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VI. FUND MANAGEMENT .................................................... 75
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The Medical College of Wisconsin, Inc. and the MCW Consortium on Public and Community Health, Inc. (MCW Consortium) are pleased to present the third annual report on the Advancing a Healthier Wisconsin endowment.

In 2004, the Medical College of Wisconsin created an endowment upon receipt of more than $303 million in proceeds from the conversion of Blue Cross and Blue Shield United of Wisconsin from a non-profit company to a stock insurance corporation. Named Advancing a Healthier Wisconsin, the College’s endowment consists of three complementary components, all with the goal of improving the health of people in Wisconsin. The Healthier Wisconsin Partnership Program supports community-academic partnerships that address public and community health improvement. Educational Leadership for the Health of the Public supports programs in health and health care education for providers and consumers. Research for a Healthier Tomorrow supports basic science, clinical and translational research initiatives in such fields as cardiovascular disease, cancer, neurosciences, genetics and population health.

The MCW Consortium serves as the public and community health oversight and advisory committee for the Advancing a Healthier Wisconsin endowment. Its members are honored to steward these funds, which are dedicated in their entirety and in perpetuity to improve the health of the people in Wisconsin. As testament to this responsibility, this report outlines the MCW Consortium’s commitment to and compliance with the documents established to guide its stewardship:

- The State of Wisconsin Office of the Commissioner of Insurance Final Decision and Order, issued March 2000; and,
- The Advancing a Healthier Wisconsin Five-Year Plan dated April 2003 and the plan Addendum dated December 2003, together the “Five-Year Plan.”

This annual report was developed by the Medical College of Wisconsin and the MCW Consortium through a coordinated process to address all activities and expenditures relevant to the three complementary programs of the endowment (Healthier Wisconsin Partnership Program, Educational Leadership for the Health of the Public, and Research for a Healthier Tomorrow) from July 1, 2005 through June 30, 2006*.

The Medical College of Wisconsin and the MCW Consortium delivered this third annual report to the Wisconsin United for Health Foundation in December 2006 for its comment and review following a comprehensive process as outlined below:

- **August 17, 2006**
  Outline and timeline approved by MCW Consortium
- **September 21, 2006**
  Initial Draft reviewed by MCW Consortium
- **October 19, 2006**
  Final Draft approved by MCW Consortium
- **November 17, 2006**
  Publication Draft approved by Medical College of Wisconsin Board of Trustees

On behalf of Medical College of Wisconsin faculty, staff, and students, community stakeholders, health service organizations, and residents touched by this endowment’s public benefit, we appreciate this opportunity to report on our activities and vision to make Wisconsin a healthier state.

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* Please note that the Medical College of Wisconsin fiscal reporting year; project award terms for Healthier Wisconsin Partnership Program, Research for a Healthier Tomorrow, and Educational Leadership for the Health of the Public; and this annual report to Wisconsin United for Health Foundation are not synchronous.
II. GOVERNANCE

The MCW Consortium on Public and Community Health, Inc. (MCW Consortium), formed in 2002, is a non-stock, non-profit corporation whose purpose is to fulfill the obligations of the Public and Community Health Oversight and Advisory Committee as described in the March 2000 Order of the Wisconsin Commissioner of Insurance in the matter of the Blue Cross and Blue Shield United of Wisconsin conversion. The MCW Consortium meets on a monthly basis and conducts itself in accordance with its bylaws and in consistence with the Wisconsin public meeting and public record laws.

RANDALL S. LAMBRICHT, PHD
Chair
Dean, College of Health Sciences
University of Wisconsin-Milwaukee

Dr. Lambrecht is an advocate for Wisconsin’s senior citizens. He helped launch UWM’s Age and Community Initiative, which takes a comprehensive approach to the health and quality of life of seniors.

T. MICHAEL BOLGER, JD
President and Chief Executive Officer
Medical College of Wisconsin

Mr. Bolger has led the College through a period of unprecedented growth in research, patient care activity, and the expansion of the College’s academic programs and outreach efforts in the community.

MICHAEL J. DUNN, MD
Dean and Executive Vice President
Medical College of Wisconsin

Dr. Dunn provides leadership for all academic, research, patient care and public and community health programs for Wisconsin’s only private medical school.

TASHA JENKINS
Executive Director
Fighting Back, Inc.

Ms. Jenkins has focused her career on serving as an advocate for children and children’s health issues, specifically addressing substance abuse prevention for Milwaukee youth.

TERRY BRANDENBURG, MPA, MBA
Health Commissioner
City of West Allis

Mr. Brandenburg is a statewide leader in public health. For the past 13 years he has directed public health programs for the City of West Allis and the Village of West Milwaukee.

DOUGLAS R. CAMPBELL
Senior Vice President of Finance and Administration
Medical College of Wisconsin

Mr. Campbell has more than 25 years experience in academic healthcare fiscal oversight and management.

PEGGY HINTZMAN, MBA
Associate Director
Wisconsin State Laboratory of Hygiene

Ms. Hintzman has more than 20 years experience in public health. She is a statewide advocate for Wisconsin’s public health.

PAULA A. LUCEY, RN, MSN
President
Lamplighter Consulting

Ms. Lucey provides strategic guidance for community development initiatives and is the immediate past Director of Milwaukee County Health and Human Services.

CHERYL A. MAURANA, PHD
Senior Associate Dean for Public and Community Health
Medical College of Wisconsin

Dr. Maurana has received national recognition for her work in public health research and community-academic partnership development.

LEADERSHIP TRANSITION: In June 2006, following four years of visionary service and leadership at the Medical College of Wisconsin, Juli Kaufmann ended her tenure as founding director of the Healthier Wisconsin Partnership Program. Amy Murphy succeeded Ms. Kaufmann in July 2006 to guide the Program’s continued dedication to and development of community-academic partnerships for a healthier Wisconsin. This report and the successes contained within it are a tribute to the transformative and passionate skills of all who collaborate, lead, and implement through this vision.
The Five-Year Plan provides a framework with three complementary components for use of the Advancing a Healthier Wisconsin endowment funds:

- Educational Leadership for the Health of the Public;
- Healthier Wisconsin Partnership Program;
- Research for a Healthier Tomorrow.

This broad framework is designed to recognize the critical role each of the three components serve in achieving the vision of improving health for the people of Wisconsin. The framework and components are reflected in the following chart taken from the Five-Year Plan Addendum:

### Principles of Stewardship
- Collaboration
- Prioritization
- Leverage
- Accountability
- Transformation

### Inclusive Process
- Health Plans (local, state and national)
- Public Participation
- MCW Consortium on Public and Community Health

### Three Complementary Components

#### Educational Leadership for the Health of the Public
Education and training to enhance the capacity of:
- Public Health Professionals
- Health Providers
- Patients and Consumers
- Medical Students

#### Healthier Wisconsin Partnership Program
Through community-academic partnerships:
- Address leading health risks & priorities
- Focus on specific populations
- Prevent causes of death and disability
- Build capacity and enhance systems

#### Research for a Healthier Tomorrow
Through basic, clinical, applied and translational research, address leading causes of death and disability including:
- Cardiovascular Disease
- Cancer
- Neuroscience
- Genetics

Through population health research, address leading health risks and priorities identified in the state health plan.

### Outcomes
- Improved Health of the People of Wisconsin
- Strengthened Community Capacity
- Leadership in Public Health
The framework and priorities for Educational Leadership for the Health of the Public and Research for a Healthier Tomorrow funding are guided by the Five-Year Plan that outlines a set of six principles to govern the stewardship of the funds, detailed on page 43 of this report.

The framework and priorities for the Healthier Wisconsin Partnership Program are guided by the Five-Year Plan that outlines a set of five principles that govern the stewardship of the funds, detailed on page 9 of this report:

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**ANNUAL MILESTONES**

The Five-Year Plan covers the period from 2003-2008 and includes the following annual milestone objectives:

1. **Year One** 2003-2004
   - The Five-Year Plan was drafted with the assumption that implementation would begin in 2003, however, start-up was delayed pending the development and approval of an Addendum to the plan.
   - The final Five-Year Plan, including the Addendum, was approved in February 2004. The subsequent annual milestone timeline outlined in the Five-Year Plan is now adjusted due to these additional developments.

2. **Year Two** 2004-2005
   - Start-up functions to actively organize and fund projects with community-based partners, including training sessions and community meetings to foster and develop partnerships.
   - Develop and fund specific education and research initiatives that support health improvement.

3. **Year Three** 2005-2006
   - Fund approved community-based partnerships, education and research initiatives that are designed to maximize impact on the health of the public. Partnerships will be in varying stages of development and will be continually encouraged and supported.
   - Initial collection and review of evaluative data related to community-based partnerships as well as to the initiatives in research and education.

4. **Year Four** 2006-2007
   - Continue to develop and support community-based partnerships and educational and research initiatives while beginning the evaluation and outcome assessment. Evaluation will be designed to demonstrate efficacy and relevance in meeting the overall goal of improving health.
   - Expansion, modification or discontinuation of funding may be recommended as a part of this process.

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This annual report relates to the period July 1, 2005, through June 30, 2006 and responds to the Year Three 2005-2006 milestones noted above.
The Five-Year Plan establishes benchmarks and measurements, noted below, for determining progress toward the Advancing A Healthier Wisconsin vision. This annual report provides detail on progress toward achieving these twelve measurements and benchmarks.

1. Develop new community health partnerships targeted in Healthiest Wisconsin 2010;

2. Enhance and strengthen existing community health partnerships, and increase their focus on Healthiest Wisconsin 2010;

3. Develop new public health professional development programs in coordination with University of Wisconsin School of Medicine and Public Health (UWSMPH), and with other state health training programs such as those at University of Wisconsin-Milwaukee (UWM), and Marquette University;

4. Expand continuing medical education offerings for health professionals and use distance learning and teleconferencing technology to increase accessibility;

5. Enhance medical school curriculum to include public and community health concepts and skills;

6. Establish a new clinical skills training and assessment program for students and health professionals to enhance the transfer and integration of new clinical skills, procedures, technology and research discoveries into community healthcare;

7. Support new research initiatives that enhance our ability to identify and control factors that lead to heart disease including the identification of genes relating to hypertension;

8. Support new research initiatives that broaden our ability to diagnose, treat, and prevent cancer, and proceed with the development of predictive cancer profiling;

9. Support new research initiatives that demonstrate an improved understanding of the function of the brain, and improve the ability to assess the effectiveness of investigational therapies;

10. Support new research initiatives that foster translational research and develop a program to facilitate the migration of research findings into clinical practice;

11. Support new research initiatives that further our understanding of evaluative clinical research including assessment of patient care outcomes; and

12. Support new research initiatives that expand our knowledge of population health and community-based research as described by the Institute of Medicine’s “The Future of the Public’s Health in the 21st Century.”
The use of Advancing a Healthier Wisconsin funds is prescribed in the Five-Year Plan according to the following initial allocations:

- 35% of the funds, designated for public health and public health community-based initiatives.
- 65% of the funds, designated for health care provider education and medical research.

The allocation percentage remains unless it is increased or decreased by the affirmative vote of two-thirds of all the members of the MCW Consortium at the time a Five-Year plan is approved. Additionally, the MCW Consortium has elected to evaluate the allocation as part of its annual review process. During the second year of implementation of the Five-Year Plan, the MCW Consortium maintained the previously determined distribution of funds designated for public health, health care provider education and medical research.

Perhaps more important, the MCW Consortium has embraced a philosophy of approaching 100% of the funds through a coordinated effort to wisely invest in research, education and community partnerships, recognizing all components are necessary and important in order to advance the vision of improving the health of the people of Wisconsin.

Additionally, the meaning of public health is defined as “population health, rather than population medicine, focused on the broader determinants of health in communities, such as prevention efforts to promote healthy lifestyles for women, children and families; disease prevention and control; and control of environmental agents that negatively impact health.” While 35% of the allocation is technically dedicated to public health, as defined, public health efforts occur in all of the three complementary components of research, education and community partnerships. This philosophy for the allocation of funds was embraced in the funding decisions during the first funding cycle for each of the components described below and in subsequent sections.

The short-term and long-term health outcomes of the three complementary components will be measured and experienced within different timeframes by the residents of Wisconsin. Research and education projects represent a longer-term investment in public health by investing in new discoveries in biomedical, translational and population health research and training future health providers and equipping them with knowledge, tools, and the capacity to improve health based on scientific rigor. Community partnership projects have a more immediate impact based on the provision of services to at-risk populations, targeting existing and emerging health priorities, engaging community and Medical College of Wisconsin faculty in collaborative systems change, and translating scientific learning into community-based health prevention activities.

**Advancing a Healthier Wisconsin Total Funding Commitments**

$30,281,213  
107 Projects

<table>
<thead>
<tr>
<th>Educational Leadership for the Health of the Public</th>
<th>Healthier Wisconsin Partnership Program</th>
<th>Research for a Healthier Tomorrow</th>
</tr>
</thead>
<tbody>
<tr>
<td>Portion of Total Funds Distributed</td>
<td>$6,078,536</td>
<td>$14,158,610</td>
</tr>
<tr>
<td>15 projects</td>
<td>49 projects</td>
<td>43 projects</td>
</tr>
<tr>
<td>Public Health Professionals - $656,000</td>
<td>Addressing leading health risks and priorities</td>
<td>Cardiovascular Disease - $1,705,709</td>
</tr>
<tr>
<td>Health providers, patients, and consumers - $347,566</td>
<td>Focus on specific populations</td>
<td>Cancer - $2,822,390</td>
</tr>
<tr>
<td>Public and Community Health Doctoral Degree Program - $2,429,057**</td>
<td>Prevent causes of death and disability</td>
<td>Neuroscience - $467,287</td>
</tr>
<tr>
<td>MPH Expansion - $1,380,949**</td>
<td>Build capacity and enhance systems</td>
<td>Genetics - $1,403,044</td>
</tr>
<tr>
<td>Medical, graduate and resident education - $1,264,964</td>
<td></td>
<td>Population Health - $4,624,427**</td>
</tr>
</tbody>
</table>

*On June 21, 2006 four research and education projects totaling $9,005,388 were presented to the MCW Consortium for review and comment and approved by the MCW Board of Trustees on July 21, 2006. These include: $4,778,113 for the Public and Community Health Doctoral Degree Program in collaboration with the University of Wisconsin-Milwaukee, $2,761,897 for the expansion of MCW’s Masters of Public Health degree program to include other health professionals, $1,159,543 for the development of an infrastructure to support clinical and translational research, and $305,835 to support a clinical and translational research core facility.

**The total investments of $4,778,113 for the Public and Community Health Doctoral Degree Program and $2,761,897 for the MPH Expansion are divided evenly between the Educational Leadership for the Health of the Public and the Research for a Healthier Tomorrow fund totals.
The vision of the Healthier Wisconsin Partnership Program is to improve the health of the people of Wisconsin. The Healthier Wisconsin Partnership Program advances this vision by awarding project funding from the Advancing a Healthier Wisconsin endowment to support community-academic partnerships that address public and community health improvement. This section details information on two distinct funding cycle activities, which overlap during the reporting period of this report, as follows:

- 2nd Funding Cycle: RFP issued in September 2005; funding awards announced in March 2006.

The priorities of the Healthier Wisconsin Partnership Program and the projects that it funds are defined in the following four areas: Principles of Stewardship, Areas of Emphasis, Program Models and Funded Projects.

PRINCIPLES OF STEWARDSHIP
The framework and priorities for the Healthier Wisconsin Partnership Program are guided by the following five Principles of Stewardship outlined in the Five-Year Plan.

Collaboration The Healthier Wisconsin Partnership Program supports effective collaboration between community partners and Medical College of Wisconsin partners to capitalize on the strengths of each. Additionally, projects funded by the Healthier Wisconsin Partnership Program should build upon Healthiest Wisconsin 2010 (the state health plan), and coordinate with other efforts in the community.

Prioritization The Healthier Wisconsin Partnership Program aims to have maximum impact on the health of the people of Wisconsin by deliberately focusing on the greatest state and local needs.

Leverage The Healthier Wisconsin Partnership Program seeks opportunities to leverage its funding, with an emphasis on pooling existing resources, attracting additional resources, and encouraging sustainability.

Accountability The use of Healthier Wisconsin Partnership Program funds and the impact of funded projects should be measurable and accounted for through effective oversight and rigorous evaluation. Accountability should include comprehensive involvement of affected communities.

Transformation The Healthier Wisconsin Partnership Program aims to effect systemic change by emphasizing prevention, innovation, and capacity-building.

AREAS OF EMPHASIS
The Five-Year Plan also establishes the following three overarching areas of emphasis. These are the focus of an annual RFP process that invites community and Medical College of Wisconsin partners to collaboratively apply for project funding.
PROGRAM MODELS
Projects funded through the Healthier Wisconsin Partnership Program embrace interrelated approaches to health improvement and community–academic partnership through the following two models:

**HEALTH IMPROVEMENT MODEL**
- Address major areas of health risks
- Focus on specific populations
- Emphasize prevention of causes of death and disability
- Transform health improvement efforts through capacity-building and systemic programs

**COMMUNITY ACADEMIC PARTNERSHIP MODEL**
- Understanding the environment for partnerships
- Commitment to partnership principles
- Recognition and development of partnership stages

Funded Projects
The Healthier Wisconsin Partnership Program awards funding to partnership projects designed to support a range of health promotion or health-related prevention activities:

- **Development Awards**
  These awards generally fund planning, evaluation, or pilot activities related to the formation or development of a partnership, project, and/or program; or, the evaluation or implementation of capacity-building strategies aimed at strengthening organizations, sectors, or systems. They are typically awarded for a 12-month period totaling no more than $50,000.

- **Impact Awards**
  These awards generally fund partnership activities related to the implementation of a health promotion or health prevention project, program and/or partnership with significant impact; or, the implementation of capacity building strategies that will have significant impact on a health-related organization, sector, or system. They are typically awarded for a 36-month period totaling no more than $450,000.

<table>
<thead>
<tr>
<th>Overview</th>
<th>1st Funding Cycle (2004 awards)</th>
<th>2nd Funding Cycle (2006 awards)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development Awards</td>
<td>15</td>
<td>14</td>
</tr>
<tr>
<td>Impact Awards</td>
<td>8</td>
<td>12</td>
</tr>
<tr>
<td>Total Awards</td>
<td>23</td>
<td>26</td>
</tr>
<tr>
<td><strong>Total Funding</strong></td>
<td><strong>$3.9 M</strong></td>
<td><strong>$6.1 M</strong></td>
</tr>
</tbody>
</table>
During the period of this report (July 1, 2005–June 30, 2006), the 15 Development and 8 Impact projects awarded funding in December 2004 were at various stages of activity and administration:

- **March 2005–July 2005**
  Funding agreement materials finalized
- **March 2005–August 2005**
  Early phases of projects and programs initiated
- **October 2005–February 2006**
  Site-visits by Healthier Wisconsin Partnership Program staff conducted
- **December 2005**
  Six-Month Progress Reports (all projects) submitted
- **July 2006**
  Final Reports (Development Awards within 60 days of project completion) submitted
- **August 2006**
  Year-End Progress Reports (Impact Awards) submitted

The Healthier Wisconsin Partnership Program requires funded partners to submit performance and financial reports at six-month intervals throughout the duration of their projects. These reports outline the strategic project outputs, key activities, related processes, participation by stakeholders and partners, short and medium term results that have been achieved, reflections and lessons learned. Using qualitative and quantitative data, partners are asked to detail progress toward goals and outcomes and describe the ultimate impact of the project.

For purposes of this report, updates for the 23 projects funded in 2004 are presented in the following two sections, complemented by evaluative findings from an anonymous survey conducted with completed Development project partners on page 39 of this report:

- Principles of Stewardship Measures
- Project Progress Reports

**PRINCIPLES OF STEWARDSHIP MEASURES***

In their Year-End Progress Reports (Impact Projects) and Final Reports (Development Projects), partners reported on project measures tied to the Principles of Stewardship. The following table represents a summarized analysis of projects indicating attainment and/or focus on achieving these five project measures.

1. Additional funding or in-kind resources have been secured by the partnership, either by individual partners or the partnership as a whole for the same project or related work. *(LEVERAGE: Pooling existing resources, attracting additional resources, and encouraging sustainability)*

2. New skills and/or capacities have been developed by participating community and academic partners. *(COLLABORATION: Maintained effective collaboration between community partners and academic partners to capitalize on the strengths of each)*

3. Documented innovations and/or evidence-based practices have been developed through this project and are being shared through peer reviews, recognition, community dialogue, etc. *(ACCOUNTABILITY: Effective oversight and rigorous evaluation, PRIORITIZATION: Strove for maximum impact on the health of the people of Wisconsin by deliberately focusing on the greatest state and local needs)*

4. Publicity and/or published materials have been developed from this project, including brochures, web-site content, marketing, logo branding, etc.

5. Policy change activities have been initiated by this project. *(TRANSFORMATION: Aiming to effect system change by emphasizing prevention, innovation, and capacity-building)*

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* As reported by funded partners in Year-End Progress Reports (Impact Projects, N=8) and Final Reports (Development Projects, N=15).
The following summaries present progress report results from community-academic partnership projects awarded during the 1st Funding Cycle of the Healthier Wisconsin Partnership Program. These three-year Impact awards were announced in December 2004; project activities commenced in early 2005; and progress reports were submitted in the summer of 2006.

**BILINGUAL COMMUNITY-BASED CHRONIC CARE PROJECT**

**$450,000  04/01/2005 – 03/31/2008**

**SIXTEENTH STREET COMMUNITY HEALTH CENTER**
Mary J. Mueller, MPH, RD, CD

**UNITED COMMUNITY CENTER**
Angelica Delgado-Rendon

**MCW DEPARTMENT OF PEDIATRICS**
Asriani Chiu, MD
Jennifer Cohn, MLS
Christine Cronk, ScD

**MCW DEPARTMENT OF POPULATION HEALTH**
Ray Hoffmann, PhD

**MCW DEPARTMENT OF MEDICINE**
Paul Knudson, MD

This project aims to develop a model of care that will reduce the adverse health effects of the chronic health conditions (asthma, diabetes and obesity) most prevalent in an inner city Hispanic community. The program educates the community about chronic disease risks and management, tests new approaches for treating chronic diseases, evaluates interventions, establishes community partnerships, and trains staff in new procedures for patient care.

**PROGRESS:** Recruitment criteria, bilingual curriculum and intervention strategies were determined, and consent forms were developed and translated for all three health conditions. Outcome measures were selected along with instruments to measure each outcome, to include depression screening, chronic care management, diet and activity, self-management, quality of life, self-efficacy, and program participation. Most instruments are validated in English, with some validated in Spanish. A weekly support group for patients with chronic illness was established. MCW/Froedtert Hospital demonstrated a switchbox and software that can download/interpret blood sugar levels from 9 different glucometer brands and provided training to members of the Sixteenth Street Community Health Center’s diabetes program. This training has increased efficiency, reduced human error, and standardized reporting.

**CHURCH-BASED HEALTH AND WELLNESS PROGRAM**

**$450,000  04/01/2005 – 03/31/2008**

**BETHELHEM TEMPLE CHURCH**
Suffragan Bishop Samuel D. Rogers
Juanita Jacobs
Sharon Cooper
Gladys Rogers

**CHRIST TEMPLE CHURCH OF GOD IN CHRIST**
Pastor Hugh B. Genous
Patricia Genous

**CITY OF MILWAUKEE HEALTH DEPARTMENT**
Yvonne Greer, MPH, RD, CD

**EBENEZER CHURCH OF GOD IN CHRIST**
Pastor Jonathan Saffold
Julia Means

**HOLY CATHEDRAL CHURCH OF GOD IN CHRIST**
Pastor Charles McClelland
Nancy Wynn
Linda James
Quintin Grant

**MAISON TEMPLE CHURCH OF GOD IN CHRIST**
Pastor Osie Tatum
Better Gillespie
Geraldine Daniel

**NEW HOPE MISSIONARY BAPTIST CHURCH**
Archie L. Ivy

**PARKLAWN ASSEMBLY OF GOD**
Pastor Walter Harvey
Gloria Echols

**MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE**
Syed Ahmed, MD, DrPH
Barbara Beck, PhD
Staci Young, MS
This project aims to reduce health risk factors related to cancer, cardiovascular disease and diabetes in African American church-based communities. Church Health Action Teams (CHATs) are being recruited from seven congregations to conduct baseline health assessments of their communities and develop educational interventions.

**PROGRESS:** Pre and post assessments from the CHAT training indicate an increase in knowledge of community needs, strengths and local resources. CHAT members indicated an increased skill level in community organizing and working with congregation members to develop health programs. CHAT members indicated increased knowledge in many health topics, including: nutrition, cardiovascular disease, diabetes, cancer and exercise. CHAT members have begun to gain a better understanding of the resources and services available from partner churches.

---

**COMMUNITY HEALTH ADVOCATE MODEL PROGRAM (CHAMP)**

$449,501  03/01/2005 – 02/28/2008

This project aims to develop, implement, and sustain a health advocate program at five City of Milwaukee public housing sites. The project focuses on changing human behavior through peer influence and social support. Public housing residents are recruited and trained to become health advocates for their housing sites. Health risks related to cardiovascular disease, diabetes and obesity are the focal point of this project.

**PROGRESS:** Twenty-five advocates were trained for participation in the CHAMP project. Post-tests indicate that advocates increased their knowledge about heart disease and diabetes in the areas of prevention, prevalence, signs and symptoms, treatment, management, and community resources. Advocates have increased their skills in leadership and community organizing and have strengthened their commitment to improving the health and quality of life of public housing residents. The advocates meet monthly to share ideas, problem-solve, and strategize to increase effectiveness.

---

**CULTURALLY-APPROPRIATE WEIGHT LOSS INTERVENTION FOR OVERWEIGHT LATINO CHILDREN**

$450,000  08/22/2005 – 08/21/2008

This project aims to conduct a unique, community-based intervention that involves a randomized trial of culturally-appropriate weight loss intervention for overweight Latino children ages six to eighteen in Milwaukee. The intervention promotes lifestyle changes through combining a weight loss regimen, one or more physical activities ranging from soccer to hip-hop dance, and dietary counseling that includes cooking classes for parents.

**PROGRESS:** The project successfully completed two focus groups for Mexican immigrant and Puerto Rican families. Preliminary findings of both focus groups include insights related to diet, physical activity, parent education, community resources, healthy food substitutions and enthusiasm about the program. These findings were discussed within weekly partnership meetings. The MCW research team is preparing focus group transcripts, analyzing the transcripts, and submitting abstracts of the findings for consideration for presentation at the annual meetings of the Pediatric Academic Societies, the American Public Health Association, NAASO, the Obesity Society, and others. The last two focus group sessions for Mexican-American and other Latinos are still in process.
HEALTHCARE CAN CHANGE FROM WITHIN: A SUSTAINABLE MODEL FOR INTIMATE PARTNER VIOLENCE

$450,000 ♦ 06/01/2005 – 05/31/2008

DOUGTOWN HEALTH CENTER, MEDICAL COLLEGE OF WISCONSIN
John Meurer, MD, MBA
Pam Ramsey
Jenny Schroeder

SOJOURNER TRUTH HOUSE
Kathleen Stolpman
Paulie McCowan
Debra Fields

WAUKESHA FAMILY PRACTICE CENTER,
WAUKESHA MEMORIAL HOSPITAL FOUNDATION
Kathie Strombom
Velia Martin
Cindy Wrass

THE WOMEN’S CENTER
Marie Kingsbury

MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
Bruce Ambuel, PhD, MS
Marie Wolff, PhD
Kevin Hamburger, PhD
Clare Guse, MS

MCW DEPARTMENT OF PEDIATRICS
Marlene Meltzer-Lange, MD

MCW DEPARTMENT OF EMERGENCY MEDICINE
Mary Beth Phelan, MD, RDMS

This project aims to improve the health of women in Wisconsin by strengthening the primary and secondary prevention of intimate partner violence (domestic violence) within the health care delivery system. The project will develop, implement and evaluate a model training program that will help medical clinics and emergency departments establish a sustainable intervention in collaboration with community agencies for intimate partner violence.

PROGRESS: Prior to developing this training program and subsequent new model program, participating clinics began by assessing their patient information and their capacity to prevent and respond to intimate partner violence (IPV). Physicians and staff at all four clinics were then trained, and each clinic identified two health advocates to lead the clinic’s ability to identify and respond to IPV. A Health Advocate Reference Manual and a Physician’s Guide to Screening and Assessment have been developed and, in some cases, additional clinic policies and procedures have been drafted.

PARTNER UP FOR SUPERIOR HEALTH (PUSH)

$450,000 ♦ 04/01/2005 – 03/31/2008

ASHLAND COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT
Terri Kramolis

IRON COUNTY HEALTH DEPARTMENT
Zona Wick

PRICE COUNTY HEALTH DEPARTMENT
Tracy Ellis
Tony Bondioli

SAWYER COUNTY HEALTH AND HUMAN SERVICES DEPARTMENT
Pat Harrington

DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
David B. Schubot, PhD

The project uses a multi-faceted approach and evidence-based interventions to change social norms to increase good nutrition and increase physical activity for residents in Ashland, Bayfield, Iron, Price and Sawyer counties. Each county is developing a comprehensive community action plan that coordinates with local school districts, community centers, churches, employers, and local government. Through these coordinated efforts, the project aims to reduce the prevalence of obese and overweight residents in a multi-county, rural area of Wisconsin.

PROGRESS: Project partners engaged in multiple activities including the development of community walking programs, walking clubs and the development of accessible walking trails. Across the five counties, children were educated through their schools about nutrition and physical exercise. This health information was supported by school-wide events and more sustainable changes to school policies based on school board approval. General community education-programs for adults and media messages were also used. Businesses were targeted through employee wellness programs that included health assessments, health information from multiple sources and access to variety of opportunities for physical activities. Many of these activities take advantage of the unique landscape provided by these northern counties such as a canoe skills course, lakeshore walking trails, and cross country skiing.
The project aims to prepare and analyze community health profiles by conducting a community health assessment, identifying and prioritizing community strengths and needs, developing a strategic health plan to address community needs, and identifying health improvement efforts to tackle top health priorities. The Riverwest Health Initiative (RHI) will increase community coalition participation; develop parent education and resources of healthy lifestyles; ensure immunizations at Franklin Pierce and Fratney schools and participating Children’s Outing Association (COA) Centers; decrease rates of reported juvenile crime and substance abuse; increase the number of community youth linked to a medical home; and, increase the number of children birth to three years attending COA’s Centers who receive developmental screenings.

**PROGRESS:** Additional partners joined the original community coalition, including the Holton YMCA, neighborhood members, Cream City Collectives, and the Riverwest Neighborhood Association. RHI recognized the need for improved outreach to Hispanic and African-American residents. To meet this goal, a relationship was established with the Latino Health Organization to facilitate referrals and provide translation services. To increase the effectiveness of community outreach, a part-time Bilingual (Spanish) Community Outreach Worker was hired. RHI community coalition was strengthened through a community resource inventory, monthly partner surveys, and door-to-door outreach. Parent education, resources for families, immunization compliance, juvenile crime, neighborhood-wide substance abuse, conflict resolution, tobacco use, neighborhood safety through walking programs, and access to primary medical care are being addressed as part of this comprehensive health initiative. In the second and third years of the project, health care access, mental health, nutrition, and neighborhood safety will be prioritized.
This project aims to reduce the burden of intentional and unintentional injuries in Wisconsin by supporting the development of community-based injury prevention coalitions across Wisconsin. These public-private community-based coalitions will use evidence-based strategies to develop, implement and evaluate local programs to reduce the burden of injury at the local level.

**Progress:** Data and evidence-based injury prevention program information has been disseminated to all five county health departments. All counties have convened broad-based coalitions and are in varying stages of coalition development, identification of priority injury areas and goal-setting. Two coalitions have developed local injury prevention programs. Community injury prevention profiles have been developed and will be distributed at the Burden of Injury in Wisconsin Statewide Summit in October 2006.

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**DEVELOPMENT AWARDS**

*(listed in alphabetical order)*

The following summaries present final report results from community-academic partnership projects awarded during the 1st Funding Cycle of the Healthier Wisconsin Partnership Program. These one-year Development awards were announced in December 2004, project activities commenced in early 2005, and final reports were submitted in the summer of 2006.

**BARRON COUNTY FALL PREVENTION PROJECT**  
$19,427  ◆  03/15/2005 – 03/14/2006

**BARRON COUNTY OFFICE ON AGING**  
Charlene Oftedahl  

**LAKEVIEW MEDICAL CENTER**  
Beckie Fulton  
Char Mlejnek, RN

**MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE**  
Clare Guse, MS

**MCW DEPARTMENT OF MEDICINE**  
Joan Neuner, MD, MPH

**MCW DEPARTMENT OF POPULATION HEALTH**  
Peter Layde, MD, MSc

**MCW INJURY RESEARCH CENTER**  
Ann Christiansen, MPH

The primary goal of the Barron County Fall Prevention Project is to prevent falls and fall-related injuries among older adults in Barron County, Wisconsin. The secondary goal is to link older adults at risk for falls and fall-related injuries to existing health services.

**RESULTS:** Barron County Office on Aging added fall screening questions to their Meals-on-Wheels and Adult Day Care initial eligibility assessment forms and annual re-assessment forms. At-risk individuals were referred to the Aging and Disability Resource Center local resources and programs to reduce their risk of falling. Based on the findings of this project and a positive experience working with project partners, the Aging and Disability Resource Center of Barron County wrote a successful application for prevention funds from the Wisconsin Bureau on Aging and Disability Resources to address medication management issues for elderly and disabled persons living independently in the community. Additionally, partners secured an HWPP Development Award in the 2nd Funding Cycle for expansion of the program to Douglas and Washburn Counties. This new project is titled *Northwest Wisconsin Falls Prevention Collaborative.*

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**BOOSTER SEAT EDUCATIONAL CAMPAIGN FOR INNER-CITY MILWAUKEE**  
$25,000  ◆  04/01/2005 – 03/31/2006

**CHILDREN’S HEALTH EDUCATION CENTER**  
(INJURY FREE COALITION AND SAFE KIDS SE WISCONSIN)  
Bridget Clementi

**CHILDREN’S HOSPITAL OF WISCONSIN**  
Cinda Werner, MS, RN

**MILWAUKEE URBAN LEAGUE**  
Shirley Sharp

**MCW DEPARTMENT OF PEDIATRICS**  
Suzanne Brixey, MD  
Maureen Otto  
Ramesh Sachdeva, MD
This project aimed to decrease the morbidity and mortality of children ages 4-8 from unintentional injuries and deaths resulting from motor vehicle crashes through surveying caregivers and physicians and directly observing drivers. This pilot program also laid the groundwork for a Booster Seat Educational Campaign targeting the inner city of Milwaukee.

**RESULTS:** The cost and false perception that the child was too big for belt positioning booster seats (BPB) for age-appropriate children living in the central city of Milwaukee are the two most common reasons for non-use. Information gained from this project supported the passage of Wisconsin Act 106. This pilot program resulted in a Healthier Wisconsin Partnership Program Implementation Award in the 2nd funding cycle, titled *Milwaukee Kids: Drive Me Safely, Drive for Health.*

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**COMMUNITY-ACADEMIC PARTNERS FOR ELDER ABUSE EDUCATION AND PREVENTION**

$24,991  ◆  03/01/2005 – 06/30/2006

**UW-MILWAUKEE, CENTER ON AGE AND COMMUNITY**

Maria Ledger, MSW

**MILWAUKEE COUNTY DEPARTMENT ON AGING**

Linda Cieslik, PhD
Ramona Williams

**MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE**

Syed Ahmed, MD, DrPH
Annette Cernohous
Shari Crome
Kevin Hamberger, PhD
Eric Gass, MS

This project studied the needs, mapped assets, and developed a strategic plan for reducing risk and incidence of physical, emotional, and material abuse of older adults in Milwaukee County.

**RESULTS:** For planning purposes, a comprehensive literature review, an asset map of existing programs and support services and a needs assessment were completed. A collaborative network was developed and a task force was formed to discuss issues and provide input into ongoing strategic plans. As a result, a strategic plan was developed by project partners for leverage of implementation funds in 2007.

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**CREATING A COMMUNITY-ACADEMIC PARTNERSHIP TO IMPROVE THE ORAL HEALTH OF WAUKESHA COUNTY**

$24,883  ◆  03/01/2005 – 08/31/2006

**WAUKESHA MEMORIAL HOSPITAL FOUNDATION**

Kathie Strombom

**MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE**

Bruce Ambuel, PhD, MS

This project aimed to evaluate existing oral health programs in Waukesha County and propose a viable delivery model for comprehensive dental care to low income, underinsured Hispanic families.

**RESULTS:** Established an active 23 member coalition with broad based representation to improve oral health access and gain commitment of local dentists to support low-income, underserved, Hispanic families. In cooperation with the State of Wisconsin’s Chief Dental Officer, the partners evaluated the dental health needs of children and adults in Waukesha County and identified best practices related to clinic operations and procedures, staffing, patient eligibility, and funding sources. Ultimately, the coalition developed a relationship with the Waukesha County Dental Society to establish a clinic to serve underserved, uninsured Hispanic population.
DOMESTIC VIOLENCE SCREENING IN SOUTH CENTRAL WISCONSIN
$18,202 ◆ 03/01/2005 – 11/30/2005

HOPE HOUSE OF SOUTH CENTRAL WISCONSIN, INC.
Peggy Helm-Quest

MCW DEPARTMENT OF SURGERY
Karen Brasel, MD, MPH

This project aimed to review the screening practices of health care professionals for domestic violence in five south-central Wisconsin counties. Survey results will allow more effective screening programs, prevention activities, and violence intervention strategies.

RESULTS: The partnership developed and implemented a survey with health care professionals about screening for domestic violence. Survey results were shared as project partners discussed their organizational processes to identify and support victims of domestic violence. Partners then collaborated with Hope House to distribute brochures and posters at their facilities. As a result, the community has an improved system to support survivors of domestic abuse.

ELDER HEALTH UPHOLDERS
$24,000 ◆ 04/01/2005 – 03/31/2006

WHEATON FRANCISCAN HEALTHCARE (FORMERLY COVENANT
HEALTHCARE SYSTEMS, INC.)
Maebie Brown
Nancy Bruggemani
Sherry Castillo
Julie Ellis, RN, MSN
Karen Reed

MILWAUKEE HEALTH SERVICES, INC.
Crystal Logan
Diane McSwain

MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
Jeffrey Morzinski, PhD

This project aimed to improve the health outcomes for southeastern Wisconsin’s African American older adults through the use of uniquely trained volunteers. These volunteers provided culturally appropriate health education, social support and health advocacy through churches where these volunteers and older adults are members.

RESULTS: A multidisciplinary project team was established to implement the project and a health needs assessment was conducted. As a result, health teaching models were developed related to arthritis and diabetes. Church-based volunteers were recruited, trained and mentored. The volunteers planned and implemented diverse projects with their churches, since both a great need and an interest in health were demonstrated among participating churches. This project resulted in a Healthier Wisconsin Partnership Program Development Award in the 2nd Funding Cycle, titled Elder Health Upholders.

FOCUS ON KIDS PARTNERSHIP PROJECT
$25,000 ◆ 04/01/2005 – 03/31/2006

CHILDREN’S FAMILY AND COMMUNITY PARTNERSHIPS, INC.
Kevin Boland, MA
Denise Pilz

PENFIELD CHILDREN’S CENTER, INC.
Patricia Grede
Joanette Mazar, RN, BSN
Beth Vick

MCW DEPARTMENT OF PEDIATRICS
Lisa Zetley, MD
Shelley Penberthy, BSN, RN

This project aimed to increase the accessibility of primary and preventive health services, create a continuity of care between the primary physician and community service providers, and facilitate communication between agencies serving children with developmental delays, disabilities, or complex medical and social issues from culturally diverse low-income families.
RESULTS: There was a 71% increase in the attendance rate of the children participating in the project for medical appointments and other support services. As reported in the post-project surveys, 88% of the families stated they have an increased understanding of their child’s need for medical and supportive services. Additionally, 100% of the families stated they were more satisfied with the services their child received after participation in the project, primarily due to better communication between multiple providers and the parents. All of the partner agencies reported an increase in their knowledge and understanding of the partner agencies, the services they offer, and how to obtain services. Additionally all partner agencies reported a better understanding of the children enrolled in the project, resulting in the creation of a more comprehensive care plan.

HEALTHIER CUMBERLAND COALITION
$24,758  •  04/01/2005 – 03/31/2006

3M CUMBERLAND
Jeanette Olsen BSN, RN

AUGUSTANA LUTHERAN CHURCH
Rev. David Halaas

CUMBERLAND MEMORIAL HOSPITAL AND
EXTENDED CARE UNIT
Mary Jean Jergenson, RN, MSN

CUMBERLAND SCHOOL DISTRICT
Don Groth

HEALTHIER CUMBERLAND COALITION
Becky Robertson

MCW DEPARTMENT OF POPULATION HEALTH
Jane Morley Kotchen, MD, MPH

This partnership aimed to address health improvement in the Cumberland area of rural northeastern Wisconsin by fostering healthy eating habits, increased physical activity, and improved levels of fitness. The partners developed a school-based program to address nutrition and fitness for children and their families with the long-term goal of reducing the incidence of overweight and obesity.

RESULTS: A comprehensive nutrition, physical activity and wellness policy was adopted by the Cumberland School Board. A “Cumberland Fitness Challenge” attracted over 750 participants in a rural community of 2,200 residents. Documented completion of the challenge to be physically active 30-60 minutes a day for five days a week for six weeks was achieved by 46% of the registrants, which is a significant accomplishment considering the substantial time commitment required by participants. Growing volunteer participation is another indication that the population may be receptive to a more comprehensive program. Adoption of a school policy to address nutrition and physical activity issues provides a foundation and avenue for future school-based health promotion interventions. School kitchen staff increased the whole grains in breads, decreased fat and sugar in recipes and offered more fruit and vegetable options. This pilot project laid the groundwork for Healthier Wisconsin Partnership Program funding of an Impact Award during the 2nd funding cycle, titled Healthier Cumberland.

HOLISTIC HEALTH PLANNING PARTNERSHIP FOR WOMEN OFFENDERS
$24,914  •  03/15/2005 – 05/30/2006

HORIZONS, INC.
Connie Shaver
Linda Pate-Hall

MCW DEPARTMENT OF MEDICINE
Ann Maguire, MD, MPH

This project aimed to develop a community-based health collaborative that will use a health improvement model to identify and address the physical, emotional, spiritual, and financial health needs of women offenders in the community.

RESULTS: Two focus groups of women offenders were held and full health assessments were conducted on forty Horizon consumers. A health forum of community health providers was attended by twenty-eight agencies. A program plan and holistic health curriculum has been drafted to meet the needs of female offenders. The project has resulted in new data about the health practices and risks of women offenders, including uncovering several unmet needs that require further intervention. The project has also mobilized a core team of stakeholders who are committed to helping women involved in the criminal justice system gain increased information and access to health services and advocate for systems change.
This project aimed to develop a coalition of free and low cost clinics to understand and address the needs of the uninsured in Milwaukee. The goal of the coalition was to learn as much as possible about those who lack sufficient financial resources to qualify for any kind of insurance, but yet choose to electively and non-emergently access safety net health care providers.

RESULTS: A data collection instrument for clinical chart review was developed and 6 volunteers were trained to conduct the chart review. Ten clinics located in Milwaukee and Waukesha participated in the chart review resulting in the evaluation of 4,159 health records. A written report based on the chart reviews was produced. Participating clinics and providers have formed a Primary Care Alliance whose mission is to address the needs of the underserved and uninsured in Milwaukee. The work completed through this development grant provided the foundation for the Milwaukee Cares project, a strategic effort to develop a network of physicians and health services for the uninsured. Milwaukee Cares was funded as an impact grant during Healthier Wisconsin Partnership Program’s 2nd Funding Cycle.

MENTAL HEALTH CAPACITY-MARION, WI $27,986 ◆ 04/01/2005 – 06/30/2006

HOPE COUNSELING
Pastor Skip Robertson

MARION AREA COMMUNITY FOUNDATION
Gus Knitt

This project aimed to assess the perception of community mental health needs among key stakeholders and community members in order to increase the availability of, and access to, local health service options. This information will inform the creation of a strategy for long-term support for mental health programs and create an implementation plan to increase access to services and disseminating results.

RESULTS: An interview regarding perceptions of mental health needs and capacity was developed, implemented, analyzed and distributed. The data collected through this initiative enhanced the capacity of HOPE Counseling to increase access to mental health services. The HOPE Board has decided to explore a coalition with area schools, the Marion Area Family Resource Center, and other appropriate organizations to address the mental health needs in the area.
NEIGHBORHOOD CENTER NUTRITION AND PHYSICAL ACTIVITY DEMONSTRATION PROJECT FOR URBAN CHILDREN AND FAMILIES ♦ $25,000 ♦ 04/01/2005 – 04/30/2006

NEIGHBORHOOD HOUSE OF MILWAUKEE
Clarence Johnson
Penny Williams
Audra Hale
Christie Julian

SILVER SPRING NEIGHBORHOOD CENTER
Jim Bartos
Judy Kuehnau
Anthony McHenry

UW-MILWAUKEE, COLLEGE OF NURSING
Laura Anderko, PHD, RN

MCW DEPARTMENT OF PEDIATRICS
John Meurer, MD, MBA

This project aimed to develop a curriculum that included structured, age appropriate activities to improve the nutritional and exercise behaviors of pre-school, school age, teen, and adult caregivers to prevent or lower the risks of health and lifestyle problems that are related to overweight, obesity, poor diet, and lack of exercise.

RESULTS: This project attempted to improve the health of people served in the Neighborhood House community by piloting a scientifically-based educational program that was integrated into the activities of two neighborhood centers located in a high-risk community. The nutritional and physical activity status of parents and children were assessed. Best practices were researched, identified and adopted. The partnership provided valuable and practical experience for students, using a public and community health model. Additionally, the neighborhood center participants received targeted interventions and activities. This project resulted in a Healthier Wisconsin Partnership Program 2nd Funding Cycle Impact Award titled Citywide Nutrition and Physical Activity for Urban Children and Families, engaging eight neighborhood centers.

PROJECT HOPE (HEALTH OF PEOPLE EVERYWHERE): AN AGAPE/STRITCH/MCW PARTNERSHIP
$26,962 ♦ 03/01/2005 – 05/31/2006

AGAPE COMMUNITY CENTER
Kasandra Tarkington

CARDINAL STRITCH UNIVERSITY
COLLEGE OF NURSING
Sharon Garrett, MSN, RN

MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
Barbra Beck, PhD

This project aimed to conduct a comprehensive health assessment of the Agape service area and strengthened the capacity of the community by using community-based participatory research (CBPR).

RESULTS: Ten Agape community members formed a Community Advisory Committee. Seven focus groups and a survey were administered to assess health care status, concerns and resources. A Town Hall Meeting was held for the Agape community at which the focus group and survey results were shared and future activities discussed. The Community Advisory Committee members increased their understanding of how to plan and conduct focus groups, develop and administer written surveys, analyze data, prioritize results and share these activities with the community. A foundation grant of $2,500 for equipment was procured.
ROCK RIVER HEALTHY SMILES
$42,658  ◆  03/15/2005 to 04/30/2006

CITY OF WATERTOWN HEALTH DEPARTMENT
Carol Quest

JEFFERSON COUNTY DENTAL SOCIETY
Brian Turley

ROCK RIVER FREE CLINIC, INC.
Barb Dehnert

DODGE COUNTY HUMAN SERVICES AND HEALTH DEPARTMENT
Jodi Langfeldt

JEFFERSON COUNTY HEALTH DEPARTMENT
Gail Scott

UNITED WAY
Dan McCrea

DODGE-JEFFERSON HEALTHIER COMMUNITY PARTNERSHIP
Debra Gatzke
Amy Cloute

MARQUETTE SCHOOL OF DENTISTRY
Robert Karczewski

MCW CENTER FOR SCIENCE EDUCATION
Katie Williams

HOLT DENTAL SUPPLY
Paul Phelps

PLUMBER’S LOCAL 75
Steve Breitlow

MCW DEPARTMENT OF FAMILY AND COMMUNITY MEDICINE
David B. Schubot, PhD

ST. VINCENT DE PAUL

This project aimed to develop a best practice model for the delivery of dental health education and dental health services for low income uninsured and underinsured residents in Dodge and Jefferson Counties by developing a free, sustainable dental clinic.

RESULTS: Dental clinics located in Wisconsin that serve the un- and underinsured were identified and four sites were visited and surveyed. An oral health profile was developed for the community. A business plan was developed and community partnerships expanded based on this information. A Board of Directors and a 501(c)3 designation was secured. Based on these efforts, $400,000 was secured from Delta Dental, St. Vincent DePaul, to support a free dental clinic. A case study was written based on clinic site visits and survey questions.

SYSTEM PLANNING FOR AN INTEGRATED DATABASE FOR CHILDREN WITH DEVELOPMENTAL DISABILITIES
$24,959  ◆  03/01/2005 to 05/31/2006

CITY OF MILWAUKEE HEALTH DEPARTMENT
Kathy Blair, BSN, MS

MILWAUKEE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES
Elizabeth Kraniaik

MCW DEPARTMENT OF PEDIATRICS
Christine Cronk, ScD

MILWAUKEE CENTER FOR INDEPENDENCE
Howard Garber, PhD

UW-MILWAUKEE
Paula Rhyner, PhD
Min Wu, Ph.D

This project aimed to develop an integrated database for identifying and tracking children with developmental delays or disabilities from birth to 3 years of age in Milwaukee County. This system facilitated cooperation and data sharing among the partners and was used to support agencies providing services to these children.

RESULTS: An on-line survey was developed and administered to early intervention service providers. The survey results revealed a great need for an integrated database system for children with disabilities from birth to three years of age in Milwaukee County. It was identified that all early intervention providers maintain their own database of records for each child served, often in different formats which limits the sharing and integration of data. As a result of the survey, a vision statement, mission statement and objectives for a database system were developed. The State of Wisconsin Department of Health and Family Services, which oversees statewide early intervention programs, joined the partnership to assure compatibility. The potential utility of the database has expanded to fulfill other family service and community planning needs. A web-site was also developed to share information on the project. Data collection and reporting systems used in early intervention programs have been revised, in part, as a result of this project.
On September 23, 2005, the Healthier Wisconsin Partnership Program initiated its 2nd Funding Cycle with the issuance of the 2006 Request for Proposals (RFP) for partnership projects according to the following timetable.

<table>
<thead>
<tr>
<th>2005</th>
<th>2006</th>
</tr>
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<tbody>
<tr>
<td>SEPT</td>
<td>OCT</td>
</tr>
<tr>
<td>♦ Issued Request for Proposals on September 23, 2005</td>
<td></td>
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<tr>
<td>Conducted seven statewide training sessions</td>
<td></td>
</tr>
<tr>
<td>♦ Received Notices of Intent</td>
<td></td>
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<tr>
<td>♦ Received Proposals</td>
<td></td>
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<tr>
<td>♦ Conducted technical reviews</td>
<td></td>
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<tr>
<td>Conducted merit reviews</td>
<td></td>
</tr>
<tr>
<td>♦ Completed supplanting determinations</td>
<td></td>
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<tr>
<td>♦ Notification of awards</td>
<td></td>
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<tr>
<td>Funded projects orientation</td>
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</table>

**TECHNICAL ASSISTANCE**

Following the issuance of the RFP, the Healthier Wisconsin Partnership Program provided technical assistance that included the provision of information and training on the proposal process.

♦ Web-based resources were developed for the Healthier Wisconsin Partnership Program to provide ongoing electronic access to information related to the program and the RFP process. A web-based partner directory was refreshed, containing an academic partner component that includes Medical College of Wisconsin faculty and staff who have indicated interest in serving as partners with community organizations to submit proposals to the Healthier Wisconsin Partnership Program. The directory also includes a community partner component describing community organizations seeking academic partners.

♦ In September and October 2005, statewide training sessions were conducted by staff of the Healthier Wisconsin Partnership Program and members of the MCW Consortium to provide hands-on proposal assistance. Attendance at these sessions was optional and participation was not required in order to submit a proposal. Held in Milwaukee, Madison, Tomah, Oshkosh, Rhinelander, and Rice Lake, these sessions were attended by more than 205 representatives of Wisconsin’s community organizations as well as faculty and staff from the Medical College of Wisconsin. According to a survey, attendees described themselves in the following four stages of development at the time of attending a training session:
PROPOSAL REVIEW PROCESS
Following the provision of technical assistance, the response generated by this RFP was strong, with over 300 community and Medical College of Wisconsin partners submitting 132 notices of intent in December 2005. Of these, 113 full proposals met technical eligibility and underwent competitive merit review. The following summary provides an overview of the proposals received.

<table>
<thead>
<tr>
<th>Summary</th>
<th>Impact Projects</th>
<th>Development Projects</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of proposal submissions</td>
<td>63</td>
<td>50</td>
<td>113</td>
</tr>
<tr>
<td>Amount requested (approx.)</td>
<td>$27,270,972</td>
<td>$2,425,611</td>
<td>$29,696,583</td>
</tr>
<tr>
<td>Academic partner applicants *</td>
<td>68</td>
<td>50</td>
<td>96</td>
</tr>
<tr>
<td>Community organization applicants *</td>
<td>138</td>
<td>119</td>
<td>227</td>
</tr>
</tbody>
</table>

* self-reported on applications, unduplicated, and exclusive of numerous support staff, volunteers, and other involved partners

Technical Review
A technical review process was implemented by the Healthier Wisconsin Partnership Program in order to provide an initial evaluation of proposal submissions to determine that eligibility requirements were met and that all sections were completed according to the guidelines. Submissions that successfully passed the technical screen proceeded to the merit review process.

Merit Review
Community-Campus Partnerships for Health (CCPH) conducted the merit review for the Healthier Wisconsin Partnership Program. CCPH is a nonprofit organization that promotes health through partnerships between communities and higher educational institutions. Founded in 1996, CCPH is a growing network of over 1,000 communities and campuses. CCPH has members throughout the United States, and increasingly the world, who are collaborating to promote health through service-learning, community-based research, community initiatives and other partnership strategies.

CCPH works to:
- build the capacity of communities and higher educational institutions to engage each other as partners;
- incorporate service-learning into the education of all health professionals;
- recognize and reward community-based teaching, research and service; and,
- develop partnerships that balance power and share resources among partners.

Following a national recruitment process conducted by CCPH, 21 community and academic consultants were engaged by the Medical College of Wisconsin to serve as merit reviewers. (Please see following page.) The consultants are individuals from outside the state of Wisconsin with expertise in public and community health, community-academic partnerships, and proposal review. During January and February 2006, each proposal was reviewed for merit by two community and two academic reviewers. Additionally, Impact proposals that received outstanding rankings following this initial review were further reviewed by all expert reviewers at an in-person meeting held in Milwaukee in February 2006.

In March 2006, the proposals were considered by the MCW Consortium. The MCW Board of Trustees reviewed and approved all of the proposals recommended by the MCW Consortium on March 17, 2006.
Healthier Wisconsin Partnership Program
National Merit Reviewers

ALEX ALLEN, MD, MA
Vice President of Community Planning and Research
Isles, Inc.
Trenton, NJ

RAMONA BENSON
Community Health Worker Specialist
City of Berkeley Black Infant Health Program
Berkeley, CA

DEANNE BLANKENSHIP, BS, CHES
Project Manager
Breast Cancer and Early Cervical Cancer Screening Program, California Health Collaborative
Chico, CA

MICHÈLE CURTIS, MD, MPH
Associate Professor of Obstetrics and Gynecology
University of Texas-Houston Medical School
Houston, TX

ELMER FREEMAN, MSW, PhD(c)
Executive Director
Center for Community Health Education Research and Service
Boston, MA

ADAM GOLDSTEIN, MD, MPH
Associate Professor
Department of Family Medicine
University of North Carolina-Chapel Hill School of Medicine

WILLIAM J. HALL, MD
Professor of Medicine and Director, Center for Healthy Aging
University of Rochester School of Medicine
Rochester, NY

JEFF HARENESS, MPH
Director
Western Massachusetts Center for Healthy Communities, Cooley Dickinson Hospital
Holyoke, MA

KARI HARTWIG, DrPH
Assistant Clinical Professor, Department of Epidemiology and Public Health
Yale University School of Medicine
New Haven, CT

ANNA HUFF
Project Director
Mid Delta Community Consortium
Phillips County, Marvell, AK

MICK HUPPERT, MPH
Associate Dean for Community Programs
University of Massachusetts Medical School
Worcester, MA

MARION KAVANAUGH-LYNCH, MD, MPH
Director, California Breast Cancer Research Program
University of California, Office of the President
Oakland, CA

JOAN MILLER, MHA
Executive Director
Bexar County Community Health Collaborative
San Antonio, TX

ADRIAN MOSLEY, MSW
Administrator, Community Health
Johns Hopkins Health System
Baltimore, MD

LORI M. NASCENTE, MPH
Associate Director, Division of Community Health
University of Southern California School of Medicine
Los Angeles, CA

DAVID NELSON, PhD
Director of Rehabilitation and Wellness Services
Millinocket Regional Hospital
Millinocket, Maine

GERRY ROLL, BS
Executive Director
Hazard Perry County Community Ministries Inc
Hazard, KY

RENEE ROYAK-SCHULER, PhD, MBA
Associate Professor, Department of Epidemiology and Preventive Medicine
University of Maryland School of Medicine
Baltimore, MD

ORIANNE SHARR, MPH, CSW
Assistant Director for Community Programs
Lutheran Family Health Centers
Department of Community-Based Programs
Brooklyn, NY

K SUJATA, MBA, PhD
Director of Planning and Development
Interfaith Housing Development Corporation of Chicago
Chicago, IL

MARK W. YEAZEL, MD, MPH
Assistant Professor, Department of Family and Community Health
University of Minnesota Medical School
Minneapolis, MN
On March 17, 2006, the Healthier Wisconsin Partnership Program announced funding of $6,060,692 for 26 projects. Over 100 community and academic partners on these urban, rural and statewide projects, representing multiple areas of the Health Improvement Model and embracing the Community-Academic Partnership Model of collaboration, committed to advance the vision of the Healthier Wisconsin Partnership Program to improve the health of Wisconsin residents through a broad range of health promotion and prevention activities.

<table>
<thead>
<tr>
<th>Summary</th>
<th>Impact Projects</th>
<th>Development Projects</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of funded proposals</td>
<td>12</td>
<td>14</td>
<td>26</td>
</tr>
<tr>
<td>Amount awarded</td>
<td>$5,386,277</td>
<td>$674,415</td>
<td>$6,060,692</td>
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<tr>
<td>Academic partners participating *</td>
<td>15</td>
<td>23</td>
<td>30</td>
</tr>
<tr>
<td>Community organizations participating *</td>
<td>49</td>
<td>54</td>
<td>83</td>
</tr>
</tbody>
</table>

**Geographic Distribution**

<table>
<thead>
<tr>
<th>Type</th>
<th>Impact Projects</th>
<th>Development Projects</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statewide - $599,137</td>
<td>1</td>
<td>3</td>
<td>4 (15%)</td>
</tr>
<tr>
<td>Rural – $1,494,922</td>
<td>3</td>
<td>3</td>
<td>6 (23%)</td>
</tr>
<tr>
<td>Urban – $3,966,633</td>
<td>8</td>
<td>8</td>
<td>16 (62%)</td>
</tr>
</tbody>
</table>

* self-reported on applications, unduplicated, and exclusive of numerous support staff, volunteers, and other involved partners

---

**Distribution of All Projects by Health Improvement Model**

*(applicants were able to select more than one indicator for each focus area)*

**Major areas of health risks**

**Specific populations**

**Prevention of causes of death and disability**

**Transformation and capacity building efforts**
The following community-academic partnership projects were awarded funding in March 2006 for the implementation of three-year, health promotion programs for a healthier Wisconsin.

**BUILDING COMMUNITY CAPACITY: GAMP CHRONIC DISEASE MANAGEMENT INITIATIVE**

$449,970

The GAMP Chronic Disease Management Initiative will use case management to improve patient self-management skills, improve health outcomes, and increase the effective use of health resources for 625 indigent, uninsured persons suffering from chronic disease. It will establish a model for replication throughout the GAMP system.

16TH STREET COMMUNITY HEALTH CENTER
John Bartkowski, DrPH

CITY OF MILWAUKEE HEALTH DEPARTMENT
Bevan Baker, CHE

FROEDTERT MEMORIAL LUTHERAN HOSPITAL
William Petasnick

MILWAUKEE CONTINUUM OF CARE
Joe Volk

MILWAUKEE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES
John Chianelli

UW-MILWAUKEE, COLLEGE OF NURSING
Laura Anderko, RN, PhD

WISCONSIN HEALTH AND HOSPITAL ASSOCIATION
Bill Bazan

WPS
Teri Malsch

ACADEMIC PARTNERS
Joan Bedinghaus, MD – Family and Community Medicine
Ann Maguire, MD, MPH – Medicine

**CITYWIDE NUTRITION AND PHYSICAL ACTIVITY FOR URBAN CHILDREN AND FAMILIES**

$450,000

This project will implement a curriculum of educational and physical activities in eight central city neighborhood centers to improve the nutrition and physical activity of ethnically diverse children ages 3 to 18 and their adult caregivers to prevent or lower the risks of health problems related to overweight, poor diet and lack of exercise.

UNITED NEIGHBORHOOD CENTERS OF MILWAUKEE
Karen Higgins
Sarah O’Connor

AGAPE COMMUNITY CENTER
Patrice Colletti, SDS
Eva Spencer

COA YOUTH AND FAMILY CENTERS
Tom Schneider
Dwight Williamson

JOURNEY HOUSE
Michelle Bria
Melissa Lawent

MILWAUKEE CHRISTIAN CENTER
Kathy Bailargeon
Christina Torres-Ilk

NEIGHBORHOOD HOUSE OF MILWAUKEE
Clarence Johnson
Penny Williams
Audra Hale
Christie Julian

NEXT DOOR FOUNDATION
Sharon Schulz
Carla Rutherford
Kenyatta Sinclair

NORTHcott NEIGHBORHOOD HOUSE
Mac Weddle
Latonya Lucas

SILVER SPRING NEIGHBORHOOD CENTER
Jim Bartos
Judy Kuehnau
Anthony McHenry

MOUNT MARY COLLEGE
Lisa Stark

UW-MILWAUKEE, COLLEGE OF NURSING
Laura Anderko, RN, PHD

ACADEMIC PARTNERS
John Meurer, MD, MBA – Pediatrics
Jennifer Cohn, MLS
Qun Xiang, MS
Antonella Ferrise
COMMUNITY CONNECTIONS TO PROMOTE INDEPENDENT LIVING (CCPIL)  
$450,000

The purpose of CCPIL is to create a coordinated health care system in rural Wood and Marathon counties for older adults with chronic conditions that focuses on strengthening patients’ ability to manage their own care through community-based services and self-management support.

AGING AND DISABILITY RESOURCE CENTER OF MARATHON COUNTY  
Susan Coleman  
Todd Breaker

SECURITY HEALTH PLAN  
Michelle Bachhuber, MD  
Julie Wallace, CHES

ACADEMIC PARTNER  
Jeff Whittle, MD, MPH – Medicine

EMPOWERING INDIVIDUALS TO IMPROVE THEIR HYPERTENSION CONTROL THROUGH PEER SUPPORT  
$450,000

This intervention will establish a network of peer support groups to encourage superior blood pressure control and reduce the associated risk of death and disability among elderly members of the Veterans of Foreign Wars (VFW).

CLEMENT J. ZABLOCKI VA MEDICAL CENTER  
Michael Erdmann, MD

VETERANS OF FOREIGN WARS  
Karen Janezic  
Steve Lawrence

ACADEMIC PARTNER  
Jeff Whittle, MD, MPH – Medicine  
Kristyn Ertl, BA

FAMILY RISK REDUCTION INTERVENTION WITH FEMALE JUVENILE DELINQUENTS  
$436,601

This project will implement a family-systems prevention program for adolescent females who have been referred to juvenile court that promotes sustained abstinence from delinquency and other risk behavior, as well as improved mental health, family function, and family communication.

MILWAUKEE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES, COURT AND DELINQUENCY SERVICE  
Kathy Malone

NEW CONCEPT SELF DEVELOPMENT CENTER  
June Perry

ACADEMIC PARTNER  
David Seal, PhD – Psychiatry and Behavioral Medicine
FIGHT ASTHMA MILWAUKEE ALLIES: IMPROVING ACCESS TO QUALITY ASTHMA CARE
$450,000

Improving Access to Quality Asthma Care will strengthen collaborative efforts among parents of children with asthma and their families, childcare centers, schools, community agencies, and healthcare providers to advocate for and improve the accessibility and quality of asthma care for thousands of Milwaukee children.

AMERICAN LUNG ASSOCIATION OF WISCONSIN
Michelle Mercure

AURORA HEALTH CARE, INC.
Jolyn Zamora
Sarah Arvelo
Vicki Carlson-Oehlers
Sue Schaus

BOYS AND GIRLS CLUBS OF GREATER MILWAUKEE
Tracy Osbourne

CHILDREN’S HOSPITAL AND HEALTH SYSTEM
Erin Lee
Laurie Smrz
Evelyn Kuhn

CITY OF MILWAUKEE HEALTH DEPARTMENT
Kris White, BSN

FAMILY HOUSE
Vicky Edwards

HEALTH AND WELLNESS ENTERPRISES, LLC
Kathy Levac, RN, MS

MILWAUKEE AREA HEALTH EDUCATION CENTER
Suzanne Letellier

MILWAUKEE PUBLIC SCHOOLS
Kathleen Murphy

WHEATON FRANCISCAN HEALTHCARE-
ST. JOSEPH REGIONAL MEDICAL CENTER
Kathy Polacheck

WHEATON FRANCISCAN HEALTHCARE- HOME HEALTH AND HOSPICE, INC.
Dawn Johnson

ACADEMIC PARTNERS
John Meurer, MD, MBA – Pediatrics
Jennifer Cohn, MLS
Jane Brotanek, MD, MPH
Pam Ramsey
Emmanuel Ngui, DrPH, MSc

HEALTHIER CUMBERLAND
$450,000

This project will build a community culture of healthy lifestyle behaviors and an environment that sustains a Healthier Cumberland.

3M CUMBERLAND
Jeanette Olsen, BSN, RN

AUGUSTANA LUTHERAN CHURCH
Rev. David Halaas

CUMBERLAND MEMORIAL HOSPITAL AND EXTENDED CARE UNIT
Mary Jean Jergenson, MSN, RN

CUMBERLAND SCHOOL DISTRICT
Don Groth

HEALTHIER CUMBERLAND COALITION
Becky Robertson

ACADEMIC PARTNER
Jane Morley Kotchen, MD, MPH – Population Health
HEALTHIER WORKFORCE 2009: IMPROVING HEALTH AND EMPLOYABILITY OF WELFARE-TO-WORK PARTICIPANTS

$450,000

Healthier Workforce 2009 Improving the Health and Employability of Welfare-to-Work Participants will reduce health related barriers to employment and improve the health status of Wisconsin Works (W-2) participants.

COMMUNITY ADVOCATES, INC.
Tracy Wymelenberg
Andi Elliott

MAXIMUS, INC.
Karwn Shao
Kelly Blaschke
Jerry Stepaniak

ACADEMIC PARTNERS
Ann Maguire, MD, MPH – Medicine
Sergey Tarima
Dan Eastwood

IMPROVING ACCESS TO QUALITY DEMENTIA CARE SERVICES IN UNDERSERVED RURAL WISCONSIN

$450,000

The overall purpose of this initiative is to promote the health and well being of Wisconsin residents affected by Alzheimer’s disease and related disorders and their families and in particular those people who reside in traditionally underserved rural and minority communities of our state.

ALZHEIMER’S ASSOCIATION, SOUTH CENTRAL WISCONSIN CHAPTER
Paul Rusk

ALZHEIMER’S ASSOCIATION, GREATER WISCONSIN CHAPTER
Mary Bouche

ALZHEIMER’S ASSOCIATION, SOUTHEASTERN WISCONSIN CHAPTER
Tom Hlavacek

ACADEMIC PARTNER
Diana Kerwin, MD – Medicine

MILWAUKEE CARES

$450,000

Milwaukee Cares will substantially improve the health status of uninsured residents of Milwaukee County by providing appropriate access to free episodic, primary and specialty care, hospital services, and medication through the creation of a voluntary network of physicians, health professionals, hospitals and pharmaceutical service.

BILINGUAL COMMUNICATIONS AND CONSULTING, INC.
Maria Gomez

BLUE CROSS BLUE SHIELD OF WISCONSIN FOUNDATION
Jill Becher

CITY OF MILWAUKEE HEALTH DEPARTMENT
Capri-Mara Fillmore, MD, MPH, MSc

WI DEPARTMENT OF HEALTH AND FAMILY SERVICES
W. Curtis Marshall

MEDICAL SOCIETY OF MILWAUKEE COUNTY
Bruce Kruger

MILWAUKEE CARES
Jacqueline Sills Ware

MILWAUKEE COUNTY GENERAL ASSISTANCE MEDICAL PROGRAM
John Chianelli

FREE CLINIC COLLABORATIVE AURORA HEALTHCARE
Tina Grace

BREAD OF HEALING CLINIC
Tom Jackson, Barbara Homer-Ibler

FROEDTERT AND COMMUNITY HEALTH
Maureen McNally

GREATER MILWAUKEE FREE CLINIC
George Schneider

HEALTHCARE NETWORK
Barb Tylenda

HOUSE OF PEACE
Beth Peterman

JERICHO ROAD FOUNDATION
Tim Jorgenson

LAKE AREA FREE CLINIC
Jean Neal

MARQUETTE CLINIC FOR WOMEN AND CHILDREN
Mary Ann Lough, PhD

OPEN DOOR FREE CLINIC
Margaret Bull

PFIZER, INC.
Isaam Lutfiyya

ST. BEN’S FREE CLINIC
Carol Sejda

WALKERS POINT FREE CLINIC
Jeff Luecke

WISCONSIN HOSPITAL ASSOCIATION
Bill Bazan

Academic Partner
Theodore MacKinney, MD, MPH – Medicine
MILWAUKEE KIDS: DRIVE ME SAFELY-DRIVE FOR HEALTH
$450,000

Since motor vehicle crashes are the leading cause of injury and death in Wisconsin, all children, regardless of socioeconomic status should have access to the appropriate car or booster seat to decrease their morbidity and mortality as a result of motor vehicle crashes.

AURORA HEALTH CARE-AURORA WIC PROGRAM
Jen Agnello

CHILDMEN’S HOSPITAL AND HEALTH SYSTEM
Bridget Clementi
Cinda Werner

MILWAUKEE HEALTH SERVICES, INC.
Angie Wilks-Tate

YMCA OF METROPOLITAN MILWAUKEE, INC.
NORTHSIDE BRANCH
John Lowther

ACADEMIC PARTNERS
Suzanne Brixey, MD – Pediatrics
Lisa Uherick, MD – Pediatrics
Stephen Hargarten, MD, MPH – Emergency Medicine
Andrea Winthrop, MD – Surgery
Steve Pinkerton, PhD – Psychiatry and Behavioral Medicine

STRONG RURAL COMMUNITIES INITIATIVE (SRCI)
$449,706

The purpose of the Strong Rural Communities Initiative (SRCI) is to improve health indicators for selected rural communities in Wisconsin and make collaboration for prevention the norm, not the exception, in rural Wisconsin.

RURAL HEALTH DEVELOPMENT COUNCIL
Tim Size

LANGLADE COUNTY HEALTH DEPARTMENT
Mary Brayton

MANITOWOC COUNTY HEALTH DEPARTMENT
Annie Short
Amy Wergin

WAUPACA COUNTY
Connie Abert

ACADEMIC PARTNERS
Syed M. Ahmed, MD, DrPH – Family and Community Medicine
Eric Gass, MS

The following community-academic partnership projects were awarded funding in March 2006 for the planning of health promotion programs or partnerships for a healthier Wisconsin.

ARSENIC IN WISCONSIN’S RESIDENTIAL DRINKING WATER: PLANNING FOR ACTION
$50,000

This project will increase the capacity of the environmental health community to comprehensively address elevated arsenic levels in residential drinking water.

CENTER FOR WATERSHED SCIENCE AND EDUCATION
Kevin Masarik

OUTAGAMIE COUNTY PUBLIC HEALTH DIVISION
Jeff Phillips
Melody Bockenfeld

UW-EXTENSION, WINNEBAGO COUNTY
Catherine Neiswender

UW-MADISON, SCHOOL OF NURSING
Lori Severtson, RN, PhD

WINNEBAGO COUNTY HEALTH DEPARTMENT
Doug Gieryn

WI DEPARTMENT OF HEALTH AND FAMILY SERVICES, DIVISION OF PUBLIC HEALTH
Henry Anderson, MD

ACADEMIC PARTNERS
Syed M. Ahmed, MD, DrPH – Family and Community Medicine
Sarah Beversdorf, MSW, MPH

ACADEMIC PARTNERS
Suzanne Brixey, MD – Pediatrics
Lisa Uherick, MD – Pediatrics
Stephen Hargarten, MD, MPH – Emergency Medicine
Andrea Winthrop, MD – Surgery
Steve Pinkerton, PhD – Psychiatry and Behavioral Medicine

2006 DEVELOPMENT AWARDS
(listed in alphabetical order)
CHASING THE WHIRLWIND: STORYTELLING ABOUT AMERICAN INDIAN YOUTH DEPRESSION
$49,137
This project will produce a plan and next steps for a culturally-informed, community-based depression education model to decrease depression-related mortality and morbidity among American Indian youth by increasing community knowledge, decreasing social stigma, and promoting supportive treatment.

GERALD L. IGNACE INDIAN HEALTH CENTER, INC.
Charity Schwingle, MSW
Jimmie Kewakundo

INHEALTH WISCONSIN
Suzette Urbashich, MS
Sue McKenzie, MA

LUTHERAN SOCIAL SERVICES OF WISCONSIN AND UPPER MICHIGAN, INC.
Bernestine Jeffers

SPOTTED EAGLE, INC.
Mark R. Powless, MS

UNIVERSITY OF WISCONSIN-MILWAUKEE
Leah M. Arndt, PhD

ACADEMIC PARTNERS
Barbara Reed, PhD – Psychiatry and Behavioral Medicine
Michelle Cornette, PhD

COGNITION AND OUTREACH SERVICE DELIVERY TO AGING SENIORS
$49,628
This project will develop a model to allow community outreach programs to more effectively provide services to cognitively-impaired seniors by using health science students seeking experience in service delivery to seniors and health sciences faculty experienced in delivering geriatric home care.

CARROLL COLLEGE
Trevor Hyde, PhD

INTERFAITH CAREGIVING NETWORK, INC.
Kathy Gale
Aimee Henry

ACADEMIC PARTNERS
Edith Burns, MD – Medicine
Kathryn Denson, MD

COMMUNITY MOBILIZATION INITIATIVE ADDRESSING DISPARITIES IN STDs AND UNINTENDED PREGNANCIES
$50,000
This initiative seeks to improve sexually transmitted diseases (STDs) and adolescent pregnancy prevention outcomes for minority, uninsured youth in Milwaukee through new community planning and mobilization efforts.

CITY OF MILWAUKEE HEALTH DEPARTMENT
Geoffrey Swain, MD, MPH
Capri-Mara Fillmore, MD, MPH, MS
Amy Doczy, MPH
David Garcia, MPH

HEALTH CARE EDUCATION AND TRAINING, INC.
Ann Kronser

WI DEPARTMENT OF HEALTH AND FAMILY SERVICES, DIVISION OF PUBLIC HEALTH, BUREAU OF COMMUNICABLE DISEASE AND PREPAREDNESS, STD/HIV PROGRAMS
Jim Vergeront, MD
Kathleen Krchnavek, MSSW
Neil Hoxie, MS
Bill Reiser, MSN, RN
Casey Schumann, MS

ACADEMIC PARTNERS
Wendi Ehrman, MD – Pediatrics
Seth Foldy, MD, MPH – Family and Community Medicine
DEVELOPING STRATEGIES: IMPROVING THE HEALTH OF LGBT PEOPLE OF COLOR
$50,000

The purpose of this project is to analyze 2005 needs assessment data, recruit partners, support leadership development, and develop strategies for programming that will improve health disparities that exist for lesbian, gay, bisexual and transgender (LGBT) people of color in Southeastern Wisconsin.

**DIVERSE AND RESILIENT, INC.**
Gary Hollander, PhD
Brenda Coley

**WI DEPARTMENT OF HEALTH AND FAMILY SERVICES**
Miche Llanas

**MILWAUKEE HEALTH DEPARTMENT**
David Garcia, MPH

**ACADEMIC PARTNER**
David Seal, PhD – Psychiatry and Behavioral Medicine

**CONNXEXUS**
Sandra Jones, PhD

ELDER HEALTH UPHOLDERS
$50,000

This project aims to improve health outcomes for southeastern Wisconsin’s African American older adults through the use of uniquely trained volunteers who will provide culturally appropriate health education, social support and health advocacy through churches where these volunteers and older adults are members. The project builds on activities conducted during 2005 as a recipient of a $25,000 Healthier Wisconsin Partnership Program award.

**WHEATON FRANCISCAN HEALTHCARE**
Maebie Brown
Nancy Brueggeman
Julie Ellis, RN, MSN
Karen Reed

**ACADEMIC PARTNER**
Jeffrey Morzinski, PhD – Family and Community Medicine

**CHILDREN’S HEALTH ALLIANCE, CHW**
Karen Ordinans

**CHILDREN’S HOSPITAL OF WISCONSIN DENTAL CENTER**
A. Charles Port, DDS

**MAMQUETTE UNIVERSITY SCHOOL OF DENTISTRY**
William Lobb, DDS

**MILWAUKEE PUBLIC SCHOOLS**
William Andrekopoulus
Kathleen Murphy, MS, APRN-BC, FNP

**ACADEMIC PARTNER**
Earnestine Willis, MD, MPH – Pediatrics
Tiffany Frazier, MPH

HEALTHY TEETH = HEALTHY KIDS
$45,627

An oral health action plan will be developed by community stakeholders in Milwaukee as a result of a community assessment that, once implemented, will result in the reduction of dental disease, need for treatment and elimination of chronic mouth pain among children.

**GRASS ROOTS EMPOWERMENT PROJECT, INC.**
Molly Cisco

**MENTAL HEALTH ASSOCIATION IN WAUKESHA COUNTY, INC.**
Lisa McLean

**MILWAUKEE COUNTY BEHAVIORAL HEALTH DIVISION**
Suzanne Schuler

**OUR SPACE, INC.**
Joan Lawrence

**WAUKESHA COUNTY DEPARTMENT OF HUMAN SERVICES**
Michael Demares

**ACADEMIC PARTNER**
Jon Gudeman, MD – Psychiatry and Behavioral Medicine

INTEGRATING PEER SUPPORT THROUGHOUT THE BEHAVIORAL HEALTH CONTINUUM OF CARE
$50,000

The intent of this project is to develop a cost-effective, transformative service and to integrate this unique treatment modality throughout the public and private behavioral health care delivery systems in Milwaukee and Waukesha County.

**GRASS ROOTS EMPOWERMENT PROJECT, INC.**
Molly Cisco

**MENTAL HEALTH ASSOCIATION IN WAUKESHA COUNTY, INC.**
Lisa McLean

**MILWAUKEE COUNTY BEHAVIORAL HEALTH DIVISION**
Suzanne Schuler

**OUR SPACE, INC.**
Joan Lawrence

**WAUKESHA COUNTY DEPARTMENT OF HUMAN SERVICES**
Michael Demares

**ACADEMIC PARTNER**
Jon Gudeman, MD – Psychiatry and Behavioral Medicine
NEW LEADERSHIP WISCONSIN: BUILDING HEALTH POLICY LEADERSHIP CAPACITY
$50,000

This project aims to plan a pilot version of a public and community health policy development module for inclusion in the summer 2007 New Leadership Development Program (NLDP) for women at Mount Mary College.

MOUNT MARY COLLEGE
Yvonne Lumsden-Dill

ACADEMIC PARTNERS
Earnestine Willis, MD, MPH – Pediatrics
Seth Foldy, MD, MPH – Family and Community Medicine

ANN MAGUIRE, MD, MPH – MEDICINE
Earnestine Willis, MD, MPH – Pediatrics
Seth Foldy, MD, MPH – Family and Community Medicine

NORTHEAST WISCONSIN FALLS PREVENTION COLLABORATIVE (NWFPC)
$45,588

Northwest Wisconsin Falls Prevention Collaborative, formed with Barron, Douglas and Washburn medical, social service, and volunteer organizations will work in partnership with the Medical College of Wisconsin to develop organizational system practices to prevent falls in older adults.

CATHOLIC CHARITIES BUREAU, INC. (RETIRED AND SENIOR VOLUNTEER PROGRAM)
Kendra-Sue Rohde, BA

LAKEVIEW MEDICAL CENTER
Char Mlejnek, RN

WASHBURN COUNTY UNIT ON AGING
Linda Fike, BA

BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM, UNIVERSITY OF WISCONSIN-SUPERIOR
John Kunz, MS

ACADEMIC PARTNERS
Peter Layde, MD, MSc – Population Health
Clare Guse, MS – Family and Community Medicine
Ann Christiansen, MPH – Injury Research Center

SABER PARA LA GENTE / KNOWLEDGE FOR THE PEOPLE
$50,000

Saber Para La Gente will test an innovative method to enhance the knowledge about Latino health disparities in Wisconsin through qualitative information drawn from descriptions of those who experience them, using theatre as a tool.

LATINO HEALTH ORGANIZATION
Carolina Gonzalez-Schlenker, MD, MPH

MARQUETTE UNIVERSITY COLLEGE OF NURSING
Lea Acord, RN, PhD

MILWAUKEE PUBLIC THEATRE
Barbara Leigh

SPANISH CENTERS OF RACINE, KENOSHA AND WALWORTH INC.
Ben Ortega

STATE OF WISCONSIN DIVISION OF PUBLIC HEALTH
Kelly Jones, BSN, MSN

ACADEMIC PARTNERS
Christine Cronk, ScD – Pediatrics
SAFETY STARTS AT HOME
$34,619
Because the majority of injuries in young children occur in and around the home, educating at-risk families on how to create a safer environment for their children and providing them with the tools to do so will result in increased awareness and a reduction in unintentional injuries.

CHILDREN'S HEALTH AND HOSPITAL SYSTEM
Bridget Clement

CITY OF MILWAUKEE HEALTH DEPARTMENT
Richard Gaeta

MILWAUKEE FIRE DEPARTMENT
Lt. David Anderson

UNITED COMMUNITY CENTER
Shani Lizardi
Virgilio Rodriguez

YMCA OF METROPOLITAN MILWAUKEE
Pat Hernandez-Piotrowski

ACADEMIC PARTNERS
Andrea Winthrop, MD – Surgery
Stephen Hargarten, MD, MPH – Emergency Medicine
Suzanne Brixey, MD – Pediatrics
Lisa Uherick, MD – Pediatrics
Ann Christiansen, MPH – Injury Research Center
Mary Czinner – Injury Research Center
Hongyan Yang – Family and Community Medicine
Marlene Melzer-Lange, MD – Pediatrics

STRENGTHENING PUBLIC HEALTH POLICYMAKING FOR A HEALTHIER MILWAUKEE
$49,816
A partnership between the City of Milwaukee Health Department and the Medical College of Wisconsin will result in the development of a model outline to guide local level public health policymaking to improve the health of Milwaukee’s residents.

CITY OF MILWAUKEE HEALTH DEPARTMENT
Vivian Chen, MSW, ScD
Kathleen Blair, BSN, MS

ACADEMIC PARTNERS
Stephen Hargarten, MD, MPH – Emergency Medicine
John Meurer, MD, MBA – Pediatrics

Keri Frisch, MS – Injury Research Center

THE WISCONSIN CENTER FOR HEALTH COMMUNICATION: PATHWAYS TO IMPLEMENTATION
$50,000
This project will convene public health system and other stakeholders to develop a plan to establish a Wisconsin Center for Health Communications. It will serve as a multimedia resource and infrastructure for public health communications and health marketing.

WISCONSIN PUBLIC HEALTH ASSOCIATION
Gretchen Sampson, RN, MPH

ACADEMIC PARTNERS
Alan David, MD – Family and Community Medicine
Seth Foldy, MD, MPH – Family and Community Medicine
The MCW Consortium on Public and Community Health implemented a comprehensive evaluation as a tool to improve program operations and to develop a framework to assess health outcomes. Based on the fact that the Healthier Wisconsin Partnership Program is approximately half-way through the implementation of the Five-Year Plan, the developmental evaluation has been largely process-oriented and can be characterized by the following general aims:

- seek feedback, generate learning, support direction and/or affirm change in direction;
- develop new measures and monitoring mechanisms as goals emerge and evolve;
- position evaluation as a key function integrated into ongoing activities;
- design the evaluation to capture system interdependencies and emerging connections;
- focus accountability on key values and commitments.

This continual evaluation has enhanced the clarity of the Request for Proposals, streamlined Funding Agreement processes, informed technical assistance needed by applicants and funded projects, and laid the groundwork for a rigorous long-term evaluation that will focus on project outcomes and overall health improvement in Wisconsin.

**OVERARCHING FRAMEWORK**

The MCW Consortium on Public and Community Health has set forth an evaluation for the Healthier Wisconsin Partnership Program that includes three major components:

**IMPACT**

This component is focused on the Principles of Stewardship as a framework for assessing if the Healthier Wisconsin Partnership Program is achieving its vision of improving the health of the people of Wisconsin.

**PROJECT OUTCOMES**

This component is focused on quantifying the impact of individual funded projects. The final results of the 1st Funding Cycle Development Awards and interim results of the Impact Awards are included in this report.

**STRATEGIES**

This component is focused on evaluating current program operations and processes using the requirements and guidelines established in the second funding cycle Request for Proposal framework.

**STAKEHOLDER INVOLVEMENT**

Public participation continues to be incorporated into each improvement of the Healthier Wisconsin Partnership Program. In keeping with this commitment, public comment and opinion fulfills a significant role in evaluation. The following stakeholders provided input into the 2005-2006 Evaluation.

**COMMUNITY STAKERS**
- broad range of Wisconsin community stakeholders
- public health associations and committees
- city, county, and state government staff and officials
- other funders
- funded and unfunded community applicants

**MCW STAKERS**
- faculty and staff
- faculty leadership
- departments chairs, administrators, and liaisons
- funded and unfunded academic applicants

**OTHER STAKERS**
- MCW Consortium on Public and Community Health
- Healthier Wisconsin Partnership Program and other MCW staff
- National merit review consultants
- Community Campus Partnerships for Health
- University of Wisconsin School of Medicine and Public Health (UWSMPH)
SOURCES OF DATA
Multiple sources of data were used to evaluate the processes and short-term outcomes of the Healthier Wisconsin Partnership Program. This information includes existing Healthier Wisconsin Partnership Program program data and surveys and reports that capture the experience of both funded and unfunded applicant agencies and multidisciplinary stakeholders:

Program Data
1. Healthier Wisconsin Partnership Program Proposals
Information on both funded and unfunded projects has been compiled, analyzed and used to understand the strengths and challenges of applicant agencies and health needs across the State of Wisconsin.

2. RFP Training Session Evaluation
This report presents a summary of the feedback provided by 120 of the 205 participants in the seven sessions provided across the State of Wisconsin. Key findings include:
- Most training session participants represented community organizations.
- Most of the training session participants indicated that they would submit a proposal during the 2nd Funding Cycle.
- Training session participants were at various stages of development related to project concepts, proposal writing and partnership maturity.

3. Survey of the National Merit Reviewers
This report presents reviewer’s responses to a survey conducted following the announcement of awards. Key findings include:
- The number of reviewers representing academic and community perspectives were equal and the majority of reviewers felt that these two perspectives were voiced and listened to equally during the review meeting.
- The on-line merit review system was a significant improvement over the e-mail review utilized during the 1st Funding Cycle.
- The majority of reviewers felt that they had adequate time to review and discuss each proposal.

4. Analysis of First and Second Funding Cycle Applicant Organizations
This report assesses Healthier Wisconsin Partnership Program outreach and organizational awareness and capacity. Key findings include:
- There were approximately 450 unique applicants in 1st and 2nd Funding Cycles.
- 65% of applicants represented non-profit organizations with a 501(c)3 designation. The majority of these organizations describe their organizations as health or social service oriented.
- 25% of applicants represented government agencies. Most of these organizations represent state or local health departments.
- 6% of applicants represent for-profit organizations.
- 4% of applicants represent non-profits without 501(c)3 or coalitions.

5. Funded Projects Reports
These reports are submitted every six months by both Development and Impact Projects. Specific outcomes for the 1st Funding Cycle are detailed in the project progress reports on page 12. Highlights from the completion of the 1st Funding Cycle Development Awards include:
- Four Development Awards – Barron County Fall Prevention, Booster Seat Educational Campaign for Inner-City Milwaukee, Healthier Cumberland Coalition, How Safe is the Safety Net, and Neighborhood Center Nutrition and Physical Activity Demonstration Project for Urban Children and Families - that were implemented during the 1st Funding Cycle were expanded and funded as Impact Project Awards during the 2nd Funding Cycle.
- Significant funding in the amount of $375,000 was secured by the Rock River Healthy Smiles project to open a new free dental clinic in Jefferson County as a result of $42,658 in funding from Healthier Wisconsin Partnership Program. This grant was awarded by Delta Dental of Wisconsin, who has also challenged the partners to raise an additional $36,000, which they will then match. The project has also received in-kind donations and other grants in excess of $25,000.
- The Creating a Community Academic Partnership to Improve the Oral Health of Waukesha County project established an active oral health coalition, conducted an oral health needs assessment and secured a relationship...
with the Waukesha County Dental Society to establish a clinic to serve the un- and underinsured Hispanic population. The project partners then received a grant through the Waukesha Memorial Hospital Foundation in the amount of $12,500 to assist with establishing the clinic, in addition to several other in-kind and committed funds from a variety of greater Milwaukee funders.

♦ In addition to being funded as an Impact Award in Healthier Wisconsin Partnership Program’s 2nd Funding Cycle, information gained from A Booster Seat Educational Campaign for Inner-City Milwaukee informed the development and passage of new Child Booster Seat Law in Wisconsin (Wisconsin Act 106) that went into effect on July 1, 2006.

♦ Two Development Awards – Barron County Fall Prevention and Elder Health Upholders – were each successfully awarded funding as Development projects in the 2nd Funding Cycle.

6. Conference Participation

WPHA-WALHDAB Annual Conference: Partnerships Across Wisconsin • May 25, 2006, Wisconsin Dells
Partners from the Church-Based Health and Wellness Program (2004 Impact project) presented on how their project addresses Wisconsin’s health risk areas (including Healthiest Wisconsin 2010 priorities) through community-academic partnership, including a discussion of project outcomes and lessons learned.

♦ Julia Means – Ebenezer Church of God in Christ
♦ Nancy Wynn – Holy Cathedral Church of God in Christ
♦ Barbra Beck and Staci Young – Medical College of Wisconsin

CCPH 9th Annual Conference: Walking the Talk: Achieving the Promise of Authentic Partnership
May 31-June 3, 2006, Minneapolis, MN
Five Healthier Wisconsin Partnership Program-funded projects presented at the international Community Campus Partnerships for Health (CCPH) annual conference. These projects included:

♦ Project Hope (Health of People Everywhere): An Agape/Stritch/MCW Partnership
  Barbra Beck – Medical College of Wisconsin
  Sharon Garrett – Cardinal Stritch University

♦ Holistic Health Planning Partnership For Women Offenders
  Ann Maguire – Medical College of Wisconsin
  Connie Shafer and Linda Pate-Hall – Horizons, Inc.

♦ Bilingual Community-Based Chronic Care Project
  Christine Cronk – Medical College of Wisconsin
  Lisa Rodriguez-Burnett – United Community Center
  Mary Mueller – 16th Street Community Health Center

♦ Riverwest Health Initiative
  Jim Sanders – Medical College of Wisconsin
  Mary Jo Baisch – UW-Milwaukee College of Nursing

♦ Wisconsin Injury Prevention Coalitions
  Ann Christiansen – Medical College of Wisconsin
  Barbara Hill – UW Madison

Surveys

1. Annual Stakeholder Survey
The information gathered in this annual stakeholder survey provides information that will help measure progress toward achieving the vision, principles of stewardship partnerships and program priorities as outlined in the Five-Year Plan. The 22-question, anonymous, web-based survey was developed to supplement existing data and reach a broad, statewide stakeholder base. It was disseminated to almost 2,000 individuals from community organizations and the Medical College of Wisconsin from May 22, 2006 - June 9, 2006. The following comparisons are extracted from data compiled through each of the first two stakeholder surveys (full reports are available at www.mcw.edu/healthierwisconsin).

Key Findings

♦ Stakeholders—Respondents to each of the two surveys conducted by the Healthier Wisconsin Partnership Program were most likely to have a primary professional affiliation with a health, social service or other
community-based organizations, followed by state or local government, Medical College of Wisconsin, or other academic institutions. A significantly greater number of respondents work in Milwaukee and/or southeastern Wisconsin than other areas of the state.

- Staff and Technical Assistance—Respondents generally found the Healthier Wisconsin Partnership Program staff to be accessible and helpful; and, the program website was noted as being easy to navigate and sufficiently informative. Several suggestions for website enhancements have been suggested including improved partnership directories.
- Request for Proposal Process (RFP)—The majority of respondents felt the RFP guidelines and requirements were clear and reasonable, however, many commented more concise feedback is needed from the national merit reviewers.
- Community-Academic Partnerships—While many of the respondents indicated the partnership requirement is reasonable, the majority would like additional assistance with building productive partnerships.

2. Annual Completed Project Survey
This anonymous, web-based survey was sent to community and academic partners following the completion of the fifteen Development projects to gauge the overall funding and performance experience with the Healthier Wisconsin Partnership Program.

Key findings:
- Respondents expressed relative ease in establishing and maintaining the community-academic partnership and a commitment to continue the partnership.
- Respondents also expressed challenges related to project administration especially as it related to the Human Subjects Protection Institutional Review Board process.
- Despite administrative challenges, most respondents rated the technical assistance provided by the Healthier Wisconsin Partnership Program staff as “above average.”

These findings are based on the following survey data:

<table>
<thead>
<tr>
<th>LIKERT DATA SCALE</th>
<th>Academic Partners Response</th>
<th>Community Partners Response</th>
<th>AVERAGE RESPONSE (N=15)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Our partnership achieved the goals/outcomes originally proposed for our project.</td>
<td>1.6</td>
<td>1.3</td>
<td>1.4</td>
</tr>
<tr>
<td>What is the likelihood your partnership will apply for continued funding for this project?</td>
<td>1.8</td>
<td>1.5</td>
<td>1.6</td>
</tr>
<tr>
<td>How would you rate the ease of maintaining the partnership throughout the project?</td>
<td>1.4</td>
<td>1.9</td>
<td>1.7</td>
</tr>
<tr>
<td>I will continue with this community/academic partnership.</td>
<td>1.8</td>
<td>1.6</td>
<td>1.7</td>
</tr>
<tr>
<td>What is the likelihood you will apply for Healthier Wisconsin Partnership Program funding again?</td>
<td>1.6</td>
<td>1.7</td>
<td>1.7</td>
</tr>
<tr>
<td>How would you rate the ease of establishing a community/academic partnership?</td>
<td>1.6</td>
<td>1.9</td>
<td>1.8</td>
</tr>
<tr>
<td>The Healthier Wisconsin Partnership Program model provided opportunities for my organization’s growth.</td>
<td>1.8</td>
<td>1.9</td>
<td>1.9</td>
</tr>
<tr>
<td>The Healthier Wisconsin Partnership Program model provided opportunities for my professional growth.</td>
<td>1.8</td>
<td>2.1</td>
<td>2</td>
</tr>
<tr>
<td>It would be helpful to submit progress reports in electronic format exclusively.</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>I found the site visit conducted by the Healthier Wisconsin Partnership Program staff timely and useful.</td>
<td>2.2</td>
<td>1.9</td>
<td>2</td>
</tr>
<tr>
<td>How would you rate technical assistance provided by Healthier Wisconsin Partnership Program staff?</td>
<td>1.8</td>
<td>2.3</td>
<td>2.1</td>
</tr>
<tr>
<td>How would you rate the overall Healthier Wisconsin Partnership Program funding experience?</td>
<td>2</td>
<td>2.1</td>
<td>2.1</td>
</tr>
<tr>
<td>The funding that the partnership received was commensurate with the activities conducted during this project.</td>
<td>2.6</td>
<td>2.6</td>
<td>2.6</td>
</tr>
<tr>
<td>How would you rate the process for submitting invoices through the Academic Partner?</td>
<td>2.5</td>
<td>3</td>
<td>2.8</td>
</tr>
<tr>
<td>How would you rate the instructions for completing the Supplanting Attestation forms?</td>
<td>2.8</td>
<td>2.9</td>
<td>2.9</td>
</tr>
<tr>
<td>How would you rate the overall use of HWPP forms?</td>
<td>2.6</td>
<td>3</td>
<td>2.9</td>
</tr>
<tr>
<td>How would you rate the process for submitting your Human Subjects Protection Protocol and receiving notice from the Institutional Review Board for inclusion with your Funding Agreement?</td>
<td>3.4</td>
<td>3.6</td>
<td>3.5</td>
</tr>
</tbody>
</table>
**LESSONS LEARNED**

The collective results and analysis of existing program data and surveys has resulted in continual changes to Healthier Wisconsin Partnership Program operations and has informed priorities for the coming years as follows:

| REQUEST FOR PROPOSALS | • Information on the administrative requirements of funded projects was added based on feedback from successful applicants. Additionally, a glossary of terms will be included to provide more specificity to applicant eligibility criteria and allowable activities.  
• Improvements made to the RFP between the 1st and 2nd Funding Cycles appear to have significantly increased the clarity of guidelines and directions. |
|---|---|
| FUNDING AWARDS AND TIMELINES | • The level of funding has steadily increased for each of the three funding cycles.  
• A 12-month funding cycle is recommended to assure predictability for planning purposes among community and academic partners and to assure responsiveness to the health needs that exist within the state of Wisconsin. |
| TECHNICAL ASSISTANCE | • Technical assistance needs continue to be identified for both funded and unfunded organizations. The Healthier Wisconsin Partnership Program plans to be responsive to both of these audiences.  
• Technical assistance needs identified by unfunded applicants include grant writing assistance and support to identify a suitable project partner.  
• Technical assistance needs identified by funded applicants include increasing understanding of administrative requirements, project sustainability, and evaluation. |
| REVIEW PROCESS | • Approximately 30% of all proposals were challenged by technical deficiencies related to submission requirements. Special attention is given to this area of need during RFP training sessions and interaction with potential applicants.  
• Merit Reviewers have asked for a graphic partnership overview to better understand the roles, responsibilities and relationship between project partners. |
| ADMINISTRATIVE REQUIREMENTS | • Applicants and funded projects have expressed the need for Healthier Wisconsin Partnership Program to simplify application requirements and to streamline administrative requirements that are part of the funding agreement.  
• The Partnership Overview form that required original signatures as a part of the Notice of Intent has been eliminated; this form will only be required as a part of the full proposal.  
• Administrative systems related to the Medical College of Wisconsin and Children’s Hospital of Wisconsin Institutional Review Board have been initiated to facilitate the process and assure timely project start dates. |
| PARTNERSHIP DEVELOPMENT | • Partnership development is a high priority for the MCW Consortium and will be a programmatic priority year round.  
• Meaningful partnerships result from long-term planning and can best be facilitated prior to the release of the RFP.  
• MCW Faculty Liaisons provide departmental support to the Healthier Wisconsin Partnership Program and community organizations in need of an academic partner. |
| IMPACT/HEALTH OUTCOMES | • Assessing the impact of the Healthier Wisconsin Partnership Program on the health of Wisconsin residents is a long term objective of the program.  
• A tracking system has been put in place to follow projects on a long-term basis.  
• Technical assistance will be explored for funded projects to assure sustainability of best practices and ultimate health improvements. |
In Spring 2006, the MCW Consortium approved planning for a 3rd Funding Cycle, and the Healthier Wisconsin Partnership Program commenced preliminary preparation to announce the following timeline:

**3rd Funding Cycle Plan (2006 RFP, 2007 Awards)**

1. **RFP Issued**
   - (September 1, 2006)
2. **Statewide Training Sessions**
   - Technical assistance in eight Wisconsin communities to ensure reasonable access to the program
   - (September and October 2006)
3. **Notices of Intent Due**
   - All applicants submit an electronic notice of intent for both award categories
   - (October 24, 2006)
4. **Proposals Due**
   - (December 5, 2006)
5. **National Merit Review Consultants**
   - Twenty community and academic consultants serve as merit reviewers. The consultants are individuals from outside the state of Wisconsin with expertise in public and community health, community-academic partnerships, and proposal review. Each proposal is reviewed by four of the merit reviewers: two community and two academic. See page 25.
   - (January 2007)
   - Exceptionally ranked proposals advance to an in-person merit review meeting for further consideration and final merit rank.
   - (February 2007)
6. **MCW Consortium on Public and Community Health**
   - All proposals are presented in merit rank order to the Consortium for consideration, approval and recommendation to the Board of Trustees.
   - (March 2007)
7. **MCW Board of Trustees**
   - Final recommended proposals advance to the Board of Trustees for final approval.
   - (March 2007)
The Medical College of Wisconsin awards research and education project funding from the Advancing a Healthier Wisconsin endowment to leverage academic expertise and assets to promote discoveries and educational opportunities that will translate into improvements in health status.

The Advancing a Healthier Wisconsin Five-Year Plan approved by Wisconsin United for Health Foundation, Inc. for funds from the conversion of Blue Cross and Blue Shield United of Wisconsin establishes the following funding priorities:

**Research for a Healthier Tomorrow**
MCW awards research funding from the Advancing a Healthier Wisconsin Endowment that leverages academic expertise and assets to promote discoveries that advance human health. Funding supports research in the basic, clinical, applied and translational sciences that focus on cardiovascular disease, cancer, neuroscience, genetics and population health. Funds are also used to support imaging, biotechnology and bioinformatics projects that emphasize and support these research priorities.

The translation of biomedical research findings from the laboratory to the bedside is critical to improving the health of the residents of the State into the future. Strengthening clinical research collaborations and expanding patient access to new treatment protocols are included in the cardiovascular disease, cancer, neuroscience, and genetics initiatives. Population health research that addresses leading health risks and priorities as identified in the Healthiest Wisconsin 2010 Plan is prioritized. MCW and the University of Wisconsin School of Medicine and Public Health continue to pursue a complementary approach to biomedical research into the leading causes of death in Wisconsin, emphasizing the strengths of each institution.

This pluralistic approach towards research into the major causes of death and disability leverages the assets and capabilities of both institutions and their collaborating research organizations. In addition, MCW supports interdisciplinary research collaborations whenever appropriate.

**Educational Leadership for the Health of the Public**
Improvements in health are achieved not only through research but also through the training of health care providers and the education of the public on how to improve and maintain health. The growing availability and complexity of health information and choices makes lifelong learning and technology-based information delivery increasingly important. Further, technology allows education to become more personalized. Funding from the Advancing a Healthier Wisconsin endowment supports investments in education for health care providers and consumers that will benefit Wisconsin residents for future decades.
**PRINCIPLES OF STEWARDSHIP**

The framework and priorities for Advancing a Healthier Wisconsin through Research and Education are guided by the following Principles of Stewardship outlined in the Five-Year Plan.

**Prioritization** maximizes the impact on the health of the people of Wisconsin by deliberately focusing on diseases and conditions that most affect people’s health, longevity, and quality of life.

**Build on strengths** identifies initiatives that use the programmatic strengths available at the Medical College of Wisconsin and within the state to maximize success.

**Leverage** seeks opportunities to make use of its funding, with an emphasis on pooling existing resources, attracting additional resources, and encouraging sustainability.

**Prevention through research** emphasizes research that seeks to prevent disease, injury and disability. Initiatives should also be responsive to public and community health priorities and needs.

**Collaboration** aims to establish effective collaborations between the community and Medical College of Wisconsin partners to broaden program impact throughout the state and to enhance the translation of knowledge into community practice.

**Outcomes research** aims to assure effectiveness through rigorous program evaluation and monitoring of program outcomes.

**AREAS OF EMPHASIS**

The following overarching areas of emphasis are based in the Five-Year Plan and guide both research and education funding decisions.
The Medical College of Wisconsin issued its second Advancing a Healthier Wisconsin through Research and Education Request for Proposals (RFP) in 2005.

As a result of the assessment from the first research and education proposal solicitation in 2004, a number of recommendations resulted in changes to the 2005 funding cycle process. One key change was the implementation of a competitive peer-review process. This approach offers the opportunity to leverage broader expertise and participation in the funding process. Funding based on competitive review continues to be complemented by a process similar to the 2004 funding cycle called the MCW Program Development Fund.

The Medical College of Wisconsin presented recommended research and education projects resulting from competitive review to the MCW Consortium for review and advice at the November 17th and December 15th Consortium Board meetings. The MCW Consortium provided advisory recommendations to the MCW Board of Trustees. Six education proposals totaling $789K and twelve research proposals totaling $1.7M were approved by the MCW Board of Trustees on November 18 and December 16, 2005 respectively.

In addition, fifteen research and education proposals in the amount of $3.8M were advanced through the MCW Program Development Fund. Two proposals specifically addressed priorities in education and include $556K for implementation of a Healthy Wisconsin Leadership Institute, in collaboration with the University of Wisconsin School of Medicine and Public Health, and $40K to support planning for a doctoral degree program in public and community health, in collaboration with the University of Wisconsin-Milwaukee.

Thirteen proposals specifically addressed priorities in research including cardiovascular disease, cancer, genetics, neuroscience, and population health. All fifteen research and education proposals funded through the MCW Program Development Fund were presented publicly at MCW Consortium meetings reviewed by the MCW Consortium for advice and comment, and approved by the MCW Board of Trustees prior to June 30, 2006.

Detailed summaries of all projects funded through the Advancing a Healthier Wisconsin endowment through the Research and Education Competitive Fund processes and the MCW Program Development Fund between July 1, 2005 and June 30, 2006 are provided in the following section of this report. In addition, progress reports on research and education projects funded through the first funding cycle are also included. A timeline and process for the complete funding cycle of each fund of the Advancing a Healthier Wisconsin through Research and Education is found on pages 46 and 47.

Four research and education projects totaling $9,005,388 were presented to the MCW Consortium for review and comment on June 21, 2006 and approved by the MCW Board of Trustees on July 21, 2006. Because these projects were reviewed by the MCW Consortium within the reporting period for this Advancing a Healthier Wisconsin Annual Report, they are included as a separate section of this report. These projects include: $4,778,113 for the development of a doctoral degree program in public and community health in collaboration with the University of Wisconsin-Milwaukee, $2,761,897 for the expansion of MCW’s Masters of Public Health degree program to include other health professionals, $1,159,543 for the development of an infrastructure to support clinical and translational research, and $305,835 to support a clinical and translational research core facility. Detailed summaries of projects funded between July 1, 2006 and June 30, 2007 will be provided in subsequent annual reports.
### Health Improvement Through Research and Education 2005 Competitive Process Fund

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Support faculty-initiated education projects that are aligned with priority areas in the Five-Year Plan through a peer-review process.</th>
<th>Support faculty-initiated research projects that are aligned with priority areas in the Five-Year Plan through a peer-review process.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposals meeting more than one of the 2005 educational priorities from the Five-Year Plan</td>
<td>Proposals from new investigators or established investigators either taking new directions or extending current or previous research</td>
<td>Emphasis placed on new interdisciplinary initiatives</td>
</tr>
<tr>
<td>Emphasis placed on collaborative proposals between departments, centers, etc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investment Preferences</td>
<td>Application and review process (RFP)</td>
<td></td>
</tr>
<tr>
<td>RFP issued by the Dean</td>
<td>RFP issued by the Dean</td>
<td></td>
</tr>
<tr>
<td>The Society of Teaching Scholars Steering Committee conducts the review and ranking based on merit</td>
<td>The Research Affairs Committee conducts the review and makes recommendations for funding based on scientific merit</td>
<td></td>
</tr>
<tr>
<td>Society of Teaching Scholars Steering Committee reviewers are recused for reviews of their own applications or those from their departments</td>
<td>Applications may be reviewed by ad hoc reviewers serving at the request of the Committee</td>
<td></td>
</tr>
<tr>
<td>The Research and Education Advisory Committee (composed of the senior associate deans) reviews the results and develops a recommended priority list for funding based on fit with the Five-Year Plan to be forwarded to the Dean</td>
<td>The Research Affairs Committee scores applications using a priority scale based on that of the National Institutes of Health</td>
<td></td>
</tr>
<tr>
<td>The Dean discusses the funding recommendations with the Consortium, and then makes the final decision with the Board of Trustees approval</td>
<td>Research Affairs Committee reviewers are recused for reviews of their own applications or those from their departments</td>
<td></td>
</tr>
<tr>
<td>Proposed allocation</td>
<td>Maximum of $150,000 for 1 to 3 years</td>
<td>Maximum of $150,000 for 1 to 3 years</td>
</tr>
<tr>
<td>Minimum of 5 awards</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### MCW Program Development Fund

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Support program development in areas consistent with both the Advancing a Healthier Wisconsin Five-Year Plan and MCW’s five-year strategic plan. Funds will be allocated on a rolling basis as opportunities arise.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program development</td>
<td></td>
</tr>
<tr>
<td>Recruitment of faculty expertise in targeted areas of the Five-Year Plan</td>
<td></td>
</tr>
<tr>
<td>Equipment that advances knowledge and training in cardiovascular disease, cancer, neuroscience, and genetics research</td>
<td></td>
</tr>
<tr>
<td>Collaborative projects (multi-investigator, multi-departmental, etc.)</td>
<td></td>
</tr>
<tr>
<td>Application and review process (RFP)</td>
<td></td>
</tr>
<tr>
<td>Dean determines allocations on a continual basis after consultation with the Senior Associate Deans for Research, Education and Public and Community Health</td>
<td></td>
</tr>
<tr>
<td>Dean requests advice and comment from the MCW Consortium on Public and Community Health each month</td>
<td></td>
</tr>
<tr>
<td>Dean makes decisions with Board of Trustees approval</td>
<td></td>
</tr>
<tr>
<td>Proposed allocation</td>
<td>Approximately $4M to $5M</td>
</tr>
</tbody>
</table>
Funding Cycle

Off of Academic Affairs

Applications were duplicated and processed for merit review by Society of Teaching Scholars

Steering Committee for the Society of Teaching Scholars

Steering Committee received applications, conducted merit review and made funding recommendations (October 24, 2005)

Budget Committee

Budget Committee reviewed recommended applications for supplanting and forwarded proposals to the Research and Education Advisory Committee for their review (Early November 2005)

Research and Education Advisory Committee (Senior Associate Deans)

The Research and Education Advisory Committee reviewed proposals for fit with Advancing a Healthier Wisconsin Five-Year Plan and MCW’s strategic plan and priorities. Top proposals that were not advanced for funding were also reviewed for potential funding through the MCW Program Development Funds (November 1, 2005)

Dean

Dean made final funding recommendations (November 10, 2005)

MCW Consortium on Public and Community Health

The Dean presented the final recommended proposals to the Consortium for advice and comment (November 17, 2005)

Board of Trustees

Final recommended proposals were advanced to the Board of Trustees for final approval (November 18, 2005)
Research Applications (Due September 19, 2005)

Office of Research Affairs
Applications were processed for merit review by Research Affairs Committee

Research Affairs Committee
Research Affairs Committee received applications, conducted merit review and made funding recommendations (November 8-9, 2005)

Budget Committee
Budget Committee reviewed recommended applications for supplanting and forwarded proposals to the Research and Education Advisory Committee for their review (November 14, 2005)

Research and Education Advisory Committee (Senior Associate Deans)
The Research and Education Advisory Committee reviewed proposals for fit with Advancing a Healthier Wisconsin Five-Year Plan and MCW’s strategic plan and priorities

Top proposals that were not advanced for funding were also reviewed for potential funding through MCW program development funds (December 6, 2005)

Dean
Dean made final funding recommendations (December 12, 2005)

MCW Consortium on Public and Community Health
The Dean presented the final recommended proposals to the Consortium for advice and comment (December 15, 2005)

Board of Trustees
Final recommended proposals advanced to the Board of Trustees for final approval (January 27, 2006)
During the period of this report, Advancing a Healthier Wisconsin through Research and Education funded 33 projects for a total of $6.3M.

The following pages provide a detailed summary statement on all projects funded through June 30, 2006 and progress on 2004 and 2005 project activities. In addition, four projects reviewed by the MCW Consortium on June 21, 2006 are listed following the Imaging, Biotechnology, and Bioinformatics section.

To assure consistency with the priorities identified in the Advancing a Healthier Wisconsin Five-Year Plan, projects categorized as interdepartmental equipment in the 2004 Annual Report have been re-categorized into those focus areas that better reflect the contribution to the research being conducted through the equipment and its users. Projects that include the purchase of major pieces of equipment are identified as such in the project summaries.

**CASE-BASED INTEGRATION TO PROMOTE A PUBLIC HEALTH CURRICULUM FOR MEDICAL STUDENTS**

**Principal Investigator:** David Bolender, PhD, Department of Cell Biology, Neurobiology and Anatomy  
**Collaborators:** The Medical Scientist Training Program (MSTP) and faculty from the departments of Biochemistry, Cell Biology, Neurobiology and Anatomy, Medicine, Physical Medicine and Rehabilitation, and Neurosurgery  
**Competitive Education Fund:** $130,000 (2006-2009)  
**Focus Area(s):** MCW Curriculum Development, Faculty Development

This program uses the Integrated Grand Rounds (IGR) model to present case-based clinical problems developed by clinicians and basic scientists. These clinical problems emphasize public health, evidence-based medicine, genetics and other emerging topics. The presence of patients at IGR sessions who are experiencing the clinical problem being discussed gives students additional patient contact and builds communication skills. Archiving these sessions provides continuing medical education opportunities for broad-based health profession education, as well as for MCW faculty and students.

**PROGRESS:** Three Integrated Grand Round Sessions were planned for 2006. The first session began in early Spring 2006 and focused on obesity. Presenters included representatives from several departments including Medicine-Division of Endocrinology, Biochemistry, and Medical Scientist Training Program students. Evaluations indicate a high satisfaction rating, with an average score of 4.5 out of 5. Additional sessions to be presented in the Fall and Winter cover lower back pain and HIV/AIDS. These sessions have been integrated into the MCW master academic calendar. The collaborative efforts involved in case development and presentations provide opportunities for faculty development as well as facilitating implementation of public and community health-related objectives within the medical student curriculum. Sessions are digitally archived and available online as well as in the MCW library so that the cases may be used in a variety of teaching activities for medical students, graduate students and residents, as well as continuing medical education of community physicians and health professionals. Planning is underway for future sessions in 2007.
COLLABORATIVE CURRICULUM ON CHRONIC OBESITY (COCO)

Principal Investigator: Jeff Morzinski, PhD, Department of Family and Community Medicine
Collaborators: Doug Bower, MD, Department of Family and Community Medicine, Ann Maguire, MD, MPH, Department of Medicine, and Paola Palma Sisto, MD, Department of Pediatrics
Competitive Education Fund: $149,964 (2006-2009)
Focus Area(s): MCW Curriculum Development

Skills to evaluate and treat chronic obesity are core skills for physicians, especially those in primary care specialties. Obesity is a health priority for Wisconsin, with complex features and debilitating effects. This project (CoCO) aims to advance the competence of medical students in the knowledge and care of obese patients, improve coordination of third-year ambulatory clerkships to foster a continuum of sequenced obesity education, and raise volunteer preceptors’ knowledge about obesity care and patient education. Shared lecture-discussions, a continuing medical education conference, and an obesity toolkit for preceptors are being developed and implemented.

PROGRESS: This three-year project began with formation of a faculty and student Steering Committee to monitor all CoCO events. In Year 1, a web-based course was developed to introduce students to key obesity topics. Clerkships are instituting obesity content and case discussions that integrate themes of nutrition, current guidelines and communication. Year 2 will emphasize shared lecture-discussions and a Continuing Medical Education Conference for preceptors during which an innovative “obesity toolkit” is introduced. In Year 3, this toolkit is the focus of pilot “service learning” activities in which obesity skill application will be emphasized. Several data collection strategies will measure reaction, learning and impact on students and the community, helping to ensure that CoCO results will yield many positive effects on medical education and Wisconsin’s health.

DEVELOPMENT AND EVALUATION OF A STUDENT-CENTERED SELF-DIRECTED OSCE* PROGRAM AND AN ACGME** COMPETENCY-DRIVEN OSCE FOR DEVELOPMENT AND EVALUATION OF RESIDENTS’ ACHIEVEMENT OF ACGME COMPETENCY OBJECTIVES

Principal Investigators: Dario Torre, MD, MPH, Department of Medicine, Ralph Schapira, MD, Department of Medicine
Collaborators: James Sebastian, MD, Department of Medicine, Julie Mitchell, MD, MS, Department of Medicine, Kurt Pfeifer, MD, Department of Medicine, Susan Davids, MD, MPH, Department of Medicine
MCW Program Development Fund: $300,000 (2004-2007)
Focus Area(s): Clinical Skills and Learning, Patient Education, MCW Curriculum Development

This program will provide clinical skills training to better prepare medical students for patient care through the integration of new technology into curricula.

PROGRESS: The only core clerkship that allows medical students to select, watch and grade their Standardized Patient encounters, this program provides feedback to individual students that will enhance their performance, create opportunities for student self-assessment, and facilitate the acquisition of knowledge relevant to the core clinical competencies. The program has been well-received by students rotating through the Medicine clerkship and has the potential to be implemented in additional clerkships. One-hundred-ninety-seven students who participated in the program over the 2005-06 academic year stated that the program was “Very Good” or “Excellent”. As of Fall 2006, ninety residents from the Departments of Medicine, Neurology and Anesthesiology have participated in the program-based assessment of cardiovascular examination skills and OSCEs measuring communication skills in end-of-life discussions and informed consent. The data from these examinations will be compared to data obtained after residents undergo specific training programs in this area. Further OSCEs have been developed for testing resident teaching skills, communication of resuscitation status, skills obtaining a spiritual history and a general history in patients from a variety of ethnicities.

* OSCE = Objective Structured Clinical Examination. OSCE is a timed examination in which medical students interact with a series of simulated patients in stations that may involve history-taking, physical examination, counseling or patient management

**ACGME = The Accreditation Council for Graduate Medical Education. ACGME is responsible for the accreditation of post-MD medical training programs within the U.S.
HEALTH OUTREACH, PARTNERING, AND EDUCATION (HOPE) INITIATIVE

Principal Investigator: Laura Roberts, MD, Department of Psychiatry and Behavioral Medicine
Collaborators: Carly Chan, MD, Department of Psychiatry and Behavioral Medicine, Mitzi Dearborn, PhD, Department of Psychiatry and Behavioral Medicine, Joseph O’Grady, MD, Department of Psychiatry and Behavioral Medicine, Russell Scheffer, MD, Department of Psychiatry and Behavioral Medicine, David Seal, PhD, Department of Psychiatry and Behavioral Medicine, Continuing Medical and Professional Education, University of Wisconsin-Milwaukee School of Nursing, Zablocki Veterans Administration Medical Center

Focus Area(s): Public Health Professional Leadership, Patient Education and Library Services

The Health Outreach, Partnering, and Education (HOPE) Initiative provides mental health education resources to health professionals and the public through an innovative, multi-disciplinary approach that targets Wisconsin rural and urban populations. In accordance with the Five-Year Plan, this project works closely with the Continuing Medical Education program to increase the impact of educational offerings in clinical topics using new distance-learning technology.

PROGRESS: A day-long conference was conducted in September 2006 with nationally recognized speakers addressing leading mental health issues related to suicide and suicide prevention in youth and adolescents. The audience included mental health clinicians, as well as mental health staff from high school and college counseling programs. Continuing Education programs are well received. Grand Rounds occur weekly for three weeks a month for nine months of the year and regularly attract over 100 clinicians from multiple disciplines. The 2006 Door County Summer Institute attracted over 260 mental health professionals. A total of 157 participants were from Wisconsin, with 111 coming from regions of the state outside of Milwaukee County. MCW’s Department of Psychiatry and Behavioral Medicine provided 8 tuition scholarships to community agencies. All sessions received high marks from attendees. The HOPE Initiative’s Speakers’ Bureau provides speakers to community agencies and public health departments on topics ranging from Stress Management to Depression. Speakers have also participated in newspapers and television interviews. The HOPE Initiative has begun dissemination of the Continuing Education Grand Rounds through web-based resources. Preliminary efforts have already demonstrated demand for this resource. In addition, DVDs from the HOPE initiative’s Native American Mental Health Conference were developed and distributed to Native American Tribes across the state.

HEALTHY WISCONSIN LEADERSHIP INSTITUTE

Principal Investigator: Peter Layde, MD, MSc, Department of Population Health
Collaborators: Terry Brandenburg, MPH, MBA, West Allis Health Commissioner, Pat Remington, MD, University of Wisconsin School of Medicine and Public Health

MCW Program Development Fund: $100,000 (2004 Planning), $556,000 (2005-2008 Implementation)
Focus Area(s): Public Health Professional Leadership

The Healthy Wisconsin Leadership Institute is a continuing education and training resource supported jointly by MCW and the University of Wisconsin School of Medicine and Public Health (UWSMPH). Its mission is to develop leaders who engage in innovative activities to protect and promote the health of the public.

PROGRESS: In 2005, the Institute planning committee, comprised of leaders in community health improvement across the state, MCW and UWSMPH, created the following framework for its programs: Community Teams Program, Health Policy Program and Lifelong Learning and Mentoring Program. The Community Teams Program provides teams from communities across Wisconsin an intensive 12-month learning experience, including workshops, distance education, and projects in home communities. The Health Policy Program offers web-based and in-person workshops focusing on issues and policy interventions that impact the 11 health priorities outlined in the State Health Plan, and provides technical assistance for community groups as they plan, conduct, and evaluate policy initiatives. The program aims to increase capacity to understand and change local, regional and state policies that impact population health. A series of workshops are planned for Fall 2006. The Lifelong Learning and Mentoring Program provides advanced skills and leadership training, mentoring, and shared leadership activities, offers growth opportunities for existing leaders, and supports the development of the next generation of public health and community leaders.
In March 2006, five community teams were selected from among 26 applications through a competitive process. They are:

- The Barron County Safe and Stable Families Coalition, focusing on methamphetamine and other substance abuse and addiction,
- Healthy People Portage County, addressing the problem of obesity and lack of physical activity,
- The LaCrosse Area Dental Care Advocacy Coalition, creating access to affordable dental care,
- The Milwaukee Partnership for Reducing Adolescent Risky Sexual Behavior, and
- The Wisconsin LGBT Youth Health Initiative, the only statewide team, working to decrease tobacco, alcohol and drug use as well as injury and mental health problems among lesbian, gay, bisexual, and transgender youth in Wisconsin.

A comprehensive evaluation for the Institute is being developed. Additional information is available via the Institute’s website at [http://www.hwli.org](http://www.hwli.org).

**IMPROVING EDUCATION IN OBSTETRICS AND GYNECOLOGY**

**Principal Investigator:** Michael Lund, MD, Department of Obstetrics and Gynecology
**Collaborators:** Dwight Cruikshank, MD and Paul Lemen, MD, Department of Obstetrics and Gynecology
**MCW Program Development Fund:** $30,000 (2004-2007)
**Focus Area(s):** Clinical Skills and Learning

This program improves medical education in obstetrics care and reproductive health through establishing an obstetric/gynecologic skills lab. The center’s facilities aim to support programs for physicians to demonstrate new procedures, develop critical thinking skills, and provide opportunities to learn new techniques in a controlled environment.

**PROGRESS:** This program established an obstetric/gynecologic skills lab with the majority of funds invested in the Noelle 565 Obstetric simulator, a state-of-the-art female mannequin capable of teaching skills needed for vaginal delivery as well as resuscitation of the neonate and resuscitation of the mother. Several gynecologic teaching aids were also purchased to be used in related second and third year medical student courses and clerkships to support student practice and experience. This project will significantly contribute to the faculty’s ability to teach medical students through the use of standardized patients and high-tech simulation. Learning obstetric and gynecologic skills is challenging due to natural difficulty in recruiting standardized patients.

**INTERDEPARTMENTAL COLLABORATION FOR COMPETENCY-BASED EDUCATION**

**Principal Investigator:** Kurt Pfeifer, MD, Department of Medicine
**Collaborators:** Wendy Peltier, MD, Department of Neurology, Lisa Marr, MD, Palliative Care Center, Department of Medicine
**MCW Competitive Funds for Education:** $150,000 (2006-2009)
**Focus Area(s):** MCW Curriculum Development, Clinical Skills and Learning

Developed through a multi-departmental collaboration, this program aims to establish a core curriculum to provide ACGME* competency-based education for residents, promote faculty leadership, curriculum development and educational scholarship by serving as a venue for piloting new teaching methods and testing their effectiveness.

**PROGRESS:** This program performed a comprehensive needs and resource assessment to determine what skills and knowledge are critical to medical residents and what means exist for providing this education. Information from all departments was pooled to generate a curriculum with prioritized, generalizable educational objectives. Departmental representatives used resident feedback as well as objective evidence of teaching effectiveness to select faculty to lead modules focused on these objectives. When appropriate, faculty from different departments collaborated to teach topics with overlapping specialty expertise. Teaching modules have been grouped into three courses based on the training level at which they are considered most appropriate. Given the great dependency on basic skills in the first year of residency and the program’s goal of achieving a strong

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*ACGME = The Accreditation Council for Graduate Medical Education. ACGME is responsible for the accreditation of post-MD medical training programs within the U.S.
base on which to develop advanced proficiencies, half of the program’s modules have been designed for first-year residents and will be given in Phase I of the overall program. This includes approximately 40 hours of educational modules that are given consecutively over a 5-day period. Phase II (for second year residents) will require approximately 24 hours over 3 days, and Phase III (for third year or more senior residents) will require approximately 16 hours over 2 days.

OBJECTIVE STRUCTURED CLINICAL EXAM (OSCE) TO ASSESS COMMUNITY HEALTH COMPETENCIES

Principal Investigator: Marie Wolff, PhD, Department of Family and Community Medicine
Collaborators: Syed Ahmed, MD, DrPH, Department of Family and Community Medicine, Barbra Beck, PhD, Department of Family and Community Medicine
Competitive Education Fund: $120,000 (2006-2008)
Focus Area(s): MCW Curriculum Development, Clinical Skills and Learning

This community-academic partnership project develops an Objective Structured Clinical Exam (OSCE) to assess Family and Community Medicine clerkship students’ ability to provide responsive care with a focus on the impact of cultural beliefs and values, socioeconomic status and health literacy on the patient encounter and health status. Support for the Community Health Objective Structured Clinical Exam (OSCE) project will provide an opportunity to develop three cases focusing on these issues. Students will conduct a patient visit with standardized patients who will enact three different scenarios focusing on cultural issues, socioeconomic status, or health literacy. The Standardized Patient and community experts will rate the students’ competency to adequately address these issues in the clinical encounter. The degree of inter-rater reliability between the standardized patients and the expert raters will be determined, and the OSCEs will be revised based on the results for continued use in the clerkship.

PROGRESS: As this project began in July 2006, progress on this project’s activities will be provided in future reporting periods of the Advancing a Healthier Wisconsin Annual Report.

PLANNING AND IMPLEMENTATION OF THE COMMUNITY OF SCIENTIFIC INNOVATORS (COSI) GRADUATE PROGRAM

Principal Investigator: Sally Twining, PhD, Department of Biochemistry
Collaborators: Departments of Biochemistry, Biophysics, Cell Biology, Medicine, Microbiology and Pharmacology, Neurosciences, Pediatrics, Physiology, and the Interdisciplinary Program in Biomedical Sciences
Competitive Education Fund: $135,000 (2006-2009)
Focus Area(s): MCW Curriculum Development, Faculty Development

MCW Community of Scientific Innovators (COSI) seeks to change the culture of graduate science education by creating a collaborative learning environment to complement core knowledge, developing the competencies needed to address pressing medical problems and encouraging successful innovation in translational research.

PROGRESS: COSI builds on several existing doctoral degree programs including Interdisciplinary Program in Biomedical Sciences, Biochemistry, Biophysics, Cell Biology, Microbiology and Pharmacology, Neurosciences, Physiology and MRI Biophysics. The first year of the program includes round table discussions combined with virtual patient learning modules and clinical experiences. Discussion topics are based on the Healthier Wisconsin 2010. The second year begins the Boundaries of Science and Medical Practice course and the development of a patient-focused research project. The third year includes participation in a fourth year medical student selective in a translational research seminar series. A COSI Steering Committee and sub committees have been established to ensure that program objectives are achieved. Currently, two cases are being planned and developed with one focusing on diabetes and the other on obesity and sepsis.
PLANNING SUPPORT FOR A DOCTORAL DEGREE PROGRAM IN PUBLIC AND COMMUNITY HEALTH

Principal Investigator: Peter Layde, MD, MSc, Department of Population Health
Collaborators: University of Wisconsin-Milwaukee
MCW Program Development Fund: $40,000 (2005-2006)
Focus Area(s): MCW Curriculum Development

This award provides support for the development of a doctoral degree program in public and community health. This program is being developed in collaboration with the University of Wisconsin-Milwaukee.

PROGRESS: A Steering Committee comprised of representatives from the Medical College of Wisconsin and University of Wisconsin-Milwaukee led exploratory discussions to assess the feasibility and required resources for a collaborative doctoral degree program in public and community health. Staff support was secured for a program coordinator to provide the overall organization of the development of the doctoral degree program. Matching funds for this project were provided through the University of Wisconsin-Milwaukee.

START UP FOR THE STAR CENTER: STANDARDIZED TEACHING ASSESSMENT RESOURCE CENTER

Principal Investigators: Kenneth Simons, MD, Office of Academic Affairs, Deborah Simpson, PhD, Office of Academic Affairs
Collaborators: Erin Dalcourt, Office of Academic Affairs, Dawn Bragg, PhD, Office of Student Affairs/Diversity
MCW Program Development Fund: $250,000 (2005-2008)
Focus Area(s): MCW Curriculum Development, Clinical Skills and Learning

This project supports the start-up of a center in which medical students and other health professionals will practice clinical care through human and mechanical simulations. Focus areas include geriatrics, asthma, hypertension, obesity, heart disease prevention, doctor-patient communication skills, and reproductive health. Long-term, the focus areas include nutrition, substance abuse, environmental health, obesity, tobacco use, high risk sexual behavior, intentional and unintentional injuries, and communicable diseases.

PROGRESS: Key outcomes resulting from the creation of this facility include:

- Logging over 900 hours, 7,404 users have used STAR Center through June 30, 2006.
- Several interdisciplinary collaborations have occurred, including an advanced learning session with students from the joint MCW-Marquette University Master of Science in Healthcare Technologies Management program. Additional collaborative programs are in the development stages for Flight for Life employees, Marquette University nursing students, and community physicians.
- Tours and presentations were conducted to familiarize stakeholders and potential users with the Center’s array of innovative capabilities, including prospective medical students, MCW alumni, Marquette University faculty, education committees from the Department of Family and Community Medicine and MCW administrators and faculty.
- In Fall 2005, the Center hosted an open house for faculty and community health leaders to demonstrate the equipment and the benefits provided by incorporating state-of-the-art learning technology into medical education.
- The Center has been featured in print and television media including Fox 6 News, the Milwaukee Journal Sentinel, and the Wisconsin Medical Journal, as well as highlighted at MCW’s Educational Innovations and Innovators Conference.
- In the next year, efforts will continue to attract the attention of Milwaukee’s health care community and the public to highlight opportunities and benefits at the STAR Center.
STUDENTS AS FACILITATORS FOR CONSUMER/PATIENT ACCESS TO QUALITY INTERNET HEALTH INFORMATION

Principal Investigator: Dawn Bragg, PhD, Office of Student Affairs/Diversity
Collaborators: MCW Apprenticeship in Medicine Program, MCW Todd Wehr Library, and Milwaukee Public Libraries
Competitive Education Fund: $105,000 (2006-2008)
Focus Area(s): Patient Education and Library Services

Using web-based resources, this project educates the public on identifying quality health care information, assists the public in health care decision-making by increasing their access to and knowledge of health information, and augments the knowledge of medical students in using quality consumer health care information.

PROGRESS: A website, MCW CHARTS (www.mcw.edu/charts), was developed containing evaluation criteria to aid the public in identifying reliable health information and making informed health decisions. A complementary brochure was developed to promote the website and resources available to patients and the public. The website includes descriptions, highlights, and links to several authoritative consumer health resources as well as information on the health priorities of the state health plan. Over 200 third-year medical students and 15 high school students from MCW’s Apprenticeship in Medicine (AIM) Program were trained to identify quality consumer health information aided by the new website MCW CHARTS. With knowledge gained through this program, students can teach patients and health care providers how to find current, reliable information when working in clinical settings. In addition, MCW librarians led workshops for community members on using Internet resources to gain knowledge on health information at Milwaukee public libraries. Through this program, patients and health consumers are provided useful tools and skills to aid healthier lifestyle choices and make better-informed health care decisions.

RESEARCH

CAROTID PLAQUE REGRESSION WITH HIGH DOSE ATORVASTATIN VERSUS CONVENTIONAL DOSE SIMVASTATIN USING HIGH FIELD MRI

Principal Investigator: Raymond Migrino, MD, Department of Medicine
Collaborators: Jason Jurva, MD, Department of Medicine, Robert Prost, PhD, Department of Radiology, Scott Rand, MD, PhD, Department of Radiology, Mohyuddin Tayyab, MD, Department of Medicine, and, Osama Zaidat, MD, Department of Neurology
MCW Program Development Fund: $166,082 (2006-2007)
Focus Area(s): Cardiovascular Disease, Functional Imaging

The project aims to quantify plaque burden using high-field MRI. This capability will be useful in early detection of disease and modification of its course in order to prevent debilitating or fatal outcomes such as stroke.

PROGRESS: Results of this study will contribute to knowledge in identifying patients with high plaque burden, determining the effectiveness of treatment of the plaque and determining whether a more aggressive form of treatment is superior to conventional treatment. Thus far, the project has pooled the clinical resources of four departments and divisions to identify and treat patients for the research study. The shared use of the 3T MRI, obtained with help from NIH funding for brain research, has been coordinated for the investigation. The project is a multidisciplinary collaboration among Cardiovascular, Radiology, Medicine, Neurology and Radiologic Physics specialists. As investigators are in the initiation phase of the project, it is too early to determine the long-term impact on improved health. However, the project may have a significant impact on the early diagnosis of arterial disease, prevention of complications such as stroke and heart attack, as well as treatment of carotid plaque buildup.
ESTABLISHMENT OF A HUMAN EMBRYONIC STEM CELL (ESC) CORE LABORATORY

Principal Investigator: Stephen Duncan, PhD and John Lough, PhD, Department of Cell Biology, Neurobiology, and Anatomy
Focus Area(s): Cardiovascular Disease, Genetics

Development of this core laboratory allows investigators access to training and equipment that will enable them to conduct research as well as leverage federal and private funds to facilitate the advances necessary to make stem cell therapeutics a reality.

Progress: This core lab has enabled investigative teams to generate preliminary data for significant prospective funding from National Institutes of Health (NIH) and other funders, notably a $7.5M National Heart, Lung, and Blood Institute (NHLBI) grant. The availability of this core lab accelerates the discovery of therapeutic advances to treat many diseases outlined in the AHW Five-Year Plan and the Healthiest Wisconsin 2010 state health plan including heart disease and cancer. It further advances the establishment of techniques that will allow stem cells to be used in a clinical environment. Specifically, the development of the core lab has enabled research resulting in significant contributions to the study of cardiovascular disease. Findings from this research suggest that transplantation of embryonic stem cells can significantly partially restore function following a heart attack. Future work is being designed to avoid scar formation of the cardiac tissue by performing transplantations during intervals following infarction when conditions are deemed optimal. Investigators are hopeful that this approach will result in normal remodeling of the cardiac tissue, concomitant with complete restoration of normal myocardial function.

HEMOGLOBIN AND HAPTOGLOBIN IN SICKLE CELL DISEASE

Principal Investigator: Neil Hogg, PhD, Department of Biophysics
Collaborators: Cheryl Hillery, MD, Department of Pediatrics
Competitive Research Fund: $149,666 (2006-2008)
Focus Area(s): Cardiovascular Disease

This project aims to understand the mechanisms behind the harmful effects of Sickle Cell Disease (SCD) in the cardiovascular system.

Progress: This project specifically tests the hypothesis that increased plasma hemoglobin in Sickle Cell Disease results in altered endothelial cell function mediated by lipid oxidation and nitric oxide scavenging. Studies are underway to examine the role of nitric oxide on lipid oxidation using new techniques. A technician has been specially trained in cell culture techniques and is currently growing the cells necessary for this project. The project is poised to begin an extensive period of experimentation and data collection leading to the submission of a Sickle Cell Disease Center Grant Proposal in January 2007. This project is a collaboration between a basic scientist and a physician scientist and draws on expertise in clinical care, clinical research and basic science projects. While the cause of Sickle Cell Disease is genetic, progress of the harmful consequences of this disease can be delayed by intervention. Understanding of the fundamental molecular dysfunctions at place in this multifactorial pathology advances improvements in health care and quality of life for individuals suffering from this genetic disease that is prevalent in African American and Hispanic communities in Wisconsin.
IKCA UP-REGULATION MEDIATES IN THE DEVELOPMENT OF ATHEROSCLEROSIS

**Principal Investigator:** Hiroto Miura, MD, PhD, Department of Medicine  
**Collaborator:** David Gutterman, MD, Department of Medicine  
**Competitive Research Fund:** $150,000 (2006-2008)  
**Focus Area(s):** Cardiovascular Disease

This project studies a novel approach to the development of atherosclerosis (hardening of the arteries) by examining the role of IKCa (intermediate-conductance calcium-activated potassium channel) activity in vascular remodeling. These studies offer new strategies for the prevention and/or treatment of atherosclerosis following angioplasty or coronary artery bypass surgery.

**PROGRESS:** As this project began in July 2006, progress on this project’s activities will be provided in future reports of Advancing a Healthier Wisconsin.

LENTIVIRAL SIRNA TRANSGENIC RAT TO STUDY VASCULAR ROLE OF NEUROPEPTIDE Y

**Principal Investigator:** Michael Michalkiewicz, PhD, Department of Physiology  
**Collaborators:** Raymond Migrino, MD, Department of Medicine, David Wilcox, PhD, Department of Pediatrics  
**Competitive Research Fund:** $150,000 (2006-2008)  
**Focus Area(s):** Cardiovascular Disease, Genetics

This project develops a genetic tool based on lentiviral (slow-growing virus) -siRNA technology to efficiently knock-down a gene of interest in the laboratory rat model for efficient validation of human cardiovascular disease genes. This work will lead to the identification of genetic factors responsible for hypertension as well as improve understanding of the genetic mechanism of hypertension and the ability to develop effective therapies. Initial studies will examine the role of the sympathetic neuromodulatory agent, Neuropeptide Y, which may be involved in pathological forms of hypertension.

**PROGRESS:** As this project began in April 2006, progress on this project’s activities will be provided in future reports of Advancing a Healthier Wisconsin.

MASS SPECTROMETRIC APPLICATIONS IN PROTEOMICS AND METABOLOMICS

**Principal Investigator:** Kasem Nithipatikom, PhD, Department of Pharmacology and Toxicology  
**Collaborator:** William Campbell, PhD, Department of Pharmacology and Toxicology  
**MCW Program Development Fund:** $225,435 (2004-2007)  
**Focus Area(s):** Cardiovascular Disease

This project aimed to upgrade and expand capabilities of essential equipment. New features will provide different ways of breaking down large proteins and peptides into fragments that can be better analyzed. The new system will provide more analytical options to investigators.

**PROGRESS:** Several new investigative methods for proteins, peptides and small molecules have been developed resulting from this investment. Ten investigators from four departments at MCW and one from UW-Madison have used the system for 12 different projects. Applications of this technology have increased as evidenced by seven new projects initiated between January and June 2006. The diversified applications include small molecules and proteins and peptides that are mostly involved in cancer, cardiovascular and neurological diseases. It is anticipated that applications will be used by more investigators who work in the fields of cancer, cardiovascular diseases, neurological diseases, and genetic diseases. The majority of
the work performed on these new upgraded systems are collaborative efforts among interdepartmental investigators and/or investigators at the Mass Spectrometry Facility. This project promotes effective collaboration among interdisciplinary investigators, enhances research with new approaches that will increase competitiveness for broader external supports, and supports expert investigators for their discoveries that may lead to prevention and therapies of the diseases that have impact on the health of the citizens of Wisconsin.

MCW CORE HISTOLOGY/TISSUE PREPARATION LABORATORY (HTPL)

**Principal Investigator:** Bruce Campbell, MD, Department of Otolaryngology and Communication Sciences and Interim Director of the Cancer Center  
**Collaborators:** David Harder, PhD, Department of Physiology, Debebe Gebremedhin, MD, Department of Physiology, David Guttermann, MD, Department of Medicine, Elizabeth Jacobs, Department of Medicine, Balaraman Kalyanaraman, Department of Biophysics, Michael Kron, Department of Medicine, Vivian Lee, Department of Medicine, Rongshan Li, Department of Pathology, Meetha Medhora, Department of Medicine, Robert Montgomery, Department of Medicine, John Moulder, MD, Department of Radiation Oncology, Debra Newman, Blood Center of Wisconsin, Paula North, Department of Pathology, Jingsong Ou, Department of Surgery, Shailesh Patel, Department of Endocrinology, Kirkwood Pritchard, Department of Pediatrics, Nita Salzman, Department of Medicine, Kathleen Schmainda, Department of Radiology, Joel Shilyansky, Department of Pediatrics, David Stowe, Department of Anesthesiology

**MCW Program Development Fund:** $150,000  (2004-2006)  
**Focus Area(s):** Cardiovascular Disease

HTPL is a core facility designed to provide services to, and promote collaboration among, MCW investigators. This facility supports the Five-Year Plan’s commitment to fostering initiatives in biotechnology and bioengineering.

**PROGRESS:** By having a dedicated HTPL core facility on campus, MCW is able to rapidly prepare and analyze tissue samples for research. Researchers no longer have to wait until patient samples can be processed. The true benefit to the researchers, and by extension the people of Wisconsin, is a shorter time between discovery and application. The addition of the new director, a board-certified pathologist, assures continuing high-quality tissue preparation and interpretation. This project is an excellent source of collaboration between the Children’s Hospital of Wisconsin, and MCW Cancer and Cardiovascular Centers. The histology lab provides a necessary and previously unavailable resource for faculty with research focuses in cancer, cardiovascular disease, neurosciences, and genetics. The histology laboratory is versatile and flexible in function. It supports 8 of 11 health priorities of the Healthiest Wisconsin 2010 plan. The histology laboratory is open to all MCW faculty and faculty at other institutions including the Blood Center of Wisconsin, Marquette University, Milwaukee School of Engineering, and the University of Wisconsin-Milwaukee. This facility will be used to leverage grant support from National Institutes of Health, National Science Foundation and the Department of Defense. The faculty has found this core extremely valuable to their research and it has filled a void on campus for tissue processing.

ROLE OF C-SRC IN THE PATHOPHYSIOLOGY OF ARPKD (RENAL GENETIC DISEASE)

**Principal Investigator:** Ellis Avner, MD, Department of Pediatrics  
**Collaborator:** William Sweeney, Department of Pediatrics  
**Competitive Research Fund:** $150,000 (2006-2008)  
**Focus Area(s):** Cardiovascular Disease, Cancer, Genetics

This project addresses the basic pathophysiology of one of the most common groups of renal genetic diseases (PKD-polycystic kidney disease) with their attendant cardiovascular morbidity and mortality. The study delineates a disease mechanism that is highly relevant to the cell biology of many malignancies, and investigates the potential effectiveness of new chemotherapeutic agents. The work will generate new extramural funding support and interdisciplinary scientific interaction. Results from this could lead to the first clinical trial of disease-specific therapy for children with ARPKD.

**PROGRESS:** As this project began in April 2006, progress on this project’s activities will be provided in future Advancing a Healthier Wisconsin reports.
ROLE OF MITOCHONDRIA IN CARDIAC PROTECTION FROM ISCHEMIC INJURY

Principal Investigator: Martin Bienengraeber, PhD, Department of Anesthesiology
Collaborator: Michael Olivier, PhD, Department of Physiology
Competitive Research Fund: $150,000 (2006-2008)
Focus Area(s): Cardiovascular Disease, Genetics

This project investigates whether exposure to isoflurane, an inhalation anesthetic, protects the heart against ischemic (insufficient blood flow) damage by preserving mitochondrial structure and function. Research has shown that isoflurane causes changes in mitochondrial function, “the powerhouse” of the cardiac cell. By identifying the responsible proteins for this mechanism within the mitochondria, this research may reveal novel targets for a cardio-protective strategy that, ultimately, would be applicable to patients suffering from heart disease. The study uses an interdisciplinary approach including physiological, pharmacological, and molecular techniques, as well as proteomics.

Progress: As this project began in April 2006, progress on this project’s activities will be provided in future Advancing a Healthier Wisconsin reports.

SIMULTANEOUS MAGNETCARDIOGRAPHIC AND ECHOCARDIOGRAPHIC ASSESSMENT OF FETAL CARDIAC ABNORMALITIES

Principal Investigator: Janette Strasburger, MD, Department of Pediatrics
Collaborator: Ronald Wakai, PhD, University of Wisconsin Department of Medical Physics
Competitive Research Fund: $143,205 (2006-2008)
Focus Area(s): Cardiovascular Disease

This research aims to bring new technologies forward in fetal medicine, to educate obstetricians and family physician providers in these new diagnostic and treatment methods, and to enhance the means by which all pregnant women in Wisconsin, and especially minority mothers, access health care and understand its importance.

Progress: The purpose of this study is to develop better non-invasive methods of characterizing the intrauterine clinical condition of fetuses with arrhythmias, acquired heart failure, and structural congenital heart disease. This is a well-established collaboration between the MCW’s Pediatrics Department and the University of Wisconsin Department of Medical Physics. Preliminary results from this study have facilitated a line of investigation not previously thought possible due to this project’s breakthroughs in echocardiography technology and fMCG signal processing. Using these new methods, investigators evaluated two Wisconsin patients in association with fetal surgical interventions on the aortic valve as part of a highly innovative clinical treatment protocol for severe congenital heart disease. Results from the fMCG recordings in conjunction with fetal surgical interventions were presented at several annual conferences in 2006. The project has fostered a number of both inter-institutional as well as interdisciplinary alliances for the future. Results from this research will significantly impact diagnosis and management of fetal cardiovascular disease.

USE OF RNA INTERFERENCE IN THE BRAINSTEM TO EXAMINE ENDOCANNABINOID BAROREFLEX REGULATION IN NORMAL AND HYPERTENSIVE RATS

Principal Investigator: Jeanne Seagard, PhD, Department of Anesthesiology
Collaborators: Caron Dean, PhD, Department of Anesthesiology, Cecilia Hillard, PhD, Department of Pharmacology, and Michael Michalkiewicz, PhD, Department of Physiology
Focus Area(s): Cardiovascular Disease
This project focuses on genetic factors that could relate to hypertension, as well as an improved understanding of brain function and the ability to assess effectiveness of investigational therapies.

PROGRESS: This collaborative, multi-departmental study is working to improve understanding of reflex regulation of the cardiovascular system and advance the ability to regulate mechanisms that control central integration of baroreceptor (sensory receptor that responds to pressure) input. The investigative team has conducted several studies to support its research aims, including monitoring autonomic and cardiovascular changes in a rat model of nerve injury. This marks the first longitudinal study of the changes in cardiovascular function associated with this type of injury. Preliminary data have contributed to proposals for federal and local funding as well as four publications. Successful completion of this research could provide new directions for treatment of high blood pressure and may help identify genetic factors that could be involved in the development of high blood pressure, as well as improved understanding of how the brain works.

ASSESSMENT OF COGNITION AMONG BREAST CANCER SURVIVORS

Principal Investigator: Ann Nattinger, MD, MPH, Department of Medicine
Collaborators: Purushottam Laud, PhD, Department of Biostatistics, Liliana Pezzin, PhD, JD, Department of Medicine, Stephen Rao, PhD, Professor, Department of Neurology and Director of the Functional Imaging Research Center
Competitive Research Fund: $150,000 (2006-2007)
Focus Area(s): Cancer, Neurosciences

This project aims to improve the quality of care and outcomes of breast cancer survivors by integrating the analytical strengths of several strands of biomedical, neuroscience, and social sciences. The project will address concerns about treatment-induced cognitive deficits among those suffering from breast cancer. Researchers will study cognitive and brain functioning of women with a hormone receptor positive tumor who received the recommended aromatase inhibitor drug and contrast the results to those from control groups. This study represents an innovative effort that ultimately focuses on improving the quality of care provided to, and the outcomes of, the growing number of Wisconsin breast cancer survivors.

PROGRESS: As this project began in April 2006, progress on this project’s activities will be provided in future reports of Advancing a Healthier Wisconsin.

BIOPHOTONIC IMAGING CORE

Principal Investigator: Robert Truitt, PhD, Department of Pediatrics
Collaborators: Joseph Barbieri, PhD, Department of Microbiology and Molecular Genetics, William Drobyski, MD, Department of Medicine, Bryon Johnson, PhD, Department of Pediatrics, Kasem Nithipatikom, PhD, Department of Pharmacology and Toxicology, Rimas Orentas, PhD, Department of Pediatrics, Carol Williams, PhD, Department of Pharmacology and Toxicology, Michael Dwinell, PhD, Department of Microbiology and Molecular Genetics, Ken Matsui, PhD, Department of Pediatrics, Nita Salzman, MD, PhD, Department of Pediatrics, Jeffrey Woodliff, PhD, Department of Pediatrics
Competitive Research Fund: $150,000 (2006-2007)
Focus Area(s): Cancer, Genetics

Establishment of the Biophotonic Imaging core facility enhances the research capabilities of MCW faculty, contributing to greater knowledge and new therapies for cancer, infectious diseases, autoimmune disease and stem cell transplantation, among others. This device helps to show the interactions between cellular constituent molecules.

PROGRESS: Researchers established a core facility to provide real-time in vivo molecular imaging capabilities in intact animal subjects through the purchase of the In Vivo Imaging System. This core facility promotes collaboration among researchers from diverse specialties and disciplines working on several diseases. The funds from this award were used to purchase optical imaging equipment for the purpose of establishing a shared...
Biophotonic In Vivo Imaging Core. The equipment purchased included (1) a Lumina In Vivo Imaging System (IVIS) from Xenogen, Corporation with optional gas anesthesia system and (2) a Maestro Multi-Spectral In Vivo Imaging System from Cambridge Research and Instrumentation, Inc. The investigators comprising the initial user group for the core have complementary, aligned research aims such that each user advances some aspect that relates to the maintenance or the failure of immunological self-integrity in the context of cancer, pathogens, autoimmunity or inflammation. Eleven users are co-investigators for the development of this core. It is anticipated that use of the core will increase with education of the core’s capabilities. Key accomplishments of the core thus far include creating synergy through collaboration and interdepartmental effort, promoting research that will enhance competitiveness for broader support, and leveraging the expertise and assets of MCW faculty to promote discoveries that will impact on the health and well-being of the citizens of Wisconsin.

CELLULAR FUNCTIONS OF A NUCLEAR FKBP: A DRUG RECEPTOR BECOMING A CHROMOSOME-SPECIFIC NUCLEOSOME ASSEMBLER

**Principal Investigator:** Ming Lei, PhD, Department of Microbiology and Molecular Genetics  
**Collaborator:** Vaughn Jackson, PhD, Department of Biochemistry  
**Competitive Research Fund:** $150,000 (2006-2009)  
**Focus Area(s):** Cancer, Genetics

This project builds knowledge of the genetic and molecular bases of cancer. By gaining insights into how a drug-receptor-like protein modulates chromatin structure, this study may generate new ideas for the development or improvement of anti-immune and anti-cancer therapies.

**PROGRESS:** Findings resulting from this research contribute to an understanding of the genetic and molecular basis of cancer and have the potential to yield a new direction in cancer biology. Results have been presented at two national meetings and published in respected journals. This project is a multidisciplinary collaborative effort between a geneticist, a biochemist, and a Marquette University computer scientist.

FACILITATING DISCOVERY WITH MULTI-PARAMETER PHYSIOLOGIC IMAGING OF BRAIN TUMORS

**Principal Investigator:** Kathleen Scmainda, PhD, Department of Radiology  
**Collaborators:** Edgar DeYoe, PhD, Robert Prost, PhD, and John Ulmer, MD, Department of Radiology  
**MCW Program Development Fund:** $249,995 (2004-2006)  
**Focus Area(s):** Cancer, Neuroscience, Biotechnology and Bioengineering, Functional Imaging

This research focuses on increasing the life span of those with brain tumors through the development of a special physiologic imaging platform.

**PROGRESS:** As a result of this funding, an initial prototype of an integrated imaging display system was developed. This new tool has the ability to correlate physiological parameters such as speech or movement in relation to the radiation treatment field or surgical resection area, providing important new information to guide the treatment of brain tumors. Multiple collaborations among centers and several departments have resulted from this project and continue to foster further collaboration on new research projects and funding proposals. A new collaboration between labs of the Departments of Radiation Oncology and Radiology have been formed and strengthened in large part due to the funds available through Advancing a Healthier Wisconsin. Seven papers and four presentations have been made at national meetings or submitted for publication describing this work. After further refinement of the platform, the research team hopes to make the new tool available, with education and training, to other health care centers locally, regionally and nationally. Results from this project have the potential to significantly increase survival and improve quality of life for patients with brain tumors. Further, similar physiologic imaging platforms may be more easily developed for other diseases such as stroke.
GENETIC DETERMINANTS OF SUSCEPTIBILITY AND RESISTANCE IN MAMMARY CARCINOGENESIS

Principal Investigator: Sonia Sugg, MD, Department of Surgery
Collaborator: Howard Jacob, PhD, Department of Physiology, Human and Molecular Genetics Center
MCW Program Development Fund: $249,000 (2004-2007)
Focus Area(s): Cancer, Genetics

This project conducts research to identify new genes and mechanisms involved in breast cancer susceptibility and resistance. The project leverages the MCW's strength in genomics to investigate breast cancer, a major health priority for Wisconsin residents, identified in the Healthiest Wisconsin 2010 plan.

PROGRESS: Building from past research that discovered certain strains of rats are resistant to induction of breast cancer by carcinogens, this project searches for the genes, located on separate chromosomes, which would explain resistance or susceptibility to breast cancer. Preliminary investigations have provided necessary information to inform the outcomes of this study. Additional multigenic determinants of susceptibility/resistance to carcinogens will be identified by experiments through this program in the next year. Identification of new genes and mechanisms involved in breast cancer susceptibility and resistance will significantly change our current prevention and treatment strategies. This project integrates cancer and genetics research and will be useful to serve as a component for future programmatic grants with multiple investigators.

INVESTIGATION OF MRI/FMRI/MRSI FOR IMRT TARGET DEFINITION AND OUTCOME ASSESSMENT

Principal Investigator: X. Allen Li, PhD, Department of Oncology
Collaborators: Edgar DeYoe, PhD, Robert Prost, PhD, Kathleen Schmainda, PhD, and John Ulmer, MD, Department of Radiology, and Christopher Schultz, MD, Department of Radiation Oncology
Focus Area(s): Cancer, Functional Imaging

This project has great potential to increase local tumor control and reduce treatment toxicities for brain tumors that will lead to improvements in the current standard of care for radiation therapy of cancer.

PROGRESS: This project uses magnetic resonance imaging (MRI) for tumor and critical structure definition in radiation therapy planning. Investigators are now capable of incorporating images and other information from physiological MRI into the radiation treatment planning process. This allows precise definition of tumor location and calculation of radiation therapy so as to spare critical brain functions. Researchers assessed the advantages of MRI/pMRI in identifying biologic targets and critical structures for intensity modulated radiation therapy (IMRT) planning for brain tumors. Comparison of dosimetry plans obtained for volunteer patients with and without MRT/pMRI showed that the nonuniform dose distribution plans based on pMRI would lead to improved treatment outcomes. This project directly impacts the treatment of Glioblastoma Multiforme (GBM), the most common intracranial primary malignancy in the brain. GBM is one of the major causes of death in young cancer patients. The median survival time is only 8-12 months, and the five-year survival rate is about 2%. Methodology and strategies developed in this project could change the current practice of radiation therapy and improve treatment outcomes. This project will impact a large percentage of patients with brain cancer in Wisconsin.

MCW CANCER CENTER RECRUITMENT

Principal Investigator: Bruce Campbell, MD, Professor, Department of Otolaryngology and Communication Sciences and Interim Director of the Cancer Center
MCW Program Development Fund: $750,000 (2006-2008)
Focus Area(s): Cancer
This investment aims to recruit basic scientists in the area of cancer research. The research areas focus on aberrant signal transduction pathways in malignancy, genetic disruptions which generate oncogenes, and genetic alterations that result in the loss of tumor suppressor genes.

**PROGRESS:** As this project began in July 2006, progress on this project’s activities will be provided in future reports of Advancing a Healthier Wisconsin.

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**NOVEL METABOLISM OF MICROSOMAL EPOXIDE HYDROLASE AND PROSTATE CANCER**

**Principal Investigator:** Kasem Nithipatikom, PhD, Department of Pharmacology and Toxicology  
**Collaborator:** Carol Williams, PhD, Department of Pharmacology and Toxicology  
**Competitive Research Fund:** $150,000 (2006-2008)  
**Focus Area(s):** Cancer, Cardiovascular Disease, Neuroscience

This study investigates the metabolism of microsomal epoxide hydrolase (mEH) in the regulation of prostate cancer cell proliferation and invasion. These findings may lead to effective therapeutic targets for the treatment of prostate cancer.

**PROGRESS:** This project investigates a newly-discovered function of microsomal epoxide hydrolase (mEH) in metabolizing a biologically active lipid molecule (2-AG) in prostate cancer cells. This metabolism has two important implications; it terminates the functions of the lipid molecule that can initiate the signaling cascade and; it generates a lipid substrate for other enzymatic pathways. These two cascades have been shown to regulate cancer cell growth and spreading. Preliminary data indicate that the mechanism of this enzyme is involved in the regulation of prostate cancer cell growth and invasion. Thus, the study will potentially lead to new and unique therapeutic approaches for prostate cancer. Research outcomes will improve the health and quality of life in older men and, more commonly, minority men who are likely to develop this disease. Several investigators have contributed their resources including reagents, chemicals, and technical assistance to this project. It is anticipated that further collaboration will increase as the project progresses.

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**RECRUITMENT OF NEW RESEARCH CLINICIAN SCIENTISTS IN CANCER**

**Principal Investigator:** James Wade, MD, MPH, Department of Medicine  
**MCW Program Development Fund:** $250,000 (2004-2007)  
**Focus Area(s):** Cancer

The recruitment of cancer researchers will help to strengthen interdisciplinary cancer investigations by identifying strong collaborators who will help leverage existing strengths in cancer research at MCW.

**PROGRESS:** The project is structured to aid in the recruitment of world-class cancer researchers to Milwaukee and the state of Wisconsin. The recruitment of such individuals will result in the growth of new information about the origin of cancer and how best to diagnose and control this dreaded disease. Funding has been instrumental in preparing a recruitment package to enable recruitment of new faculty in cancer research. The anticipated recruitment will help to build an interdisciplinary cancer research center by identifying strong collaborators to work with other members of the Cancer Center and position MCW for application to the National Cancer Institute as a Comprehensive Cancer Center. New cancer researcher recruits will be evaluated on their collaborative potential, and their ability to leverage start-up funds for external funding. The availability of these funds continues to enable a multi-departmental (Medicine, Pediatrics), and a multi-institutional (MCW, Children’s Hospital, Froedtert Hospital) recruitment effort to secure major cancer research programming to this institution.
ROLE OF PHOSPHATIDYLSERINE IN IMMUNE EVASION BY NEUROBLASTOMA

Principal Investigator: Joel Shilyansky, MD, Department of Pediatrics
Collaborators: Bryon Johnson, PhD, and Ken Matsui, PhD, Department of Pediatrics
MCW Program Development Fund: $20,000 (2006-2008)
Focus Area(s): Cancer

This study aims to understand how cancer cells avoid detection and destruction by the immune system. By understanding the mechanisms by which cancer cells escape immune detection and destruction, this study will contribute to the future design of novel and effective anti-cancer treatments. Such treatments may also have fewer side effects and risks to patients. For example, blocking phosphatidylserine in patients, may unmask the cancer cells and stimulate an anti-tumor immune response. The study addresses cancer in children, a priority of the initiative, and a group of diseases with disproportionately greater impact both on the longevity and quality of life of the patient. The study capitalizes on resources available at MCW to study cellular and molecular immunology. The study is a collaboration between investigators in the Departments of Surgery and Pediatrics at MCW.

Progress: As this project is scheduled to begin in October 2006, progress on this project's activities will be provided in future reports of Advancing a Healthier Wisconsin.

ROLE OF T REGULATORY CELLS IN GRAFT VS. HOST DISEASE AND TUMOR CLEARANCE

Principal Investigator: William Grossman, MD, PhD, Department of Pediatrics
Collaborators: William Drобыski, MD, Department of Medicine, Soumitra Ghosh, PhD, Marty Hessner, PhD, Asriani Chiu, MD, James Verbsky, MD, PhD, Calvin Williams, MD, PhD, and Michael Zacharisen, MD, Department of Pediatrics
MCW Program Development Fund: $250,000 (2004-2007)
Focus Area(s): Cancer

This research will help to understand the mechanisms involved in the development of graft vs. host disease, a life-threatening complication of bone marrow transplantation, and provide insights to help control the progression of cancer.

Progress: This research has led to the novel discovery of a T cell subset that is critical to the development of GvHD and initial discoveries of how T regulatory cells control these pathogenic T cells. Further studies have now identified the perforin/granzyme pathway as critical in human T cell-induced tumor cell killing and immune responses. This project has fostered the development of multiple multi-investigator collaborative initiatives, including submission and award of a $14 million multi-institutional contract, four publications, and three presentations. Additional grant submissions using these data are planned over the next year. Research results are currently being compiled for dissemination, and have led to further novel investigations into the prevention of GvHD development. Discoveries resulting from this research may lead to interventions into preventing graft vs. host disease and promoting tumor clearance in pediatric and adult cancers.

USE OF ELECTRON MICROSCOPY IN CONTEMPORARY CELL BIOLOGY RESEARCH

Principal Investigator: Paula Traktman, PhD, Department of Microbiology and Molecular Genetics
MCW Program Development Fund: $203,625 (2006-2007)
Focus Area(s): Cancer, Cardiovascular Disease, Neuroscience

The goal of this proposal was to purchase new equipment for the Shared Electron Microscopy Facility so as to greatly improve the ability of users throughout MCW to perform ultrastructural analysis of molecules, cells and tissues. In addition, the remote microscopy setup will facilitate collaboration by allowing users throughout MCW to manipulate and examine samples on the electron microscope at remote sites through an internet connection.
PROGRESS: As this project began in March 2006, progress on this project’s activities will be provided in future reports of Advancing a Healthier Wisconsin.

IDENTIFICATION OF ATTENTION AND EXECUTIVE IMPAIRMENT IN EARLY NEUROLOGIC INJURY

Principal Investigator: Amy Heffelfinger, PhD, MPE, Department of Neurology
Collaborators: Kathy Sawin, PhD, University of Wisconsin-Milwaukee School of Nursing as well as representatives from several MCW departments and physicians from Children’s Hospital Wisconsin including, Emergency, Neurosurgery, Neurology, Pediatrics, the Child Development Center, and Child Protective Services
Focus Area(s): Neuroscience

This project develops tools to identify children under 6 years of age who have attention and executive functioning difficulties due to neurological injury or illness in order to implement early treatment. This project also explores the impact that risk factors such as family and social variables have on recovery and development.

PROGRESS: Although widely recognized as one of the most common problems from early neurological injury or disease, no mechanism currently exists to identify attention or executive dysfunction in early childhood. Early identification and treatment will hopefully allow for an increased trajectory of recovery and skill acquisition. This novel study provided feasibility data for a longitudinal investigation of the development and treatment of attention and executive functions in infants and preschool children with early neurological injury. A small, but substantial, number of children between the ages of 6 months and 5 years participating in the study were identified as having general cognitive delays and recommended for early treatment. Future studies will identify a subset of children to receive treatment to maximize their attention and early problem solving/impulse control abilities. Following this, new assessment tools will be used on young patients referred as having a need for early treatment of these specific deficits. Collaborators on this project include physicians in several areas of health care within the MCW and Children’s Hospital system. The Department of Neurology graciously matched the funds provided through Advancing a Healthier Wisconsin to make this project possible.

NEUROBIOLOGICAL PREDICTORS OF RESPONSES TO MEDICATIONS IN PEDIATRIC BIPOLAR DISORDER

Principal Investigator: Russell Scheffer, MD, Department of Psychiatry and Behavioral Medicine
Collaborators: Jennifer Apps, PhD, Department of Psychiatry and Behavioral Medicine, Robert Prost, PhD, Department of Radiology
MCW Program Development Fund: $20,000 (2005-2007)
Focus Area(s): Neuroscience, Functional Imaging

This project seeks to leverage the advances in spectroscopy and the clinical excellence of the Division of Child and Adolescent in MCW’s Department of Psychiatry and Behavioral Medicine to investigate Bipolar Disorder.

PROGRESS: This study exams patients with pediatric onset Bipolar Disorder using proton and lithium spectroscopy of the whole brain to determine if the somewhat heterogenous condition of Bipolar Disorder can be better delineated. It is anticipated that research results will suggest that endophenotypes of pediatric bipolar disorder will be preliminarily identified with regard to both baseline measures and treatment responsiveness. This area of research holds great hope in reducing suffering associated with this illness. Collaborations between the Departments of Psychiatry and Behavioral Medicine and Radiology have led to pooling of several resources. Additional funding opportunities and potentially a clinically neuroimaging study may result from these efforts. This project directly addresses a profound need for better treatments for psychiatric conditions. Wisconsin is significantly underserved in child psychiatry. More patients will be able to receive good care as a result of the long-term outcomes of these efforts.
STUDIES OF PEDIATRIC EPILEPSY

Principal Investigator: Kurt Hecox, MD, PhD, Department of Pediatrics
Collaborators: Charles Marcuccilli, PhD, Department of Pediatrics
MCW Program Development Fund: $360,000 (2005-2008)
Focus Area(s): Neuroscience

This study aims to research the etiology of pediatric epilepsy and attempts to develop predictive measures of seizures. Studies use sophisticated computer-based analyses of electroencephalograms.

PROGRESS: Though still in the developmental stages of the project, significant progress has been made in establishing the appropriate infrastructure and systems management for the implementation of the study. This includes partnership development with Marquette Biomedical Engineering, implementation of the statistical tracking method and software, approval for signal processing protocols in humans and animals, processing of first human pediatric data, and plans for the recruitment of additional scientific staff to support the project. Once methods are developed, the project will initiate training of other centers within the state of Wisconsin including physicians and community health leaders in pediatrics to properly categorize and treat children with epilepsy unresponsive to conventional medications.

ABC TRANSPORTER PHARMACOGENETICS: IMPACT ON THIOPURINE THERAPY

Principal Investigator: Michael Stephens, MD, Department of Pediatrics
MCW Program Development Fund: $17,852 (2005-2007)
Collaborators: Ron Hines, PhD, Department of Pediatrics, Raymond Hoffman, PhD, Department of Population Health, and D. Gail McCarver, MD, Department of Pediatrics
Focus Area(s): Genetics, Gastroenterology

This project explores thiopurine metabolism to increase understanding of genetic risks for drugs that are commonly used to treat inflammatory bowel disease and chemotherapy. By individualizing treatment strategies, physicians can improve each patient’s response to treatment and avoid adverse drug reactions.

PROGRESS: This project contributes to the identification of common genetic variants and explored their impact on thiopurine metabolism in vitro. Studies focus on the identification of genetic variation to determine its impact on thiopurine disposition. In Fall 2006, investigators presented research findings at the North American Society of Pediatric Gastroenterology, Hepatology and Nutrition. Knowledge gained from this project will help physicians develop individualized treatment plans for Wisconsin patients by aiding physicians in choosing the most appropriate medication dose (or chose a different medication) based on the patient’s genetically determined ability to metabolize the drug. Advancing a Healthier Wisconsin support was augmented by a grant from the Children’s Digestive Health and Nutrition Foundation. Using AHW funds, Dr. Stephens was also able to successfully compete for an NIH young investigator award. Finally, successful completion of this project will not only have a direct impact on Wisconsin residents, but also will allow for the development of a laboratory infrastructure that can quickly be applied to other pharmacogenetic problems, such as those arising in the treatment of HIV/AIDS and cardiovascular disease.

ESTABLISHMENT OF A CORE FACILITY FOR PHARMACOGENOMICS

Principal Investigator: Ron Hines, PhD, Department of Pediatrics
Focus Area(s): Genetics
This project will build a core expertise within MCW and affiliated health care delivery institutions that will begin bringing personalized medical approaches to the citizens of Wisconsin. The ultimate aim of this core is to minimize the risk of adverse drug reactions and maximize therapeutic efficacy based on experimental design, and the technical ability to develop and perform high throughput genotyping and phenotyping assays. Core faculty and personnel also will assist in data interpretation and the planning of future experiments.

**Progress:** As this project began in July 2006, progress on this project's activities will be provided in future reports of Advancing a Healthier Wisconsin.

### Genetic Analysis Initiative for Individualized Medicine

**Principal Investigator:** Howard Jacob, PhD, Department of Physiology, Human Molecular Genetics Center  
**Collaborators:** John Baker, PhD, Department of Pediatrics, David Bick, MD, Department of Pediatrics, Ulrich Broeckel, MD, Department of Medicine, Soumitra Ghosh, PhD, Department of Pediatrics, Ron Hines, PhD, Department of Pediatrics, Subra Kugathasan, MD, Department of Pediatrics, D. Gail McCarver, MD, Department of Pediatrics, Andrew Pelech, MD, Pediatrics, and Joseph Skelton, MD, Department of Pediatrics, Jozef Lazar, MD, PhD, Department of Dermatology, Ahmed Kissebah, MD, PhD, Department of Medicine, James Lustig, MD, Department of Pediatrics, Theodore Kotchen, MD, Department of Medicine, and, Michael Olivier, PhD, Department of Physiology

**MCW Program Development Fund:** $500,000 (2005-2007)  
**Focus Area(s):** Genetics, Cardiovascular Disease, Cancer

This study aims to identify genes that are directly involved in development of diseases or provide a predisposition to the development of diseases. Finding genes in both of these categories may assist in developing novel and innovative approaches for detecting, treating and preventing the disease.

**Progress:** Initial genome wide association studies will provide genes of interest that can be compared to the genes identified in animal disease models. Results of this study will contribute to the development of individually targeted interventions for patients and ultimately, state-wide health improvements. The genetic analysis to be performed in this project involves at least 7 of the top 54 priority health conditions: asthma, breast cancer, cerebrovascular disease, congenital anomalies, diabetes, hypertension and ischemic heart disease. Publications and grant proposals are in development. Additional funding will continue the analysis of genetics involvement in diseases and ultimately identify specific genes or gene regions that can be targeted for detection, intervention and prevention methods. This project is highly interdisciplinary and utilizes the expertise of a broad spectrum of specialists and further suggests that the results of this study will have a broad impact.

### High-Throughput Crystallization Robotics

**Principal Investigator:** Joseph Barbieri, PhD, Department of Microbiology and Molecular Genetics  
**Collaborators:** Paula Traktman, PhD, Department of Microbiology and Molecular Genetics, William Campbell, PhD, Department of Pharmacology and Toxicology, Jung-Ja Kim, PhD, Department of Biochemistry, Ming Lei, PhD, Department of Microbiology and Molecular Genetics

**MCW Program Development Fund:** $225,000 (2004-2007)  
**Focus Area(s):** Genetics

This technology provides critical structural information on virulence factors of microbial pathogens. In accordance with the Five-Year Plan, this technology will further research in bioengineering and molecular genetics.

**Progress:** The proposal requested funds to purchase a robot to increase the productivity of crystallization procedures at MCW. A Hamilton robotic system was purchased and has arrived at MCW. The unit has been installed and a technician has been hired to run the instrument. Faculty from
several departments are able to use this technology. Data acquired with this instrumentation has contributed to increased understanding of the molecular basis for disease processes and their prevention. Understanding the molecular basis for disease provides a platform for evidence-based medicine. This technology provided data for new sources of funding for additional research. New techniques continue to be developed from this investment.

VACCINIA RELATED KINASES: REGULATORS OF BAF IN ESTABLISHING NUCLEAR INTEGRITY

Principal Investigator: Paula Traktman, PhD, Department of Microbiology and Molecular Genetics
Competitive Research Fund: $150,000 (2006-2008)
Focus Area(s): Genetics, Cancer

This project studies a newly-identified family of protein kinases (Vaccinia related kinases) which phosphorilate and, hence, regulate BAF (Barrier to Auto-integration Factor) and, thereby, cellular division.

PROGRESS: Preliminary data demonstrate that when BAF cannot be properly phosphorylated, it is sequestered in the nucleus and cell proliferation is slowed. Thus, the enzyme/substrate pair of VRK and BAF is likely to play a significant role in the control of cell division. This research advances understanding of cellular and genetic mechanisms that contribute to the development of cancer. Mutations within VRK genes may contribute to cancer as well as infertility. Hence, understanding how VRK regulates cell proliferation will open new opportunities for therapeutic intervention as well as providing enhanced insight in to the mechanisms of cancer development. Two abstracts and one manuscript have been submitted for publication.

BARRIERS TO COLORECTAL CANCER SCREENING IN SOUTHEASTERN WISCONSIN COMMUNITIES

Principal Investigator: B. Alex Matthews, PhD, Department of Population Health
Collaborators: Ann Nattinger, MD, Department of Medicine, Prakash Laud, PhD, Department of Population Health, Mary Taylor, PhD, Department of Anesthesiology
MCW Program Development Fund: $244,793 (2004-2006)
Focus Area(s): Population Health, Cancer

Across gender, colorectal cancer (CRC) is the second leading cause of cancer-related death in the US. Evidence from randomized longitudinal efficacy trials consistently shows a significant reduction in CRC mortality associated with screening. The goal of the proposed research was to examine indicators associated with screening test use and gather preliminary data for a CRC screening intervention study.

PROGRESS: Random-digit-dialing interviews were conducted in Spring 2005 to survey a population-based sample (N = 1068) of CRC asymptomatic Wisconsin residents aged 50 to 79 years old on health beliefs, behaviors, and CRC screening patterns. Logistic regression results showed that testing anxiety and lack of perceived need for healthy people to test were associated with less screening. Up-to-date CRC screening was associated with reliance on physicians as the primary source for health information, family/personal history of bowel disease, regular physician visits, and participation in other cancer screening tests, controlling for age. Overall, screening rates were found to be much lower than estimated by national surveys, mainly, because (1) screening rates include people who are testing for disease and therefore underestimate the number of people who need to be screened and (2) people who have never screened think that screening is not needed if they are not currently experiencing any symptoms. Several studies are underway using data collected as a result of this project. Findings contributed to the understanding of challenges involved with the collection and calculation of CRC screening rates that are representative of community members use of proactive health services. These results have been used to provide a substantial foundation for future funding. In addition four manuscripts and three presentations have resulted from this project.
DEVELOPMENT OF A CENTER FOR SCIENCE, HEALTH AND SOCIETY

**Principal Investigator:** Cheryl Maurana, PhD, Department of Population Health, Office of the Senior Associate Dean for Public and Community Health  
**MCW Program Development Fund:** $360,000 (2006-2009)  
**Focus Area(s):** Population Health

This project is developing a new Center to strengthen science literacy and foster public engagement in science and health policy development through research, education, and citizen deliberation. The Center aims to expand MCW’s leadership role in increasing science literacy, especially among youth, by transferring knowledge to lay audiences, articulating the important role that science plays in our society, and expanding knowledge regarding the impact of an informed public on science and health policy development.

**PROGRESS:** This project began in March 2006. Preliminary progress includes a contract with the Southeastern Wisconsin Regional Consortium for Pandemic Influenza Preparedness, and a proposal submitted to the Howard Hughes Medical Institute in collaboration with the Milwaukee Academy of Science.

WISCONSIN HEALTH CARE UTILIZATION PROJECT

**Principal Investigator:** Richard Cooper, MD, Department of Population Health  
**Collaborators:** Liliana Pezzin, PhD, Department of Population Health, Marie Wolff, PhD, Department of Family and Community Medicine  
**MCW Program Development Fund:** $249,629 (2004-2006)  
**Focus Area(s):** Population Health

This project assesses health care utilization at a population level and focuses on understanding the economic and demographic trends in health care services in Wisconsin, with a particular focus on Milwaukee County. The project facilitates collaboration between MCW and community partners and supports practitioners and policy makers as they address the issues of equitable health care in Wisconsin.

**PROGRESS:** Initial analysis of hospital utilization has been carried out using two adult age groups stratified by race and per capita income. Further studies will focus on comparing data results from Wisconsin with other states in the Midwest. Examining patterns of health care use and outcomes across population clusters in Wisconsin allowed investigators to define the contribution of such heterogeneity to assessing health care expenditures. Results demonstrate differences in utilization rates in the same income level groupings in different geographic regions of the state. The study is assessing the factors that may account for these areas of high utilization. The study has estimated the magnitude of potential costs of caring for the least affluent and least insured groups in Wisconsin.

ADL-SPECIFIC ROBOT THERAPY ENVIRONMENT FOR UPPER EXTREMITY REHABILITATION

**Principal Investigator:** Michelle Johnson, PhD, Department of Physical Medicine and Rehabilitation  
**Collaborators:** Gerald Harris, PhD, Department of Orthopedic Surgery at MCW and the Department of Biomedical Engineering at Marquette University, Roger Smith, PhD, Department of Occupational Therapy, University of Wisconsin-Milwaukee, John McGuire, MD, Department of Physical Medicine and Rehabilitation, Tim Dillingham, MD, Department of Physical Medicine and Rehabilitation, Kevin White, MD, Department of Physical Medicine and Rehabilitation, William Waring, MD, Department of Physical Medicine and Rehabilitation  
**MCW Program Development Fund:** $138,880 (2004-2006)  
**Focus Area(s):** Clinical and Translational Research
This research project develops a novel robotic-based, intervention system to improve upper arm rehabilitation and improve functioning in daily living environments. It uses new engineering measures derived from human motion tracking along with clinical measures of arm function to assess how stroke survivors move and to determine the best way to assist them with a robot. The main outcome will be a robot-assisted therapy environment that can assist in the re-training of the upper arm of persons with upper arm disability.

**PROGRESS:** Building from the project's first year successes, the ADL Exercise Robot (ADLER) Therapy environment for stroke was developed and combines the benefits of Activities of Daily Living (ADL) training (motivation and functional task practice), with the benefits of robotic therapy (repeatability and reliability). The prototype robot therapy environment permits training of tasks that involve both reaching to objects only and reaching and manipulation of objects. This year, investigators completed the implementation of the safety system for the robot that permitted safe interactions and extended the system to accommodate low functioning subjects that had difficulty grasping the objects. An evaluation stage will begin shortly. This project is highly collaborative in that it draws on cross-disciplinary resources that are located at MCW, Marquette University and the University of Wisconsin-Milwaukee, to understand the problem of upper limb function after stroke. The project draws on the community of stroke survivors across the state and partners with community-based stroke programs for volunteers, feedback, and to publicize the results of the research. Several presentations, papers, and grant proposals have resulted from this research. If successful, this project will improve the quality of rehabilitative care for survivors of stroke and traumatic injury.

**CLINICAL AND TRANSLATIONAL SCIENCE INITIATIVE**

**Principal Investigator:** Theodore Kotchen, MD, Associate Dean for Clinical Research  
**MCW Program Development Fund:** $70,000 (2006-2007)  
**Focus Area(s):** Clinical and Translational Research

This project aids in the development of an institutional center for conducting translational research that is interdisciplinary, multi-institutional, and encompasses an advanced degree-granting program in translational sciences. This proposal funds an administrator to provide the overall organization for the development of an institutional center for conducting translational research.

**PROGRESS:** As this project began in April 2006, progress on this project’s activities will be provided in future Advancing a Healthier Wisconsin reports.

**TRANSLATIONAL RESEARCH INITIATIVE: NOVEL RISK FACTORS FOR ATHEROSCLEROTIC CARDIOVASCULAR DISEASE**

**Principal Investigator:** David Gutterman, MD, Department of Medicine  
**Collaborators:** Elizabeth Jacobs, MD, Department of Medicine, David Harder, PhD, Department of Physiology, G. Richard Olds, MD, Department of Medicine  
**MCW Program Development Fund:** $250,000 (2004-2007)  
**Focus Area(s):** Cardiovascular Disease, Clinical and Translational Research

This project will accelerate the generation of new research findings with high potential for impact on the health of the people of Wisconsin by integrating basic cardiovascular disease research into the clinical arena, including both epidemiological and genetic studies. By promoting more clinically-oriented research, the initiative will maximize the ability to improve cardiovascular disease outcomes, one of the most important health concerns in Wisconsin. The proposal supports the recruitment of a cardiovascular translational researchers to catalyze the opportunities for converting basic science investigation into new clinical treatments.
PROGRESS: Cardiovascular disease is the number one killer of people in Wisconsin. Translational cardiovascular research is a targeted way to bring basic science investigation to the patient. This funding has allowed pursuit of three potential senior cardiovascular clinician-investigators to direct the Translational Research Initiative (TRI) at MCW. The director’s duties will involve oversight of multiple translational research projects directed at reducing death from cardiovascular disease, overweight and complications of tobacco use. It will cut across all age, gender, and racial groups, emphasizing both prevention and causes of death and disability. By its nature, translational research is highly collaborative, and the director of the TRI will necessarily collaborate and interact with a wide variety of scientists and projects throughout the College. The organization of multiple clinical and basic researchers in the same area should create new collaborations that would be leveraged into multi-investigator grant applications in the area of cardiovascular disease and stroke.

EARLY DETECTION OF ALZHEIMER’S DISEASE USING FUNCTIONAL MRI

Principal Investigator: Stephen Rao, PhD, Department of Neurology, Piero Antuono, MD, Department of Neurology
Collaborators: Ray Hoffmann, PhD, Department of Population Health, Malgorzata Franczak, MD, Department of Neurology, Diana Kerwin, MD, Department of Medicine, Shi-Jiang Li, PhD, Department of Biophysics Research, Alzheimer’s Association
Focus Area(s): Clinical and Translational Research, Neuroscience, Functional Imaging

The purpose of this research project is to develop a preventive therapy approach focusing on early detection of Alzheimer’s disease, which has the highest combination of magnitude and severity of all adverse health conditions.

PROGRESS: This longitudinal study used task-activated functional magnetic resonance imaging (fMRI) to provide a comprehensive understanding of the pattern and natural neural dysfunction that presages Alzheimer’s disease, a major statewide health issue. The research project’s task activation probe involves the recognition of famous individuals, a measure of remote semantic retrieval. Preliminary data suggests that this probe activates brain regions most vulnerable to the pathological changes in early Alzheimer’s Disease. A long-term goal of this project is to assess the utility of fMRI in detecting and monitoring changes in neurobiological function in early Alzheimer’s Disease. fMRI biomarkers hold the promise of pinpointing the earliest neural changes in Alzheimer’s Disease, allowing treatments to begin at the onset of neurodegeneration and well before the appearance of more global cognitive symptoms. Research suggests that identifying such markers would increase the chances for successful treatment and improve prognosis for AD. Several faculty members have collaborated on this project. This project involves collaboration between the MCW fMRI Center, the General Clinical Research Center, the Froedtert Memorial Lutheran Hospital memory disorders clinic, and the Alzheimer’s Association.

ADVANCED NANOSPRAY MASS SPECTROMETER FOR PROTEOMIC APPLICATIONS

Principal Investigator: Bassam Wakim, PhD, Department of Biochemistry
Focus Area(s): Biotechnology

This technology will increase the ability of interdisciplinary MCW researchers to detect peptide fragments.

PROGRESS: The instrument was purchased and installed in March 2005, and it resides in the Protein and Nucleic Acid facility. This instrument surpasses other available instruments in its sensitivity and large variety of proteins that can be identified. A training program for new and existing investigators in protein identification was developed and launched in 2005. The diversity of disease processes supported by this instrument fit well with the Healthiest Wisconsin 2010 plan, providing innovative solutions to health problems being investigated by researchers from many disciplines. This instrument will advance basic biomedical research focusing on chronic diseases such as cardiovascular disease, diabetes, and cancer. Data obtained using this instrument supports extramural funded research and is being leveraged in support of new NIH applications. Over 50 investigators have used the facility. Two funded and six pending grants are a direct result of this equipment.
BIACORE 3000-UNIVERSAL APPROACH TO LIGAND-PROTEIN AND PROTEIN-PROTEIN INTERACTION

**Principal Investigator:** Nancy Dahms, PhD, Department of Biochemistry  
**Collaborators:** William Campbell, PhD, Department of Pharmacology and Toxicology, Cecilia Hillard, PhD, Department of Pharmacology and Toxicology, Brian Volkman, PhD, Department of Biochemistry  
**MCW Program Development Fund:** $327,847 (2004-2006)  
**Focus Area(s):** Biotechnology

This new technology enables multi-disciplinary researchers in genetics, biotechnology, bioengineering and endocrinology to monitor molecular interactions critical to furthering new insights and innovative solutions to cardiovascular disease and cancer, two of the leading health priorities identified in the Healthiest Wisconsin 2010 Plan and the Five-Year Plan.

**PROGRESS:** The Biacore 3000 instrument provides new approaches to study the neurochemistry of substance abuse, cardiovascular disease, and cancer. This state-of-the-art technology allows for increased sensitivity, high-throughput, and for the detection of drug-protein, hormone-protein, protein-protein, DNA-protein, carbohydrate-protein, and lipid-protein interactions that cannot be performed with other methodologies. In addition to its contribution to research, the Biacore 3000 enabled students to receive instruction on the theory of Surface Plasmon Resonance (SPR) including an explanation of the theory, examples of applications, and practical considerations of the Biacore 3000 system. Future offerings will be integrated into graduate level courses. In addition, a lecture on SPR theory has been placed on the Protein and Nucleic Acid Facility website to serve as a source of information for MCW faculty as well as for investigators outside of the institution, and will provide essential information for investigators considering whether the methodology is suitable for their studies. Several MCW faculty from diverse disciplines as well as the Blood Research Institute of Southeastern Wisconsin have used this technology through collaborative interactions to advance their research.

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MASS SPECTROMETRIC APPLICATIONS IN METABOLICOMICS

**Principal Investigator:** Andrew Greene, PhD, Department of Physiology  
**Collaborator:** Daniel Beard, PhD, Department of Physiology  
**MCW Program Development Fund:** $321,935 (2004-2005)  
**Focus Area(s):** Biotechnology

This equipment enables interdisciplinary MCW researchers to strengthen and foster collaboration in combating metabolic syndrome, a disease that combines obesity, dislipidemia and insulin resistance, and affects more than 30% of Wisconsin residents.

**PROGRESS:** The purpose of this grant was to fund unique equipment for obtaining and analyzing large-scale metabolic and genomic data. The equipment was purchased in May 2005. This is the first such piece of equipment on campus. Since its creation, the Biotechnology Center has successfully supported collaborations with more than 10 investigators resulting in five funded NIH grants. A core computational modeling effort is integrating metabolic, cardiovascular, genomic, and proteomic data obtained from diverse research groups into a mechanistic understanding of the pathophysiology of the metabolic syndrome. Each of the components of this research has independent funding. Biomedical science has entered an era in which collaboration across disciplines is essential to tackle many complex biological problems. This need for collaborative and integrative approaches stems from the rapid progress in understanding biology at the molecular level. The instrument purchased by this grant facilitates research in a critical health area for people of Wisconsin, namely, metabolic syndrome, a prevalent disease associated with insulin resistance, hypertension, and obesity. This instrument supports ongoing funded research programs and increases the competitiveness of MCW faculty for new extramural funding.
FOUR ADDITIONAL PROJECTS APPROVED JULY 2006

CARDIOVASCULAR TRANSLATIONAL RESEARCH FACILITY

Principal Investigator: David Gutterman, MD, Department of Medicine
Collaborators: David Harder, PhD, Department of Medicine, Elizabeth Jacobs, MD, Department of Medicine, Shane Phillips, PhD, Department of Medicine
Focus Area(s): Clinical and Translational Research, Cardiovascular Disease

This project provides the necessary staff support for translational research in cardiovascular disease. The investment enables experiments that link basic science and clinical science by focusing on alterations in endothelial function and cardiac function and by evaluating the diagnostic utility of novel tests in pulmonary hypertension.

CLINICAL AND TRANSLATIONAL RESEARCH INFRASTRUCTURE

Principal Investigator: Reza Shaker, MD, Department of Medicine
Collaborators: Howard Jacob, PhD, Department of Physiology, Human and Molecular Genetics Center, several clinical and basic science departments
MCW Program Development Fund: $1,159,543 (2006-2009)
Focus Area(s): Clinical and Translational Research

This investment creates an infrastructure to facilitate the translation of basic research into the clinical arena and the community. This initiative is multidisciplinary and includes provisions for training clinical investigators, including a degree in clinical and translational research. Funding for this initiative will also support a pilot program to foster community engagement with basic and clinical investigators.

DOCTORAL DEGREE PROGRAM IN PUBLIC AND COMMUNITY HEALTH*

Principal Investigator: Peter Layde, MD, MSc, Department of Population Health
MCW Program Development Fund: $4,778,113 (2006-2011)
Focus Area(s): Population Health, MCW Curriculum Development

The proposed doctoral degree program in Public and Community Health will enhance the breadth and depth of research expertise in public and community health with an emphasis on training the next generation of research scientists in population health. This program is being developed in collaboration with the University of Wisconsin-Milwaukee.

MASTERS OF PUBLIC HEALTH EXPANSION*

Principal Investigator: Peter Layde, MD, MSc, Department of Population Health
Collaborators: Jane Kotchen, MD, MPH, Department of Population Health
MCW Program Development Fund: $2,761,897 (2006-2011)
Focus Area(s): Masters of Public Health Degree Program

This award supports the expansion of the Masters of Public Health (MPH) Degree Program. The audience will be expanded to include health professionals other than physicians who work in local public health and non-profit/profit agencies. The new program will incorporate modern distance-learning technologies.

*The $4,778,113 for the Public and Community Health Doctoral Degree Program and $2,761,898 for the MPH Expansion are divided evenly between the Educational Leadership for the Health of the Public and the Research for a Healthier Tomorrow fund totals.
The impact of Research for a Healthier Tomorrow and Education and Leadership for Public Health projects funded by the Advancing a Healthier Wisconsin endowment will be fully realized in future years through the availability of new and more effective prevention and treatment protocols aimed at major causes of death and disability. Equally as important are education projects aimed at enhancing the effectiveness of medical and public health professionals who serve the residents of the State of Wisconsin. The results of research and education can transform the traditional health care delivery system and statewide public health capacity as new knowledge and core competencies are transferred to the health professional workforce, and the latest medical breakthroughs are integrated into community practice. Projects are currently in the early stages of implementation.

OVERARCHING FRAMEWORK
The MCW Consortium on Public and Community Health endorses a structure of evaluation for the research and education endowment components that includes three major components:

- **IMPACT**
  The ultimate impact of research and education projects will be enumerated through identification of publications whereby results are widely disseminated, additional funding leveraged as a result of initial AHW investment, scientific awards and enhancement of public health and medical leadership.

- **PROJECT OUTCOMES**
  As projects are completed, AHW will determine if original underlying hypotheses were realized, the impact of equipment purchases on researchers representing multiple disciplines was achieved, and finally, a summary of research conclusions was reached.

- **STRATEGIES**
  This component is focused on assessing projects in relation to their relevance to the AHW Five-Year Plan and its research priorities, and the process by which proposals are reviewed and prioritized for funding.

FRAMEWORK TO SUMMARIZE PROGRESS TO-DATE ON FUNDED PROJECTS

- Description of progress toward the expected outcomes detailed in the proposal
- List of any papers, presentations or any other dissemination of the work, with appropriate acknowledgment of Advancing a Healthier Wisconsin as a funding source
- For those who have purchased equipment, description of the number of users, and interdisciplinary collaborations that have resulted
- A financial status report that provides a summary of expenses to-date
- Explanation of fit with the Advancing a Healthier Wisconsin Five-Year Plan and its addendum
- Explanation of fit with *Healthiest Wisconsin 2010*, the state health plan
- Ways in which the project is addressing the Principles of Stewardship outlined in the Five-Year Plan
FRAMEWORK FOR FUTURE ASSESSMENT PROJECTS BASED ON PRINCIPLES OF STEWARDSHIP

Prioritization
- Identify focus area(s) of funded projects
- Describe how prioritization of initiatives was determined and why it will have the best potential to significantly improve health

Build on strengths
- Table relating MCW’s strengths to funded projects

Leverage assets
- Table showing leveraging or pooling of resources
- Number of proposals submitted and secured for additional funding

Prevention through research
- Table showing funded projects that seek to prevent disease, injury and disability
- Table relating funded projects to Healthiest Wisconsin 2010 (state health plan)

Collaboration
- Description of funded projects that involve intra-institutional collaboration
- Description of projects that involve other academic institutions
- Description of the number of users and interdisciplinary collaborations that have resulted from the research project and/or its equipment

Outcomes research (as defined in the Five-Year Plan)
- Description of plan for monitoring of program outcomes
- Table listing any papers, presentations or any other dissemination

LESSONS LEARNED
Changes made to the operations of Research for a Healthier Tomorrow and Educational Leadership for the Health of the Public projects include:

<table>
<thead>
<tr>
<th>REQUEST FOR PROPOSALS</th>
<th>• Explicit timeframes for proposal submission, merit review and the entire award process were established.</th>
</tr>
</thead>
<tbody>
<tr>
<td>TECHNICAL ASSISTANCE</td>
<td>• Centralized information and the availability of outreach and training to prospective MCW principal investigators to clarify funding priorities, eligibility guidelines and proposal specifications and review criteria have been developed and implemented.</td>
</tr>
<tr>
<td>REVIEW PROCESS</td>
<td>• A merit review process involving the Research Affairs Committee, the Society of Teaching Scholars, the Research and Education Advisory Committee, the Consortium on Public and Community Health and the MCW Board of Trustees was established.</td>
</tr>
</tbody>
</table>
| ADMINISTRATIVE REQUIREMENTS | • An ongoing perpetual commitment to conduct an annual assessment of the proposal review and award process.  
• Improvements to the formal notification and budget allocation process. |
The Advancing a Healthier Wisconsin funds are invested with the Medical College of Wisconsin Endowment Funds using a diversified asset allocation strategy that includes equity, fixed income, and alternative investments. All Endowment Fund investments are made in accordance with the Endowment Investment Policy, as approved by the Medical College of Wisconsin Board of Trustees. The investment goal for the Advancing a Healthier Wisconsin funds is to maintain the real value of the funds while providing a stream of income to fund the initiatives and partnership programs of the Five-Year Plan. The Medical College of Wisconsin has a long-term investment planning horizon for the Endowment Funds, recognizing that rates of return may be volatile on a year-by-year basis and that achievement of investment objectives may not progress uniformly over time. The funds are managed according to prudent standards as established by the laws of the State of Wisconsin.

All Endowment Funds, including the Advancing a Healthier Wisconsin funds, are invested in a unitized pool. Pooling of funds allows an individual participating fund to benefit from diversification and economies of scale in the investment process. Income is also unitized and allocated based on relative value on the first of the month. Realized capital gains are reinvested in the pool. The separate identity of each fund participating in the Endowment Fund pool is fully preserved, and each fund’s share in the income and gains of the pool is assured. The Medical College of Wisconsin has retained Marshall & Ilsley Trust Company to maintain the unitized accounting for the Endowment Fund, including the Advancing a Healthier Wisconsin funds.

The Advancing a Healthier Wisconsin funds are segregated in six separate accounts within the Endowment Fund. With respect to the 35% allocation of the funds for the Healthier Wisconsin Partnership Program, accounts for the true endowed funds, immediately available funds available for current program distribution, and the spendable funds available for future program distribution are maintained. Similarly, three separate accounts are maintained for the 65% allocation of the funds for Health Improvement through Research and Education.

True Endowment Fund distributions are based on a defined portion of the market value of the endowed funds, as specified in the Grant Agreement. For the year ended June 30, 2006, the Spendable Fund Distribution from the True Endowment was initially based on 60% of the market value of the funds. Effective April 1, 2006, following Wisconsin United for Health Foundation’s successful review of the 2005 Annual Report, the Spendable Fund Distribution from the True Endowment is based on 80% of the market value of the funds. Investment earnings on the remaining portion of the market value are temporarily restricted under the terms of the Grant Agreement and remain in the True Endowment Fund.

The Immediate Fund distributes all investment earnings to the Spendable Fund.

The Advancing a Healthier Wisconsin funds are integrated into the annual financial audit of the Medical College of Wisconsin. The Advancing a Healthier Wisconsin Financial Schedule is prepared using substantiated numbers from the Medical College of Wisconsin’s audited financial statements. The audited financial statements for the Medical College of Wisconsin are attached.

Immediate Funds for program expenses are reimbursed on a one-month lag. The unreimbursed expenses are reflected on the schedules on the following pages as Due to The Medical College of Wisconsin, Inc.
Advancing a Healthier Wisconsin
Healthy Wisconsin Partnership Program
Financial Schedule For the Fiscal Years Ended June 30, 2006 and 2005
(in thousands)

<table>
<thead>
<tr>
<th>Assets:</th>
<th>2006</th>
<th>2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>Investments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spendable Fund</td>
<td>$7,481</td>
<td>$1,946</td>
</tr>
<tr>
<td>Immediate Fund</td>
<td>8,289</td>
<td>9,746</td>
</tr>
<tr>
<td>True Endowment Fund</td>
<td>109,376</td>
<td>103,044</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$125,146</strong></td>
<td><strong>$114,736</strong></td>
</tr>
</tbody>
</table>

| Liabilities and Net Assets: |      |      |
| Liabilities: |      |      |
| Due to the Medical College of Wisconsin, Inc. from Immediate Funds | $195 | $127 |
| Net Assets: |      |      |
| Temporarily Restricted-Spendable Fund | $7,481 | $1,946 |
| Temporarily Restricted-Immediate Fund | 8,094 | 9,619 |
| Permanently Restricted-True Endowment Fund | 109,376 | 103,044 |
| **Total Assets** | **124,951** | **114,609** |

<table>
<thead>
<tr>
<th>Commitments-Immediate Fund:</th>
<th>Administration</th>
<th>Partnerships</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance at Inception-3/11/04</td>
<td>$10,500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less: Program expenses-cumulative</td>
<td>$1,215</td>
<td>$1,191</td>
<td>2,406</td>
</tr>
<tr>
<td>Unexpended fund balance at 6/30/06</td>
<td>8,094</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less: Outstanding Commitments at 6/30/06</td>
<td>546</td>
<td>8,848</td>
<td>9,394</td>
</tr>
<tr>
<td><strong>Uncommitted fund balance at 6/30/06</strong></td>
<td><strong>$ (1,300)</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**The deficit will be covered from the Spendable Fund.**
Advancing a Healthier Wisconsin
Health Improvement Through Research and Education
Financial Schedule For the Fiscal Years Ended June 30, 2006 and 2005
(in thousands)

### Assets:

<table>
<thead>
<tr>
<th>Investments:</th>
<th>2006</th>
<th>2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spendable Fund</td>
<td>$13,881</td>
<td>$3,626</td>
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<tr>
<td>Immediate Fund</td>
<td>15,919</td>
<td>17,728</td>
</tr>
<tr>
<td>True Endowment Fund</td>
<td>203,127</td>
<td>191,368</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$232,927</td>
<td>$212,722</td>
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### Liabilities and Net Assets:

<table>
<thead>
<tr>
<th>Liabilities:</th>
<th>2006</th>
<th>2005</th>
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<tbody>
<tr>
<td>Due to the Medical College of Wisconsin, Inc.</td>
<td>$439</td>
<td>$181</td>
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<tr>
<td>from Immediate Funds</td>
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</table>

<table>
<thead>
<tr>
<th>Net Assets:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporarily Restricted-Spendable Fund</td>
<td>$13,881</td>
<td>$3,626</td>
</tr>
<tr>
<td>Temporarily Restricted-Immediate Fund</td>
<td>15,480</td>
<td>17,547</td>
</tr>
<tr>
<td>Permanently Restricted-True Endowment Fund</td>
<td>203,127</td>
<td>191,368</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>232,488</td>
<td>212,541</td>
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</table>

### Commitments-Immediate Fund:

<table>
<thead>
<tr>
<th></th>
<th>Education</th>
<th>Research</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance at Inception-3/11/04</td>
<td></td>
<td>$19,500</td>
<td></td>
</tr>
<tr>
<td>Less: Program expenses-cumulative</td>
<td>$1,017</td>
<td>$3,003</td>
<td>4,020</td>
</tr>
<tr>
<td>Unexpended fund balance at 6/30/06</td>
<td></td>
<td></td>
<td>15,480</td>
</tr>
<tr>
<td>Less: Outstanding Commitments at 6/30/06</td>
<td>2,020</td>
<td>5,603</td>
<td>7,623</td>
</tr>
<tr>
<td><strong>Uncommitted fund balance at 6/30/06</strong></td>
<td></td>
<td></td>
<td>$7,857*</td>
</tr>
</tbody>
</table>

*Effective July 21, 2006 the Medical College of Wisconsin Board of Trustees approved funding $9.1 million for Health Improvement Through Research and Education program expenses over the next five years. This reduces the Uncommitted fund balance for Health Improvement Through Research and Education to $(1,298,000). The deficit will be paid for from the Spendable Fund.
Thank you for reading the 2005-2006 Advancing a Healthier Wisconsin Annual Report.

All documents referred to in this report can be found on the Advancing a Healthier Wisconsin web site:

www.mcw.edu/healthierwisconsin

Any questions or comments regarding this Annual Report may be directed to Advancing a Healthier Wisconsin staff at 414.456.4350 or healthierwisconsin@mcw.edu