



MEDICAL COLLEGE OF WISCONSIN

ADVANCING A HEALTHIER WISCONSIN

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

MEETING MINUTES

▪ 2015 ▪

The MCW Consortium on Public and Community Health is committed to building broad public awareness and encouraging public input related to the Advancing a Healthier Wisconsin endowment. Information regarding the work of the MCW Consortium can be found in these minutes and on the program web site at www.mcw.edu/healthierwisconsin

For any other document inquiries regarding information that does not appear in these minutes, please refer to the web site links regarding:

- [Bylaws](#)
- [Policy on Conflicts of Interest](#)
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ADVANCING A HEALTHIER WISCONSIN

**MCW Consortium on Public and Community Health
Healthier Wisconsin Partnership Program--Responsive Component Cohort 2
Stage 1 Subcommittee Review Meeting
Medical College of Wisconsin --Executive Board Room
January 29, 2015--10:00 am - 1:00 pm
Minutes**

Directors Present: Genyne Edwards, Elizabeth Giese, Paula Lucey (Chair), Cheryl Maurana

Others Present: Christina Ellis, Tim Size

I. CALL TO ORDER

The meeting of the Subcommittee of the Board of Directors was called to order at 10:07 am.

II. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Christina Ellis introduced the process for the Subcommittee review and discussion of the Stage 1 Changemaker Brief Proposals for the Responsive Component Cohort 2 of the Healthier Wisconsin Partnership Program. She reminded the Subcommittee they are making recommendations to the Consortium, and those recommendations will be advanced to the full Consortium for their approval at the meeting on Thursday, February 5, 2015.

Ms. Ellis reviewed the Conflict of Interest Policy and directed that members having indicated a conflict of interest through the online review tool must recuse themselves from further discussion, scoring and voting on those particular submissions by leaving the room for that review and vote. During the review process, the Conflict of Interest Policy was enforced and documented for each proposal. Staff also captured 'parking lot' issues regarding process improvement for the Subcommittee to revisit at a later time.

It was noted that one reviewer, Geri Lyday, was absent and her review comments were shared as each proposal was discussed and her original vote remained as entered in her individual review.

Subcommittee members discussed the scores resulting from the online scoring and agreed not to discuss or advance submissions that received 40% or lower affirmative vote, with the exception of one proposal that was requested to be discussed. Additionally, Subcommittee members agreed to advance for recommendation without discussion submissions that received 83% or greater affirmative vote, with the exception of one proposal that was requested to be discussed.

After further discussion and review, the Subcommittee recommended seven Stage 1 Changemaker Brief Proposals to be invited back for Stage 2 Pitch Presentation, to be approved by the full Consortium.

III. ADJOURN

There being no additional business, the meeting of the Review Subcommittee was adjourned at 12:17 pm.



ADVANCING A HEALTHIER WISCONSIN

**MCW Consortium on Public and Community Health
Medical College of Wisconsin
Executive Board Room
February 5, 2015
2:00 to 4:00 p.m.**

Minutes

Directors Present: Bevan Baker, Genyne Edwards (by phone), Lieske Giese (by phone), Joseph Kerschner, Paula Lucey (Chair), Cheryl Maurana, John Raymond, Joy Tapper, Dan Wickeham

Others Present: Christina Ellis

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 2:03 pm.

II. APPROVE MINUTES FROM DECEMBER 4, 2014 AND JANUARY 29, 2015 SUBCOMMITTEE

The December 4, 2014 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

The January 29, 2015 meeting minutes of the MCW Consortium Public and Community Health, Healthier Wisconsin Partnership Program—Responsive Subcommittee meeting were reviewed and unanimously approved.

III. RESEARCH AND EDUCATION

Dr. Raymond presented a brief overview of a proposed MCW School of Pharmacy. Dr. Raymond noted that a request of AHW support for the proposed School of Pharmacy will be presented to the Consortium in the coming months. He anticipates a request of approximately \$3M over 22 months to design and develop the proposed School of Pharmacy's leadership and initial program development.

The Consortium inquired as to whether there would be opportunities for students to obtain dual degrees while enrolled within the School of Pharmacy. Dr. Kerschner commented that this was a component that could be of interest to medical students. The Consortium thanked Dr. Raymond for his presentation and noted that they look forward to reviewing the AHW proposal at a future meeting.

IV. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

A request was submitted to the Healthier Wisconsin Partnership Program (HWPP) on behalf of the Violence Prevention Initiative (VPI) partners for a no-cost extension and reallocation of some monies awarded to the VPI. To provide context for this request, Ms. Lucey noted that in 2010, the MCW Consortium funded the VPI's implementation phase for \$8.1M. VPI began on February 1, 2010 with an end date of June 30, 2015. Ms. Lucey referenced the purpose of the VPI to: 1) prevent violence and intervene early with youth ages 0-11 years with schools and neighborhoods, 2) influence/motivate youth aged 12-17 years with neighborhoods and schools, 3)

educate, develop, catalyze and convene across all youth to build capacity for violence prevention with neighborhoods, schools and the broader community.

Christina Ellis reviewed the document submitted by VPI requesting a no-cost extension and reallocation of approximately \$866,000 anticipated to be unspent from the original award over an extended 12-month period. The additional year and use of unspent funds would accommodate completion of the evaluation of the VPI and the opportunity to meet and exceed the remaining goals in Priority 3 and, subsequently, extend the reach of the VPI after HWPP funding ends. Ms. Ellis reminded the Consortium of HWPP's no-cost extension policy that requires no-cost extension requests to be received 90 days prior to the end of the project period, are not allowed to exceed 20% of the total approved budget, and cannot exceed six additional months past the project original end date. Typically, a no-cost extension may not propose any new work or new partners.

Dr. Maurana proposed several suggestions for next steps to the Consortium members for consideration:

1. Grant the No-Cost Extension as requested, with or without modification.
2. Maintain the current end date of June 30, 2015; all unspent funds would be returned to the endowment; partners would be encouraged to submit new ideas through the HWPP Responsive component and look forward to intersections with the Strategic component.
3. Maintain the current end date of June 30, 2015; and reaffirm commitment to violence prevention through the lens of changemaking.

Ms. Edwards suggested taking a closer look at what has been done so far by consulting with a third-party to have an objective organization assess the current success and recommend next steps in violence prevention to enhance and move forward the investment that has already been made.

Ms. Giese noted the environment under which the original funding was approved had significantly changed. By maintaining the current end date, the Consortium will have an opportunity to step back, examine lessons learned and then decide how best to invest in violence prevention through the Endowment's new lens of changemaking.

Following discussion, Ms. Edwards introduced a motion to maintain the current end date and reaffirm the Consortium's commitment to violence prevention through the lens of changemaking, which could include assessment of the investment conducted by a third party consultant. The motion was seconded and opened for discussion.

Dr. Kerschner suggested changing the word "could" to "would" in order to allow for a broader perspective in looking at the data which has already been generated.

Mr. Baker was not supportive of the motion, but indicated that he was supportive of what the initiative was originally established to accomplish. Mr. Baker commented that establishing the VPI represented a bold statement by MCW and decreasing violence within the community is an extremely tough job. He stressed that violence was not going to be solved in five years and that it was important for the Consortium to maintain its commitment to violence prevention as an important priority.

Dr. Maurana reminded the Consortium of its responsibilities to ensure proper stewardship of AHW.

Ms. Lucey and Ms. Tapper asked Christina Ellis to clarify which partners' funding was being discussed. Ms. Ellis indicated that the available funds being referenced within the no-cost extension request had been originally allocated for the VPI MCW partners.

Dr. Raymond noted that he had expected significant leveraging and sustainability and that he was concerned that these activities would not be achieved by extending the end date.

Ms. Tapper appreciated the VPI's accomplishments thus far, but noted that within the last five years the community has changed and there is a heightened awareness and recommitment to violence prevention by others in Milwaukee. She agreed that an assessment should occur that culminated in a strategic plan, rather than an evaluation, to inform any future investments.

Mr. Wickeham indicated that he had extensively reviewed the VPI progress reports and materials. He agreed with Ms. Tapper and the proposed motion.

Ms. Tapper requested that the results from any data analysis be delivered to the community partners to provide the partners the opportunity to leverage the work that has been done.

Following additional discussion, an amended motion was made to maintain the current end date [June 30, 2015] of the VPI and reaffirm the Consortium's commitment to violence prevention through the lens of changemaking, which would include assessment and strategic planning towards continued investment conducted by a third party consultant completed in a timely manner. The motion was seconded. Eight Consortium members approved the motion, Bevan Baker opposed the motion.

Christina Ellis stated that during the November 13, 2014 MCW Consortium meeting, 18 currently funded HWPP funded projects were reviewed. Two projects had received a 'yellow' categorization due to delays and significant project changes. The projects completed an Interim Report in response to the Consortium-identified concerns. The Consortium reviewed and discussed the interim reports to determine whether projects would receive continued funding. The two projects were *Diversity Matters: Recruiting Wisconsin's Future Public Health Workforce* and *Healthier Obstetrical Outcomes through Enrichment Activities and Community Engagement*.

Following a review of the Interim Report provided by the *Diversity Matters: Recruiting Wisconsin's Future Public Health Workforce* project and discussion by the Consortium members, a motion was made to approve the project for continued funding in Year 4 with the expectation of an additional update from partners following the February Advisory Committee meeting as well as the Spring 2015 implementation, verifying completion of those activities and next steps to complete remaining project activities and achieve the project-specific objectives by the project end date. The motion was seconded and unanimously approved.

Following a review of the Interim Report provided by the *Healthier Obstetrical Outcomes through Enrichment Activities and Community Engagement* project and discussion by the Consortium members, a motion was made to approve the project for continued funding in Year 2 with the expectation of additional information provided in the September 2015 progress report and final report regarding continued Zeta involvement in the project and in the long-term partnership. The motion was seconded and unanimously approved.

Christina Ellis provided an overview of the HWPP Responsive Component Stage 1 Changemaker Brief Proposals, which were submitted on January 9, 2015. Twenty-four proposals passed technical review by Healthier Wisconsin Partnership Program staff and a review by the MCW Government and Community Relations Office to ensure no-lobbying concerns.

The Responsive Subcommittee, consisting of four MCW Consortium member and two external content experts, met on January 29, 2015 and recommended a slate of submissions to be invited for the Stage 2 Pitch Presentation, pending review and approval by the full Consortium. Seven proposals were recommended by the Subcommittee to receive an invitation to participate in the Stage 2 Pitch Presentations.

Consistent with the conflict of interest policy, each member of the Consortium who identified a conflict of interest absented themselves from the discussion and voting. The following conflicts of interest were identified:

- *Advocating for Model Policies that Support Teen Pregnancy/STI Prevention Activities in Milwaukee*—
Bevan Baker

- *Increasing Low-SES Consumers Access and Use of Milwaukee Farmers Markets to Improve Produce Intake*—Genyne Edwards
- *Prenatal Oral Healthcare: Systems Change to Improve Access*—Joy Tapper
- *Transforming Eau Claire: Designing a Healthy Community*—Lieske Giese

The Consortium unanimously approved the subcommittee recommendation to invite the seven proposals to participate in the Stage 2 Pitch Presentations.

Christina Ellis provided an overview of the first RFP under the HWPP Capacity Building component. Two submissions were received. Each underwent extensive review by a Subcommittee that included Dr. Maurana, Ms. Lucey, and Mr. Wickeham, as well as three non-consortium members. This review process also included a Pitch Presentation. The Subcommittee recommended one proposal titled, *Human Subjects Protection Trainings & Language Barriers Should not Burden Healthier Wisconsin Projects* for the Consortium's consideration. The recommended project is requesting funding of \$254,692 over 24 months to develop a customizable curriculum to deliver project specific training to satisfy IRB requirements in lieu of CITI training. The project also will be vetting a flexible translation policy and procedures.

No conflicts of interest were identified for this proposal.

A motion was made, seconded, and unanimously approved to fund the *Human Subjects Protection Trainings & Language Barriers Should not Burden Healthier Wisconsin Projects*.

Ms. Ellis noted that the HWPP Strategic component is continuing to be developed and an update will be provided at the March 18, 2015 Consortium meeting.

V. ADVANCING A HEALTHIER WISCONSIN

Dr. Maurana presented the 2013-2014 Annual Report for the Advancing a Healthier Wisconsin Endowment. Pending approval by the MCW Consortium, the annual report will be presented to the MCW Board of Trustees and will be sent to the WUHF Board this spring.

Ms. Lucey noted that she had met with Christina Ellis and Greg Calhoun to discuss possible strategies for enhancing dissemination of the annual report.

Following discussion about the Annual Report, a motion was made, seconded, and unanimously approved to approve the 2013-2014 Annual Report for the Advancing a Healthier Wisconsin Endowment.

Due to limited meeting time, Dr. Maurana indicated she will provide an update on the Five-Year Plan implementation during the March 18, 2015 meeting.

Dr. Maurana informed the Consortium that the Legislative Audit Bureau auditors have selected ten HWPP projects, plus the VPI and ten Research and Education Program projects for review. The project partners have been notified that their projects have been selected by the Legislative Audit Bureau auditors. AHW was recently notified that a new lead auditor will be assigned to the program audits of AHW and the Wisconsin Partnership Program.

VI. ADJOURN

There being no additional business, the meeting of the MCW Consortium on Public and Community Health adjourned at 4:03 p.m.

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Next Meeting:
March 5, 2015

11:30 a.m. to 4:00 p.m.
Medical College of Wisconsin - Room HRC H4940/4950



ADVANCING A HEALTHIER WISCONSIN

**MCW Consortium on Public and Community Health
Medical College of Wisconsin
H4940/4950, Cardiovascular Center Conference Room
March 5, 2015
Minutes**

Directors Present: Bevan Baker, Genyne Edwards, Lieske Giese, Joseph Kerschner, Paula Lucey (Chair), Cheryl Maurana, Joy Tapper, Dan Wickeham

Others Present: Christina Ellis, Tim Size, Geri Lyday

Absent: John Raymond

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 11:40 am.

II. APPROVE MINUTES FROM FEBRUARY 5, 2015

The February 5, 2015 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

III. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

The Consortium engaged in Stage 2 of the HWPP Responsive Cohort 2 pitch presentation review. Christina Ellis introduced the pitch presentation process. Consortium members were reminded that following each pitch presentation the Consortium would individually vote on those partnerships they would like to be invited to submit a Stage 3 Call for Changemaker Plan full proposal. The full proposals will be reviewed during the May 7, 2015 Consortium meeting.

Ms. Ellis reviewed the Conflict of Interest Policy and directed that members having a conflict of interest should indicate so prior to the presentation and recuse themselves from further discussion, scoring and voting on those particular submissions by leaving the room for the pitch and vote. During the review process, the Conflict of Interest Policy was enforced and documented for each proposal.

The following conflicts of interest were identified:

- Advocating for model policies that support teen pregnancy/STI prevention activities in Milwaukee -- Bevan Baker
- Increasing Low-SES Consumers Access and Use of Milwaukee Farmers Markets to Improve Produce Intake—Genyne Edwards
- Prenatal Oral Healthcare: Systems Change to Improve Access—Joy Tapper
- Transforming Eau Claire: Designing a Healthy Community— Lieske Giese
- Beyond the Bell Milwaukee-- Genyne Edwards

During the meeting time allocated for the Strong Communities pitch, the Consortium was made aware of the partnership's unique and challenging circumstances preventing the partners from being able to be present during the meeting. Following a robust discussion, the Consortium members agreed that a postponement of a pitch presentation cannot be accommodated within the current timeline of the process for this cohort.

Seven applicants presented a brief overview or ‘pitch’ of their proposed project followed by questions from and dialogue with the MCW Consortium. Following each pitch, the MCW Consortium members discussed and voted individually whether to invite each partnership for the Stage 3 Call for Changemaker Plan full proposal. Following all presentations and voting, MCW Consortium members reviewed the voting results and engaged in further discussion to identify recommendations. The Consortium unanimously approved six applicants to advance to submit Stage 3 Call for Changemaker Plan full proposals.

IV. ADJOURN

There being no additional business, the meeting of the MCW Consortium on Public and Community Health adjourned at 4:00 p.m.



**Next Meeting:
March 18, 2015
1:00 – 3:00 pm
Medical College of Wisconsin
Executive Board Room**



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin

Executive Board Room, M1360

March 18, 2015--1:00 p.m. to 3:00 p.m.

Meeting Minutes

Directors Present: Bevan Baker (by phone), Genyne Edwards, Lieske Giese (by phone), Joseph Kerschner, Paula Lucey (chair), Cheryl Maurana, Joy Tapper, Dan Wickeham

Others Present: Christina Ellis

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 1:03 pm.

II. APPROVE MINUTES FROM MARCH 5, 2015

The March 5, 2015 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

III. ADVANCING A HEALTHIER WISCONSIN

Dr. Maurana provided an update on the accomplishments of the Endowment's first year of changemaking through the AHW Five-Year Plan, *Moving from Grantmaker to Changemaker*. She reviewed how the AHW endowment has implemented five of its seven new strategies to invest in and advance changemaking across the research, education and public and community health program areas.

Dr. Maurana noted how the Healthier Wisconsin Partnership Program (HWPP) has launched two responsive funding cycles focused on policy and systems change. The HWPP Strategic component identified community-based mental and behavioral health as its first funding priority. HWPP's Strategic component aims to catalyze knowledge sharing, partnership development, and the creation of new initiatives promoting education, enhancing prevention, and increasing the prevalence of positive mental health.

Through the AHW Research and Education Program (REP), Dr. Maurana commented on the new funding opportunities available to researchers through the Responsive component's RFP process. The Responsive component brings together basic science and clinical researchers to advance discovery and improve health. Through its Strategic component, REP has invested in several multi-year, large-scale initiatives, including advancing cardiovascular disease research and testing new methods to reduce HIV/AIDS. These initiatives have an increased emphasis on clinical and translational research to accelerate the discovery and testing of improved treatments. REP also provided funding for the development of several new, innovative education initiatives including developing health policy and health care delivery systems pathway for medical students and the new School of Pharmacy, among others.

Dr. Maurana noted that as the AHW Endowment moves forward, it will focus on implementation of the Five-Year Plan's Capacity Building and Cross-Cutting components. In addition, the Consortium and the AHW REAC have committed to identifying strategies that bring together the strengths of the research and education strategic priorities with HWPP. This will be accomplished through the development of cross-cutting initiatives that integrate the contributions of research, education and community partnerships.

Looking to the year ahead, the Consortium will continue to invest in policy and systems change, advance learning communities for our mental and community behavioral health focus, expand collaborative research in population health and comparative effectiveness, among other areas, and increase investments in innovative education initiatives that are transformative re-shaping how health care professionals are trained to meet the changing demands of Wisconsin's health needs.

Dr. Maurana reminded the Consortium members that many have commented in past meetings, to move forward with this ambitious new direction, we will need to realign staff to ensure a more engaged, proactive model in working with our applicants and funded partners to help ensure success. This will be a priority over the coming months to ensure we are best positioned for the successful implementation of the AHW Five-Year Plan's many program deliverables.

Ms. Lucey suggested board development opportunities be identified that can help to advance program and project accomplishments. She also emphasized the importance of recognizing AHW staff and ensuring appropriate compensation for the high level of their work. Ms. Edwards agreed and added that the marketing and packaging of program successes should be sought and considered from a community-perspective to enhance communication and dissemination.

Dr. Maurana added that in May the Consortium will be provided with an update on the endowment status. Also, the Consortium will discuss and evaluate the allocation of the AHW funds between public and community health partnerships and research and education initiatives and determines whether any adjustment is warranted.

Dr. Maurana informed the Consortium that the LAB program audit lead staff contact has indicated that the interviews with selected project partners will be completed by mid-April.

IV. RESEARCH AND EDUCATION

Strategic Component

Dr. Kerschner presented an overview of the proposal titled *An Innovative Model for Educating the Pharmacists of the Future: Pharmacy School Design and Development* requesting \$3 million over two years to design and develop a School of Pharmacy at the Medical College of Wisconsin to address workforce needs in Wisconsin. Mr. Wickeham noted that there were no supplanting concerns. Following discussion, the Consortium recommended specifically including a piece within the curriculum addressing the importance of public health.

Dr. Kerschner presented an overview of the proposal titled *StEP-UP: Student Enrichment Program for Underrepresented Professions in Medicine* requested \$925,915 over five years to partner with educational institutions to nurture underrepresented in medicine students to better prepare them for success in the field of medicine. Mr. Wickeham noted that there were no supplanting concerns. The Consortium commented on the value of the program and encouraged other schools to participate.

Dr. Kerschner presented an overview of the proposal titled *Developing an Anesthesiologist Assistant Program at MCW* requesting \$990,876 over three years to develop an innovative Anesthesiologist Assistant program to increase access to quality anesthesia care throughout Wisconsin. Dr. Maurana noted that the partnership has a strong collaboration and once established has the ability to be self-sustaining through tuition revenues. Mr. Wickeham noted that there were no supplanting concerns. Ms. Giese commented on the potential for collaboration with the Wisconsin Practice-based Research Network.

Responsive Component Update

Dr. Kerschner provided an update on REP Responsive Component, noting an RFP was released in October resulting in a total of 66 letters of intents. Following a review process, 16 letters of intent were invited to submit full proposals. Of the invited proposals, 12 proposals were advanced to full review. The anticipated start date for these projects is July 1, 2015.

Capacity Building Component

There was no update for the Capacity Building Component.

V. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Strategic Component Update

Ms. Ellis reported the positions of Facilitator and Evaluator have been filled. The position of Subject Matter Expert remains open and HWPP will continue to look for qualified candidates to fill the position. Initial steps in the initiative include efforts to conduct community outreach in April and May around the issue of mental and behavioral health. Consortium members discussed the nomenclature of mental health and behavioral health and how these definitions will be important to the programming going forward.

A motion was made, seconded, and unanimously approved to accommodate up to \$227,075 through the HWPP budget to secure contracts for the facilitator, evaluator and direct costs associated with conducting the community presentations, roundtables and learning communities for the HWPP Strategic Component.

Responsive Component Update

Ms. Ellis updated the Consortium on the projects awarded through the first cohort of the Responsive Component. Currently, two of the three have completed the funding agreement process and the other project has completed all of the materials and is in the final stages of approval. The first progress reports will be due in mid-July and a more detailed update will be shared after that time.

HWPP staff are conducting individual orientation calls or in person meetings with each of the six partnerships selected to move forward with full proposals for the second cohort of Responsive funding. During these meetings, the proposal materials and submission process are reviewed as well as the capacity building opportunities. During the May 7th Consortium meeting, each proposal will be discussed individually and final funding decisions will be made. Following the May 7 funding decisions, applicants will be notified of their conditional award status pending MCW Board of Trustees approval later in May and encouraged to begin to work on their funding agreement and IRB submission.

Capacity Building Component Update

Ms. Ellis reminded the Consortium that the CITI product development proposal that was funded by the Consortium titled, *Human Subjects Protection Trainings & Language Barriers Should not Burden Healthier Wisconsin Projects*, is still pending Board of Trustees review for approval that is anticipated later this month.

Legacy Projects

The Healthier Wisconsin Partnership Program staff have reviewed, interviewed and selected a consultant for the VPI assessment and are in contract negotiations with ORS Impact consulting group, which specializes in evaluations of complex and dynamic systems with particular focus on comprehensive community change efforts. The consulting costs are estimated at \$81,000. They proposed using an Outcomes Framework that they developed with Tom Kelly, a former evaluation manager at Annie E. Casey Foundation.

Ms. Edwards introduced Social Impact Bonds as a process that results in a contract with the public sector to pay for improved social outcomes that can result in public sector savings. Social Impact Bonds can help to “scale up” effective interventions from one city or state to other areas. Ms. Edwards suggested the VPI consultant may be interested in identifying if an aspect of VPI could be leveraged through the use of a Social Impact Bond. Mr. Baker added that some models have worked quite well in other states at bringing people to the table, and that Social Impact Bonds could be a great way to continue the conversation with people who aren’t normally on the funding side.

Ms. Lucey commended the staff on the work that has been done with the partnerships to assist them to understand the new direction and the changemaking philosophy that AHW had made over the last year.

VI. ADJOURN

The Consortium discussed and decided to cancel the April 2, 2015 meeting due to the proximity of the holiday. There being no additional business, the meeting of the MCW Consortium on Public and Community Health adjourned at 2:47 p.m.



Next Meeting:

May 7, 2015

2:00 to 4:00 p.m.

Medical College of Wisconsin

Executive Board Room, M1360



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin
Executive Board Room, M1360
May 7, 2015 - 2:00-4:30 PM

Meeting Minutes

Directors Present: Bevan Baker, Genyne Edwards, Lieske Giese, Joseph Kerschner, Paula Lucey (chair), Cheryl Maurana, John Raymond, Joy Tapper, Dan Wickeham

Others Present: Christina Ellis

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 2:05 pm.

II. APPROVE MINUTES FROM MARCH 18, 2015

The March 18, 2015 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

III. ADVANCING A HEALTHIER WISCONSIN

Ms. Margie Spencer provided an overview of the current AHW Endowment financials. The overview provided information regarding the AHW Endowment balances as of March 31, 2015.

Following Ms. Spencer's presentation, the Consortium discussed the 35%/65% split in the AHW Endowment's allocation.

Following discussion, a motion was made to retain the existing 35%/65% Endowment split, recognizing that the vote on the allocation occurs on an annual basis. This motion was unanimously approved.

IV. RESEARCH AND EDUCATION PROGRAM

Dr. Raymond provided an update on the proposed MCW School of Pharmacy. He thanked the Consortium for its support of the \$3M request to the AHW Endowment to support the School of Pharmacy's development. He noted that the AHW proposal will be presented to the MCW Board of Trustees on May 29, 2015 with the MCW School of Pharmacy feasibility study.

Dr. Kerschner provided an update on the AHW funded community medical education program and its MCW Green Bay and Central Wisconsin campuses. He reported that the first class of medical students will begin at the MCW Green Bay campus in July 2015.

Dr. Kerschner noted that the MCW-Central Wisconsin campus received accreditation from the Higher Learning Commission and the Liaison Committee for Medical Education and will begin recruitment for the first class of medical students beginning July 2016.

He also noted that there had been strong interest in potential residency program placements for both Family Medicine and Psychiatry programs in Green Bay and Central Wisconsin.

Dr. Kerschner provided an update on the AHW Research and Education Program (REP) Responsive awards. The REP Responsive component was launched October 2014. AHW REP received 66 letters of intent and invited 16 applicants to submit full proposals. Full proposals were reviewed for technical compliance and evaluated by a merit review panel. The Research and Education Advisory Committee advanced six applications for funding based on the merit review panel's recommendations. Each award will be \$200,000 for two years through this funding cycle. They include:

- *Novel Target for the Treatment of Type 2 Diabetes*
- *Effects of Inflammation on Cognition, Behavior and Psychiatric Illness*
- *Molecular Pathways Implicated in Amyotrophic Lateral Sclerosis*
- *A Structured-Based Drug Discovery Resource for Clinical and Basic Scientists*
- *Ensemble Prediction Models for Personalized Therapy and Survival Analysis*
- *Genetic Mapping and Gene Identification in Acute Kidney Injury*

Dr. Kerschner commented on the high quality of the proposals and that they were well-positioned to be transformative. The proposals will be reviewed for approval by the MCW Board of Trustees at its May meeting. Mr. Wickeham indicated no supplanting concerns.

There was no update for the Capacity Building Component.

V. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Ms. Lucey presented the HWPP FY16 budget. Christina Ellis noted some differences between the FY15 and FY16 budgets. She noted that the FY16 budget reflected projected expenses for each HWPP funding component including personnel costs and program development costs necessary for the implementation of each specific component, such as technical assistance provider contracts, meeting costs, and travel.

Ms. Tapper expressed interest in learning how AHW's budget compared to other health conversion funds' operations and grant distributions. Ms. Edwards commented that information from other conversion foundations could be helpful in informing program management costs. Dr. Maurana responded that national foundation and conversion fund management models had been considered in the development of HWPP's FY16 staffing plan and budget. She agreed that as HWPP moves into full implementation of its funding components, there could be the need for additional staff, but that these needs were not reflected in the FY16 budget at this time.

Mr. Baker indicated his support for additional AHW Endowment staff, but emphasized the importance of investing and incentivizing existing staff to equip them with the skills to be successful in accomplishing AHW's new changemaking vision.

Ms. Giese noted that it was important to balance the need to ensure appropriate AHW staffing with the need to invest more funds in community health initiatives.

Following additional discussion, the FY16 budget was unanimously approved.

Ms. Lucey reported that over the last several weeks, HWPP staff have connected with more than 150 individuals through the Roundtable Conversations and Community Forums designed to inform the HWPP Strategic component. The response to this initiative has been overwhelmingly positive and stakeholders are excited to see a focus on mental health commenting on the significant needs to be met in Wisconsin communities.

Ms. Lucey suggested that many of the issues from the discussions could be combined via the creation of community-based initiatives that focus on prevention, centralization of resources and referral services, and encouragement of mental health stigma elimination. These initiatives could potentially serve as convening entities to provide education, dissemination, and networking for interested parties.

Ms. Giese indicated that we need to address mental and behavioral health at the root-cause level because otherwise the need will always exist.

Ms. Tapper reminded the Consortium that it is important to look at what is being developed by the communities currently and to have the individual community indicate the intervention needed and the method.

Following further discussion, the Consortium members agreed that a subcommittee of the Consortium will be formed to continue to move the Strategic Component forward.

Ms. Ellis provided an overview for the Consortium review process of the Responsive component Cohort 2 final proposals. She noted that projects approved by the Consortium for funding would be notified of a conditional approval of funding, pending the final decision from the MCW Board of Trustees later in May. She noted that none of the proposals in consideration had supplanting concerns.

Ms. Ellis reviewed the conflict of interest policy and discussed the process the Consortium used to recuse themselves from the discussion, scoring and voting when a conflict arises. Consistent with the conflict of interest policy, each member of the Consortium who identified a conflict of interest absented themselves from the discussion and voting by leaving the room.

The following conflict of interests were identified:

- *Advocating for model policies that support teen pregnancy/ STI prevention activities in Milwaukee:* Bevan Baker
- *Beyond the Bell Milwaukee:* Genyne Edwards
- *Increasing Low-SES Consumers Access and Use of Milwaukee Farmers Markets to Improve Produce Intake:* Genyne Edwards
- *Transforming Eau Claire: Designing a Healthy Community:* Lieske Giese

Following additional discussion on the proposals, the Consortium unanimously approved the following Responsive Component Cohort 2 proposals:

- *Advocating for model policies that support teen pregnancy/ STI prevention activities in Milwaukee*
- *Beyond the Bell Milwaukee*
- *Creating a Jackson County that supports Mental Health*
- *Creating a safe surrender policy to reduce the number of fugitives in Milwaukee*
- *Increasing Low-SES Consumers Access and Use of Milwaukee Farmers Markets to Improve Produce Intake*

- *Transforming Eau Claire: Designing a Healthy Community*

Ms. Ellis presented an overview of the HWPP Responsive Component Cohort 3 RFP. Ms. Ellis highlighted revision to the RFP that resulted from applicant and reviewer feedback. She noted key items included maintaining the estimated funding amounts of \$1M-\$1.5M for 4-6 projects; slight adjustments to the brief proposal questions; and inclusion of the Technical Assistance Providers throughout the project period.

Ms. Ellis indicated that AHW is currently receiving applications to fill a staff position of Capacity Building Program Officer. When this position is filled, one of the first tasks for this individual will be to assess existing capacity building resources in Wisconsin, understand the needs and gaps in capacity building resources, and propose a method of filling those gaps.

Ms. Ellis noted the Healthier Wisconsin Leadership Institute's funding from the AHW REP is anticipated to end on June 30, 2015. Following discussion, the Consortium members asked AHW staff to assess the broad capacity building needs of stakeholders. This information will be used by the Consortium to inform whether there might be opportunities in the future to align AHW investments with identified needs and gaps in resources.

Ms. Lucey noted the interim report submitted by the HWPP funded project titled Diversity Matters. Ms. Lucey asked Ms. Giese and Ms. Tapper to review the project's submitted reports to help the Consortium make a decision on next steps for this project at the June meeting.

Dr. Maurana provided a brief update on the evaluation of the Violence Prevention Initiative led by the consultant ORS Impact. She noted that ORS Impact has interviewed many of the Consortium members and will begin interviews with community and MCW partners soon. In June, the ORS Impact consultant will travel to Milwaukee to interview additional stakeholders. At this time, Dr. Maurana noted that ORS Impact plans to complete the report by October 2015.

VI. OTHER

Dr. Raymond announced the appointment of Wesley A. Benbow, MBA, as MCW's Senior Vice President for Finance and Administration and Chief Operating Officer. Mr. Benbow plans to join MCW on June 1, 2015.

Joy Tapper inquired about the percentage of REP funded projects aligned with workforce development. AHW staff will provide information to Ms. Tapper regarding her request.

VII. ADJOURN

There being no additional business, the MCW Consortium on Public and Community Health meeting adjourned at 4:37 p.m.



Next Meeting:

June 4, 2015

2:00 to 4:00 p.m.

Medical College of Wisconsin
Executive Board Room, M1360



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin
Executive Board Room, M1360
June 4, 2015--2:00 to 4:00 p.m.

Meeting Minutes

Directors Present: Bevan Baker (phone), Genyne Edwards, Lieske Giese (phone), Joseph Kerschner, Paula Lucey (chair), Cheryl Maurana, John Raymond, Joy Tapper, Dan Wickeham

Others Present: Christina Ellis

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 2:03 pm.

II. APPROVE MINUTES FROM MAY 7, 2015

The May 7, 2015 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

III. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Paula Lucey provided an update on the development of the strategic funding opportunity focused on community-based mental and behavioral health. She recognized the work of the Consortium subcommittee and staff in developing the HWPP strategic funding model. The subcommittee used the input received from more than 150 individuals through roundtables and community forums, as well as data from a review of best practices in the field, lessons learned, and the Consortium discussions, to develop the proposed funding model. Ms. Lucey presented an overview of the HWPP strategic component funding model noting that it aims to address root causes, recognize individual needs, recognize that communities need flexibility, and ensure that the changes are sustainable. The proposed approach would encourage applicants to apply as a special interest or geographic community. Funding would be used to support the development of a strategic plan with the community to address community-based mental and behavioral health needs through a cross-sector, coalition-based approach.

Joy Tapper suggested focusing on behavioral health as opposed to mental health. She noted that behavioral health was more inclusive of alcohol and other drug abuse, which would be important to include in the funding priority. Ms. Tapper commented that she was supportive of targeting communities as applicants, but suggested limiting the initial number of selected communities for funding. She emphasized it would be important to ensure there was sufficient time and resources to ensure success. Ms. Tapper also recommended that all applicants be required to contribute to two or three shared outcomes that align with the vision of the strategic component as a whole.

Mr. Baker agreed that it would be important to be focused on one priority with a small number of communities to ensure success. He stressed that community-based mental and behavioral health is a challenging health priority.

Ms. Edwards noted that it would be important to clearly define the scope and scale of funding initiatives and how projects can be interconnected. She also stressed that there should be a strong focus on capacity building.

Ms. Tapper suggested an in-depth approach for the one selected priority rather than an approach that would address concurrent, multiple priorities.

A motion was made and seconded to have the subcommittee continue to develop the strategic component funding model and request for proposals with a recommendation to be presented at the August Consortium meeting.

Christina Ellis provided an update on the Responsive component and its three cohorts. She noted that Cohort 1 includes three funded projects that began on January 1, 2015 totaling nearly \$730K. Ms. Ellis reported that HWPP staff conducted in-person meetings or conference calls with each project to discuss implementation. She noted that staff also connected with each partnership in April to learn about their progress during the first quarter and will connect with funded projects over the next couple of months as they work on their progress reports. Ms. Ellis shared selected progress to-date for each project, including: the expansion of Rusk County partnership to include additional expertise, initial pilot of dispatcher training for bystander CPR program, and recognition through two MANDI awards for the municipal diversion policy project.

Ms. Ellis provided an update on Cohort 2's six funded projects totaling approximately \$1.7M scheduled to begin July 1, 2015. Ms. Ellis noted that HWPP staff have assisted with the funding agreement process and conducted orientations with each of the six partnerships.

Ms. Ellis reported that the Cohort 3 RFP was released in May 2015. She noted that more than 50 individuals attended HWPP's two RFP information sessions to learn about the funding opportunity, application process and expectations of funded awards. Ms. Ellis noted that letters of intent (LOIs) will be due to HWPP on July 10, 2015. She shared that a subcommittee consisting of a subset of Consortium members and external content experts will review the LOIs and recommend projects to be invited to the Pitch Presentation stage.

Ms. Ellis announced that Tracy Wilson had accepted the position of HWPP Capacity Building Program Officer. The Consortium congratulated Ms. Wilson on her new position. Ms. Ellis noted that, due to Ms. Wilson's transition, HWPP was in the process of reviewing applications for the HWPP Responsive Program Officer vacancy.

Ms. Ellis provided an update on legacy projects that require annual assessment by the Consortium to ensure adequate progress and approval for the next year of funding. The 8th Funding Cycle Impact Award titled *Promoting Healthy Relationships Among LGBT Youth* began six months after the 8th Funding Cycle cohort due to extensive delays in obtaining initial IRB approval. The 7th Funding Cycle Impact Award titled *Changing the Culture of Risky Drinking Behavior: Policy Change* began six months after the 7th Funding Cycle cohort due to the completion of a 5th Funding Cycle Impact Award.

Following a review and discussion of the two projects, a motion was made and unanimously approved for the projects to receive continued support.

Ms. Ellis provided the Consortium with a draft of an evaluation design and interview protocol developed by ORS Impact for the Violence Prevention Initiative (VPI). The 7-month evaluation will focus on assessing the VPI accomplishments and identifying strategies for moving forward.

Ms. Tapper requested additional emphasis in the report on the recommendations for future directions.

Ms. Lucey and Ms. Edwards agreed, noting that the interview questions appeared to align with the need to identify future directions, but that it would be important to emphasize this aspect in the report.

IV. RESEARCH AND EDUCATION PROGRAM

Dr. Kerschner shared that the MCW Board of Trustees had approved six REP Responsive proposals that were presented to the Consortium at a past meeting. He noted that a second REP Responsive RFP had been released with a focus on changemaking and innovative research collaborations. He expected to fund approximately five awards for \$200,000 each over two years.

Dr. Kerschner provided a brief overview of the REP strategic proposal *Community Engagement Core Proposal*. Dr. Kerschner noted that Syed Ahmed, MD, MPH, DrPH, FAAFP, Senior Associate Dean for Community Engagement, was in the process of developing the proposal to increase MCW's capacity for community engagement through the creation of a centralized resource for MCW faculty and community partners. Dr. Kerschner welcomed Consortium comments on the concept of the Community Engagement Core and noted that the proposal will be presented for the Consortium's review at a future meeting.

Dr. Kerschner provided an overview of the REP strategic proposal *Improving Clinical Imaging Diagnostics through Use of Cutting-Edge MRI Technology* proposal requesting \$500,000 over three years. This proposal is led by Kevin Koch, PhD, in the Department of Biophysics and Radiology. Dr. Kerschner noted that the proposal aims to improve magnetic resonance imaging technology and techniques to better assess cancer, inflammation, brain degeneration and brain injury. Mr. Wickeham reported there were no supplanting concerns with this proposal.

Dr. Kerschner provided an overview of the *Defining the Nature and Extent of Nervous System Trauma and its Modification: New Strategies* proposal requesting \$1.05M over five years. This proposal is led by Dennis J. Maiman, MD, PhD in the Department of Neurosurgery. Dr. Kerschner noted that the proposal aims to improve the diagnosis and treatment of brain injuries, including concussions, and other forms of nervous system trauma. The proposal has the potential to advance new therapies to enhance recovery after nervous system trauma. Mr. Wickeham reported there were no supplanting concerns with this proposal.

Dr. Raymond thanked the Consortium for its support of the REP strategic investment in the development of a School of Pharmacy. He informed the Consortium that the MCW Board of Trustees had approved the AHW proposal and feasibility study to develop an MCW School of Pharmacy. Dr. Raymond noted that the next step would be to begin recruitment efforts for the founding dean and that he would update the Consortium on the School of Pharmacy's development.

There was no update for the Capacity Building Component.

V. ADVANCING A HEALTHIER WISCONSIN

Dr. Maurana noted continued progress in the Legislative Audit Bureau’s programmatic evaluation of the 2009-2013 AHW Endowment activities.

Dr. Raymond indicated that the search for the MCW Senior Vice President for Finance and Administration and Chief Operating Officer had been reopened due to the top candidate having declined the position due to an unanticipated family situation. Dr. Raymond thanked Mr. Wickeham for agreeing to continue to serve on the Consortium Board.

VI. ADJOURN

Before adjourning, Ms. Lucey reminded the Consortium members that the July meeting has been cancelled due to the holiday weekend. The next meeting will be held August 6, 2015.

There being no additional business, the MCW Consortium on Public and Community Health meeting adjourned at 3:32 p.m.



**Next Meeting:
August 6, 2015
2:00 to 4:00 p.m.
Medical College of Wisconsin**



**MCW Consortium on Public and Community Health
Healthier Wisconsin Partnership Program--Responsive Component Cohort 3
Stage 1 Subcommittee Review Meeting
Medical College of Wisconsin –Room M2630
July 29, 2015—12 noon – 3:00 pm
Minutes**

Directors Present: Paula Lucey (Chair), Cheryl Maurana, Joy Tapper, Dan Wickeham

Others Present: Christina Ellis, Michael Bovee, Richard Cox, Geri Lyday

I. CALL TO ORDER

The meeting of the Subcommittee of the Board of Directors was called to order at 12:03 pm.

II. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Christina Ellis introduced the process for the Subcommittee review and discussion of the Stage 1 Changemaker Brief Proposals for the Responsive Component Cohort 3 of the Healthier Wisconsin Partnership Program. She reminded the Subcommittee they are making recommendations to the Consortium, and those recommendations will be advanced to the full Consortium for their approval at the meeting on Thursday, August 6, 2015.

Ms. Ellis reviewed the Conflict of Interest Policy and directed that members having indicated a conflict of interest through the online review tool must recuse themselves from further discussion, scoring and voting on those particular submissions by leaving the room for that review and vote. During the review process, the Conflict of Interest Policy was enforced and documented for each proposal. Staff also captured 'parking lot' issues regarding process improvement for the Subcommittee to revisit at a later time.

Subcommittee members discussed the scores resulting from the online scoring and agreed not to discuss or advance submissions that received 50% or lower affirmative vote, with the exception of two proposals that were requested to be discussed. Additionally, Subcommittee members agreed to advance for recommendation without discussion submissions that received 100% affirmative vote.

After further discussion and review, the Subcommittee recommended nine Stage 1 Changemaker Brief Proposals to be invited back for Stage 2 Pitch Presentation, to be approved by the full Consortium.

III. ADJOURN

There being no additional business, the meeting of the Review Subcommittee was adjourned at 12:37 pm.



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin
Executive Board Room, M1360
August 6, 2015 - 2:00-4:00 PM

Meeting Minutes

Directors Present: Genyne Edwards, Lieske Giese (by phone), Joseph Kerschner, Paula Lucey (chair), Cheryl Maurana, John Raymond, Joy Tapper, Dan Wickeham

Directors Absent: Bevan Baker

AHW Staff Present: Christina Ellis, Tim Meister, Tracy Wilson, Shari Hagedorn

Guests Present: Maureen Busalacchi, David Clark, John T. Newsome

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 2:05 pm.

Christina Ellis introduced Maureen Busalacchi who will be joining the Endowment on August 17, 2015 as the HWPP Responsive Component Program Officer.

Dr. Maurana introduced John T. (Jack) Newsome, JD, MBA who will be joining the Medical College of Wisconsin (MCW) as the Vice President and General Counsel on June 1, 2015.

II. APPROVE MINUTES FROM JUNE 4, 2015 AND JULY 29, 2015

The June 4, 2015 meeting minutes of the MCW Consortium on Public and Community Health and the July 29, 2015 Responsive Component Subcommittee meeting minutes were reviewed and unanimously approved.

III. RESEARCH AND EDUCATION PROGRAM

Dr. Maurana provided an update on the AHW funded School of Pharmacy initiative on behalf of Dr. Raymond who was late to the meeting. She noted that the School of Pharmacy Founding Dean Search Committee was nearing the final stages of its national search. Dr. Maurana also shared that MCW was beginning conversations with potential partners regarding pipeline development opportunities.

Dr. Kerschner provided an update on the AHW funded Community Medical Education Program that supported the development of the MCW Green Bay and Central Wisconsin campuses. More than 2,200 students applied to the inaugural class in Green Bay and 26 were accepted. He noted the community and the health systems in Green Bay are enthusiastic and welcoming

of the new students. Dr. Kerschner added that recruitment is currently underway for the MCW-Green Bay and MCW-Central Wisconsin campuses for classes that begin July 1, 2016.

Dr. Kerschner provided an update on the REP Responsive Component Cohort 2 process. He noted the second Responsive RFP has been released with a call for innovative research collaborations between clinical and basic science investigators. In response to this call, more than 40 letters of intent were received resulting in 13 applicants being invited to submit full proposals. Full proposals will be due September 8, 2015 and final recommendations will be advanced to the Consortium and the MCW Board of Trustees. Dr. Kerschner noted that this process has stimulated collaboration and encouraged researchers to work in new ways.

There was no update for the Capacity Building Component.

IV. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Christina Ellis provided an overview of numerous mechanisms HWPP staff have used to engage with the community during the past quarter, including community meetings, funder events, and funded project site visits that were held throughout the state.

David C. Clark, PhD, Director of the Human Research Protections Program at MCW, presented an overview of the Institutional Review Board (IRB) purpose and process. He participated in a conversation with the Consortium members regarding HWPP funded projects and IRB. The Consortium expressed interest in continuing the conversation to identify opportunities for enhancements to the current process.

Christina Ellis and Tim Meister shared an overview of the HWPP Strategic component. They noted that throughout June and July, a subcommittee of Consortium members met to further refine the structure of the Strategic component and to incorporate feedback from stakeholders. They reiterated that the focus of the initiative will be on behavioral health.

Mr. Meister noted the Strategic component will be structured to support up to ten community collaborations that would partner with one MCW team to address behavioral health challenges facing Wisconsin communities. Dan Wickeham suggested that it could be helpful to have the MCW team be part of the process from the planning phase through the life of the initiative to ensure continuity. He also suggested that there could be considerable strength in having the MCW team reflect the commitment of an MCW department rather than an individual MCW principal investigator.

Mr. Meister further described the scope and scale of the initiative as possibly supporting up to \$15 million over an eight-year period. He noted that the MCW team would receive a separate award of approximately \$2 million over the eight-year period for their contributions to the partnership with the ten communities. Mr. Meister noted that the three distinct phases of the Strategic component funding are being drafted.

Mr. Meister noted that the draft Strategic component funding opportunity features three overarching outcomes expected of the effort as a whole. He shared that indicators for each outcome will be developed during the funded planning phase with the funded partners.

Genyne Edwards suggested that the materials include additional detail regarding the expectations and support that will be provided for the development of the community collaborations.

Lieske Giese suggested that the selection process consider the variance of available resources around the state. Ms. Giese also shared that it would be important to ensure a geographically diverse set of community collaborations.

A motion was made and unanimously approved to continue the development of the Strategic component funding opportunity consistent with the presented direction and incorporating the Consortium's comments. It was noted that the Consortium should receive the final Strategic component RPF for review and approval at their October meeting.

Ms. Ellis presented an overview of the HWPP Responsive component, Cohort 3 Stage 1 Changemaker Brief Proposals. Twenty-three Stage 1 proposals were received, passed technical review, and forwarded to the Consortium subcommittee for review. Ms. Ellis noted the subcommittee consisted of four MCW Consortium members and three external content experts. In addition, a review was conducted by the MCW Government and Community Relations Office to identify any proposed activities with possible lobbying concerns. The Subcommittee reviewers scored and commented on each eligible submission individually and met as a group on July 29th to discuss their reviews. The subcommittee used the same conflict of interest practice as that used by the Consortium. Ms. Ellis described the nine proposals recommended by the subcommittee for invitation to participate in the Stage 2 Pitch Presentations scheduled for September 3.

The Consortium unanimously approved the subcommittee recommendation to invite the nine proposals to the Stage 2 Pitch Presentations.

Ms. Ellis provided an overview of the Responsive component, Cohort 1 Annual Assessment. The information provided to the Consortium members served as an update to prepare for the formal annual assessment for continued funding for the next project year, which will occur toward the end of 2015. The three funded projects through the first cohort of the Responsive component completed their first progress reports covering the period from January 1, 2015 through June 30, 2015. Ms. Ellis noted the project partners for these three Cohort 1 projects will be coming together on September 23, 2015 for their first annual cohort meeting to participate in bi-directional learning across the funded projects, network with other engaged entities and meet with HWPP staff.

Ms. Ellis and Tracy Wilson presented an overview of the draft framework for the HWPP Capacity Building component that is designed to build capacity in three main areas: partnership development and project planning, funded project support and peer learning, and dissemination and sustainability. Ms. Wilson noted that the framework emphasizes chagemaking methods that invest financial and non-financial resources in communities and partnerships to build their capacity. The work also will collaborate with and build on existing efforts, including the other HWPP components when appropriate, the Research and Education Program Capacity Building component, other MCW departments and other nonprofits and funders.

V. ADVANCING A HEALTHIER WISCONSIN

Dr. Maurana noted that the Consortium will begin to have conversations regarding the development of the Cross Cutting component and suggested a future meeting include the Research and Education Advisory Committee.

Dr. Maurana provided a brief update regarding the Legislative Audit Bureau (LAB) audit. Dr. Maurana indicated that the Medical College of Wisconsin and University of Wisconsin School of Medicine and Public Health have completed the exit interview with the LAB auditors. She noted that MCW leaders were impressed with the professional and considerate nature of the LAB's leadership and staff during the process. She noted that the report was scheduled for release in August and that the Consortium members will be provided notification and a link to the report as soon as it is available. Dr. Maurana further noted the LAB has indicated that they would be pleased to meet with the Consortium; however, they can only do so after the Legislative Audit Committee has had an opportunity to receive a presentation on the results.

VI. ADJOURN

There being no additional business, the meeting of the MCW Consortium on Public and Community Health adjourned at 3:58 pm.



Next Meeting:

September 3, 2015

11:00 a.m. – 5:00 p.m.

Medical College of Wisconsin

Education Conference Room – M3077



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin
Education Conference Room, M077
September 3, 2015 - 11:00 AM-5:00 PM

Meeting Minutes

Directors Present: Bevan Baker, Genyne Edwards, Lieske Giese, Joseph Kerschner, Paula Lucey (chair), Cheryl Maurana, John Raymond, Joy Tapper, Dan Wickeham

AHW Staff Present: Christina Ellis, Maureen Busalacchi, Tim Meister, Tracy Wilson, Shari Hagedorn

Guests Present: Michael Bovee

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 11:00 am.

Paula Lucey introduced Michael Bovee, who served as an external reviewer for the Cohort 3, Stage 1 review. Mr. Bovee is the Executive Director of the Legacy Foundation of Central Wisconsin, a private foundation formed in 2015 to improve the health, wellness and general wellbeing of the people of Central Wisconsin.

II. APPROVE MINUTES FROM AUGUST 6, 2015

The August 6, 2015 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

III. RESEARCH AND EDUCATION PROGRAM

Joe Kerschner provided an overview of the AHW Research and Education proposal titled *MCW Community Engagement Core Implementation Initiative* led by Syed Ahmed, MD, DrPH, Senior Associate Dean for Community Engagement. He noted that the proposal requested \$2,399,420 over four years to establish a centralized resource for MCW faculty and community partners for community-engaged research. Dr. Maurana noted that there were no supplanting concerns with the proposal.

Ms. Geise recommended the Community Advisory Board continue throughout the life of the initiative. Dr. Kerschner indicated that he would share the Consortium's comments with Dr. Ahmed.

IV. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

The Consortium engaged in the HWPP Responsive Cohort 3 pitch presentation review. Christina Ellis provided an overview of the pitch presentation process. She noted that, based on the results of the applicants' pitch presentations, successful applicants will be invited to submit full

proposals for the Consortium's review. She noted that the Consortium will make final funding determinations at its November 12, 2015 meeting.

Ms. Ellis reviewed the Conflict of Interest Policy. Consistent with the conflict of interest policy, each member of the Consortium who identified a conflict of interest refrained from the discussion and vote of the specific proposal. The following conflicts of interest were identified:

- Parent Education and Support Network – Bevan Baker, Joy Trapper
- Policy and System Change to Impact Health in MPS and Boys and Girls Clubs of Greater Milwaukee – Bevan Baker
- Proactive Outreach for the Health of Sexually Exploited Youth – Bevan Baker

Nine applicants presented a brief overview or 'pitch' of their proposed project followed by questions from and dialogue with the MCW Consortium. Following each pitch, the MCW Consortium members discussed and voted individually whether to invite each partnership for the Stage 3 Call for Changemaker full proposal. Following all presentations and voting, MCW Consortium members reviewed the voting results and engaged in further discussion to identify those applicants who should be invited to submit full proposals. The Consortium unanimously approved eight applicants to advance to submit Stage 3 Call for Changemaker full proposals.

V. ADVANCING A HEALTHIER WISCONSIN

Dr. Maurana provided an update on the Legislative Audit Bureau (LAB) audit of the AHW Endowment for the period of January 2009 to December 2013. She noted that the LAB found MCW to be in compliance with the established requirements for awarding and monitoring funds, and found no evidence of supplanting. She mentioned that the Legislative Audit Committee is in the process of determining whether it will invite presentations from UW and MCW on the audit results.

VI. ADJOURN

There being no additional business, the meeting of the MCW Consortium on Public and Community Health adjourned at 4:20 pm.



Next Meeting:

October 1, 2015

2:00 – 4:00 PM

Medical College of Wisconsin

Executive Board Room, M1360



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin
Executive Board Room, M1360
October 1, 2015 - 2:00-4:00 PM

Meeting Minutes

Directors Present: Bevan Baker, Genyne Edwards, Lieske Giese (by phone), Joseph Kerschner, Paula Lucey (chair), Cheryl Maurana, John Raymond, Joy Tapper, and Dan Wickeham

AHW Staff Present: Kate Beadle, Christina Ellis, Erin Fabian, Shari Hagedorn, Tim Meister, and Tracy Wilson

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 2:05 pm.

Dr. Maurana introduced Erin Fabian, Program Director for the AHW Research and Education Program, and Kate Beadle, Administrative Associate for AHW and the Office of Academic Outreach.

Dr. Maurana mentioned that representatives from the MCW Office of Development have indicated that they may attend future meetings of the MCW Consortium on Public and Community Health (MCW Consortium).

II. APPROVE MINUTES FROM SEPTEMBER 3, 2015

The September 3, 2015 meeting minutes of the MCW Consortium were reviewed and unanimously approved.

III. RESEARCH AND EDUCATION PROGRAM

No Research and Education Program proposals were advanced for review and comment.

IV. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Ms. Lucey provided a brief overview of the Strategic Component and activities conducted over the last year leading to the development of its funding opportunities, including MCW Consortium-led discussions, work of the Strategic Component sub-committee, creation of the Leadership Team, and HWPP staff-led community outreach activities.

Ms. Lucey introduced the two proposed RFPs for the Strategic Component dedicated to addressing community-based behavioral health: 1) a Call for Community Coalitions and 2) a Call for one MCW-Partner Team to work with the Community Coalitions.

Ms. Lucey described the Community Coalitions RFP. She noted that consistent with the MCW Consortium's past discussions, the RFP reflected plans to support up to ten Community Coalitions over an eight-year period to advance community-based behavioral health.

Ms. Lucey noted that the Strategic Component was divided into three phases and that each phase would be considered as a distinct funding period. The phases include: phase one, a one-year learning and planning phase for up to \$200,000 each; phase two, a five-year implementation phase for up to \$1,000,000 each; and, phase three, a one-year sustainability and transformation phase for up to \$300,000 each.

Ms. Lucey noted that the RFP also identified three global outcomes for the Strategic Component with the expectation that specific indicators for each outcome will be developed in collaboration with the selected community coalitions. Phase one will bring together the selected community coalitions to develop a Learning Community. The Learning Community will be devoted to building the capacity of funded community coalitions and increasing their ability to develop impactful project plans that will be implemented in phase two and aligned with sustainability strategies in phase three of the Strategic Component process.

Commissioner Baker requested clarification regarding the in-kind match requirement and how community partner data regarding the match requirements would be gathered and validated. Mr. Wickeham responded that it was not expected that HWPP would request access to the accounting data of individual organizations, but rather, that applicants would be asked to provide information regarding their matching and leveraging activities.

Ms. Tapper requested clarification on the allowable number of applications per community. She expressed support for the idea of requiring one single application per community in order to drive collaboration among partners during the initial planning phase. In addition, she suggested that HWPP should consider ways to foster collaboration across partners working in a similar health focus area or population.

Ms. Giese noted that it would be important to be deliberate in reaching out and connecting to existing efforts statewide. She emphasized that it would be important for the success of the Strategic Component to connect communities across the state, whether they are new or already working together.

A motion was made and seconded to approve the Strategic Component Community Coalition RFP. The motion was unanimously approved.

Ms. Lucey presented an overview of the MCW Partner Team RFP. She indicated that this academic team will be the MCW partner for all of the Strategic Component funded projects. The intention of this RFP is to identify one or more MCW faculty members and staff who will work with the Strategic Component community coalitions as part of the Learning Community to provide programmatic support, content expertise, and evaluation leadership.

A motion was made and seconded to approve the MCW Partner Team RFP. The motion was unanimously approved.

Ms. Ellis presented the HWPP Responsive Component Call for Changemaker Cohort 4 RFP for approval.

She shared with the MCW Consortium that, due to the funding cycle timeline, the Responsive Component pitch process will be concurrent with the pitch process identified for the Strategic Component. She noted that as a result, and in respect of the MCW Consortium's time, it was proposed that there be a slight change in the pitch presentation process for the Responsive RFP.

Ms. Ellis reminded the MCW Consortium that a subcommittee, comprised of MCW Consortium members and external reviewers, conducts the review process for the Responsive Letters of Intent. She asked that the Responsive subcommittee also serve as the review panel for the Responsive pitch presentations rather than the full MCW Consortium. She stressed that the Responsive subcommittee's recommendations will be brought to the full MCW Consortium meetings for approval at each stage. Ms. Ellis noted that this modification in the process will enable the full MCW Consortium to engage in the pitch presentations for the Strategic Component. The MCW Consortium agreed with the proposed modification.

A motion was made and seconded to approve the Call for Changemaker Cohort 4 RFP. The motion was unanimously approved.

Ms. Ellis presented the proposed Capacity Building Component framework. She noted that the framework is designed to work with communities to enhance readiness for positive health change. In addition, the framework aims to enhance the resources available to communities for health improvement through providing programs and investments in partnership development, project planning, peer learning, dissemination and sustainability.

Ms. Ellis described the three opportunities that would be launched through the Capacity Building Component, noting they would be offered on a rolling basis. These include: 1) a learning series that focuses on moving from knowledge to action, 2) incubator funding, and 3) community-to-community mentorship funding. Ms. Ellis noted that the learning series would consist of programs and workshops that build knowledge and skills.

Ms. Ellis shared that the incubator funding program aims to help communities overcome a small challenge to achieve a larger health outcome. She noted that up to ten community partnerships at \$10,000 each over a one-year period would be considered through this opportunity. She also described the community-to-community mentorship funding that aims to connect communities across the state to learn from each other and support expansion, replication and adaptation of successful health initiatives from one community to another. Ms. Ellis noted that the community-to-community mentorship program would support two communities at \$50,000 each over a one-year period.

Ms. Tapper suggested that the materials used to describe the capacity building opportunities include examples to better assist applicants' understanding of the expectations.

Ms. Lucey suggested incorporating more information about how these opportunities will contribute to the outcomes identified in the Five-Year Plan.

A motion was made and seconded to approve the HWPP Capacity Building Component framework. The motion was unanimously approved.

A motion was made and seconded to approve \$100,000 for the Incubator Funding. The motion was unanimously approved.

A motion was made and seconded to approve \$100,000 for the Community-to-Community Mentoring. The motion was unanimously approved.

V. ADVANCING A HEALTHIER WISCONSIN

Ms. Lucey provided a brief overview of the MCW Consortium's Conflict of Interest policy. She clarified that although MCW Consortium meetings are open to the public, it is important for MCW Consortium members to leave the room during the discussion of an item with which they have declared a conflict of interest. She noted that MCW Consortium members have a greater responsibility to ensure that there is no perceived influence that could result from the member remaining in the room during the discussion of the item.

Ms. Lucey clarified that individual members are not required to re-declare conflicts and leave the room for the vote when the Consortium reviews the final funding recommendations as a set.

Dr. Maurana shared a summary of the accomplishments of AHW and the value of the AHW's return on investment that demonstrates how AHW is weaving health into the fabric of Wisconsin communities, transforming the landscape of health professionals' education, translating bench research to community application, and bringing new resources to Wisconsin.

In preparation for the November 12, 2015 combined meeting with the Research and Education Advisory Committee (REAC), the MCW Consortium members reviewed the purpose and context of the AHW Endowment's Cross-Cutting Component and reviewed several models.

The MCW Consortium discussed key characteristics of the Cross-Cutting Component and its intended transformation. They also discussed how the REAC and MCW Consortium can best work together to jointly steward the Cross-Cutting Component.

VI. ADJOURN

Ms. Lucey reminded the members that the November meeting is scheduled for one week later, November 12, 2015.

There being no additional business, the meeting of the MCW Consortium on Public and Community Health adjourned at 3:58 pm.



Next Meeting:

November 12, 2015

2:00 - 4:00p.m.

Medical College of Wisconsin

Executive Board Room, M1360



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin
Executive Board Room, M1360
November 12, 2015 - 2:00-4:00 PM

Meeting Minutes

Directors Present: Bevan Baker, Genyne Edwards (by phone), Lieske Giese (by phone), Joseph Kerschner (by phone), Paula Lucey (chair), Cheryl Maurana, John Raymond, Joy Tapper, Dan Wickeham

Research and Education Advisory Committee (REAC) Members Present: Cecilia Hillard, Ann Nattinger, Marjorie Spencer

AHW Staff Present: Christina Ellis, Erin Fabian, Shari Hagedorn, Mark McNally, Tim Meister, Jessica Olsen, Tracy Wilson

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 2:04 pm.

Paula Lucey congratulated Genyne Edwards' firm, P3 Development Group LLC, for being recognized at the Legacy Redevelopment Corporation's annual luncheon.

II. APPROVE MINUTES FROM OCTOBER 1, 2015

The October 1, 2015 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

III. ADVANCING A HEALTHIER WISCONSIN

Dr. Maurana provided an overview of the AHW Endowment's Cross-Cutting Component by reviewing the definition of the component that had been identified in the AHW Five-Year Plan. She also noted areas of focus that have been suggested through initial conversations among Consortium and REAC members. Dr. Maurana then led a discussion to identify a shared vision for planning the Cross-Cutting Component. The Consortium discussed what should be the primary measure of success, what should be the guiding framework for approaching the initiative, the preferred planning process, and the target timeline for the initiative.

Dr. Raymond stated a preference for measuring health outcomes through interventions as this would have the ability to determine cause and effect.

Mr. Wickeham and Dr. Hillard agreed on the importance of focusing on measurable outcomes, however, Mr. Wickeham noted policy and systems change strategies could also have broad based impact.

Following additional discussion, the members agreed that while there are several measures of success, the primary measure should provide an opportunity for a measurable impact on health, while insuring that policy and systems change strategies are applied to ensure sustainability. Several members agreed measurable health outcomes through interventions that include policy and system change activities are most closely related to the mission of AHW.

The members further discussed options for a framework that would be most helpful to inform the approach for the component such as the AHW Changemaker Roles, the Translational Wheel, Transformative Value and the Spectrum of Prevention.

Ms. Edwards expressed the importance of using a framework that is easy to communicate.

Mr. Baker noted how the Translational Wheel pictorially encompasses the intended work for the component by surrounding better health with community engagement and aspects of research.

Ms. Giese suggested the Spectrum of Prevention as her preferred framework but also noted the Changemaker Roles more closely resemble activities that should occur within any framework.

Dr. Nattinger expressed interest in the Translational Wheel as a framework, as it lends itself to this type of initiative by providing equal weight to each area.

Ms. Tapper noted the Translational Wheel is relevant to academic work but is not easily articulated at the community level the way the Spectrum of Prevention is.

Dr. Hillard, Ms. Lucey, Dr. Kerschner, Ms. Spencer, and Dr. Raymond agreed the framework for Transformative Value is relevant because of its ability to acknowledge the work that has been funded previously through AHW, the utility of the framework across the spectrum of programs, and its emphasis on sustainability. Dr. Kerschner emphasized that the framework moved AHW out of its comfort zone and aligned with AHW's changemaking direction.

Members further expressed that it may not be possible to choose one framework, but multiple approaches may need to be combined.

Dr. Maurana encouraged discussion regarding the process for determining the component's next steps and a timeline to continue the development of the component.

Ms. Lucey suggested that, similar to the HWPP Strategic Component, a Learning Community could be explored to refine the Cross-Cutting funding opportunity.

Following additional discussion, the members agreed there is an overall sense of urgency to expedite the component while ensuring adequate planning occurs. Dr. Maurana requested volunteers to create a subcommittee to further explore the structure for the component.

Ms. Margie Spencer provided an overview of the current AHW Endowment financials. The overview provided information regarding the AHW Endowment balances as of September 30, 2015.

Dr. Raymond noted that the AHW Endowment would be placed in the MCW School of Medicine effective January 1, 2016. Ms. Lucey recognized Dr. Raymond's leadership of the AHW Endowment during a time of transition and commented that the Consortium looks forward to Dr. Raymond's continued leadership on the MCW Consortium. Dr. Raymond noted that, based on the positive Legislative Audit Bureau audit results and the strong leadership from Dr. Kerschner, MCW agreed that it was the appropriate time to position the AHW Endowment in the MCW School of Medicine.

IV. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Ms. Ellis provided an overview for the Consortium review process of the Responsive component Cohort 3 final proposals. She noted that projects approved by the Consortium for funding would be notified of a conditional approval of funding, pending the final decision from the MCW Board of Trustees later in November. She noted that none of the proposals in consideration had major supplanting or lobbying concerns that would limit their advancement.

Ms. Ellis reviewed the conflict of interest policy and discussed the process the Consortium uses to recuse himself/herself from the discussion, scoring and voting when a conflict arises. Consistent with the conflict of interest policy, each member of the Consortium who identified a conflict of interest absented themselves from the discussion and voting by leaving the room.

The following conflicts of interest were identified:

- *Policy and Systems Change to Impact Health in MPS and the Boys and Girls Clubs of Greater Milwaukee*: Bevan Baker
- *Parent Education & Support Network*: Bevan Baker and Joy Tapper
- *Proactive Outreach for the Health of Sexually Exploited Youth*: Bevan Baker

Following additional discussion of the proposals, the Consortium unanimously approved the following Responsive component Cohort 3 proposals:

- *Adopting Patient-Centered Prescription Medication Labels in Wisconsin*
- *Fostering Futures: Transforming Child Welfare Policies/Practices through Trauma-Informed Principles*
- *Healthy Eyes Healthy Futures Children's Vision Health Collaborative*
- *Maternal/Child Mental Health: Identifying & addressing root causes of behavioral concerns in children*
- *Parent Education & Support Network*
- *Policy and Systems Change to Impact Health in MPS and the Boys and Girls Clubs of Greater Milwaukee*
- *Proactive Outreach for the Health of Sexually Exploited Youth*

Ms. Ellis provided an overview to the Consortium of the information sessions held in Green Bay, Wausau, Eau Claire, Madison, and Milwaukee that focused on the current funding opportunities through each of the HWPP components. Over 100 individuals registered for these sessions where they were provided with an overview of AHW, each component, participated in a learning activity, networked with potential collaborators, and engaged in discussions with staff.

Ms. Ellis noted that specific to the HWPP Strategic Component, staff delivered a presentation to attendees at the Milwaukee Mental Health Task Force meeting on Tuesday, November 10, 2015. She thanked Joy Tapper for arranging the meeting as well as co-facilitating, along with Katie Pritchard of IMPACT, Inc., a dialogue to assess interest in applying to this funding opportunity.

Ms. Ellis described the numerous contacts HWPP staff have had with stakeholders through meetings and conference calls to discuss potential application ideas since the Strategic Component RFP was released. In addition to working with community partners, HWPP staff have discussed the MCW Partner RFP with several academic departments.

V. RESEARCH AND EDUCATION PROGRAM

Dr. Maurana, on behalf of Dr. Kerschner, provided an overview of the AHW Research and Education Program (REP) Strategic Component proposal titled *Optimizing Functional Outcomes of Stroke Survivors through Translational Research* led by Diane Braza, MD, Chair and Professor, Physical Medicine and Rehabilitation. This proposal is requesting \$1,003,673 over five years to improve functional outcomes for stroke survivors by creating the Stroke Research Center of Southeastern Wisconsin. Dan Wickeham noted that there were no supplanting concerns with this proposal.

Dr. Maurana, on behalf of Dr. Kerschner, presented the REAC's recommendations funding through the REP Responsive component that encourages basic and clinical science collaboration in MCW's nine strategic priorities with AHW's changemaking focus.

The REP received 43 Letters of Intent and invited 11 applicants to submit full proposals. Full proposals were reviewed for technical compliance and evaluated by a merit review panel. The REAC advanced for consideration six applications for funding based on the merit review panel's recommendation. Each request is for approximately \$200,000 over a two-year period for a total allocation of approximately \$1.2M through this funding cycle. The projects include:

- *Control of Diabetic Vascular Endothelial Function by Mitochondrial Fission Proteins*
- *Vascular Odorant Receptors: Regulation and Function*
- *Treatment of Pancreatic Ductal Adenocarcinoma (PDAC) with Combined Immunotherapy, Nox Inhibition, and Altered Chemokine Signaling*
- *Roles of Subcutaneous Adipose Tissue and Adiponectin on the Pathogenicity of Visceral Adipose Tissue*
- *Microbial Approaches for the Treatment of Multi-Drug Resistant Enterococcus*
- *Gaseous Intoxication by Bacterial Infection: A Mechanism for Abscess Formation*

Mr. Wickeham indicated that none of the proposals contained any supplanting concerns. Dr. Maurana noted the proposals will be advanced to the MCW Board of Trustees for review and approval.

VI. ADJOURN

There being no additional business, the meeting of the MCW Consortium on Public and Community Health adjourned at 4:11 pm.



Next Meeting:

December 3, 2015

2:00 - 4:00p.m.

Medical College of Wisconsin

Executive Board Room, M1360



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

MCW CONSORTIUM ON PUBLIC AND COMMUNITY HEALTH

Medical College of Wisconsin

Executive Board Room, M1360

December 3, 2015 - 2:00 to 4:00 p.m.

Meeting Minutes

Directors Present: Bevan Baker (by phone), Genyne Edwards, Lieske Giese, Joseph Kerschner, Paula Lucey (chair), Cheryl Maurana, John Raymond, Joy Tapper, Dan Wickeham

AHW Staff Present: Maureen Busalacchi, Christina Ellis, Erin Fabian, Shari Hagedorn, Mark McNally, Tim Meister, Jessica Olsen, Tracy Wilson

I. CALL TO ORDER

The Meeting of the Board of Directors was called to order at 2:04 pm.

II. APPROVE MINUTES FROM NOVEMBER 12, 2015

The November 12, 2015 meeting minutes of the MCW Consortium on Public and Community Health were reviewed and unanimously approved.

III. HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

Christina Ellis provided a brief update on the 16 projects that comprise the first three cohorts funded through of the HWPP Responsive component since the launch of the third AHW Five-Year Plan. She specifically noted the progress of three Responsive Cohort 1 projects continuing into the next fiscal year. Per the funding agreement for these projects, each must undergo an annual assessment of progress toward achieving their objectives. Ms. Ellis reminded the Consortium that, notwithstanding other provisions in the funding agreement, if the Consortium determines that a funded project has inadequate progress, then the Consortium can decide to reduce or terminate the funding to the project.

Following review and discussion of the Responsive cohort 1 projects, a motion was made and unanimously approved to continue funding.

Ms. Lucey and Dr. Maurana noted that efforts were underway to work with MCW Public Affairs to enhance visibility for the AHW Endowment and its funded projects.

Ms. Ellis provided a summary of the seven active legacy projects awarded through the second Five-Year Plan that are continuing into the next fiscal year of their award period. She explained that AHW staff reviewed each progress report and conducted conference calls with the partnerships to discuss accomplishments and challenges. Staff then summarized progress for the Consortium's review as part of each project's annual assessment.

It was noted that, as with the Responsive component awards, if the Consortium determines that a legacy project has inadequate progress, then the Consortium can decide to reduce or terminate the funding to the project.

Following review and discussion of the seven legacy projects, a motion was made and unanimously approved to continue funding of the seven legacy projects.

Ms. Ellis presented summary information for 24 funded projects that have recently completed or are nearing completion of their award period. These include eight 9th Funding Cycle Development projects, eight 8th Funding Cycle Development projects, three 6th Funding Cycle Impact projects, as well as the five Violence Prevention Initiative (VPI) projects.

Dr. Maurana presented an overview of the external evaluation of the VPI conducted by ORS Impact, an external consultant. On February 5, 2015, the Consortium had reaffirmed their commitment to violence prevention and agreed to work with an external consultant to create an assessment of the VPI that could be used to further evaluate, refine and hone the scope of future violence prevention efforts in Milwaukee and Wisconsin.

The Consortium members discussed the ORS Impact report regarding the VPI. The Consortium focused its discussion on the report's 'So What' section that identified key funded partner activities and outcomes, and the 'Now What' section that focused on suggestions for a path forward.

A motion was made and unanimously approved to accept the report as ORS Impact's final work product per their contract with the Consortium.

The Consortium continued a conversation affirming their commitment in the value of addressing youth violence in Milwaukee through a public health approach. Based on the recommendations by the ORS Impact, the Consortium will be actively seeking ways in which, as a funder of community health improvement in Wisconsin, the AHW Endowment can turn to changemaker roles beyond that of investor to further violence prevention efforts.

Ms. Ellis informed the members that over 180 individuals had expressed interest in the HWPP Strategic component funding opportunity to-date. Since the release of the Strategic RFP, AHW staff have been in regular contact with stakeholders including participating in numerous in-person meetings, conference calls, and emails.

Ms. Ellis informed the members that following approval of the Capacity Building framework, two funding opportunities have been released through this component, including the Change Incubator Funding and Community-to-Community Mentoring program.

Additionally, Ms. Ellis noted that, building on the Fall 2015 capacity building learning sessions, up to four new learning series are being planned for 2016 in the areas of evaluation planning, communication and messaging, collaboration, and sustainability. Each series will consist of multiple in-person sessions to help attendees move from knowledge and skill building to action in their communities in their efforts to improve community health. The series will occur in Milwaukee, Madison and the Wisconsin Dells to reach various audiences throughout the state.

IV. ADVANCING A HEALTHIER WISCONSIN

Dr. Maurana shared with the Consortium a draft of the AHW Endowment video, which has been created to assist in communicating the successes of AHW.

Dr. Maurana reported that, per the Consortium's Bylaws, the Chair of the Consortium is to be elected annually by the Board of Directors. Following discussions, nominations were requested. Paula Lucey was nominated to remain as chair for the 2016 calendar year. A motion was made and unanimously approved for Paula Lucey to remain as chair of the MCW Consortium on Public and Community health for the 2016 calendar year.

The Consortium reviewed the Conflict of Interest Policy. The Director/Officer Annual Conflicts of Interest Certificate was distributed to the members for review and signature for their annual disclosure.

Dr. Maurana provided an update on the AHW Cross-Cutting component by reviewing the November 12, 2015 Consortium meeting discussion and reviewing the definition of the component that had been identified in the AHW Five-Year Plan. She also noted areas of focus that have been suggested through initial conversations among Consortium and REAC members. Dr. Maurana then led a discussion to identify a shared vision for planning the Cross-Cutting component.

Following additional discussion, the members agreed that while there are several measures of success, the primary measure should provide an opportunity for a measurable impact on health, while ensuring that policy and systems change strategies are applied to promote sustainability. Several members agreed measurable health outcomes through interventions that include policy and system change activities are most closely related to the mission of AHW.

The members further discussed options for a framework that would be most helpful to inform the approach for the component such as the AHW Changemaker Roles, the Translational Wheel, Transformative Value and the Spectrum of Prevention. Members further expressed that it may not be possible to choose one framework, but multiple approaches may need to be combined.

Following additional discussion, the members agreed there is an overall sense of urgency to expedite the component while ensuring adequate planning occurs. The following individuals indicated they would be interested in participating on the subcommittee:

Consortium Members

Bevan Baker
Paula Lucey
Lieske Giese

Consortium and REAC Members

Joe Kerschner
Cheryl Maurana
Dan Wickeham

REAC Members

Cecilia Hillard
Ann Nattinger

Dr. Maurana noted the subcommittee will have a conference call on December 15 to identify a charge for the subcommittee, the frequency and method of meeting, and a method for narrowing an approach and topic area.

V. RESEARCH AND EDUCATION PROGRAM

No Research and Education proposals were advanced for review and comment.

VI. ADJOURN

There being no additional business, the meeting of the MCW Consortium on Public Health adjourned at 3:45 pm.



**Next Meeting:
January 7, 2016
2:00 to 4:00 p.m.
Medical College of Wisconsin**



ADVANCING A HEALTHIER WISCONSIN ENDOWMENT

AHW CROSS-CUTTING COMPONENT COMMITTEE MEETING

Medical College of Wisconsin
Dean of the School of Medicine's Conference Room
December 15, 2015
11:00 to 11:45 am

Minutes

Attendance: Bevan Baker (by phone), Cecilia Hillard, Joseph Kerschner, Paula Lucey (by phone), Cheryl Maurana, Ann Nattinger (by phone), Dan Wickeham

Absent: Lieske Giese

AHW Staff Present: Christina Ellis, Erin Fabian, Shari Hagedorn, Jean Moreland, Jessica Olsen, Tracy Wilson

I. CALL TO ORDER

The committee of the AHW Cross-Cutting component was called to order at 11:04 am.

II. REVIEW PROPOSED COMMITTEE CHARGE AND DELIVERABLES

Dr. Maurana presented a proposed charge for consideration for the AHW Cross-Cutting component committee. Following discussion, a motion was made, seconded and unanimously approved to accept the charge for the AHW Cross-Cutting component committee.

Approved Charge for Consideration: To develop recommendations to the MCW Consortium and AHW REAC regarding the plan for the Cross-Cutting component funding opportunity, including such topics as the scope, scale, priorities, process, amount, timeline, and indicators of successful outcomes.

III. REVIEW KEY CONSIDERATIONS FROM NOVEMBER 12 JOINT CONSORTIUM AND REAC MEETING

Dr. Maurana reviewed the initial outcomes from the Joint Consortium and REAC meeting. She indicated the primary measures of success were agreed to be focused on policy/systems change for health improvement and measurable health outcomes through interventions. The frameworks to guide the approach will include the Translational Wheel, and the Transformative Value Model. Dr. Maurana reminded the committee that the Consortium had identified early 2016 as an initial launch of the Component.

IV. DISCUSS SELECTION OF FOCUS AREAS FOR CROSS-CUTTING COMPONENT

The committee members reviewed the process used in determining the Strategic component priorities to begin the prioritization process for the Cross-Cutting component. The committee discussed how to determine the primary focus for the Cross-Cutting component.

Dr. Kerschner suggested having two priorities linked through a common theme.

Dr. Hillard agreed that it would be difficult to have one primary priority. She indicated that it would be important that the priorities would be linked in order to make a significant impact.

Dr. Nattinger agreed with not focusing on one particular priority, but rather identifying thematic linkages that could lead to multiple outcomes.

Ms. Lucey indicated that it would be interesting to focus on something in a broader perspective, such as focusing on the social determinates of health and then pick a particular focus area or theme to create momentum.

Dr. Hillard liked the criteria and characteristics used in the prioritization process for the Strategic component. She also noted that the final priorities that are chosen should strongly align with MCW expertise. She commented that she found the "Big enough to matter; small enough to win" factor helpful in the criteria for prioritization.

Ms. Lucey also indicated that we need to ensure that this component has the ability to have an impact on the entire state with the ability for all three MCW campuses to interact.

The members requested that staff put together resources to help inform the prioritization process. The committee noted that it could be helpful to have a document listing of AHW existing and past funded projects that align with priorities under consideration. In addition, it would be helpful to have information regarding the amount of funding in each priority.

V. IDENTIFY TARGET TIMELINE

The committee agreed that some time would be needed to effectively plan the Cross-Cutting component. The committee suggested targeting the RFP release for January-February 2017 with the earliest date for project funding to be July 2017.

VI. ADJOURN

There being no additional business the meeting adjourned at 11:47 am.