

**ADDENDUM
TO THE
MEDICAL COLLEGE OF WISCONSIN
FIVE-YEAR PLAN**

ADVANCING A HEALTHIER WISCONSIN

This addendum provides additional information and clarification to the Medical College of Wisconsin's (MCW) Five-Year Plan relating to the use of funds (the Funds) derived from the conversion of Blue Cross & Blue Shield United of Wisconsin to a stock insurance company.

I. GOAL

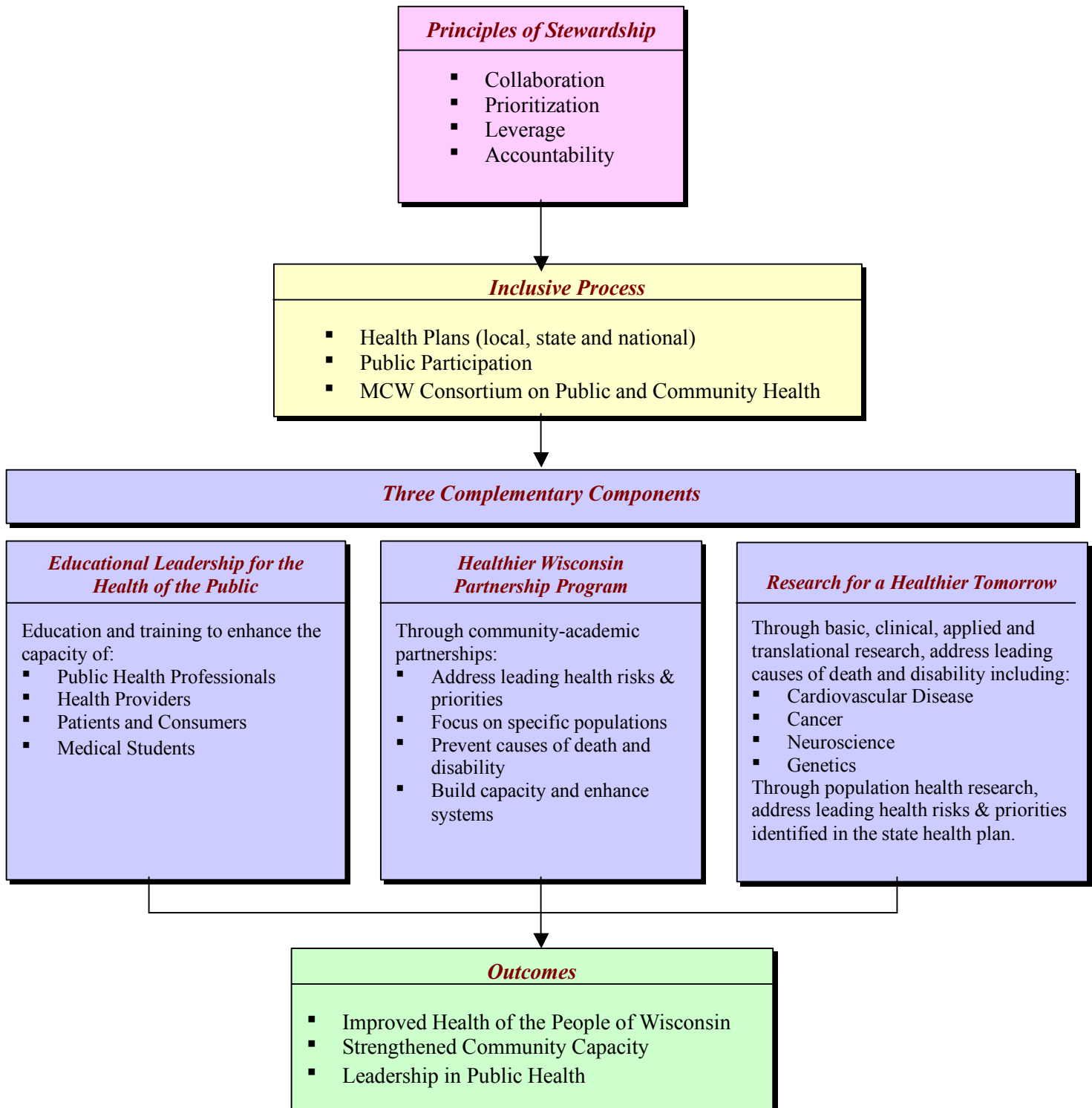
The Funds will support programs and initiatives that improve the health of the people of Wisconsin. The plan's focus is developed from *Healthy People 2010*, *Healthiest Wisconsin 2010*, *Healthiest Milwaukee Initiative* and Public Input. The major risk factors, health priorities and health conditions identified from these sources will guide funding priorities and allocations. Improvements in these areas will demonstrate our progress and success.

Addressing the complexities of health, and the interconnectedness of biological, behavioral, physical and socioeconomic determinants of health require multi-disciplinary partnerships and a multi-sector approach. Improvements in health must be sustained and measured over time. To be effective and succeed, we must both improve health status and the health system.

We will accomplish our goal through the development of partnerships, providing professional development for public health professionals, promoting consumer health education, modifying medical school curriculum and enhancing our ability to identify, treat, and prevent disease.

Utilizing these Funds to leverage other sources of funding is emphasized and as new or alternative funding sources become available for community partnerships or research or education initiatives, financial support by the Funds can be used to support other meritorious proposals and initiatives.

A Framework for Advancing a Healthier Wisconsin



II. MEASUREMENTS/BENCHMARKS

To further our goal, we will accomplish the following by 2010:

- Develop new community health partnerships targeted in *Healthiest Wisconsin 2010*;
- Enhance and strengthen existing community health partnerships, and increase their focus on *Healthiest Wisconsin 2010*;
- Develop new public health professional development programs in coordination with UW-Madison Medical School, and its transformation into a school of Medicine and Public Health, and with other state health training programs such as those at UWM, and Marquette University;
- Expand continuing medical education offerings for health professionals and utilize distance learning and teleconferencing technology to increase accessibility;
- Modify medical school curriculum to include public and community health concepts and skills;
- Establish a new clinical skills training and assessment program for students and health professionals to enhance the transfer and integration of new clinical skills, procedures, technology and research discoveries into community healthcare;
- Support new research initiatives that enhance our ability to identify and control factors that lead to heart disease including the identification of genes relating to hypertension;
- Support new research initiatives that broaden our ability to diagnose, treat, and prevent cancer, and proceed with the development of predictive cancer profiling;
- Support new research initiatives that demonstrate an improved understanding of the function of the brain, and improve the ability to assess the effectiveness of investigational therapies;
- Support new research initiatives that foster translational research and develop a program to facilitate the migration of research findings into clinical practice;
- Support new research initiatives that further our understanding of evaluative clinical research including assessment of patient care outcomes; and
- Support new research initiatives that expand our knowledge of population health and community based research as described by the Institute of Medicine's "*The Future of the Public's Health in the 21st Century.*"

We will accomplish these goals through an iterative process. The first year will include start-up functions as we actively organize and fund projects with community based partners. This will include the provision of training sessions and community meetings to foster and develop community partnerships as noted in the section below. In addition, we will develop and fund specific education and research initiatives that support our goal of health improvement.

In the second year we will fund approved community-based partnerships and education and research initiatives that are designed to maximize their impact on the health of the public. Partnerships will be in varying stages of development and will be continually encouraged and supported. The second year will also include the initial collection and review of evaluative data related to community based partnerships as well as to the initiatives in research and education. All partnerships and research and education initiatives with multi-year funding will be reviewed prior to the release of second year support.

In the third year we will continue to develop and support community based partnerships and educational and research initiatives while beginning the evaluation and outcome testing. This evaluation is required to demonstrate efficacy and relevance in meeting our overall goal to support programs and initiatives that improve health. Expansion, modification or discontinuation of funding may be recommended as a part of this process.

Annually, we will report our results to the MCW Consortium for review and advice and to the WUHF Board and the public, and intend that our efforts be both transparent and measurable. The development and implementation of community-based partnerships and education and research initiatives to improve public health is an on-going process, evolving as new knowledge is gained and the environment changes. The process includes on-going review and evaluation of results and emphasizes leveraging of other sources of funding.

III. PARTNERSHIPS

Partnership between academics, health providers, consumers, community organizations, and policy makers is essential to creating sustained improvement in health status. Partnerships are built on the premise that we can accomplish more by working together and capitalizing on our joint strengths. We hope that the synergistic use of these funds will create and support these linkages.

The conversion Funds will support community-based partnership proposals through the Healthier Wisconsin Partnership Program. A community-based partner is broadly defined to be inclusive of statewide, regional and local partners. Eligible community partners are private, non-profit organizations, and public organizations, including:

- State and local governments;
- Voluntary associations, foundations, civic groups;
- Scientific or professional associations, universities, schools;
- Citizen groups, religious organizations, healthcare organizations; and
- Federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations.

Multi-sector partnerships are encouraged. Community partners and MCW partners may be involved in more than one partnership and may apply with different partners for different projects.

The MCW Consortium on Public and Community Health Inc. (Consortium) has designed a request for proposal process to encourage partnership proposal development as broadly as possible. As a part of the proposal process, the MCW Healthier Wisconsin Partnership Program (located within the Office of the Senior Associate Dean for Public and Community Health) will implement a technical assistance and capacity building plan developed with public input. The Healthier Wisconsin Partnership Program will also serve as a link between potential community partners and MCW faculty.

Components of the technical assistance plan that will facilitate partnership development include:

- Partnership development summits (both urban and rural) that bring together key community and academic leaders to address three key issues: challenges to effective partnerships, key partnership principles, and tools for building and sustaining effective community-academic partnerships; and
- RFP Training Sessions (both electronic and in person) that include electronic resources, including a database of prospective partners and partnership building resources. Ongoing programs that emphasize partnership, program and leadership development, as well as research translation and dissemination of best practices will be provided.

These programs will provide assistance in identifying partners, developing good ideas, and effectively translating the ideas into a formal proposal. In addition to the technical assistance program, one of the purposes of the Type I Funding (i.e. seed grants) available through the RFP process is to facilitate partnerships that may be in the early stages of development. Enhancing and strengthening partnerships between the community and MCW is a key strategy to achieve our goals.

In addition to the partnership development support described above, the MCW Strategic Council for Public and Community Health will provide internal assistance in the development of community partnerships. This Council includes twelve senior faculty and staff and is chaired by the Senior Associate Dean for Public and Community Health. The Council advises the Dean on issues relating to community and public health and will facilitate partnership linkages with MCW faculty.

These community relationships are critical to the achievement of our goal, and MCW is committed to assuring and supporting their development. We are confident that the Healthier Wisconsin Partnership Program can successfully match partners over time. These collaborations, and the synergy that they will generate, will further the identification of community issues within MCW while providing a conduit for translating new methods and findings into the community setting.

IV. FUNDING ALLOCATIONS

A. Public and Community Health

The Consortium will oversee a formal Request for Proposal (RFP) process for the Healthier Wisconsin Partnership Program designed to support community health partnerships. Broad standards for the use of these funds are articulated in the *Advancing a Healthier Wisconsin* Five-Year Plan (the Five-Year Plan). These standards are based on a health improvement model and include health promotion and disease prevention, also recognizing the significant role of building capacity and strengthening systems.

For each partnership, specific standards will be included in the RFP proposal submitted to the Consortium. Each partnership funded will have a written programmatic agreement that clearly defines goals and objectives and will include well-defined, measurable outcomes, evaluation plans and mutual benefits. Annually, the Consortium will review each program and the evaluation results (Appendix D), prior to authorizing continued Funding for any community health partnership project. The Consortium's annual review will be included in the annual MCW report to the Wisconsin United for Health Foundation, Inc. (WUHF) Board.

B. Research and Education

The Five-Year Plan describes the areas of research that will be supported as emerging and critical disciplines for the improvement of public health. Research in the areas of cardiovascular disease, cancer, neuroscience and genetics will contribute to the health of the public over time. Funding will focus on basic science, translational, population health and evaluative research. The Five-Year Plan also identifies other supporting research priorities, and education initiatives for both health providers and consumers. These research and education priorities were reviewed and discussed with the Consortium prior to inclusion into the Five-Year Plan.

MCW has in place mechanisms to oversee funds provided to the school from various sources including the federal government, the State of Wisconsin, and private individuals. Similar to the conversion Funds, these other funds are subject to various restrictions on use, as well as extensive auditing and reporting requirements. To comply with the extensive reporting requirements, MCW tracks all expenditures based on source at the program and faculty level.

MCW annually reviews all program initiatives, their fund sources, outcomes, and future strategies within the College's annual budget process. In addition, requests for new initiatives, their objectives, resource requirements, and funding sources, are reviewed and discussed along with any proposed modification to current programs and the impact upon the College. The allocation of conversion Funding for research and education initiatives will be coordinated with the annual budget process. This will assure a comprehensive

evaluation of the initiatives proposed for funding, a determination of whether it is supplanting existing funding, and whether other resources exist to support the initiative. Conversion funding will support both new areas of research or education as well as on-going scientific or educational programs that are consistent with our Five-Year Plan. We will enhance research and education both through recruitment of new faculty as well as through investment in growth of current MCW faculty.

C. Research and Education Initiative Review Process

Although the Order of the Commissioner of Insurance limits the role of the Consortium to the use of funds for community-based partnerships (35%), MCW has broadened the relationship to enhance coordination with the research and education components. The Consortium and MCW will conduct a coordinated review of the research and education areas of emphasis for funding consideration during the annual budget process.

In addition, the public advisory committees from both medical schools have created a joint educational committee to consider priorities for education initiatives for public health professionals. The joint committee's recommendations will be reviewed and discussed with MCW prior to the beginning of the annual budget process.

As stated above, funding allocations for research and education initiatives will be made within the College's annual budget process. The MCW Budget Committee will ask the MCW Research and Education Advisory Committee to review the initiatives and make recommendations. The Committee is comprised of the senior academic officers of the College: the Dean, the Senior Associate Dean for Research, the Senior Associate Dean for Academic Affairs (Education), the Senior Associate Dean for Public and Community Health, the Senior Associate Dean for Clinical Affairs, and the Senior Associate Dean for Graduate Medical Education. Other faculty will be added to the Committee, or will advise, as necessary.

Research and education initiatives will be evaluated based upon the compatibility with the areas of emphasis outlined in the current Five-Year Plan and the criteria noted below:

- Fit within the *Advancing a Healthier Wisconsin* Five-Year Plan;
- Fit with *Healthiest Wisconsin 2010*, *Healthy People 2010*, and the *Healthiest Milwaukee Initiative*;
- Fit with the Principles of Stewardship;
- Significance;
- Innovation;
- Ability to leverage funding;
- Scientific Merit (applicable to research initiatives);
- Sustainability (as applicable);
- Non-supplanting with existing resources; and
- Conformance to organizational policies and procedures.

The Research and Education Advisory Committee's recommendations will be forwarded to the MCW Budget Committee for review and funding allocation. However, prior to funds being allocated, the College will consult with the Consortium concerning the education and research initiatives that will be financially supported with the Funds. MCW will describe to the Consortium the education and research initiatives, the amount of financial support to be provided, the objectives and milestones to be achieved and the timeline for the initiatives.

The initiatives will be discussed and comments of the Consortium taken into consideration. Some partnership proposals and education and research initiatives may share areas of emphasis defined by both the Consortium and MCW. We anticipate that the partnerships funded by the Consortium and the initiatives funded by MCW will leverage resources whenever possible while furthering the goals of the Five-Year Plan. Through this continuing consultation, both MCW and the Consortium will assure that the Funds allocated to research and education will continue to be used as intended under the Five-Year Plan.

Consortium comments will be presented to the MCW Board of Trustees with the proposed consolidated MCW annual budget. Each funded research and education initiative will have specific objectives and defined measures of evaluation. These will be annually reviewed with the Consortium on the use of these funds. The results of this annual review will be included in the annual MCW Report to the Wisconsin United for Health Foundation.

V. INTERDISCIPLINARY PROGRAM EFFORTS

In developing its Five-Year Plan for the use of conversion funds, MCW looked to its strategic plan as a building block. The Strategic Plan emphasizes the development, promotion and support of collaborations that bring together complementary disciplines to expand the boundaries of knowledge. Building on the strategic plan, the Plan emphasizes an interdisciplinary approach with respect to both research and education initiatives.

Over the past decade, biomedical research has evolved from a focus primarily on biology and biochemistry, to a more quantitative approach employing principles of physics, informatics, technology development and systems engineering approaches and the incorporation of knowledge from the social sciences to enhance our understanding of health and disease. This evolution requires new interdisciplinary research teams of individuals working across traditional biomedical disciplines to extract, analyze and apply information from sources such as genetic and protein databases, molecular biology datasets, and compilations of functional imaging data. This work allows the creation of patient genetic profiles, evaluation of the effectiveness of new drugs in patient subpopulations, understanding of disease mechanisms at the molecular and cellular levels and facilitation of the migration of new knowledge in biomedical research into the clinical setting through the process of bench-to-bedside translational research.

New research opportunities promise to lead to substantial gains in knowledge about human health and disease, including improved prevention of disease and earlier, more effective intercession in disease processes when they occur.

MCW has current interdisciplinary research and educational relationships, some of which are internal, while others are initiatives with external organizations, such as partnerships with the University of Wisconsin-Milwaukee, joint degree-granting programs with Marquette and MSOE, or research collaborations such as the obesity research initiative with the Marshfield Clinic. However, the interdisciplinary infrastructure needed to exploit these opportunities are limited and need to be created as an investment in the future of public and personal health in Wisconsin.

MCW, as stated in the Five-Year Plan, will enter into interdisciplinary collaborations whenever appropriate. These collaborations will also include and leverage the skills of health professionals in disciplines such as nursing, dentistry and public health. This expertise will be important to increasing our effectiveness in population health research.

MCW designed the Five-Year Plan to support interdisciplinary efforts in education, research and public and community health partnerships. By using the Funds to develop interdisciplinary research initiatives and to implement public and community health partnerships, MCW intends that the use of the Funds will have a significant positive effect on efforts to improve the health of the public.

VI. FUND MANAGEMENT

MCW will treat the Funds as a permanent endowment to be invested and appropriated for use in accordance with the Statement of Investment Policy, Endowment Fund (including its three appendices) as may be amended from time to time, (Appendix A.) These Funds will be managed to implement the non-supplanting criteria contained within the Order of the Commissioner of Insurance.

The endowment Funds will support activities in two major areas: (1) public and community health partnerships, and (2) research and education health improvement initiatives. In accordance with the Plan, 10% of the Funds transferred to MCW will be made available outside the Endowment Spending Policy to ensure that a portion of the Funds is available during the initial years of the investment.

In treating the Funds as an endowment, distributions in general will be subject to the MCW Endowment Fund Spending Policy (appendix B of the Statement of Investment Policy Endowment Fund). The specifics of this issue will be directly addressed in the Grant Agreement between MCW and the WUHF.

Currently the distribution of Funds is split 35% to community health based projects and 65% to research and education initiatives. Annually, the Consortium will evaluate the

allocation of the Funds between public and community health partnerships and research and education initiatives and determine whether any adjustment is warranted.

MCW will follow the terms of the Order of the Commissioner of Insurance and “will not use a material portion of the Funds directly or indirectly for real property, or for the purchase, capital lease or construction of a facility, or committed as collateral, or in any other way for such a purpose without the prior approval of two-thirds of all members of the Consortium.”

VII. SUPPLANTING

All funding recommendations will be individually reviewed to determine whether the use of conversion Funds would supplant existing funding. Supplanting means to “replace.” Therefore, for supplanting to occur, the Funds would need to replace other funds available to support the proposed initiative. Guidelines for the determination of supplanting have been developed and are included in Appendix B. (This issue will also be addressed in the Grant Agreement.)

MCW has in place mechanisms to oversee funds provided to the school from various sources, and tracks all expenditures based on source at the program and faculty level. By making funding allocations for research and education initiatives within the annual budget process, MCW assures that an extensive, detailed review of existing funding is undertaken prior to the allocation of conversion Funds.

Each community-based partnership proposal approved by the Consortium will be required to submit the non-supplanting form in Appendix C. This form documents existing funding sources, and whether any other funding requests have been submitted for the same proposal.

MCW will, for each approved distribution of any project (i.e. community health partnership, research or education), make a written determination that the award or budget supported out of the Funds will not supplant. These determinations are required by the Order of the Commissioner of Insurance and will be annually forwarded to the Consortium.

Decisions to fund initiatives, whether in public health, education, or research, will recognize that financial support from this endowment will be generally limited to a 3-5 year period and, therefore, must be replaced by other sources of revenue in the long term.

VIII. ROLE OF THE MCW CONSORTIUM

The issues of oversight and accountability were a central point of the Order of the Commissioner of Insurance. To accommodate this, the Order required that public and community health oversight and advisory committees be formed and that regular reports

and audits be provided to the public to establish accountability mechanisms for and public participation in the governance of the Funds.

The annual reports are developed by and are the responsibility of the Consortium. Annually, MCW and the Consortium will work together to assess research and education initiatives in addition to the community based projects supported by the conversion Funds. This examination will include:

- Review of Fund expenditures;
- Timelines and the means for evaluating projects and initiatives;
- The percentage of Funds used for community based programs, research and education; and
- Review of conformance to non-supplanting requirements.

This examination will be the foundation of the annual reports to be produced by the Consortium regarding the use of the Funds. These reports will be sent to the MCW Board of Trustees and the WUHF, and the public concerning:

- The specific Funding of public and community health partnerships;
- The specific use of Funds for health care provider education and medical research initiatives;
- The evaluation results to date of Funded community partnership programs and education and research initiatives;
- Review of conformance to non-supplanting requirements;
- Review of expenditures of the Funds in relation to the goals of the then current Five-Year Plan; and
- The financial status of the Funds.

To prepare this annual report, the Consortium and MCW will conduct a coordinated process. Specifically, MCW will consult with the Consortium concerning the education and research initiatives that will be financially supported with the Funds. MCW will describe to the Consortium all the funded education and research initiatives, the amount of financial support to be provided, the objectives and milestones to be achieved, progress to date and the timeline for the initiatives.

MCW will also consult with the Consortium during the annual budget review and development process. The budget will describe the education and research initiatives that are proposed for financial support within the annual budget. MCW values the Consortium's input regarding the research and education initiatives proposed for funding and will include their comments with the proposed consolidated annual budget that is submitted to the Board of Trustees.

IX. WISCONSIN UNITED FOR HEALTH FOUNDATION

We sincerely appreciate the efforts of the WUHF Board to date and the commitment of the members to improving public health. We welcome the opportunity to provide to the members of the Wisconsin United for Health Foundation Board, while it remains in existence, copies of our annual reports to the Consortium and to consider their comments.

December 2003

MEDICAL COLLEGE OF WISCONSIN
ENDOWMENT INVESTMENT POLICY
& SPENDING POLICY

**Supplant Determination Criteria For
Advancing A Healthier Wisconsin Funds**

The March 28, 2000 Order of the Commissioner of Insurance requires that the Advancing a Healthier Wisconsin Funds “may not be used to supplant funds or resources that are available from other sources.” The MCW Consortium on Public and Community Health, Inc. is required to report annually on “whether the [Funds] are supplanting resources otherwise available” for both the 35% portion and the 65% portion of the Funds. The College must report annually the basis for the College’s “determination that the application of the [Funds] does not supplant other resources that may be available to accomplish the same purposes.”

Supplant means to replace. The concern over supplanting focuses on replacing existing funding such as federal or state grants or appropriations with the Funds for specific projects or uses. To ensure compliance with the Order not to supplant, the following set of criteria will be used to identify existing or available funding for each proposed project or use and to determine whether such existing or available funding would be replaced with financial support by the Funds.

By way of contrast, supplement means to add to. Use of the Funds to supplement other financial resources is not prohibited under the Order. Matching funding and opportunities to leverage the Funds to obtain other sources of financial support are to be encouraged.

Prior to recommending, approving or authorizing financial support by the Funds for a proposed research or education use or a proposed community partnership project, the MCW Dean and Executive Vice President and the MCW Senior Vice President Finance and Administration will assess whether other financial resources exist or are available for the project or use and must certify that no financial resources will be supplanted.

With respect to each use of the 65% portion of the Funds allocated to research and education, the Budget Committee will review and verify that the Funds do not supplant. The Budget Committee must consider each identified criterion as it may apply to the specific program to be supported by the Funds. Upon the determination of the Budget Committee that all relevant criteria have been considered, a recommendation for use of the Funds will be submitted to the MCW Board of Trustees.

With respect to each project supported by the 35% portion of the Funds allocated to community partnerships, the Consortium will assess whether other financial resources exist or are available for the project, including an assessment of whether the community partner has other financial resources available for the project, and must certify that no financial resources will be supplanted.

The following criteria will be considered to determine whether financial support by the Funds for a proposed project or proposed use would supplant other available financial resources.

Supplant Determination Criteria For Advancing A Healthier Wisconsin Funds

1. Closely related projects or uses and financial resources for related projects or uses

A related project or use includes (i) a project or use with a similar or related purpose conducted by the College or within the community and (ii) all projects, research activities and education activities conducted by the faculty member and/or community partner within the three-year period immediately prior to the application or submission. All related projects and uses and financial resources for such related projects and uses should be identified and considered.

2. Sources of financial resources for the project or use

Financial support provided by a governmental source for a project or use within the three-year period prior to the date of the application or submittal, should be identified and considered. Financial support provided by a source other than a governmental source and other than the Funds for a project or use within the two-year period prior to the date of the application or submission should be identified and considered.

3. Availability of Federal funding

Consideration should be made whether Federal funding is available, including grants awarded for the project or use, announced available funding for the project or use and eligibility to apply for available funding.

4. Availability of State funding

Consideration should be made whether State funding is available. Consideration should be made with respect to programs for which state funding has been or may be reduced due to budget cutbacks. Consideration should be made with respect to governmental mandated programs without governmental funding.

5. Availability of College corporate funding

College corporate funds are derived from tuition, the academic enrichment fund assessment on clinical revenue, facilities and administrative fees paid under federal grants, investment income on working capital and unrestricted philanthropy. Consideration should be made whether College corporate funds are available. Expenditures of College corporate funds for a project or use during the two-year period immediately prior to the application or submission for financial support by the Funds should be identified and considered.

6. Availability of community funding

Sources of community funds will be determined on a case-by-case basis. Consideration should be made whether community funds are available. Community financial support for a project or use provided during the two-year period immediately prior to the application or submission for financial support by the Funds should be identified and considered.

7. Availability of matching funds; opportunities for leveraging

Supplemental uses and limited term funding will be factors in the consideration process. Matching funding and opportunities to leverage the Funds to obtain other funding are to be encouraged.

8. Other factors applicable to the specific proposed project or use

Either the Dean and Executive Vice President, the Senior Vice President for Finance and Administration or the Consortium may identify other factors to be considered.

Dated: November 2003

**The Healthier Wisconsin Partnership Program
Non-Supplanting Form**

The March 28, 2000 Order of the Commissioner of Insurance requires that the Advancing a Healthier Wisconsin Funds “may not be used to supplant funds or resources that are available from other sources.” The MCW Consortium on Public and Community Health, Inc. is required to report annually on “whether the [Funds] are supplanting resources otherwise available” for both the 35% portion and the 65% portion of the Funds. The Medical College of Wisconsin must report annually the basis for the College’s “determination that the application of the [Funds] does not supplant other resources that may be available to accomplish the same purposes.”

Supplant means to replace. To ensure compliance with the Order not to supplant, the following set of criteria will be used to identify existing or available funding for each proposed project or use and to determine whether such existing or available funding would be replaced with financial support by the Funds.

1. Date of request or project application for financial support by the Funds.
2. Length of project or use to be supported by the Funds.
3. Description of closely related projects or uses and sources of funding for related projects or uses.
4. Sources of current or previous funding for the project or use
 - a. Federal funding.
 - b. State funding.
 - c. College corporate funding.
 - d. Community funding.
5. Other factors applicable to the specific proposed project or use.

With respect to each project that is financially supported out of the 35% portion of the Funds allocated to community partnerships, the written application to be submitted to the Consortium must consider each of the identified criteria. The application will also be submitted to the Dean and Executive Vice President and the Senior Vice President for Finance and Administration.

Each partnership should address the following statements. Please use additional paper as needed.

1. Please indicate date of request for financial support.
2. Please indicate proposed time period for the project.
3. Please describe other funding that the partnership now has, or has had in the last three years, for the proposed project:
 - a. federal funding
 - b. state/local government funding

- c. foundation funding
 - d. MCW corporate funding
 - e. local community funding
 - f. other
4. Please indicate whether the partnership has applied to another funding source for the same or similar project. If so, what was the date and result of that application, or when do the applicants expect to receive notification?
- a. federal funding
 - b. state/local government funding
 - c. foundation funding
 - d. MCW corporate funding
 - e. local community funding
 - f. other
5. Please describe projects that the partnership has previously done, or is currently doing, that are closely related to the proposed request (e.g., brief description, time period, funding).
6. Please indicate any other factors that would be relevant to the non-supplanting requirement.

Each project co-director must sign below.

Co-Director Signature _____

Co-Director Signature _____

MCW Consortium on Public and Community Health

**Healthier Wisconsin Partnership Program
Evaluation Framework**

The principles of stewardship included in the five-year plan will serve as benchmarks and provide the evaluation framework for the Healthier Wisconsin Partnership Program. Evaluations conducted within this framework will form a basis from which the Consortium board will develop revisions to the plans at least every five years.

1. Collaboration

The board will facilitate effective collaboration between MCW faculty and community partners to capitalize on the strengths that each brings to the table. The board will build upon Healthiest Wisconsin 2010, the state health plan, and will coordinate its efforts with the UW Medical School.

Criteria

- New partnerships developed as a result of funded projects
- Project outcomes link to Healthiest Wisconsin 2010 priorities

2. Prioritization

The board will strive for maximum impact to improve the health of the people of Wisconsin by implementing a deliberative prioritization process that balances state and local needs.

Criteria

- Geographic distribution of funds across Wisconsin
- Distribution of funds across targeted populations
- Funded projects help meet the state health plan goals

3. Leverage

The board will work to leverage funds, with an emphasis on pooling existing resources, attracting additional dollars, and encouraging sustainability. The board will also facilitate the expansion of community capacity and leadership through the initiatives.

Criteria

- Projects leveraged additional funds
- Projects made sustainable difference in the health of the public

4. Accountability

The board will insure public accountability for the use of the funds and the impact of the programs on improved health. This will include both oversight responsibility and rigorous evaluation. The board will communicate with, and welcome input from, the public.

Criteria

- Process considered transparent, accessible, and fair
- Funded projects linked to the health improvement model

5. Transformation

The board will work to effect change by emphasizing prevention, expanding the Medical College's focus on the health of the public, and encouraging innovation.

Criteria

- Documented public health innovations as determined through peer review and recognition by experts in the field
- Improved community and MCW faculty perceptions about the value of community- medical school partnerships
- MCW faculty participation in community/public health projects increased

12/18/03