Christine Seroogy, Department of Pediatrics, UW SMPH
- *Role of Ikaros in Cellular Proliferation*, Sinisa Dovati, Department of Pediatrics, UW SMPH



## Summary of Medical Education and Research Grant Awards that Concluded in 2008

<b>Program Type</b>		<b>Partnerships or Collaborations</b>	
■ New Investigator Program.....	9	■ UW SMPH .....	8
■ Targeted Program .....	1	■ UW-Madison .....	8
<b>Investigator UW SMPH Department</b>		■ Wisconsin .....	3
■ Dermatology .....	1	■ Regional .....	4
■ Family Medicine .....	1	■ National .....	4
■ Medical Genetics .....	1	■ International .....	2
■ Medical Microbiology and Immunology ..	1	<b>Dissemination Methods</b>	
■ Medicine .....	3	■ Abstracts .....	5
■ Oncology .....	1	■ Journal publications .....	10
■ Pediatrics .....	2	■ Manuscripts submitted .....	9
<b>Grant Duration</b>		■ Patent or license pending .....	4
■ 12-24 months .....	7	■ Scholarly presentations .....	12
■ 25-36 months .....	3	<b>Journal Publications</b>	
<b>Grant Expenditures</b>		■ <i>Cancer Research</i> .....	1
■ 75-99% .....	2	■ <i>Clinical and Experimental Immunology</i> .	1
■ 100% .....	8	■ <i>Developmental Dynamics</i> .....	1
<b>Research Approach (Taxonomy)</b>		■ <i>Journal of Allergy and Clinical Immunology</i> .....	1
■ Basic research .....	6	■ <i>Journal of Biological Chemistry</i> .....	2
■ Type 1 translational research .....	2	■ <i>Journal of Bone and Mineral Research</i> ..	1
■ Clinical research .....	1	■ <i>Journal of Virology</i> .....	1
■ Education .....	1	■ <i>Nature Clinical Practice Rheumatology</i> .	1
<b>Timeline for Impact</b>		■ <i>Prostate</i> .....	1
■ 3-5 years .....	2	<b>Total Funds Awarded</b> <b>\$ 1,069,480</b>	
■ 5-7 years .....	6	<b>Total Matching Funds</b> <b>\$ 375,000</b>	
■ Unknown .....	2	<b>Additional Funding Leveraged</b> <b>\$ 3,212,000</b>	
<b>Topics</b>		■ American Academy of Allergy Asthma and Immunology .....	1
■ Cancer .....	3	■ American Heart Association .....	1
■ Genetics .....	2	■ Department of Defense Prostate Cancer Research Program .....	1
■ Infectious diseases .....	3	■ National Institutes of Health .....	1
■ Medical education .....	1	■ Private Foundation .....	1
■ Vitamin D .....	1	■ UW-Madison Registrar's Office .....	1
<b>Outcomes</b>			
■ Advanced knowledge in the field .....	6		
■ New discovery or innovative approach ...	4		

## Evaluation

In 2008 the Wisconsin Partnership Program (WPP) concluded an evaluation of progress toward achieving the goals of the *2004-2009 Five-Year Plan*. The final report, entitled *Measuring our Progress, The Wisconsin Partnership Program Evaluation 2004-2009*, is available on the WPP Website, [wphf.med.wisc.edu](http://wphf.med.wisc.edu).

The evaluation assessed progress related to strategic focus areas and provided guidance for future planning, which included the following activities:

- An assessment of major program strategies and whether key benchmarks were met.
- A descriptive and financial analysis of grants and funding decisions.
- Attitudes and perceptions of the WPP's performance and priorities from UW School of Medicine and Public Health (UW SMPH) faculty and staff, as well as from external groups (e.g., providers, students, policymakers, health leaders, and community grantees).
- A qualitative review of Program documents and individual grant project files
- An assessment of the partnership model.
- Attitudes and perceptions of community grantees and their faculty or academic partners.
- Financial and operations review.
- Baseline assessment of grantee progress towards program objectives.
- Summary assessment and reporting of concluding grant results.

A major strategy for this evaluation was to gather information on the perceptions, opinions, and attitudes of our key audiences within the UW SMPH, the University of Wisconsin, and other external groups. The extensive stakeholder input—through intensive stakeholder interviews as well as responses to a public comment questionnaire—reflects our commitment to be responsive to the people of Wisconsin, to be better informed, and to help us establish meaningful partnerships crucial to our success.

Both stakeholders and survey respondents agreed that the WPP should prioritize funding towards public health and prevention. The three primary approaches for funded projects include community-based strategies, research activities and educating the current and future workforce. Among the highest ranked topic areas noted by respondents were obesity, alcohol/substance abuse, mental health, tobacco use, access to health care, and socioeconomic factors.

Overall, the WPP is beginning to observe positive trends in completed grants. Regarding the leveraging of additional funds, for example, the concluded awards have leveraged over \$27 million from external funding sources, which is a three-fold increase from an original investment of \$9 million. In addition, 72% of the funded community grants reported that their work was sustained one year after completion of the WPP-funded project.

Over the next five years, the WPP will increase its emphasis on measurable improvements in program-related health outcomes—which will further enhance progress towards Program objectives.

**Table 2: Summary of Major Recommendations**

The Joint Oversight and Advisory Committee (OAC) and Medical Education and Research Committee (MERC) Evaluation Subcommittee identified eleven central recommendations.

<b>WPP Role in the School of Medicine and Public Health Transformation</b>	The <i>Five-Year Plan</i> should describe WPP's role in accelerating and advancing the School's transformation through educational initiatives, faculty engagement and development, institutional incentives, research, and community engagement activities. The plan should describe strategies to help the public understand how the transformation will address the state's evolving health and health care needs.
<b>Faculty Development</b>	The <i>Five-Year Plan</i> should dedicate resources for the development of existing faculty and recruitment of new senior faculty and leaders with public health expertise to support an integrated approach across the School's basic and clinical departments and Centers.
<b>Funding Strategies</b>	The <i>Five-Year Plan</i> should incorporate the following funding approaches: <ul style="list-style-type: none"> <li>■ Develop a review process for current initiatives to determine which projects should be renewed for continuation funding.</li> <li>■ Develop criteria for judging future initiatives that place greater emphasis on those that improve the health of the population, address the prevention of disease, and develop collaborative approaches to health and health care.</li> <li>■ Identify a set of high funding priorities that align closely with the Dean's strategic transformation goals and public health priorities of the state.</li> </ul>

**Table 2: Summary of Major Recommendations (Continued)**

<b>Community Engagement</b>	The <i>Five-Year Plan</i> should emphasize community engagement throughout the WPP to strengthen the School's capacity and expertise in public health and support the transformation.
<b>Faculty Engagement and Development</b>	The <i>Five-Year Plan</i> should identify approaches to engage the full spectrum of faculty, including basic science departments, in areas of public and population health. The plan should identify faculty incentives to promote community engagement.
<b>Education</b>	The <i>Five-Year Plan</i> should allocate resources for expanding the distance education component of the MPH program. The plan should also identify strategies to encourage and support medical student and other trainees, including graduate and allied health students, to pursue degrees in public health.
<b>State Health Plan</b>	The <i>Five-Year Plan</i> should identify strategies to help grantees understand the purpose, goals, and objectives of the <i>State's Health Plan</i> (2010 or 2020) to address the priorities of the state.
<b>Communication</b>	The <i>Five-Year Plan</i> should clearly describe funding priorities along with specific grant program goals, with measurable outcomes and strategies that align with the WPP mission, vision, and guiding principles. As the School's transformation proceeds, the WPP and the School should clarify its vision of a fully integrated SMPH as a national model.
<b>Balanced Research and Education Portfolio</b>	<p>The WPP should develop a conceptual framework for award allocation that emphasizes the improvement of overall health and the reduction of health disparities. The framework should measure the desired impact, direction, and balance of future MERC awards by:</p> <ul style="list-style-type: none"> <li>■ Identifying critical areas of concentration</li> <li>■ Seeking to align with the state's critical public health concerns</li> <li>■ Committing to a routine strategic assessment of optimal allocation</li> <li>■ Defining and applying short- and long-term metrics of success</li> </ul>
<b>Community Academic Partnership Fund</b>	<p>To ensure the success of future partnerships, the OAC should:</p> <ol style="list-style-type: none"> <li>1. Encourage the diversity of expertise coming from a broad range of academic partners and work toward better matching of partner needs</li> <li>2. Support networks to engage and offer appropriate incentives to academic partners</li> <li>3. Formalize partnership development as an expectation of grant planning activities as an appropriate outcome of development grants</li> <li>4. Develop support services and build partnership capacity to: <ul style="list-style-type: none"> <li>■ Include stronger evaluation components</li> <li>■ Communicate partnership successes and raise Program visibility</li> <li>■ Convey WPP grant management processes and expectations</li> </ul> </li> </ol>
<b>Governance and Stewardship</b>	WPP should exercise due diligence in complying with the recommendations and findings of the operations and financial review where appropriate.



## Planning for the Future: 2009-2014 Five-Year Plan

For the past five years, the Wisconsin Partnership Program (WPP) has been dedicated to improving the health of Wisconsin residents through investments in research, education, and community partnerships that have spanned the state.

Having been guided by the initial *Five-Year Plan*, the WPP created a new plan in 2008 to chart our future course. The *2009-2014 Five-Year Plan* provides the direction, priorities, and categories of investments for our next phase of growth. Our goal is to build upon our most successful efforts and strategically focus investments in areas that will result in the greatest improvements in health and the reduction of health disparities.

To be responsive to the highest priority needs and to achieve our health improvement goals, the WPP developed an inclusive, multifaceted approach for wide-ranging stakeholder input when developing this new plan. Guiding the entire process was our role in the transformation of the UW School of Medicine and Public Health and valuable input from our two governing committees, the Oversight and Advisory Committee (OAC) and the Medical Education and Research Committee (MERC).

The *2009-2014 Five-Year Plan* reflects extensive stakeholder input and a continuing commitment to many of the core programs and directions established in the first five years. Additionally, several new programs and emphases have been included, such as:

- The OAC's Targeted Funding Initiatives and Collaboration Sustainability Grants.
- The MERC's new targeted competitive program and commitment to community engagement.
- Collaboration of the OAC and MERC.

These programs and areas of emphasis provide a clear direction for both committees over the next five years and underscore the significance of community engagement and collaborations. We look forward to meeting our newly established goals as we move forward with the WPP's future endeavors.

## Financial Overview

### Introduction

Funding for the Wisconsin Partnership Program (WPP) was provided pursuant to the *Agreement Between the Wisconsin United for Health Foundation, Inc. (WUHF), the University of Wisconsin Foundation, and the University of Wisconsin System Board of Regents* (the *Agreement*) dated March 25, 2004. Since that time a total of \$311,827,742 has been provided to fund the program. Of this amount \$30,000,000 was provided without spending restrictions and \$281,827,742 was provided as a permanently restricted endowment. Following four years of positive investment returns, investment declines during 2008 have reduced the value of the permanent endowment to \$260,777,417, which is below the original value of the endowment. As a result of this precipitous drop in the endowment and to ensure prudent stewardship, the WPP will not draw new revenues from the endowment to fund grants until the value is above the original investment. Consequently, the WPP reduced existing awards and curtailed new awards until additional income becomes available. Funds already withdrawn from the endowment remain available to fund these awards.

As prescribed in the *Agreement*, all Program revenues have been accounted for in segregated accounts at the UW Foundation and all Program expenditures have been accounted for in separate accounts within the UW School of Medicine and Public Health (UW SMPH). The *Agreement* also prescribed that the \$30,000,000 provided without spending restrictions needed to be expended within five years of the *Agreement* or any remaining funds be transferred to the permanently restricted endowment. As of December 31, 2008, all of these funds had been expended.

### Administrative Budget

Administrative expenses were \$882,237 for the period of January 1, 2008 through December 31, 2008 compared to a 2008 budget of \$928,450. The UW SMPH also provides in-kind support for administrative expenses from the Offices of the Dean and Vice Dean, Fiscal Affairs, Human Resources, Legal Services, and Public Affairs. The administrative budget is approved annually by the Oversight and Advisory Committee (OAC) and the Medical Education and Research Committee (MERC). Allocation of costs in the Income Statement on page 22 is based on a 35%/65% split. Detail expenditures for the period are as follows:

<b>Administrative Expenditures</b> December 31, 2008	
Total Salaries	\$448,422
Total Fringe Benefits	\$172,238
<b>Other Expenditures</b> December 31, 2008	
Supplies	\$12,738
Travel	\$19,120
Reviewer Services	\$20,883
Evaluation	\$76,112
Other Expenses	\$132,724
<b>Total</b>	<b>\$882,237</b>
<b>OAC (35%) Allocation</b>	<b>\$308,783</b>
<b>MERC (65%) Allocation</b>	<b>\$573,454</b>

### Grant Management

The WPP manages grant funds consistently, whether the funding is external to community organizations or internal to the University. Areas of grant management include the following.

- Individual projects are approved by the OAC, the MERC, or the UW SMPH Dean with the endorsement of the MERC, and are processed in accordance with UW-Madison policies and with broad oversight by the UW System Board of Regents.
- Every awarded project has a Memorandum of Understanding (MOU) (see the following section).
- Every proposal includes a non-supplanting certification (see the following Non-Supplanting Policy section).

### Memorandum of Understanding

All applications approved for funding require a Memorandum of Understanding (MOU) between the WPP and the community organization or the faculty recipient. Acceptance of an award requires the grantee to be aware of and comply with the terms and conditions of the MOU. The MOU provides a mechanism for the OAC and MERC to monitor progress of their respective awards. Each MOU includes a timeline for progress reports, financial reports, final reports, and applicable compliance documents to the WPP.

## Non-Supplanting Policy

As outlined in the *Decision of the Commissioner of Insurance in the Matter of the Application for Conversion of Blue Cross & Blue Shield United of Wisconsin*, funds from the WPP may not be used to supplant funds or resources available from other sources. The School has designed a review process for determination of non-supplanting, which was approved by WUHF.

### Initial Award

All applicants and award recipients, whether internal or external, must complete a non-supplanting questionnaire developed by the UW SMPH. As part of the technical review process and MOU development, the Associate Dean for Fiscal Affairs reviews this questionnaire, along with financial statements from external recipients. In the case of internal awards, the Associate Dean also considers the UW SMPH budget and existing grant funding.

Any potential supplanting concerns are discussed with the applicant. Resolution may include a budget modification or reduction. Funds will not be awarded if it is determined that supplanting would or is likely to occur. Any unresolved supplanting questions are brought to either the OAC or the MERC, as appropriate. An appeal process is available in the case of a dispute between the Associate Dean and the recipient.

### Subsequent Funding

As part of the financial reporting process, each recipient must certify that supplanting has not occurred. Recipients of multi-year awards must complete a new questionnaire each year.

### Annual Report

Based on the non-supplanting determination made by the Associate Dean for Fiscal Affairs, the Dean of the UW SMPH has attested to compliance with the supplanting prohibition in the annual report. The UW-Madison Vice Chancellor for Administration has also attested that the UW-Madison and UW System have complied with the supplanting prohibition.

## OAC Review and Assessment of the Allocated Percentage of Funds

*As required in the addendum to the first Five-Year Plan and in the Agreement, the OAC reviewed and assessed the allocation percentage for public health and medical education and research initiatives on October 29, 2008.*

*After considering data provided from ongoing grant reporting and the preliminary results of the WPP evaluation, as well as the communication between the OAC and MERC on the development of the 2009-2014 Five-Year Plan, the OAC believed it had sufficient information to assess and advise on the allocation percentage.*

*The OAC unanimously agreed that the allocation of 35% for Public Health Initiatives and 65% for Medical Education and Research Initiatives should remain unchanged for 2009.*

## Accounting

The following financial report consolidates activities of the UW Foundation and the UW SMPH for the period January 1, 2008 through December 31, 2008. Revenues consist of investment income and market valuation and expenditures consist of administrative and program costs. All expenses and awards are reported as either Public Health Initiatives (OAC–35%) or Medical Education and Research Initiatives (MERC–65%). Approved awards have been fully accrued as a liability less current year expenditures, as shown on page 22.

## Financial Reports—Unaudited

<b>Balance Sheet</b>	
<b>December 31, 2008</b>	
<i>Assets</i>	
Current Investments	\$40,733,715
Non-Current Investments	\$260,777,417
<b>Total Assets</b>	<b>\$301,511,132</b>
<i>Liabilities and Net Assets</i>	
<b>Liabilities</b>	
Accounts Payable	\$43,374
Grants Payable	\$28,167,115
<b>Total Liabilities</b>	<b>\$28,210,489</b>
<b>Net Assets *</b>	
Temporarily Restricted - spendable	\$12,523,226
Permanently Restricted - endowment	\$260,777,417
<b>Total Net Assets</b>	<b>\$273,300,643</b>
<b>Total Liabilities &amp; Net Assets</b>	<b>\$301,511,132</b>
* - See further discussion on page 24.	

<b>Income Statement</b>	
<b>For the Period January 1, 2008 through December 31, 2008</b>	
<i>Revenues</i>	
Gifts Received	-
Investment Income	\$1,680,208
Realized gains/(losses) on investments	\$(86,167,697)
<b>Total Revenues</b>	<b>\$(84,487,489)</b>
<i>Expenditures</i>	
Public Health Initiatives	
Administrative Expenditures	\$308,783
Grant Expenditures	\$325,164
Medical Education & Research Initiatives	
Administrative Expenditures	\$573,454
Grant Expenditures	\$7,420,719
<b>Total Expenditures</b>	<b>\$8,628,120</b>
<b>Net Increase/(Decrease) in Net Assets</b>	<b>\$(93,115,609)</b>



## Financial Notes

### Cash and Investments

The financial resources that support grants for the period January 1, 2008 through December 31, 2008 are generated from funds released by the Wisconsin United for Health Foundation, Inc. (WUHF), as prescribed in the *Agreement*, as well as generated from investment income. All funds are housed and managed by the UW Foundation. As needed, funds are transferred to the School of Medicine and Public Health (SMPH) to reimburse expenses.

Income received on unrestricted funds is based on the performance of the underlying investments as well as endowment distributions from the permanently restricted funds. All expenses are charged against unrestricted funds. Income received on permanently restricted funds is based on the performance of the underlying investments. The only reductions to the permanently restricted funds are endowment distributions to unrestricted funds.

### Current Investments

Current investments consist of participation in the UW Foundation expendables portfolio. The objective of the expendables portfolio is to preserve principal and provide a competitive money market yield. Typically, gifts placed in the expendables portfolio have a short-term horizon, usually less than three years. The expendables portfolio is mainly invested in short-duration, fixed-income securities. The UW Foundation has identified a level of the expendables portfolio that is unlikely to be withdrawn over a short-term horizon and therefore this percent is invested in higher returning asset classes.

### Non-Current Investments

Non-current investments consist of participation in the UW Foundation endowment portfolio. The objective of the endowment portfolio is to achieve a long-term, annualized return that creates an income stream to fund programs, preserves the real value of the funds, and provides for real growth. To achieve this, the endowment is invested in a diversified portfolio that includes U.S. and international equity, fixed income, real assets, alternative assets, and cash equivalents.

The UW Foundation uses quantitative models along with qualitative analysis to maximize target return while minimizing risk. The UW Foundation recognizes that individual investments or asset classes within the endowment will be volatile from year to year, but believes that this risk will be mitigated through diversification of asset classes and investments within asset classes.

### Liabilities – Grants Payable

Grants payable are recorded as of the date of the Oversight and Advisory Committee (OAC) or Medical Education and Research Committee (MERC) approval. The liability reflects the total amount of the grant award, which ranges from one to five years in length, less any expenditures incurred before December 31, 2008. Any subsequent modifications to grant awards are recorded as adjustments of the grant expenditures in the year the adjustment occurs. Grants payable at December 31, 2008 are as follows:

GRANTS PAYABLE			
Year	Public Health Initiatives (OAC-35%)	Medical Education and Research Initiatives (MERC-65%)	Total
December 31, 2009	\$9,786,855	\$11,806,208	\$21,593,063
December 31, 2010	\$1,572,662	\$3,436,047	\$5,008,709
Thereafter	-	\$1,565,343	\$1,565,343
<b>Total</b>	<b><u>\$11,359,517</u></b>	<b><u>\$ 16,807,598</u></b>	<b><u>\$28,167,115</u></b>

## Net Assets

Based upon the *Agreement*, net assets are divided into two components:

- Temporarily restricted net assets: Funds that are subject to donor-imposed stipulations of the *Agreement* that are or will be met by actions of the Wisconsin Partnership Program and/or the passage of time.
- Permanently restricted net assets: Funds held in permanent endowment status with income available on an annual basis.

## Income Statement

### Revenues

Revenues for the period of January 1, 2008 through December 31, 2008 consist of two components: (1) investment income, which has been recorded as earned throughout 2008; and (2) net realized gains/(losses) on investments, which represents the difference between the original cost of investments and the sales proceeds (realized) or the fair market value at the end of 2008 (unrealized).

Investment income distributions to the spendable (unrestricted) funds are based on the UW Foundation spending policy applied to 100% of the market value of the endowment (permanently restricted) funds.

### Expenditures

Expenditures for the period of January 1, 2008 through December 31, 2008 consist of grant awards, as described above, and administrative expenses. All expenses fall under one of the two major components identified in the *Five-Year Plan*:

- Public Health Initiatives (OAC–35%)
- Medical Education and Research Initiatives (MERC–65%)

Grant award expenditures by major component at December 31, 2008 are shown beginning on page 25.

During 2008, the OAC provided supplemental funding to two programs, the Wisconsin Population Health Fellowship Program and the Healthy Wisconsin Leadership Institute, which were originally funded in 2004 with ending dates of June 30, 2008 and September 30, 2008, respectively. The OAC agreed to extend the funding of these programs until the end of the *2004-2009 Five Year Plan* as follows:

- Wisconsin Population Health Fellowship Program – \$445,156 for the period of 7/1/08 through 3/31/09.
- Healthy Wisconsin Leadership Institute – \$118,546 for the period of 10/1/08 through 3/31/09.

The above amounts have been added to the respective Total Award as noted in the table on page 28. Please see further details on page 9.

In addition to the new awards identified in the table on page 29, the MERC, through the Strategic Allocation Fund administered by the Dean of the SMPH, provided supplemental funding in 2008 to the program, Making Wisconsin the Healthiest State. This program was originally funded in 2004 with an end date of August 31, 2008. Additional funding was provided until the end of the *2004-2009 Five Year Plan* as follows:

- Making Wisconsin the Healthiest State – \$97,344 for the period of 9/1/08 through 2/28/09.

This amount has been added to the Total Award as noted in the table on page 33. Please see further details on page 11.



## 2007 OAC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>DEVELOPMENT GRANTS</b>				
Creating Healthy Rural Communities	S	59,250	15,459	43,791
Family Table Project	S/R	59,864	13,512	46,352
Fluoridation for Healthy Communities	S	67,000	-	67,000
Group Prenatal Care for Vulnerable Pregnant Teens: Building Self-Efficacy and Social Support	S/R	66,937	-	66,937
Healthiest Wisconsin 2020: A Partnership Plan to Improve the Health and Safety of the Public	S	66,873	-	66,873
(Kev Noj Qab Haus Huv Ntawm Pojniam Hmoob Lub Neej) Staying Healthy as a Hmong Woman: Building Capacity to Address Cancer Disparities	S/R	50,840	12,685	38,155
Oral Health Improvement for Adults with Developmental Disabilities	S	66,748	21,115	45,633
Promoting a Safe and Healthy Deaf Community	S	54,443	19,013	35,430
Reducing Mental Health Treatment Barriers in Adjudicated, Poor, Substance Abusing Women	S/R	67,000	-	67,000
Reducing Youth Substance Abuse through Brief Motivational Interviewing in Schools	S/R	66,972	-	66,972
Uniting a County	S	67,000	-	67,000
<b>IMPLEMENTATION GRANTS</b>				
Allied Drive Early Childhood Initiative	S/R	474,988	19,306	455,682
Changing the Culture of Palliative Care in Rural Wisconsin	S	413,221	91,246	321,975
Ecocultural Family Interview Project	S/R	474,943	193	474,750
Expanded Community Role in the Milwaukee Homicide Review Commission	S/R	474,164	35,600	438,564
Expanding & Sustaining the 'Safe Mom, Safe Baby' Project	S/R	400,944	-	400,944
Got Dirt? Garden Initiative	S/R	474,990	8,023	466,967
It Takes a Community to Help a Smoker	S/R	473,883	18,207	455,676
Keeping Kids Alive in Wisconsin	S	464,252	-	464,252
Reducing Tobacco Use Among LGBT Populations in Wisconsin	S	475,000	51,196	423,804
Underage Drinking - A Parent Solution	S	462,991	101,946	361,045
<b>Total 2007 OAC Funding</b>		<b>\$ 5,282,303</b>	<b>\$ 407,501</b>	<b>\$ 4,874,802</b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.

† S = service (community based); E = education; R = research



## 2006 OAC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>PLANNING GRANTS</b>				
Childhood Obesity Wellness Campaign	S	38,167	38,167	-
Family Teaming to Improve Health Outcomes for Youth	S	46,117	26,459	19,658
Fit Kids, Fit Cities	S	44,210	38,783	5,427
Fluoridation for Healthy Communities	S	47,842	47,842	-
Green City, Active People	S	47,000	36,709	10,291
Health Care Task Force on Pre- and Inter-Conception Care: Optimizing Women's Health and Increasing Access to Primary and Preventive Health Services	S	39,123	30,330	8,793
Increasing Breastfeeding Rates in Milwaukee County	S	46,730	23,092	23,638
Noj Zoo, Nyob Zoo (Eat Well, Live Well): A Hmong Community Health Promoter Project	S/E	50,000	40,365	9,635
Northern Wisconsin Child and Adolescent Psychiatry Access Project (CAPAP)	S	38,188	23,361	14,827
Planning a Multicultural Women's Education Program to Eliminate the Stigma of Depression	S	47,816	44,292	3,524
Preventing Substance Abuse Among LGBTQ Youth in Wisconsin	S	48,722	42,151	6,571
Schools and Clinics United for Healthy Children and Youth	S	50,000	15,789	34,211
<b>IMPLEMENTATION GRANTS</b>				
Coordinating Partnerships to Improve Access to Public Health Coverage	S	446,185	225,542	220,643
FIT WIC - FIT Families	S	450,000	191,139	258,861
Health Watch Wisconsin	S/E	447,700	249,520	198,180
Honoring Our Children Urban/Rural Outreach Project	S	450,000	96,656	353,344
Latino Geriatric Center	S/E	448,251	196,029	252,222
Measuring the Impact	S/R	396,894	108,849	288,045
Milwaukee Nurse-Family Partnership Program	S	449,376	71,225	378,151
Project Connect	S	450,000	183,076	266,924
Strong Rural Communities Initiative	S	299,815	251,108	48,707
Taking Care of Me: A Cancer Education and Screening Promotion Program for Hispanic/Latina Women	S/E	450,000	179,015	270,985
What Works: Reducing Health Disparities in Wisconsin Communities	S/R	429,461	123,465	305,996
Wisconsin Partnership for Childhood Fitness	S/R	446,568	71,377	375,191
Workforce Development: Advancing the Plan for a Diverse, Sufficient and Competent Workforce	S/E	450,000	108,259	341,741
<b>PUBLIC HEALTH EDUCATION &amp; TRAINING</b>				
Continuing Public Health Education	S/E	\$ 560,338	\$ 373,110	187,228
<b>Total 2006 OAC Funding</b>		<b>\$ 6,718,503</b>	<b>\$ 2,835,710</b>	<b>\$ 3,882,793</b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.



## 2005 OAC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>PLANNING GRANTS</b>				
Assessing Lifestyle Behaviors and Beliefs in Underserved Adults	S	48,637	48,637	-
Development of a Wisconsin Public Health Laboratory Network	S	36,297	36,297	-
Enhancing the Role of Consumers as Informed Partners in the Health Care System	S	46,569	24,591	21,978
Got Dirt? Initiative	S	41,270	41,270	-
Green City, Healthy People: Eliminating Health Disparities while Revitalizing Milwaukee's Johnson Park	S	50,000	45,576	4,424
Hispanic Health Patient Navigation Collaboration Planning Project	S	25,728	25,728	-
Reduce Health Disparities within the LGBT Populations in Wisconsin	S	46,482	37,328	9,154
<b>IMPLEMENTATION GRANTS</b>				
Engaging Wisconsin Communities for Substance Abuse Prevention	S	430,872	196,443	234,429
Expand Behavioral Risk Factor Survey Coverage to Provide Local Tracking of Healthiest Wisconsin 2010 Priorities	S/R	440,466	256,663	183,803
Footprints to Health	S	450,000	185,671	264,329
Influencing Wisconsin's Public Health System by Defining, Understanding and Diffusing a Treatment Model for Hmong Mental Health	S/R	450,000	290,181	159,819
Polk County Alcohol and Drug Outreach and Training (PolkADOT)	S/R	448,584	353,777	94,807
Reality Check 21	S	450,000	286,117	163,883
Si Se Puede (Yes You Can)	S	411,183	350,776	60,407
Transporting Children Safely - A Public Health Model for WIC (Women, Infants, and Children) Families	S	344,924	255,121	89,803
Wisconsin Falls Reduction Project	S/R	448,898	240,618	208,280
The Wisconsin Healthy Air Initiative	S	450,000	256,801	193,199
<b>Total 2005 OAC Funding</b>		<b>\$ 4,619,910</b>	<b>\$ 2,931,595</b>	<b>\$ 1,688,315</b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.



2004 OAC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>IMPLEMENTATION GRANTS</b>				
At Risk Adolescent Health Outreach, Prevention and Services Collaborative Program	S	292,467	268,476	23,991
Beyond Lip Service: Integrating Oral Health into Public Health	S	450,000	378,042	71,958
Breaking the Barriers to Health Care & Domestic Violence Prevention for Latino/Hispanic Immigrants	S/E	450,000	450,000	-
Co-op Care	S	449,936	432,155	17,781
Dane County Early Childhood Initiative	S	439,134	438,614	520
First Breath: Enhancing Service to Health Care Providers and Clients	S/E	448,604	383,781	64,823
Fit Kids Fit Families in Washington County	S	288,892	225,346	63,546
Healthy and Active Lifestyles for Children and Youth with Disabilities: A Comprehensive Community-Based Partnership	S	413,644	319,635	94,009
Healthy Children, Strong Families	S/R	425,723	385,589	40,134
Milwaukee Birthing Project: Improving Birth Outcome for Mothers and Children	S	414,475	414,475	-
Milwaukee Homicide Review Commission	S/R	400,001	397,167	2,834
Peridata: A Rural/Urban Information Network	S	285,996	285,996	-
Safe Mom, Safe Baby: A Collaborative Model of Care for Pregnant Women Experiencing Intimate Partner Violence	S	443,738	443,738	-
<b>COMMUNITY-POPULATION HEALTH INITIATIVES</b>				
Tribal-Academic Partnership for American Indian Health	S/E/R	245,379	245,379	-
<b>PUBLIC HEALTH EDUCATION AND TRAINING</b>				
Wisconsin Population Health Fellowship Program**	S/E	2,011,945	1,669,087	342,858
Healthy Wisconsin Leadership Institute**	S/E	932,949	741,796	191,153
<b>Total 2004 OAC Funding</b>		<b>\$ 8,392,883</b>	<b>\$ 7,479,276</b>	<b>\$ 913,607</b>
<b>Total 2005 OAC Funding</b>		<b>4,619,910</b>	<b>2,931,595</b>	<b>1,688,315</b>
<b>Total 2006 OAC Funding</b>		<b>6,718,503</b>	<b>2,835,710</b>	<b>3,882,793</b>
<b>Total 2007 OAC Funding</b>		<b>5,282,303</b>	<b>407,501</b>	<b>4,874,802</b>
<b>Total OAC Funding (2004-2007)</b>		<b>\$25,013,599</b>	<b>\$13,654,082</b>	<b>\$11,359,517</b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.

† S = service (community based); E = education; R = research

\*\* Total award includes supplemental funding awarded in 2008. See details on page 24.



## 2008 MERC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>TARGETED PROGRAMS</b>				
UW Comprehensive Cancer Center (UWCCC) Biobank	R	450,108	114,722	335,386
Shared Resources for Interdisciplinary Research for Wisconsin Institutes for Medical Research (WIMR)	R	2,470,347	1,125,043	1,345,304
Wisconsin Center for Infectious Diseases (WisCID)	R	1,511,306	47,025	1,464,281
<b>TARGETED STRATEGIC PROGRAMS</b>				
Recruitment of Middle-Aged African Americans for Studies of Preclinical Alzheimer's Disease	S/R	90,000	4,304	85,696
<b>NEW INVESTIGATOR PROGRAM</b>				
Computed Tomography (CT) with Reduced Radiation Dose Using Prior Image Constrained Compressed Sensing (PICCS) Reconstruction	R	90,000	-	90,000
Evaluation of <i>Cuidándose</i> : A Communitywide Intervention to Promote Breast and Cervical Cancer Screening among Latinas	S/R	90,000	-	90,000
Genetic and Environmental Predictors of Serum Levels of 25-hydroxyvitamin D	R	90,000	-	90,000
Positron Emission Tomography Imaging of Tumor Angiogenesis	R	90,000	-	90,000
<b>COLLABORATIVE HEALTH SCIENCES PROGRAM</b>				
Closing the Gap on Pediatric Health Disparities: Discerning the Causes and Consequences of Iron Deficiency in Infancy	R	500,000	10,090	489,910
Menominee Smoking Cessation Clinical Trial	E/R/S	499,591	7,342	492,249
Patient-Specific Induced Pluripotent Stem Cell Models for Human Disease	R	499,993	-	499,993
Reducing Infant Mortality Disparities in Wisconsin	R	500,000	12,243	487,757
Wisconsin Children's Lead Levels and Educational Outcomes	S/E/R	500,000	6,380	493,620
<b>Total 2008 MERC Funding</b>		<b>\$ 7,381,345</b>	<b>\$ 1,327,149</b>	<b>\$ 6,054,196</b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.

† S = service (community based); E = education; R = research

**2007 MERC Awards\***

<b>Project Title</b>	<b>Type †</b>	<b>\$ Total Award</b>	<b>\$ Total Expended</b>	<b>\$ Grants Payable</b>
<b>TARGETED PROGRAMS</b>				
2007 Emergency Care and Trauma Symposium	S/E	80,000	80,000	-
Development of Human Rights Initiative	E	22,500	7,500	15,000
Wisconsin Academy for Rural Medicine (WARM)	E	668,490	358,491	309,999
Wisconsin Network for Health Research (WiNHR)	S/R	2,547,069	911,441	1,635,628
<b>NEW INVESTIGATOR PROGRAM</b>				
A New Diagnostic Test to Monitor Regression and Recurrence of Epithelial Ovarian Cancer	R	98,738	40,147	58,591
Falls Risk Detection and Gait Instabilities in Older Adults	S/R	100,000	46,642	53,358
Metabolic Control of Metastasis by a Master Regulator of Neurogenesis: Molecular Mechanisms and Therapeutics	R	99,990	99,990	-
Probiotics for Prevention of Infection by Multiresistant Bacteria	R	100,000	3,954	96,046
Reconstructing HIV Sequence Histories to Identify Potent Immune Responses	R	99,620	38,349	61,271
The Relationship between Asthma and Obstructive Sleep Apnea (OSA)—A Pilot Study of the Effects of Treatment for Comorbid OSA in Patients with Asthma	R	99,995	80,834	19,161
<b>COLLABORATIVE HEALTH SCIENCES PROGRAM</b>				
A Comprehensive Approach to Insomnia	R	299,654	174,898	124,756
Healthy People/Healthy Systems: The OPTIMISE Model	E	299,726	105,871	193,855
Improving Cardiovascular Risk Prediction Using Hand-Held Carotid Ultrasonography	E	286,297	192,833	93,464
Individualized Stroma-Targeting Therapy in Breast Cancer	R	300,000	78,249	221,751
Linking Aging, Resveratrol and Sirtuins	R	300,000	221,228	78,772
Vitamin D Inadequacy: Documentation in Rural Populations and Evaluation of Correction by Food Supplementation	R	300,000	109,642	190,358
Wisconsin Infectious Disease Drug Discovery	R	300,000	54,810	245,190
<b>Total 2007 MERC Funding</b>		<b>\$ 6,002,079</b>	<b>\$ 2,604,879</b>	<b>\$ 3,397,200</b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.

† S = service (community based); E = education; R = research



## 2006 MERC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>TARGETED PROGRAMS</b>				
UW Institute for Clinical and Translational Research	S/E/R	6,847,846	3,610,377	3,237,469
<b>TARGETED STRATEGIC PROGRAMS</b>				
Advancing Evidence-Based Health Policy in Wisconsin: Translating Research into Practice	S/E	149,230	98,263	50,967
Center for Urban Population Health Public Health Development Plan	S/E/R	1,058,448	435,818	622,630
<b>COMBINED MERC/STRATEGIC TARGETED PROGRAMS</b>				
The Wisconsin Smokers Health Studies	S/R	600,000	478,406	121,594
<b>NEW INVESTIGATOR PROGRAM</b>				
Creation of a Bovine Cryptosporidium Vaccine to Reduce Outbreaks in Human Populations	R	100,000	100,000	-
Determinants of Antibiotic Resistance in Nursing Homes	R	98,642	98,642	-
Integrating Variation at Single Nucleotides and Short Tandem Repeats to Identify Genetic Associations with Complex Diseases	R	100,000	85,927	14,073
Magnetic Resonance Imaging in a Study of Prolotherapy for Knee Osteoarthritis	R	99,971	50,037	49,934
Partnering with Quit Lines to Promote Youth Smoking Cessation in Wisconsin	S/R	100,000	65,738	34,262
Surface-Rendered 3D MRI Overlaid into Live X-Ray Fluoroscopy to Guide Endomyocardial Progenitor Cell Therapy for Recent Myocardial Infarction: Technical Development and Validation Toward Clinical Translation	R	100,000	100,000	-
Treatment of Vitamin D Insufficiency	R	100,000	100,000	-
<b>Total 2006 MERC Funding</b>		<b><u>\$ 9,354,137</u></b>	<b><u>\$ 5,223,208</u></b>	<b><u>\$ 4,130,929</u></b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.



## 2005 MERC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>TARGETED PROGRAMS</b>				
Human Proteomics Program	R	1,867,208	1,748,877	118,331
Regenerative Medicine Program	R	1,200,000	737,418	462,582
Survey of the Health of Wisconsin (SHOW)	S/E/R	4,116,906	3,467,208	649,698
Wisconsin Network for Health Research (WINHR)	S/R	1,340,227	1,119,591	220,636
<b>TARGETED STRATEGIC PROGRAMS</b>				
Library Collection Support for Public Health Research and Training	S/E/R	105,611	53,385	52,226
Reducing Cancer Disparities through Comprehensive Cancer Control	S/E/R	532,126	524,518	7,608
Startup Funding to Recruit Faculty Member Specializing in Genetic Epidemiology	S/E/R	261,706	125,611	136,095
Startup Funding to Recruit Faculty Member Specializing in Health Policy	S/E/R	261,706	130,042	131,664
Wisconsin Academy for Rural Medicine (WARM)	S/E	133,462	133,462	-
<b>COMBINED MERC/STRATEGIC TARGETED PROGRAMS</b>				
Health Innovations Program (HIP)	S/E/R	1,310,158	985,148	325,010
<b>NEW INVESTIGATOR PROGRAM-CYCLE 1</b>				
Healthy Children Strong Families—Supporting Caregivers Improving Lifestyles	S/R	93,054	80,471	12,583
Investigating Fungal Infection: Analysis of Spores from the Human Fungal Pathogen <i>Cryptococcus Neoformans</i>	R	100,000	100,000	-
Molecular Mechanism of Lung Organogenesis, Tumorigenesis, and Asthma	R	100,000	100,000	-
<b>NEW INVESTIGATOR PROGRAM-CYCLE 2</b>				
Androgen Receptor as an Immunological Target for the Treatment of Prostate Cancer	R	99,899	98,643	1,256
Cellular and Viral Determinants of Human Cytomegalovirus Lytic and Latent Replication Cycles	R	99,000	99,000	-
Effects of Statin Therapy on Vascular Properties and Outcomes in Diastolic Heart Failure Patients	S/R	100,000	37,383	62,617
GLI2 Protein Stabilization in the Activation of Hedgehog Signaling Pathway in Prostate Cancer	R	100,000	100,000	-
Mechanisms of CREB Regulation and Function in Response to DNA Damage	R	100,000	100,000	-
Novel Exploratory Approaches to Elucidating the Role of GRAIL in CD25+ T Regulatory Cell Biological Function	R	91,560	91,560	-
The Role of Ikaros in Cellular Proliferation	R	100,000	100,000	-
Topical Honey for Diabetic Foot Ulcers	S/R	99,976	61,951	38,025
Wnt/Frizzled Signals in Normal and Malignant Lymphoid Development	R	100,000	97,867	2,133
<b>Total 2005 MERC Funding</b>		<b>\$ 12,312,599</b>	<b>\$ 10,092,135</b>	<b>\$ 2,220,464</b>

\* As necessary, the total award for grants that concluded during 2008 has been adjusted to reflect final total expenditures. Grants that concluded prior to January 1, 2008 are not included in the table.



## 2004 MERC Awards\*

Project Title	Type †	\$ Total Award	\$ Total Expended	\$ Grants Payable
<b>TARGETED PROGRAMS</b>				
Innovations in Medical Education	S/E	3,414,780	3,031,638	383,142
Survey of the Health of Wisconsin (SHOW)	S/E/R	121,955	121,955	-
<b>TARGETED STRATEGIC PROGRAMS</b>				
Making Wisconsin the Healthiest State**	S/R	917,687	860,527	57,160
Master of Public Health (MPH)	E	2,682,977	2,192,039	490,938
Wisconsin Alzheimer's Institute	S/E/R	375,000	301,431	73,569
<b>Total 2004 MERC Funding</b>		<b>\$ 7,512,399</b>	<b>\$ 6,507,590</b>	<b>\$ 1,004,809</b>
<b>Total 2005 MERC Funding</b>		<b>\$12,312,599</b>	<b>\$10,092,135</b>	<b>\$ 2,220,464</b>
<b>Total 2006 MERC Funding</b>		<b>\$ 9,354,137</b>	<b>\$ 5,223,208</b>	<b>\$ 4,130,929</b>
<b>Total 2007 MERC Funding</b>		<b>\$ 6,002,079</b>	<b>\$ 2,604,879</b>	<b>\$ 3,397,200</b>
<b>Total 2008 MERC Funding</b>		<b>\$ 7,381,345</b>	<b>\$ 1,327,149</b>	<b>\$ 6,054,196</b>
<b>Total MERC Funding (2004-2008)</b>		<b>\$42,562,559</b>	<b>\$25,754,961</b>	<b>\$ 16,807,598</b>

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\*\* Total award includes supplemental funding awarded in 2008. See details on page 24.



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