ADVANCING A
HEALTHIER WISCONSIN

ANNUAL REPORT
for the period ending June 30, 2008
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The Medical College of Wisconsin, Inc. (MCW) and the MCW Consortium on Public and Community Health, Inc. (MCW Consortium) are pleased to present the fifth annual report on the Advancing a Healthier Wisconsin (AHW) endowment.

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; the Grant Agreement, issued March 2004; and, the AHW Five-Year Plan dated April 2003 and the plan Addendum dated December 2003.

These documents guide the process by which MCW received and stewards proceeds from the conversion of Blue Cross and Blue Shield United of Wisconsin from a non-profit company to a stock insurance corporation.

This report addresses activities and expenditures relevant to AHW from July 1, 2007 through June 30, 2008.

The MCW Consortium appreciates this opportunity to report on the past year of activities to make Wisconsin a healthier state through the AHW endowment.
ADVANCING A HEALTHIER WISCONSIN OVERVIEW

The Advancing a Healthier Wisconsin (AHW) endowment is dedicated in its entirety, and in perpetuity, to improving the health of the people in Wisconsin through three complementary components:

- Public and Community Health Partnerships including the MCW Consortium Initiative on Violence Prevention, and the Healthier Wisconsin Partnership Program (HWPP) which supports community-MCW academic partnerships that address public and community health improvement.
- Research for a Healthier Tomorrow supports basic science, clinical and translational research initiatives in such fields as cardiovascular disease, cancer, neuroscience, genetics and population health.
- Educational Leadership for the Health of the Public supports programs that provide training for community and public health professionals, health care providers, medical and graduate students as well as patients and consumers.

In accordance with the Insurance Commissioner's Order, AHW dedicates 35 percent of funds for public and community health partnerships (including HWPP) and 65 percent of funds for research and education initiatives. The divided allocation remains unless it is increased or decreased by the affirmative vote of two-thirds of all MCW Consortium members at the time an AHW Five-Year Plan is approved. However, as required by the Grant Agreement, the MCW Consortium evaluates the allocation as part of its annual review process. On August 16, 2007, the MCW Consortium unanimously voted to maintain the previously determined distribution of funds.

CUMULATIVE FUNDING COMMITMENTS AND FRAMEWORK

From July 1, 2007 through June 30, 2008, the MCW Consortium approved funding for 57 new AHW initiatives totaling $26.8 million as follows:

- Healthier Wisconsin Partnership Program awarded $6.4M to 24 community-MCW academic partnerships.
- Research for a Healthier Tomorrow awarded $17.7M to 24 projects.
- Educational Leadership for the Health of the Public awarded $1.6M to seven projects.
- Consortium Initiative on Violence Prevention awarded $1.1M to two projects.

The MCW Consortium recognizes that all three components are necessary to improve the health of the people of Wisconsin. The chart on the following page represents cumulative funding commitments since AHW’s inception and the framework under which the endowment operates.
ADVANCING A HEALTHIER WISCONSIN
Three Complementary Components
Cumulative Funding Commitments*

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
Total Funds Committed for 215 Projects
$69.4M

Educational Leadership for the
Health of the Public
31 Projects
$9.3M
Education and training to enhance the
capacity of:
• Public Health Professionals—$1.3M
• Health Providers, Patients and Consumers—$0.8M
• MPH Expansion—$1.4M
• PhD in Public and Community Health—$2.4M
• Medical, Graduate and Resident Education—$3.4M

Public and Community Health Partnerships
103 Projects
$24.5M
Healthier Wisconsin Partnership Program
101 Projects; $23.4M
Through community-academic partnerships:
• Address leading health risks and priorities
• Focus on specific populations
• Prevent causes of death and disability
• Build capacity and enhance systems

Consortium Initiative on Violence Prevention
2 projects; $1.1M
• Development phase

Research for a Healthier Tomorrow
81 projects
$35.6M
Through basic, clinical, applied and translational research, address leading causes of death and disability including:
• Cardiovascular Disease—$4.9M
• Cancer—$4.0M
• Neuroscience—$0.9M
• Genetics—$4.1M
• Population Health—$6.2M
• Clinical and Translational Research—$12.1M
• Imaging, Biotechnology and Bioinformatics—$3.4M

Outcomes
• Improved Health of the People of Wisconsin
• Strengthened Community Capacity
• Leadership in Public Health

*Totals reflect figures for those projects reviewed by MCW Consortium on Public and Community Health and approved by the MCW Board of Trustees as of July 18, 2008.
GOAL AND ANNUAL MILESTONES

The primary goal of the AHW endowment as described in the AHW 2003-2008 Five-Year Plan governing document is to support programs and initiatives that improve the health of the people of Wisconsin. To be effective and succeed in this goal, AHW will improve health status and health systems through the following approaches:

- Developing partnerships;
- Promoting education for consumer health, community and public health professionals and medical and graduate students; and,
- Enhancing our ability to identify, treat and prevent disease.

MEASUREMENTS AND BENCHMARKS

To determine progress toward the AHW goal, the MCW Consortium established the following measurements and benchmarks as described in the AHW 2003-2008 Five-Year Plan:

1. Develop new community health partnerships targeted in Healthiest Wisconsin 2010 (the State of Wisconsin health plan).
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, and with other state health training programs such as those at University of Wisconsin-Milwaukee 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 health care.
7. Enhance our ability to identify and control factors that lead to heart disease including the identification of genes relating to hypertension.
8. Broaden our ability to diagnose, treat and prevent cancer, and proceed with the development of predictive cancer profiling.
9. Demonstrate an improved understanding of the function of the brain and improve the ability to assess the effectiveness of investigational therapies.
10. Foster translational research and develop a program to facilitate the migration of research findings into clinical practice.
11. Further our understanding of evaluative clinical research including assessment of patient care outcomes.
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.”
Throughout the first Five-Year Plan, significant accomplishments focused on establishing the necessary processes to ensure program effectiveness and track progress toward achieving the vision, principles of stewardship, partnerships and program priorities to support research, education and public and community health priorities.

1. 2003-2004 - Year One
   • Drafted the AHW Five-Year Plan 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.
   • Approved and began implementation of final AHW Five-Year Plan, including the Addendum, in February 2004.

2. 2004-2005 - Year Two
   • Developed a request for proposal process to actively organize and fund projects with community-based and MCW academic partners, including training sessions and community meetings to foster and develop partnerships.
   • Developed a detailed, multi-level, proposal review process for the Healthier Wisconsin Partnership Program (HWPP) to include a national merit review panel.
   • Developed new community health partnerships in alignment with Healthiest Wisconsin 2010 (the state health plan).
   • Developed and funded specific education and research initiatives to support health improvement.
   • Supported community interdisciplinary research and education priorities of the first Five-Year Plan through investments in equipment and biotechnology to establish core labs at MCW.
   • Awarded $3.9M to 23 community-MCW academic partnership projects.
   • Awarded $3.7M for research and $.9M for education initiatives.

3. 2005-2006 - Year Three
   • Funded community-based partnerships, education and research initiatives designed to maximize impact on the health of the public.
   • Collected and reviewed evaluative data related to community-based partnerships as well as education and research initiatives.
   • Enhanced and strengthened existing community health partnerships, and increased their focus on Healthiest Wisconsin 2010.
   • Established a request for proposal process for research and education with explicit timeframes and award processes for directed and competitive initiatives based on MCW Consortium input and assessment.
   • Awarded $6M to 25 community-MCW academic partnership projects.
   • Awarded $5.1M for research and $1.4M for education initiatives.

4. 2006-2007 - Year Four
   • Began development of an evaluation framework for community-MCW academic partnership projects and research and education initiatives.
   • Continued to develop and support community-MCW academic partnerships and education and research initiatives while beginning evaluation and outcome assessment.
   • Established administrative office for research and education and enhanced website to increase communication for research and education.
   • Made significant investments in key research and education initiatives promoting training and education through inter-institutional collaborations (e.g. Healthier Wisconsin Leadership Institute).
   • Made significant investments in key research and education priorities including: population health, clinical and translational research, MPH and PhD programs.
   • Awarded $7.1M to 29 community-MCW academic partnership projects.
   • Awarded $9.1M for research and $5.4M for education initiatives.
5. 2007-2008 - Year Five

- Explored, identified and began a public and community health special initiative for violence prevention. Awarded $1.1M for two projects.
- Began development of AHW 2009-2014 Five-Year Plan. Incorporated feedback from multiple stakeholders throughout Wisconsin.
- Enhanced AHW and HWPP portions of MCW website to better meet the needs of our partners.

- Fostered translational research and developed a program to facilitate the migration of research finding into clinical practice.
- Continued development of evaluation framework and program evaluation model for HWPP to be implemented in conjunction with the AHW 2009-2014 Five-Year Plan.
- Awarded $6.4M to 24 community-MCW academic partnership projects.
- Awarded $17.7M for research and $1.6M for education initiatives.

AHW 2009–2014 FIVE-YEAR PLAN

The Advancing a Healthier Wisconsin (AHW) Five-Year Plan provides a framework with three complementary components for use of the AHW endowment funds:

- Public and Community Health Partnerships including the Healthier Wisconsin Partnership Program and the MCW Consortium Initiative on Violence Prevention;
- Educational Leadership for the Health of the Public; and,
- Research for A Healthier Tomorrow.

This broad framework is designed to recognize the critical role each of the three components serves in striving for the vision of improving health for the people of Wisconsin.

The Medical College of Wisconsin (MCW) Consortium began development of the AHW 2009-2014 five-year planning process in May 2007. Throughout the planning process, and in accordance with the Insurance Commissioner’s Order, MCW engaged in several methods of soliciting public input. The purpose of the public input process was to invite broad-based input to assist the MCW Consortium in developing the overall plan.

Additionally, MCW and the University of Wisconsin School of Medicine and Public Health worked together and coordinated efforts in plan development.

The public input process included:
- an online public comment questionnaire to the HWPP community and MCW mailing lists directly and through various public and community health organizations throughout Wisconsin;
- two community forums, one each in Milwaukee and Stevens Point. These forums were open to the public and were advertised in various newspapers throughout Wisconsin;
- five focus groups including funded and unfunded HWPP community and MCW academic partners. Two focus groups facilitated by an outside consultant were held with key public and community health officials from throughout Wisconsin, and four focus groups, facilitated by Cheryl Maurana, PhD, Senior Associate Dean for Public and Community Health, were held with MCW faculty representing the basic and clinical sciences, the MCW Council on Public and Community Health and medical and graduate education; and,
- a letter co-signed by MCW President Bolger and MCW Consortium Board Chair Brandenburg to solicit written feedback from key public officials.

In addition, individuals were encouraged to provide comments via a toll-free phone number, email or mail. A draft of the plan was then posted on the AHW website, providing an additional opportunity for the public to provide feedback. Public input was woven into the discussion as the strategic plan was developed.
The MCW Consortium formed in 2002 as 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 Insurance Commissioner’s Order. The MCW Consortium meets on a monthly basis and conducts itself in accordance with its bylaws and Wisconsin Open Meetings and Public Records Laws.

TERRY BRANDENBURG, MPA, MBA
Chair
Health Commissioner
City of West Allis
Mr. Brandenburg is a statewide leader in public health. For the past 20 years, he has directed and managed all public health programs for the city of West Allis and the village of West Milwaukee, communities with a total population of approximately 65,000.

PEGGY HINTZMAN, MBA
Vice Chair
Former Deputy Director
Wisconsin State Laboratory of Hygiene
Ms. Hintzman is past president of the Wisconsin Public Health Association and represents statewide health interests. With more than 20 years experience in public health, she is a statewide advocate for Wisconsin’s public health needs.

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 MCW’s academic programs and outreach efforts in the community.

DOUGLAS R. CAMPBELL, MHA
Senior Vice President and Chief Operating Officer
Medical College of Wisconsin
Mr. Campbell has been providing fiscal oversight and management at MCW for 16 years.

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.

RANDALL S. LAMBRECHT, PhD
Vice President for Research and Academic Relations
Aurora Health Care, Inc.
Dr. Lambrecht has been an advocate for Wisconsin’s senior citizens, helping launch UW-Milwaukee’s Age and Community Initiative, and working with Milwaukee County Dept. of Aging to establish five community-based older adult fitness centers which take a comprehensive approach to the health and quality of life of seniors.

PAULA A. LUCEY, RN, MSN
President
Lamplighter Consulting
Ms. Lucey is one of Wisconsin’s leading advocates for urban health including minority communities and the special health care needs of the poor. Ms. Lucey provides strategic guidance for community development initiatives and was a 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.

JONATHAN RAVDIN, MD*
Dean and Executive Vice President
Medical College of Wisconsin
Dr. Ravdin is an internationally recognized expert in infectious diseases and has a long record of successful leadership in academic advancement. Dr. Ravdin oversees all academic, research, patient care and public and community health programs for MCW, Wisconsin’s only private medical school.

Staff
Healthier Wisconsin Partnership Program
Erin Frederick
Director
Christina Ellis
Program Coordinator
Jean Moreland
Administrative Coordinator
Lisa Olson
Program Coordinator
Kerry Solum
Program Coordinator
Office of the Senior Associate Dean for Public and Community Health
Alicia Witten
Assistant Director
Sarah DiPadova, MPS
Program Coordinator
Pam Kohal, MPH
Program Coordinator
Donna Martin
Program Coordinator

*In May 2008, Dr. Ravdin replaced Dean Michael Dunn on the Consortium upon Dean Dunn’s retirement.
Healthier Wisconsin Partnership Program

PRINCIPLES OF STEWARDSHIP

The vision of the Healthier Wisconsin Partnership Program (HWPP) is to improve the health of the people of Wisconsin by funding community-MCW academic partnership projects that address public and community health promotion and disease prevention initiatives through two types of awards:

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.

HWPP operates with a set of core Principles of Stewardship:

Collaboration: Supporting effective collaboration between community partners and MCW partners to capitalize on the strengths of each. Projects should build upon Healthiest Wisconsin 2010 and coordinate with other efforts in the community.

Prioritization: Aiming to have maximum impact on the health of the people of Wisconsin by deliberately focusing on the greatest state and local needs.

Leverage: Seeking opportunities to leverage funding, with an emphasis on pooling existing resources, attracting additional resources and encouraging sustainability.

Accountability: Measuring and accounting for outcomes through effective oversight and rigorous evaluation by including comprehensive involvement of affected communities.

Transformation: Effecting systemic change by emphasizing prevention, innovation and capacity-building.
FUNDING PRIORITIES

Funding from HWPP is a competitive, unique and transformative opportunity for community organizations and MCW academicians to leverage resources, share information and capitalize on expertise as they work in partnership to address Wisconsin’s greatest health needs. Successful applicants embrace interrelated approaches to health improvement and community-MCW academic partnerships through the following two models:

**Health Improvement Model**

- Address major areas of health risks
- Focus on specific population
- 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
- Partnership development
Healthier Wisconsin Partnership Program

FUNDING CYCLE PROCESS

HWPP commenced its 4th Funding Cycle in September 2007. Key dates and events from this funding cycle include:

- On September 1, 2007, HWPP issued the Request for Proposal (RFP) for community-MCW academic partnership projects.
- To assist applicants, HWPP offered a proposal writing workshop and five statewide pre-application sessions that were conducted between August 23 and September 13, 2007.
- The initial phase of the RFP included the submission of an electronic Notice of Intent (October 1, 2007) representing 44 Development and 51 Impact projects for a total of 95 submissions.
- After a technical review of these 95, 38 Development and 48 Impact proposals were submitted November 20 and advanced to the National Merit Reviewers.
- After careful consideration, the MCW Consortium recommended 11 Development and 13 Impact projects to the MCW Board of Trustees for approval.
- The MCW Board of Trustees approved funding recommendations March 28, 2008.

Training and Technical Assistance

HWPP provided technical assistance that included providing information and training on the proposal process and partnership development steps, including:

- An updated academic partner directory, listing MCW faculty and staff with interest in forming partnerships with community organizations. A community partner directory also is available online.

- HWPP conducted a Partnership Proposal Writing Workshop to provide proposal writing and partnership formation assistance for community-MCW academic partnership projects. This workshop featured Dr. Lynn Miner, the founder of a nationally-recognized firm, Miner and Associates, who has trained over 10,000 successful grant seekers and fundraisers, helped nonprofit organizations raise multi-millions and reviews proposals for government, local and national foundations. Dr. Miner concentrated on the practical elements of planning and writing proposals specifically tailored to the HWPP requirements, key components and provided examples of persuasive writing. The session also included a speaker’s panel, which provided the nearly 100 participants a unique perspective from experts in their field engaged in health improvement through partnerships.

- HWPP staff offered five statewide pre-application sessions that were conducted in early September 2007. The sessions provided background information on HWPP, detailed information contained in the RFP and tips for building successful community-academic
partnerships. The sessions were free and attendance was not required for proposal submission. A total of 97 people attended the sessions.

- Between September 1 and the Notice of Intent deadline of October 1, 2007, 25 individuals contacted HWPP requesting partnership facilitation assistance. Of those, 11 resulted in submissions.

- HWPP responded to more than 100 calls and emails requesting additional technical assistance to improve proposal applications, access RFP materials, design effective project budgets and provide education about HWPP priorities and review processes.

- Quarterly electronic newsletters were disseminated to more than 2,000 community and MCW stakeholders providing additional resources and assistance.

**Competitive, Multi-Step Review Process**

**Technical Review**

A technical review process provided an initial evaluation of proposal submissions to determine eligibility requirements were met and all sections were completed according to the RFP guidelines. Submissions that successfully passed the technical review proceeded to the merit review process.

**Merit Review**

**National Merit Review**

Community-Campus Partnerships for Health (CCPH), a non-profit organization that promotes health through partnerships between communities and higher educational institutions, conducted the National Merit Review for HWPP. Following a national recruitment process conducted by CCPH, 19 community and academic reviewers were engaged to serve on the review panel. Reviewers reside outside Wisconsin with expertise in public and community health, community-academic partnerships and proposal review. During January and February 2008, each proposal was independently reviewed and scored by two community and two academic reviewers. Impact proposals that received outstanding rankings following this independent review were discussed and ranked by all reviewers at an in-person meeting held in Milwaukee January 31-February 1, 2008.

**MCW Consortium Review**

On March 24 and 26, 2008, the MCW Consortium reviewed and discussed those proposals prioritized by the National Merit Review Panel, taking into account scores and comments as well as results of a thorough budget analysis by the MCW Controller’s Office. The MCW Consortium also considered all other proposals and determined a final slate to advance to the MCW Board of Trustees based on the following general criteria:

- Qualitative comment and quantitative assessment by national merit reviewers.
- Demonstrated alignment with Wisconsin health priorities as defined by the State of Wisconsin health plan.
- Articulated commitment to Principles of Stewardship, the Health Improvement Model and the Community-Academic Partnership Model.

**Award Announcement**

On March 28, 2008, the MCW Board of Trustees approved the proposals recommended for funding by the MCW Consortium.

All applicants were notified of the funding determinations, received verbatim reviewer comments, their final score and the minimum/maximum score of all proposals.
### 4TH FUNDING CYCLE AWARDS

**Summary of Proposal Applications**

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<th>4th Funding Cycle Response</th>
<th>Impact</th>
<th>Development</th>
<th>TOTAL</th>
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<tr>
<td>$ Amount requested (approx.)</td>
<td>$21,251,628</td>
<td>$1,875,687</td>
<td>$23M</td>
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<tr>
<td># Proposal submissions</td>
<td>48</td>
<td>38</td>
<td>86</td>
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<tr>
<td># MCW academic partners*</td>
<td>72</td>
<td>47</td>
<td>101</td>
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<tr>
<td># Community organization partners*</td>
<td>145</td>
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<table>
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<tr>
<th>General Funding Summary</th>
<th>Impact</th>
<th>Development</th>
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<td>$ Amount funded</td>
<td>$5,829,096</td>
<td>$539,128</td>
<td>$6.4M</td>
</tr>
<tr>
<td># Funded proposals</td>
<td>13</td>
<td>11</td>
<td>24</td>
</tr>
<tr>
<td># MCW academic partners*</td>
<td>24</td>
<td>18</td>
<td>36</td>
</tr>
<tr>
<td># Community organization partners*</td>
<td>68</td>
<td>27</td>
<td>91</td>
</tr>
</tbody>
</table>

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

### Geographic Emphasis

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<table>
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<tbody>
<tr>
<td>Urban</td>
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<tr>
<td>Rural</td>
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<tr>
<td>Statewide</td>
<td>5</td>
</tr>
<tr>
<td>TOTAL</td>
<td>24</td>
</tr>
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</table>
The following 13 projects were awarded funding in March 2008 for implementation of three-year health promotion projects in Wisconsin.

**Elder Community Health Upholders**
$441,187 • 07/01/08 to 06/30/11

This partnership of nine Milwaukee churches and five health organizations will uphold the health of our most vulnerable, medically underserved communities through culturally aligned elder-health ministries and new health advocacy and leadership practices.

**American Cancer Society**  
Shauna Williams

**American Heart Association**  
Gail Morgan

**Arthritis Foundation Wisconsin Chapter**  
Lori Obluck

**Christ Presbyterian Church**  
Rev. Michael Miller, Sr.

**Incarnation Lutheran Church**  
Rev. Dennis Jacobsen

**Metropolitan Missionary Baptist Church**  
Rev. Willie D. Wanzo

**Monumental Missionary Baptist Church**  
Rev. Roy C. Watson

**Mount Zion Missionary Baptist Church**  
Rev. Louis E. Sibley, III

**Pilgrim Rest Baptist Church**  
Rev. Martin Childs

**St. Martin de Porres Catholic Church**  
Father John Celichowski  
Father David Pruess

**Tabernacle Community Baptist Church**  
Rev. Robert L. Harris

**Victory Missionary Baptist Church**  
Rev. Edward Thomas

**Wheaton Franciscan Health Care**  
Julie L. Ellis, PhD, RN

**MCW Department of Family and Community Medicine**  
Jeff A. Morzinski, PhD  
Karen Krause-Fromm  
Alan L. Wells, PhD, MPH

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**Emergency Department (ED) to Primary Care Medical Home Referral and Retention Project**
$450,000 • 07/01/08 to 06/30/11

Milwaukee Health Care Partnership (MHCP) plans to implement and evaluate the Emergency Department (ED) to Medical Home Referral and Retention Project for the dual purposes of ED diversion and linking low-income patients to primary care medical homes in Federally-Qualified Health Centers.

**Health Care for the Homeless of Milwaukee, Inc.**  
N. Lee Carroll

**Milwaukee Health Care Partnership**  
Joy R. Tapper

**Milwaukee Health Services, Inc.**  
C. C. Henderson

**Westside Healthcare Association, Inc.**  
Jenni Sevenich

**MCW Department of Family and Community Medicine**  
Eric Gass, PhD  
Marie Wolff, PhD
Healthier Wisconsin Partnership Program

Healthy Youth: Strong and Connected
$449,203 • 07/01/08 to 06/30/11

The objective is to decrease violent, intentional injuries and improve mental health by providing the Staying Alive violence prevention curriculum to 4,500 6th grade children in Milwaukee Public Schools via firefighters, community workers and teachers.

Center for Urban Population Health
Barbra Beck, PhD

Children’s Service Society of Wisconsin: Project Ujima
Toni Rivera

Milwaukee Fire Department
Michael L. Jones

Milwaukee Public Schools
Kristi Cole

MCW Department of Pediatrics
Marlene Melzer-Lange, MD
Dawn M. Zahrt, PhD

Integrating and Mapping Community Health Assessment Information
$450,000 • 07/01/08 to 06/30/11

This project plans to develop an automated web-based Geographic Information Systems (GIS) infrastructure for public health staff, researchers and students that can provide convenient mapped population health information from a variety of data sources to support community health improvement planning.

Wisconsin Division of Public Health
Jim Grant

MCW Department of Pediatrics
Emmanuel Ngui, DrPH, MSc

MCW Department of Population Health
Peter M. Layde, MD, MSc
Emily McGinley, MPH, MS

Johnson Park Health Alliance: Building a Culture of Community Sufficiency for Health in the Fond du Lac and North Avenue Neighborhoods
$450,000 • 07/01/08 to 06/30/11

This project aims to reduce socioeconomic and health disparities in an urban, African-American, Milwaukee neighborhood by strengthening a community-based health coalition and implementing programs to promote healthy life skills and community self-sufficiency.

Fondy Food Center, Inc.
Young Kim

Johnson Park Neighborhood Association
Tony Gibson

Seedfolks Youth Ministry
Venice Williams

Walnut Way Conservation Corporation
Sharon Adams, MSW

MCW Department of Family and Community Medicine
Linda Meurer, MD, MPH
Syed M. Ahmed, MD, MPH, DrPH
Melanie S. Hinojosa, PhD
Melissa Holmquist, MS

Kenosha County Suicide Prevention Initiative
$450,000 • 07/01/08 to 06/30/11

The purpose of this project is to prevent suicide and non-fatal suicide attempts in Kenosha County by increasing access to mental health care, increasing awareness and education and reducing access to lethal means.

Kenosha County Division of Health
Frank Matteo

Mental Health America of Wisconsin
Shel Gross

MCW Department of Emergency Medicine
Stephen Hargarten, MD, MPH
Ann Christiansen, MPH
Amy Schlotthauer, MPH
Making Milwaukee Smile
$446,519 • 07/01/08 to 06/30/11

This project will implement a major recommendation of the oral health action plan, Healthy Teeth = Healthy Kids, to provide primary, secondary and tertiary level care by a consortium of organizations utilizing a school-based oral health care model.

Children's Health Alliance of Wisconsin
Karen Ordinans

Columbia St. Mary's
Bill Solberg, MSW, LCSW

Milwaukee Public Schools
William G. Andrekopoulos

Milwaukee Health Services, Inc.
Nicole Martin, DDS

Children's Hospital of Wisconsin
A. Charles Post, DDS

Marquette University School of Dentistry
Christopher Okunseri, BDS, MSc

Southeast Dental Associates
Deanna Janssen, RDH

MCW Department of Pediatrics
Earnestine Willis, MD, MPH
Tiffany Frazer, MPH

Nurturing Healthy Youth Leaders through Faith-Based Partnerships
$450,000 • 07/01/08 to 06/30/11

This project will expand a successful faith-based partnership to increase leadership capacity and address health needs of Milwaukee youth through mentoring programs with lay health advisors.

Christ Tabernacle Ministries
Darrell Kinlow

Christ Temple Church of God in Christ
Travis Evans

City of Milwaukee
Bevan Baker, FACHE

Cross Lutheran Church
Ken Wheeler

Ebenezer Church of God in Christ
Jonathan Saffold

Greater Bethlehem Temple Church
Samuel D. Rogers

Holy Cathedral Church of God in Christ, Word of Hope Ministries
C.H. McClelland

Holy Temple First Born Missionary Baptist Church
Lezar Burnside

Liberty & Truth Ministries
Darryl Seay

Mason Temple Church of God in Christ
O. Tatum

New Covenant Missionary Baptist Church
Fred Crouther

New Hope Missionary Baptist Church
Archie L. Ivy

Parklawn Assembly of God
Walter Harvey

MCW Department of Family and Community Medicine
Staci Young, PhD
Syed M. Ahmed, MD, MPH, DrPH
Melissa Holmquist, MS
**Healthier Wisconsin Partnership Program**

**Partnership for Chronic Disease Prevention and Management in Western Wisconsin**
$449,730 • 07/01/08 to 06/30/11

This project seeks to impact morbidity and mortality from chronic disease through increased disease prevention and health promotion activities for the mostly rural underserved population in four western Wisconsin counties.

**La Crosse County Health Department**
Laura Gambino, RN, BSN

**Monroe County Health Department**
Sharon Nelson, RN, BSN

**St. Clare Health Mission**
Sandra A. Brekke, RN, BSN

**Trempealeau County Health Department**
Christine Berth, RN, BSN

**Viterbo University**
Stephanie Genz, Ed D, RN
Donna Ferry, RN, BSN

**MCW Department of Family and Community Medicine**
Marie Wolff, PhD

**Riverwest Health Initiative (RHI)**
$448,961 • 07/01/08 to 06/30/11

Riverwest Health Initiative will continue its community health improvement process by implementing and evaluating interventions that target health priorities identified in Riverwest’s strategic health plan and continue building community health capacity.

**COA Youth & Family Centers**
Thomas P. Schneider

**Columbia St. Mary’s**
Bill Solberg, MSW, LCSW

**University of Wisconsin-Milwaukee**
Mary Jo Baisch, PhD, RN

**MCW Department of Family and Community Medicine**
James Sanders, MD, MPH

**Salud de la Mujer: Community Developed Materials to Increase Health Literacy in a Latino Community**
$449,971 • 07/01/08 to 06/30/11

The primary goal of this project is to increase the health literacy and knowledge of health resources for women and families in a predominantly Latino community.

**United Community Center**
Rene Farias
Angelica Delgado-Rendon, MS
Magdalisse Gonzalez

**MCW Department of Family and Community Medicine**
Melanie S. Hinojosa, PhD
Syed M. Ahmed, MD, MPH, DrPH
Melissa Holmquist, MS
Linda Meurer, MD, MPH

**Transforming the Continuum of Behavioral Health Crisis Care: The Milwaukee Crisis Resource Center**
$450,000 • 09/01/08 to 08/31/11

The Crisis Resource Center (CRC) will improve the care of people experiencing psychiatric crises by providing recovery-driven crisis prevention and intervention services, which will empower individuals to achieve and maintain mental health stability.

**American Red Cross in Southeast Wisconsin**
Jeanna Lowry

**Aurora Behavioral Health Services**
Joy Mead-Meucci

**Justice 2000, Inc.**
Marilyn Walczak

**Milwaukee County Behavioral Health**
Jim Kubicek, LCSW
Using Social Network Testing (SNT) to Increase HIV Testing in Vulnerable Populations in Wisconsin
$443,525 • 07/01/08 to 06/30/11

New approaches are needed to identify HIV-positive individuals who have not been previously tested. This project plans to expand an existing Social Network Testing (SNT) pilot program to improve diagnosis of HIV in vulnerable populations.

AIDS Resource Center of Wisconsin
Scott Stokes

MCW Department of Medicine
John J.W. Fangman, MD

The following 11 projects were awarded funding in March 2008 for implementation of one-year health promotion projects in Wisconsin.

A School-Based Intervention to Increase African-Americans and Latinos in Health Professions
$50,000 • 10/01/08 to 09/30/09

Little is known regarding effective interventions for increasing the numbers of Latino and African-American (AA) health professionals. We hypothesize that AA and Latino middle school students’ interest in health professions will increase following a school-based intervention.

Milwaukee Public Schools
M. Kathleen Murphy, RN, MSN

MCW Department of Pediatrics
John R. Meurer, MD, MBA
Tarik D. Walker, MD, MPH

MCW Department of Surgery
Laura Cassidy, PhD

Building Capacity for Promoting Population-based Prevention Strategies in Wisconsin
$50,000 • 07/01/08 to 06/30/09

The goal of this project is to build capacity within Wisconsin’s independent public health institute so that it can best carry out its mission of inspiring Wisconsin’s business and policy leaders to adopt effective population-based prevention strategies.

Institute for Wisconsin’s Health, Inc.
Nancy Young

MCW Department of Pediatrics
Timothy E. Corden, MD
Healthier Wisconsin Partnership Program

Caring for Those Who Share: Improving the Health of Wisconsin Blood Donors
$49,959 • 07/01/08 to 06/30/09

This project aims to identify and prevent treatable disease in prospective Wisconsin blood donors, who are not allowed to donate because of anemia, through the use of an interventional tool and increased awareness about the need for further evaluation.

National Anemia Action Council, Inc.
Susan Geiger

Blood Center of Wisconsin
Alan E. Mast, MD, PhD

MCW Department of Family and Community Medicine
Kenneth Schellhase, MD, MPH
Anne Marbella, MS
Staci Young, PhD

Circles of Sisters: Enhancing Family Development with Doula Care for Beloit Teen Mothers and their Children
$49,501 • 07/01/08 to 06/30/09

This project will develop community partnerships and conduct a needs assessment to explore the feasibility of implementing a doula program for teen mothers in Beloit in order to address health disparities and increase maternal and child health.

Beloit College
Suzanne Cox, PhD
Shirley Williams

Family Services of Southern Wisconsin and Northern Illinois, Inc.
John Pfleiderer, MA

Community Health Systems, Inc.
Mollie Gill, LSW
Richard Perry, MA
Sharon Rand

Community Action, Inc. of Rock and Walworth Counties and Related Entity
DeAnna Griffin, BS
Tammie I. King, BA
Jennifer Tropp, MSW

MCW Department of Pediatrics
Emmanuel Ngui, DrPH, MSc
Chelsea Hoffman, BS

Fostering Hope
$50,000 • 07/01/08 to 06/30/09

The project aims to improve the foster care model by developing teams from faith communities that assist quality foster parents in their vocation, thus decreasing their attrition rate and consequently enhancing the well-being of youth in foster care.

Bureau of Milwaukee Child Welfare
Denise Revels Robinson

Children’s Service Society of Wisconsin
Kenneth Munson

Colarelli Family Foundation
Nick J. Colarelli, PhD

Fostering Hope Foundation
Angela Colarelli Carron, MD

MCW Department of Pediatrics
Lynn Sheets, MD
School Nursing: The Tipping Point for Health for Vulnerable Families  
$50,000 • 07/01/08 to 06/30/09  

School nurses are pivotal to helping students and families address health concerns and establish lifelong healthy behaviors. This project builds a diverse and knowledgeable school nurse work force, concentrating on the needs in Milwaukee Public Schools.

Milwaukee Public Schools  
M. Kathleen Murphy, MSN, RN

University of Wisconsin-Milwaukee  
Sally P. Lundeen, PhD, RN, FAAN

MCW Department of Family and Community Medicine  
Syed M. Ahmed, MD, MPH, DrPH  
Staci Young, PhD

The Medically Fragile Foster Child - Improving Health Status Through Education and Community Linkages  
$50,000 • 07/01/08 to 06/30/09  

This project will identify gaps in knowledge, communication and system navigation among medical providers, families and child welfare workers serving medically fragile foster children, toward creation of a curriculum to improve skills and cross system collaboration.

Bureau of Milwaukee Child Welfare  
Michelle Urban, MD

University of Wisconsin-Milwaukee  
Julie R. Brown, MA  
Gwat-Yong Lie, PhD

MCW Department of Physical Medicine and Rehabilitation  
Elizabeth Moberg-Wolff, MD

MCW Department of Pediatrics  
Lisa W. Zetley, MD

MCW Department of Academic Affairs, Student Affairs and Diversity  
Dawn Bragg, PhD

The Great Lakes Environmental Health Project  
$39,760 • 07/01/08 to 06/30/09  

This project will empower families on the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program to reduce exposure to environmental health risks through health assessment and educational initiatives that will ultimately reduce health disparities in children.

University of Wisconsin-Milwaukee  
Laura Anderko, PhD, RN

MCW Department of Pediatrics  
Earnestine Willis, MD, MPH

The Wisconsin Community Health Worker (CHW) Network  
$49,912 • 07/01/08 to 06/30/09  

This project will establish the Wisconsin Community Health Worker (CHW) Network to cultivate training and networking opportunities for CHWs and their supporters throughout Wisconsin.

Northern Wisconsin Area Health Education Center  
Martin Schaller  
Suzanne Matthew

Wisconsin Area Health Education Center Program Office  
Kirstin Siemering

MCW Department of Pediatrics  
Earnestine Willis, MD, MPH
Well City Milwaukee: Creating a Workable Plan to Evaluate a City-Wide Worksite Wellness Initiative
$49,996 • 07/01/08 to 06/30/09

Well City Milwaukee will assist employers to deliver results-oriented wellness programs as a strategy to enhance the health and well-being of their workforce, manage health care expenditures and raise awareness of the importance of healthy lifestyles.

City of Milwaukee Health Department
Vivian Chen, MSW, ScD

Greater Milwaukee Committee
Richard Greene

Metropolitan Milwaukee Association of Commerce
Mary Steinbrecher

Wellness Council of Wisconsin
Theresa Islo

YMCA of Metropolitan Milwaukee
Janet A. McMahon, MPH

MCW Department of Population Health
Jane Morley Kotchen, MD, MPH

Wisconsin Well Water: Planning Web-based Resources to Promote Safe Drinking Water for Wisconsin Residents
$50,000 • 07/01/08 to 06/30/09

This project aims to increase the capacity for systematically delivering information to support household water management decisions among Wisconsin residents that are responsible for their drinking water safety with a goal of reducing water-related illness.

Center for Watershed Science and Education
Kevin Masarik

University of Wisconsin-Madison, Department of Life Sciences and Communication
Bret Shaw

University of Wisconsin-Madison, School of Nursing
Dolores J. Severtson

MCW Department of Family and Community Medicine
Syed M. Ahmed, MD, MPH, DrPH
Melissa Holmquist, MS

CUMULATIVE AWARDS 2004-2008

HWPP has awarded $23.4M in four funding cycles to 101 community-academic partnerships. Each funded partnership consists of at least one community partner and one MCW academic partner and exemplifies HWPP’s vision to improve the health of the people of Wisconsin.

All HWPP funded projects propose transformational ways to improve the health of Wisconsin’s citizens, focusing on health promotion and disease prevention while also recognizing the significant role of building capacity and strengthening systems in an effort to reach those goals. The table on the following page represents the distribution of all HWPP funded projects along the four interrelated areas of the Health Improvement Model as well their geographic emphasis:

Information regarding project accomplishments can be found on the AHW website at www.mcw.edu/healthierwisconsin.
## Project Distribution

### Address Major Areas of Health Risks*

<table>
<thead>
<tr>
<th>Area</th>
<th>Total #</th>
<th>% Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to primary and preventative health services</td>
<td>58</td>
<td>57%</td>
</tr>
<tr>
<td>Social and economic factors that influence health</td>
<td>54</td>
<td>53%</td>
</tr>
<tr>
<td>Intentional and unintentional injuries</td>
<td>35</td>
<td>34%</td>
</tr>
<tr>
<td>Nutrition</td>
<td>33</td>
<td>32%</td>
</tr>
<tr>
<td>Overweight, obesity and lack of physical activity</td>
<td>29</td>
<td>28%</td>
</tr>
<tr>
<td>Mental health and mental disorders</td>
<td>26</td>
<td>25%</td>
</tr>
<tr>
<td>Environmental and occupational health hazards</td>
<td>15</td>
<td>15%</td>
</tr>
<tr>
<td>High risk sexual behavior</td>
<td>15</td>
<td>15%</td>
</tr>
<tr>
<td>Other</td>
<td>15</td>
<td>15%</td>
</tr>
<tr>
<td>Communicable disease</td>
<td>14</td>
<td>14%</td>
</tr>
<tr>
<td>Substance abuse and addiction</td>
<td>14</td>
<td>14%</td>
</tr>
<tr>
<td>Tobacco use and exposure</td>
<td>13</td>
<td>13%</td>
</tr>
</tbody>
</table>

### Focus on Specific Populations*

<table>
<thead>
<tr>
<th>Population</th>
<th>Total #</th>
<th>% Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>64</td>
<td>63%</td>
</tr>
<tr>
<td>Racial and ethnic populations</td>
<td>61</td>
<td>60%</td>
</tr>
<tr>
<td>Children and adolescents</td>
<td>44</td>
<td>43%</td>
</tr>
<tr>
<td>Women</td>
<td>33</td>
<td>32%</td>
</tr>
<tr>
<td>Uninsured</td>
<td>27</td>
<td>26%</td>
</tr>
<tr>
<td>Other</td>
<td>25</td>
<td>25%</td>
</tr>
<tr>
<td>Seniors</td>
<td>21</td>
<td>21%</td>
</tr>
<tr>
<td>Rural</td>
<td>20</td>
<td>20%</td>
</tr>
<tr>
<td>Men</td>
<td>19</td>
<td>19%</td>
</tr>
<tr>
<td>Disabled</td>
<td>14</td>
<td>14%</td>
</tr>
</tbody>
</table>

### Prevention of Causes of Death and Disability*

<table>
<thead>
<tr>
<th>Cause</th>
<th>Total #</th>
<th>% Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>58</td>
<td>57%</td>
</tr>
<tr>
<td>Intentional and unintentional injuries</td>
<td>33</td>
<td>32%</td>
</tr>
<tr>
<td>Heart</td>
<td>30</td>
<td>29%</td>
</tr>
<tr>
<td>Stroke</td>
<td>22</td>
<td>22%</td>
</tr>
<tr>
<td>Cancer</td>
<td>19</td>
<td>19%</td>
</tr>
<tr>
<td>Chronic obstructive pulmonary disease</td>
<td>12</td>
<td>12%</td>
</tr>
</tbody>
</table>

### Transform Health Improvement Efforts Through Capacity-Building and Systemic Programs*

<table>
<thead>
<tr>
<th>Effort</th>
<th>Total #</th>
<th>% Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community health improvement processes</td>
<td>79</td>
<td>77%</td>
</tr>
<tr>
<td>Organizational, sector or system capacity building</td>
<td>61</td>
<td>60%</td>
</tr>
<tr>
<td>Public and community health leadership and policy</td>
<td>38</td>
<td>37%</td>
</tr>
<tr>
<td>Sufficient and competent workforce</td>
<td>34</td>
<td>33%</td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>8%</td>
</tr>
</tbody>
</table>

### Geographic Emphasis

<table>
<thead>
<tr>
<th>Emphasis</th>
<th>Total #</th>
<th>% Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>72</td>
<td>71%</td>
</tr>
<tr>
<td>Statewide</td>
<td>16</td>
<td>16%</td>
</tr>
<tr>
<td>Rural</td>
<td>14</td>
<td>14%</td>
</tr>
</tbody>
</table>

*N = 101. Applicants are able to select more than one indicator for each focus area, resulting in an overlapping of indicators.
KEY FINDINGS AND ASSESSMENT

HWPP is committed to evaluating the effectiveness of funded projects through each annual funding cycle, as well as the overall program processes and policies that guide its operations. To fulfill this commitment, HWPP institutes a continuous quality improvement method to inform the evaluation of the program process and projects that it supports. The Principles of Stewardship serve as benchmarks and provide the evaluation framework for HWPP funded projects.

![Diagram of continuous quality improvement]

Public participation, comment and opinion continue to be incorporated into each improvement of HWPP and fulfill a significant role in informing overall continual assessment. The following stakeholders provided input:

**Community Stakeholders**
- 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 Stakeholders**
- Faculty and staff
- Faculty leadership
- Departmental chairs, administrators and liaisons
- Funded and unfunded academic applicants
- HWPP staff

**Other Stakeholders**
- MCW Consortium on Public and Community Health
- National Merit Reviewer consultants
- Community-Campus Partnerships for Health
- University of Wisconsin School of Medicine and Public Health

### Process: Key Findings and Assessment

**Stakeholder Input**

Multiple sources of data were used to measure and monitor the processes and the short-term outcomes of HWPP. This information includes program data that reflect the process experience of funded and unfunded applicant agencies and multidisciplinary stakeholders in the operations of HWPP.

**Public Input from AHW 2009-2014 Five-Year Plan Development Process**

The MCW Consortium began development of the 2009-2014 five-year planning process in May 2007. Throughout the planning process, and in accordance with the Insurance Commissioner’s Order, the Medical College of Wisconsin (MCW) engaged in several
methods of soliciting public input. The purpose of the public input process was to invite broad-based input to assist the MCW Consortium in developing the overall plan. The MCW Consortium incorporated the public input into the development of the plan.

A summary of common themes generated from this public input is found below in lieu of results from an Annual Stakeholder Survey, which was not conducted in 2008 due to the Five-Year Planning Process.

**Partnerships**

- Community-MCW academic partnerships are productive and mutually beneficial
- Successful partnerships are based on a shared commitment to the mission
- Mentoring and education are necessary to develop strong academic and community partners
- Finding an academic partner can be a difficult process
- Consider broadening current definition of academic partner

**Pre- and Post-Award Process**

- Application and administrative process is cumbersome
- Use technology to make securing signatures, submitting applications easier
- Notice of Intent process should be a review of preliminary applications for viability, rather than a technical review
- Smaller organizations and those in rural areas lack the resources and experience to write proposals

**Outreach and Communication**

- Community partners need additional support from HWPP staff, both during and after the application process
- Partners want more communication about:
  - successful partnerships
  - best practices and outcomes
  - general AHW program information

**Funding**

- Provide more funds for the community
- Support new award category for smaller grants
- Longer award periods would allow for more in-depth and longer-lasting changes

**Models, Policies and Initiatives**

- Health Improvement Model is comprehensive
- Continue link to State Health Plan
- Maintain broad spectrum of health priorities
- More cooperation between HWPP and Wisconsin Partnership Program

**Violence Prevention Initiative**

- Violence is considered a high priority public health issue
- Initiative was strongly supported as long as violence is clearly defined (including geography) and the initiative keeps a public health perspective

**National Merit Reviewers Survey**

Following the completion of each HWPP review cycle, all national merit reviewers are asked to provide thorough, qualitative feedback on the process utilized and priorities identified by HWPP. This information is gathered by Community-Campus Partnerships for Health and draws on these sources of data:

- Merit review debriefing at the close of the February 2008 review meeting
- Informal comments about the review process shared by reviewers in person and via email
- Anonymous online survey of merit reviewers completed by 17 reviewers (9 community, 8 academic)

**Key Findings**

- Merit Review Process: Overall, the merit review process is working well. One reviewer stated “Overall, [it is] a great process, and really shows the State’s dedication to improving health outcomes for its residents.”
- Quality of Proposals Reviewed: Reviewers suggested continuing to provide Technical Assistance regarding partnership development, evaluation and sustainability would improve the quality of the proposals submitted.
Healthier Wisconsin Partnership Program

Projects: Key Findings and Assessment

HWPP requires funded partners to submit performance reports at six-month intervals throughout the duration of their projects in relation to the Principles of Stewardship. 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. In addition, site visits are conducted to enhance HWPP’s knowledge of funded partnership projects in a manner that cannot be fully realized from written progress reports. Progress from funded projects may be found on the AHW website at www.mcw.edu/healthierwisconsin.

The Principles of Stewardship serve as benchmarks and provide the evaluation framework for HWPP. The following results are a summary of findings from HWPP’s first four funding cycles related to the Principles of Stewardship.

Collaboration: Effective collaboration between MCW faculty and community partners capitalizes on the strengths that each brings to the partnership. To date, 261 community partners and 85 MCW academic partners have collaborated on funded projects. Nearly 100 percent of funded projects have reported successful collaborations resulting from their partnership. HWPP’s funding priorities support Wisconsin’s priorities as detailed in Healthiest Wisconsin 2010, the state health plan. Anecdotal evidence suggests that the process of creating a proposal, even if not funded, has also lead to partners working together. The MCW Consortium collaborates regularly with the University of Wisconsin School of Medicine and Public Health on such matters as the Healthy Wisconsin Leadership Institute (HWLI), evaluation, technical assistance and partnership development.

Prioritization: Geographic distribution of funds across Wisconsin maximizes impact to improve the health of the people of Wisconsin by implementing prioritization processes and projects that address the highest priorities identified by state and local needs assessments. Thirty-seven Wisconsin counties have been directly impacted by HWPP projects, and 16 projects have generated statewide impact. Three-fifths of impact projects and three-fourths of development projects have documented the development of innovative or evidenced-based practices resulting from their funded projects.

Leveraging: HWPP encourages the leveraging of project funds by pooling existing resources and attracting additional dollars to provide sustainability. More than 80 percent of impact projects and nearly 70 percent of development projects report leveraged funds from federal, state or local resources.

Accountability: The MCW Consortium strives to ensure public accountability for the use of the Funds and the impact of the programs on improved health. This includes both oversight responsibility and rigorous evaluation. The Consortium Board communicates with, and welcomes input from, the public. Additionally, nearly 75 percent of impact and development projects have disseminated information to the public via state, national and international conferences and presentations, and have garnered media attention for project and partnership successes.

Transformation: In order to enhance the health of Wisconsin communities, HWPP projects must aim to effect systemic change by emphasizing prevention, innovation, and capacity-building. Nearly half of all funded projects have reported such transformation.

The following information represents highlights from the past year of HWPP funding to 49 active projects based on the same five Principles of Stewardship. Since the Principles of Stewardship are closely related, many of the highlights listed could apply to more than one area within the five principles.

Leverage

- Through project linkages to the MPS Wellness Centers at Community Learning Centers, two AmeriCorps members offered nutrition and healthy lifestyle programming for after-school children at two schools in this Southside Latino community. This helps to further develop obesity prevention programming in the community and has the potential to be sustainable through new AmeriCorps members each year.
- $5,500 was raised from several groups and local residents toward the Hurley City Trail construction.
- The construction of a one-mile, paved, walking and biking path connecting downtown Hurley with Cary Park was started with HWPP funds, with the
Leverage, continued

remaining funds provided by the Plum Creek Foundation and contributions from local groups and residents.

• $10,000 was received from the State Division of Public Health/Cardiovascular Health Program.
• In-kind resources received from La Crosse Health Department senior staff of $9,000 annually for implementation.
• Project received a 12-month, $50,000 planning grant from the Wisconsin Partnership Fund.
• Project received a $47,859 grant from the Project for Public Spaces.
• Project received $5,000 from the Medical Society of Milwaukee County to pilot clinic-based interventions.
• Project secured funding from ProHealth to hold additional training sessions.
• In-kind support from The Task Force on Family Violence.
• Materials were donated by Aurora-Sinai Medical Center.
• Project secured $25,000 from the Greater Milwaukee Foundation’s Shaw Fund.
• Project received $50,000 from the WK Kellogg Foundation.
• Milwaukee Area Health Education Center provided funding for a summer research student.
• Project leveraged resources with the Division of Public Health.
• Received in-kind support from the State of Wisconsin.
• Project worked closely with state officials to coordinate project efforts in Milwaukee, and introduce social network testing across the state.

Collaboration, continued

• Project members developed skill in scoring interviews; they also learned more about the concepts of community and leadership.
• Coalition has attracted new area partners including Neu-Life Community Resource Center, SeedFolks Youth Ministries and Bread of Healing Clinic.
• Project workgroup worked with the MPS Director of Wellness and Prevention and Health Services Manager regarding curriculum recommendations.
• Project has a total membership of 32 partners who represent sexual health networks, community based agencies, youth serving organizations, health care professionals, clinics, schools and government.

Accountability

• A cookbook was published based on a collection of recipes gathered by the Community Health Advocates.
• Project was represented at the International Conference on Urban Health Conference held in Baltimore, Maryland.
• Project shared their resources at a number of local, national and international conferences.
• The study on health care access (Analysis of primary care physician practices in Milwaukee County including GIS coding of these practices) reported in a poster presentation at the UW Population Health Institute’s meeting.
• Community injury profiles were developed and disseminated.
• Poster presented at the American Public Health Association Annual Meeting and Exposition in San Diego.
• Project presented at the UW Population Health Institute’s conference.
• Project completed Burden of Injury report.
• Members of the project team presented the project at a regional nursing staff meeting at Gundersen Lutheran.
• Community Coalition meetings were covered by the La Crosse Tribune.
• Community Coalition spokesperson interviewed on two radio programs regarding the project.
• Project presented at the UW System Annual Women’s Studies Conference in Green Bay.
• Developed Resource Lists of the Wisconsin Women’s Health Alliance in Spanish and English.

Collaboration

• Advocates invited officials from the Housing Authority of the City of Milwaukee to a meeting/presentation highlighting the accomplishments of the advocate program, aimed toward eliciting continuing support of the advocate program from Housing officials.
• In addition to collaboration among seven churches of various denominations and networking with other health and social service agencies in Milwaukee, the project has been approached by organizations that were interested in serving the community and setting up CPR and blood pressure training.
• Collaboration with the Milwaukee Brewers and the Milwaukee Wave has been established for the educational component of the intervention.
Accountability, continued

- Project was presented to the Research Committee at the Herma Heart Center.
- Project presented at the 4th Street Forum in Milwaukee.
- Poster presentation at the Spring Society for Teachers of Family Medicine conference in Baltimore.
- Project presented poster at the forum for Behavioral Science in Family Medicine Conference in Chicago.
- Project accepted at the North American Primary Care Research Group, San Juan, Puerto Rico.
- Developed a website with project information and available resources.
- Published a project booklet and distributed it to the local community and collaborating partners.
- A project press conference was held featuring Milwaukee Mayor Tom Barrett, and City of Milwaukee Health Commissioner Bevin Baker.
- Project received local written and television press, as well as links to a national website.

Prioritization

- In Ashland County, a student intern developed a child obesity toolkit, which was distributed to local clinics, child care providers and families.
- Training was provided on accessing data through the Wisconsin Interactive Statistics on Health System at the Wisconsin Department of Health Services.
- Town hall meeting held featuring a national speaker, co-hosted by a local high school and other community sponsors as well as local law enforcement.
- Curriculum was aligned with the Wisconsin State standards to make sure guidelines for health, science and physical education were addressed.
- The project revitalization process was highlighted as a best practice by PolicyLink, a national research and action organization and advancing economic and social equity.
- Project established best practices for the Latino diabetic population in Waukesha.
- Project innovations include a Development of Walkability Scan, a Refinement of Fruit and Vegetable Audit Tool and procedures to assess nutrition and fitness assets and barriers in other parts of Milwaukee.
- Project hosted the Next Step Conference, a conference designed to connect professionals dedicated to improving the health of the community.

Prioritization, continued

- Project developed a Model for Quality Home Care.
- Project presented a written report at the Cardinal Stritch College of Nursing Advisory Board.
- Project developed a protocol, based on State standards, to identify, train and monitor program recruiters.

Transformation

- Advocates successfully circulated a petition to demonstrate their opposition to the elimination of bus routes that would adversely affect their building residents.
- Project participants cultivated a relationship with their alderman and have an interest in attending County Board meetings.
- Project is helping to change community norms to one of support for healthy eating and lifestyle practices, and is increasing awareness of the importance of role modeling healthy practices and social support for healthy living among community members.
- In Ashland County, the health department formed a committee with local schools, UW-Extension, clinic staff, pediatricians, school staff, media and other vested partners dedicated to the promotion of healthy policies and lifestyle changes.
- A Program Planning Model was disseminated, and feedback from all counties indicated that it is a valuable tool that counties will continue to use after the grant has ended.
- Growing movement exists among the youth of this community against the misuse of alcohol, which was most recently shown when a group of local high school students used Facebook-posted photos of fellow students drinking illegally to pursue stronger alcohol policies in the school system.
- Project members were formally trained to prepare, maintain and sell produce, proceeds from which were returned to the program to enable sustainability.
- Project identified and addressed the need for a culturally appropriate education program for a primarily Spanish speaking population.
SPECIAL INITIATIVE

In 2006, the MCW Consortium began formal consideration of a special initiative that would address a specific public health priority, and would be MCW Consortium Board-directed for the AHW endowment with the following key characteristics:

- complement, not replace, the annual HWPP funding cycle;
- not be subject to an open RFP process;
- conducted in collaboration with community, MCW and philanthropic community; and,
- aligned with Principles of Stewardship as outlined in the Five-Year Plan.

In fall 2007, the MCW Consortium voted to focus its first special initiative on violence prevention. This initiative would:

- be funded through the 35 percent of the AHW endowment, in addition to the HWPP annual request for proposal process;
- capitalize on community participation and MCW resources;
- prior to implementation, be developed in accordance with a comprehensive planning process involving community partners; and,
- be operationalized as a part of the AHW 2009-2014 Five-Year Plan.

In early 2008, the MCW Consortium approved $1.1M for a 15-month Development Phase of a violence prevention initiative. The initiative has two major goals: 1) to decrease rates of violence in identified areas of Milwaukee and, possibly, greater Wisconsin; and 2) to strengthen community capacity to prevent future violence. The initiative will use both a public health and asset-based model that focuses on community strengths. It is expected that the experiences gained from this project will benefit other Wisconsin communities that share this important public health issue.

Upon completion of the Development Phase, the MCW Consortium will consider a commitment of up to $2M per year through its public and community health component for up to 10 years, pending a progress and re-evaluation at five years and determine how AHW research and education activities might add value to the initiative. It is anticipated that implementation will begin in 2010.
The Medical College of Wisconsin (MCW) awards research and education project funding from the Advancing a Healthier Wisconsin (AHW) endowment to leverage academic expertise and assets to promote discoveries and educational opportunities that will translate into improvements in health status.

FUNDING PRIORITIES, COMMITMENTS AND GUIDELINES

The 2003-2008 AHW Five-Year Plan under which this document is guided, establishes the following funding priorities:

**Research for a Healthier Tomorrow**

Funding is used to support both basic and clinical research initiatives in several key areas including: cardiovascular disease, cancer, neuroscience, genetics and population health. Funds are also used to support imaging, biotechnology and bioinformatics projects that emphasize and support these five research priorities. The translation of biomedical research findings from the laboratory to the bedside is also critical to improving the health of the residents of Wisconsin. Strengthening clinical research collaborations and expanding patient access to new treatment protocols is included in the cardiovascular disease, cancer, neuroscience and genetics initiatives. Population health research addressing leading health risks and priorities in the Healthiest Wisconsin State Health Plan is included. MCW and the University of Wisconsin School of Medicine and Public Health continue to pursue a complementary approach to biomedical research exploring the leading causes of death in Wisconsin, emphasizing the strengths of each organization.

This multi-faceted approach toward research guides investigations into the major causes of death and disability and leverages the assets and capabilities of both institutions and their collaborating research organizations.

**Educational Leadership for the Health of the Public**

Improvements in health are achieved not only through medical research but also through the efforts of community and public health professionals and health care providers, as well as educating the public who require training on how to improve and maintain health. Lifelong learning is a normal part of living as technology-based delivery of information becomes the rule, not the exception.

- Public health professionals
- Health providers, patients and consumers
- Medical, graduate and resident education

Through programmatic initiatives and training, including:
- Clinical skills and learning
- Faculty development
- Library services
- Student scholarships
- Educational outreach through continuing medical education (CME)
- Patient education
- Graduate degree programs in public and community health (e.g., MPH, PhD)
- Medical College Curriculum Development for Public and Community Health
**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 2003-2008 AHW 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 utilize the programmatic strengths available at the Medical College of Wisconsin and within the state to maximize success.

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

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

**Collaboration**: supports effective collaboration between 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.

**FUNDING CYCLE OVERVIEW (JULY 2007-JUNE 2008)**

As a result of the assessment from prior funding cycles, areas of improvement were identified and incorporated into the 2007 funding cycle process. Several of the changes are highlighted in the *Key Findings and Assessment* section of this report on page 42. The competitive review continues to be complemented by the MCW Program Development Fund.

MCW presented recommended research and education projects resulting from competitive review to the MCW Consortium at the March and May 2008 meetings respectively. The MCW Consortium provided advisory funding recommendations to the MCW Board of Trustees. The projects include:

- Three education proposals totaling $442,691 were approved by the MCW Board of Trustees May 16, 2008.
- Twelve research proposals totaling $1,799,951 were approved by the MCW Board of Trustees March 28, 2008.

Sixteen research and education proposals totaling $17,131,657 were advanced through the MCW Program Development Fund. These proposals were presented publicly at MCW Consortium meetings, reviewed by the MCW Consortium and approved by the MCW Board of Trustees prior to June 30, 2008.

- Four proposals totaling $1,200,000 specifically addressed priorities in education including clinical skills and learning, faculty development, public health leadership development and curriculum development.
- Twelve proposals totaling $15,931,657 specifically addressed priorities in research including cardiovascular disease, cancer, genetics, population health, neuroscience and translational science.

Detailed summaries of all projects funded by the Advancing a Healthier Wisconsin endowment through the Research and Education Competitive Fund processes and the MCW Program Development Fund between July 1, 2007 and June 30, 2008 are provided on the AHW website at www.mcw.edu/healthierwisconsin. In addition, progress for research and education projects funded through funding cycles from 2004-2007 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 page 32.
## Review Process for Competitive Funds Education Funding Cycle 2007-2008

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<th>2007</th>
<th>2008</th>
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## Review Process for Competitive Funds Research Funding Cycle 2007-2008

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<td>Education</td>
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<td>----------------------</td>
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<tr>
<td><strong>Purpose</strong></td>
<td>Both funds support faculty-initiated research and education projects that are aligned with priority areas in the AHW Five-Year Plan through a peer-review process.</td>
</tr>
</tbody>
</table>
| **Investment Preferences** | • Proposals meeting more than one of the educational priorities from the AHW Five-Year Plan  
• Emphasis placed on collaborative proposals between departments, centers, etc.                                                                                                                             | • Proposals exploring new directions or enhancing current or previous research                                                                                                                             |                                                                                                                                                  |
| **Application (RFP)** | • RFP issued by the Dean  
• Dissemination of the RFP through internal and public communication websites including: AHW website, MCW e-newsletter, faculty listservs, department chair emails and announcements at faculty meetings  
• The Society of Teaching Scholars Steering Committee conducts the review and ranking based on merit  
• Society of Teaching Scholars Steering Committee reviewers are recused for reviews of their own applications or those from their departments                                                                                     | • RFP issued by the Dean  
• Dissemination of the RFP through internal and public websites including: AHW website, MCW e-newsletter, faculty listservs, department chair emails and announcements at faculty meetings  
• The Research Affairs Committee conducts the review and makes recommendations for funding based on scientific merit  
• Applications may be reviewed by ad hoc reviewers serving at the request of the Committee  
• The Research Affairs Committee scores applications using a priority scale based on that of the National Institutes of Health  
• Research Affairs Committee reviewers are recused for reviews of their own applications or those from their departments                                                                                     |                                                                                                                                                  |
| **Review Process**   | • The Research and Education Advisory Committee (REAC-composed of the dean and senior associate deans for Academic Affairs, Research Affairs and Public and Community Health) reviews the results and develops a recommended priority list for funding to be forwarded to the Dean based on the relevance to the Advancing a Healthier Wisconsin Program  
• The Dean discusses the funding recommendations with the Consortium and then makes the final decision with the Board of Trustees approval                                                                 |                                                                                                                                                  |                                                                                                                                                  |
| **Proposed Allocation** | • Maximum of $150,000 for 1 to 3 years  
• Minimum of 5 awards                                                                                                                                                                                      | • Maximum of $150,000 for 1 to 3 years  
• Maximum of 10 awards                                                                                                                                                                                     |
**MCW PROGRAM DEVELOPMENT FUND**

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Support program development and strategic initiatives in areas consistent with both the AHW Five-Year Plan and MCW's strategic plan. Funds will be allocated on a rolling basis as opportunities arise.</th>
</tr>
</thead>
</table>
| **Investment Preferences** | • Program development  
• Recruitment of faculty expertise in targeted areas of the AHW Five-Year Plan  
• Expansion of core laboratories, learning centers and inter-departmental equipment  
• Collaborative projects (multi-investigator, multi-departmental, etc.) |
| **Application and Review Process (RFP)** | • Dean discusses proposal concept with the principal investigator and invites the principal investigator to submit a proposal  
• Dean makes allocations on a rolling basis after consultation with the REAC  
• Dean requests advice and comment from Consortium and then makes the final decision with Board of Trustees approval |
| **Proposed Allocation** | • Approximately $4M to $5M |

**CUMULATIVE AWARDS 2004-2008**

Advancing a Healthier Wisconsin through Research and Education has awarded $44.9M since 2004 to support 112 initiatives. All funded projects propose transformational ways to improve the health of Wisconsin’s citizens, focusing on health promotion and disease prevention while also recognizing the significant role of building capacity and strengthening systems in an effort to reach those goals. The following table represents the distribution of all Research and Education funded projects:

<table>
<thead>
<tr>
<th>Overview</th>
<th>1st Funding Cycle (2004 awards)</th>
<th>2nd Funding Cycle (2005-06 awards)</th>
<th>3rd Funding Cycle (2006-07 awards)</th>
<th>4th Funding Cycle (2007-08 awards)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research</td>
<td>15</td>
<td>24</td>
<td>18</td>
<td>24</td>
</tr>
<tr>
<td>Education</td>
<td>5</td>
<td>8</td>
<td>11</td>
<td>7</td>
</tr>
<tr>
<td>Total Awards</td>
<td>20</td>
<td>32</td>
<td>29</td>
<td>31</td>
</tr>
<tr>
<td>Total Funding</td>
<td>$4.6M</td>
<td>$6.5M</td>
<td>$14.4M</td>
<td>$19.4M</td>
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$44.9M
During the period of this report, Advancing a Healthier Wisconsin through Research and Education funded 31 projects for a total of $19.4M. Thirteen projects awarded during the first three funding cycles have concluded. Although funding through the AHW endowment has ended, project activity may continue as researchers build on the discovery of the projects. Information on project activities and progress from July 1, 2007-June 30, 2008 is provided on the AHW website at www.mcw.edu/healthierwisconsin. Some findings and highlights from these projects are noted on page 42 (Key Findings and Assessment). Brief project descriptions on newly awarded projects in this funding period are reflected below in alphabetical order by project title.

**EDUCATIONAL LEADERSHIP FOR THE HEALTH OF THE PUBLIC**

**18-Headed Microscope**

**Principal Investigator:** Saul Suster, MD, Department of Pathology  
**MCW Program Development Fund:** $100,000 (2007-2008)  
**Focus Area(s):** Clinical Skills and Learning; Faculty Development

This project uses a 18-headed microscope to conduct a daily Peer-Review Conference in Surgical Pathology. The daily review of diagnostically difficult, challenging or problem cases not only will serve as a Quality Assurance exercise, but also as a powerful teaching tool for residents and fellows in the department.

**Advancing Health by Addressing Missed Opportunities in Primary Care**

**Principal Investigator:** LuAnn Moraski, DO, Department of Pediatrics  
**Collaborators:** Mike Farrell, MD, Department of Internal Medicine; Michael Mazzone, MD, Department of Family and Community Medicine  
**Competitive Education Fund:** $143,392 (2008-2010)  
**Focus Area(s):** MCW Curriculum Development

This project develops an innovative, sustainable educational program to address the problem of missed opportunities for screening and prevention by pediatrics, medicine/pediatrics and family medicine residents.

**An Electronic Learner’s Portfolio**

**Principal Investigator:** Alan David, MD, Department of Family and Community Medicine  
**MCW Program Development Fund:** $300,000 (2008-2012)  
**Focus Area(s):** Clinical Skills and Learning

The MCW Waukesha Family Medicine Residency Program (WFMRP) has been selected as one of 14 experimental programs to provide a 4th year residency that will enhance resident expertise in elective areas. The WFMRP project, known as the Majors and Masteries program, is instituting several major changes to the traditional Family Medicine Curriculum that will allow residents to choose an area of specialization including an optional 4th year of residency where residents will complete a Masters of Public Health, a Masters in Business Administration or a Women’s Health Fellowship.
Health Improvement Through Research and Education

The Healthy Wisconsin Leadership Institute

**Principal Investigator:** Peter Layde, MD, MSc, Department of Population Health and the Injury Research Center of Wisconsin  
**Collaborators:** Kirsten Gruebling, MPH, CHES, Department of Population Health  
**MCW Program Development Fund:** $650,000 (2008-2011)  
**Focus Area(s):** Masters of Public Health Program; Continuing Education for Public Health Professionals; Educational Outreach via Continuing Medical Education

The Healthy Wisconsin Leadership Institute provides continuing education and training for those working to protect and promote the health of the public. It is supported jointly by MCW and the University of Wisconsin School of Medicine and Public Health (UWSMPH).

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**Medical Incident Management and Preparedness Curriculum Development**

**Principal Investigator:** Ronald Pirrallo, MD, MHSA, Department of Emergency Medicine  
**Collaborators:** Jason Liu, MD, Department of Emergency Medicine; E. Brooke Lerner, PhD, Department of Emergency Medicine  
**MCW Program Development Fund:** $150,000 (2008-2009)  
**Focus Area(s):** MCW Curriculum Development; Clinical Skills and Learning; Faculty Development; Educational Outreach via Continuing Medical Education

This project aims to develop the educational infrastructure for medical personnel to gain Disaster Medicine clinical knowledge and skills. This infrastructure will be used to train MCW medical students, residents, fellows, faculty and other community health care providers and leaders.

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The Nutritional Disorders Tele-health Network

**Principal Investigator:** Alan Silverman, PhD, Department of Pediatrics  
**Collaborators:** Rachel Greenley, PhD, Department of Pediatrics; Children’s Hospital of Wisconsin; Milwaukee Area Health Education Center  
**Competitive Education Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Clinical Skills and Learning; Faculty Development; Educational Outreach via Continuing Medical Education; Patient Education

The goal of the project is to increase the expertise of primary care physicians and other health care providers regarding childhood nutritional disorders and develop their skills with telehealth communication. An anticipated goal is that increased provider expertise will translate into increased access to care for those children having nutritional disorders in rural and underserved communities. The proposed telemedicine training sites will provide training in assessment and treatment of nutritional disorders as well as consultation and referral services.

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**Quality Rounds Initiative**

**Principal Investigator:** Michael Weisgerber, MD, Department of Pediatrics  
**Collaborators:** Heather Toth, MD, Department of Medicine; Dawn Bragg, PhD, Department of Educational Services  
**Competitive Education Fund:** $149,299 (2008-2011)  
**Focus Area(s):** MCW Curriculum Development; Clinical Skills and Learning; Faculty Development

This proposal will use teaching rounds as a tool to develop senior residents’ competency as clinical teachers and leaders through internal medicine and pediatric services with the goal of producing learning materials that will help senior residents develop their teaching and leadership skills.
Basic Mechanisms Underlying Seizure Activity in Pediatric Neocortical Epilepsies

**Principal Investigator:** Charles Marcuccilli, MD, PhD, Department of Neurology, Pediatric Neurology  
**Competitive Research Fund:** $149,951 (2008-2011)  
**Focus Area(s):** Neurologic Disease

This project seeks to better understand the cellular and molecular mechanisms that lead to neocortical epilepsy, a condition which predominantly afflicts children.

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Biotechnology and Bioengineering Center Core Equipment

**Principal Investigator:** Andrew Greene, PhD, Department of Physiology, Center for Biotechnology and Bioengineering  
**MCW Program Development Fund:** $984,070 (2007-2010)  
**Focus Area(s):** Cardiovascular Disease; Cancer; Genetics; Biotechnology and Bioengineering; Faculty Development

This project utilizes funds to support core equipment in the Biotechnology and Bioengineering Center (BBC). The BBC is a multidisciplinary research center at MCW dedicated to providing state-of-the-art equipment and methods to a variety of investigators involved in interdisciplinary and collaborative research, of which many of the projects are translational in nature.

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Clinical and Translational Science Institute

**Principal Investigator:** Reza Shaker, MD, Department of Medicine  
**Collaborators:** Howard Jacob, PhD; Ellis Avner, MD  
**MCW Program Development Fund:** $7,316,709 (2007-2012)  
**Focus Area(s):** Cardiovascular Disease; Cancer; Neuroscience; Genetics; Population Health; Functional Imaging; Bioinformatics; Biotechnology and Bioengineering; Community Health; Faculty Development

This project supports the Clinical and Translational Science Institute (CTSI) at MCW. It is the second of two staged investments in the expansion of clinical and translational research capabilities at MCW and neighboring institutions. The CTSI will create a transforming and unifying environment for interdisciplinary clinical and translational research in Southeastern Wisconsin. Headquartered at the Medical College of Wisconsin, the CTSI will serve as a mechanism to support the efforts of area academic institutions, health care providers and community advocates to advance science and its application to patient care and technology transfer.

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Cloche: A Basic and Translational Model for Cardiovascular Disease

**Principal Investigator:** Ramani Ramchandran, MD, PhD, Department of Pediatrics, Genetics  
**Collaborators:** Department of Dermatology; Emory University School of Medicine  
**Competitive Research Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Cardiovascular Disease

This project aims to improve the health of the people in Wisconsin by identifying novel mechanisms that lead to the development of cardiovascular disease and identifying small molecule drug-like candidates for treatment of cardiovascular disease.

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Development of Selective Estrogen Receptor Down-regulators as Novel Therapeutics in the Treatment of Prolactinomas

**Principal Investigator:** Sanjay Kansra, PhD, Department of Medicine, Endocrinology  
**Competitive Research Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Cancer

This project seeks to identify novel alternative therapeutics for treating prolactinomas, which are pituitary tumors that produce excess amounts of the hormone prolactin.
Empirical Ethics Group

**Principal Investigator:** Laura Roberts, MD, Department of Psychiatry and Behavioral Medicine  
**MCW Program Development Fund:** $1,000,000 (2008-2012)  
**Focus Area(s):** Population Health

This project seeks to fund the development of junior faculty clinical investigators through a highly innovative research team called the Empirical Ethics Group. This interdisciplinary research effort will gather evidence to clarify, address and resolve ethically important issues arising in medical care, human research and professional conduct in the fields of medicine and science.

• • • • • • • • • • • • • • •

Enhancement of a Research and Translational Center for the Integrative Biology of Kidney Disease

**Principal Investigator:** Richard Roman, PhD, Department of Medicine, Kidney Disease Center  
**MCW Program Development Fund:** $1,000,000 (2007-2010)  
**Focus Area(s):** Cardiovascular Disease; Cancer; Genetics

By assembling a critical mass of translational researchers, this project uses an interdisciplinary approach to identify the genes and pathways that contribute to the pathogenesis of chronic progressive renal disease with the goal of identifying new treatments that will delay or reverse progressive injury.

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GABAergic Inhibition and Cocaine Addiction

**Principal Investigator:** Qing-song Liu, PhD, Department of Pharmacology and Toxicology  
**Collaborators:** Department of Biomedical Science, Marquette University  
**Competitive Research Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Neuroscience

This project seeks to understand the mechanisms and behavioral consequence of cocaine-induced reduction of GABAergic inhibition in the ventral tegmental area of the midbrain, a key component of the reward circuit that mediates the addictive properties of many drugs of abuse.

Genetic Modification of Renal Epithelial Cells in PKD

**Principal Investigator:** Frank Park, PhD, Department of Medicine, Kidney Disease Center  
**Collaborators:** Department of Pediatrics, Children’s Research Institute; Children’s Hospital of Wisconsin  
**Competitive Research Fund:** $150,000 (2008-2010)  
**Focus Area(s):** Genetics

This project aims to better understand the cellular pathophysiology of polycystic kidney disease (PKD) using lentiviral vectors.

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Genetic Screen for HIV Restriction Factor in Human Monocytes

**Principal Investigator:** Li Wu, PhD, Department of Microbiology and Molecular Genetics  
**Competitive Research Fund:** $150,000 (2008-2010)  
**Focus Area(s):** Genetics

This project aims to identify unique HIV restriction factors in human immune cells to elucidate the underlying molecular mechanisms and to translate these findings into AIDS therapy and vaccine development.

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Injury Research Center - Seed Projects

**Principal Investigator:** Stephen Hargarten, MD, MPH, Department of Emergency Medicine  
**Collaborators:** Peter Layde, MD, MSc, Department of Population Health  
**MCW Program Development Fund:** $600,000 (2008-2012)  
**Focus Area(s):** Population Health

Through solicitation of two-year proposals of pilot studies and other innovative projects, the Injury Research Center will fund the development of two seed projects per year for new injury researchers and initiation of innovative injury research projects.
Mitochondrial Anti-oxidants in Persistent Pulmonary Hypertension of Newborn

**Principal Investigator:** Girija Konduri, PhD, Department of Pediatrics, Neonatology  
**Collaborators:** Department of Surgery; Department of Biophysics  
**Competitive Research Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Cardiovascular Disease

This project aims to develop targeted therapies to reverse the cellular dysfunction in persistent pulmonary hypertension of newborns (PPHN), a condition that affects infants during their transition to postnatal life.

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Pharmacology Co-recruitment with the Cardiovascular Center for Dr. John Imig

**Principal Investigator:** William Campbell, PhD, Department of Pharmacology & Toxicology  
**Collaborators:** David Harder, PhD, Department of Physiology  
**MCW Program Development Fund:** $346,524 (2008-2011)  
**Focus Area(s):** Cardiovascular Disease

This project used program development funds for the co-recruitment of a Professor of Pharmacology with the Cardiovascular Center, Dr. John Imig. Dr. Imig is a leading expert on the role of vasodilator fatty acids. These fatty acids are produced in all blood vessels, and a decrease in their production or an increase in their degradation contributes to the development of hypertension, stroke and kidney disease. Dr. Imig's research has been instrumental in developing a new class of drugs that restore the activity of these vasodilators and decrease high blood pressure and reduce injury to the brain from stroke. These drugs are in phase I clinical trials.

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Program In Regenerative Medicine - Duncan Lab Expansion

**Principal Investigator:** Stephen Duncan, D.Phil., Department of Cell Biology, Neurobiology and Anatomy  
**MCW Program Development Fund:** $500,000 (2007-2012)  
**Focus Area(s):** Cardiovascular Disease; Genetics

This project will initiate studies, using federally approved human embryonic stem cell lines, that examine the role of specific factors that have been linked to diabetes, heart disease, and cholesterol levels. By controlling the expression of such factors during the formation of pancreatic, heart and cardiac cells from embryonic stem cells, the investigators anticipate the generation of cell models that will be used to understand the fundamental mechanisms underlying human pathologies and development.

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Program In Regenerative Medicine - New Faculty Recruitment/Renovation

**Principal Investigator:** Stephen Duncan, D.Phil., Department of Cell Biology, Neurobiology and Anatomy  
**MCW Program Development Fund:** $1,600,000 (2007-2012)  
**Focus Area(s):** Genetics

This project initiates a program of Regenerative Medicine at the Medical College of Wisconsin with the goal of laying a platform from which MCW can become a national leader in stem cell biology.
Regeneration of Infarcted Myocardium with Islet 1+ Cells

**Principal Investigator:** John Lough, PhD, Department of Cell Biology, Neurobiology and Anatomy  
**Collaborators:** Department of Pharmacology and Toxicology; Department of Biochemistry and Molecular Biology; University of Georgia  
**Competitive Research Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Cardiovascular Disease

The goal of this project is to ameliorate heart disease using cellular therapy.

---

Role of Brain Derived Neurotrophic Factor (BDNF) in Neocortical Epilepsy

**Principal Investigator:** Andrew Tryba, PhD, Department of Physiology  
**Collaborators:** Department of Neurology, Cellular and Molecular Physiology; Yale University Department of Neurology; Children’s Hospital of Wisconsin  
**Competitive Research Fund:** $150,000 (2008-2010)  
**Focus Area(s):** Neurologic Disease

This project seeks to advance the understanding of how epilepsy develops and persists, while identifying mechanisms that should be pharmacologically targeted to prevent epilepsy.

---

The Role of Induced Regulatory T-Cells in Dominant Immunologic Tolerance

**Principal Investigator:** Calvin Williams, PhD, Department of Pediatrics, Rheumatology  
**Collaborators:** University of California- Los Angeles  
**Competitive Research Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Genetics; Cancer

This project studies the fundamental mechanisms underpinning CD4+CD25+ regulatory T (iTₘ and iTₗ) cell maturation and function. iTₘ cells play critical roles in controlling immune responses.

---

The Role of Rap1B in B Cell Receptor Signaling

**Principal Investigator:** Demin Wang, PhD, Department of Microbiology and Molecular Genetics  
**Collaborators:** Department of Medicine; Blood Center of Southeastern Wisconsin  
**Competitive Research Fund:** $150,000 (2008-2011)  
**Focus Area(s):** Genetics; Cancer

This project explores the roles of Rap1b, a ubiquitously expressed member of the Ras superfamily of small GTP binding proteins, in B cell development and function, and studies the mechanism by which Rap1b regulates B cell biology.

---

Support for New Faculty in the Center for Biopreparedness and Infectious Disease - Coburn

**Principal Investigator:** Dara Frank, PhD, Department of Microbiology and Molecular Genetics  
**Collaborators:** Cancer Center; Department of Medicine; Department of Pediatrics, Division of Gastroenterology and Infectious Disease; Department of Physiology  
**MCW Program Development Fund:** $271,368 (2008-2011)  
**Focus Area(s):** Clinical and Translational Research

This project utilized faculty development funds to recruit Dr. Jenifer Coburn to MCW’s Center for Biopreparedness and Infectious Disease (CBID). CBID seeks to build an integrated program with specialists whose research expertise complements CBID’s strengths in parasite biology, biochemistry, physiology and genetics. CBID was conceived in response to the National Institutes of Health, National Institute of Allergy and Infectious Disease initiative to strengthen basic research and response capabilities to threats posed by the illegitimate use of microorganisms or their toxins. Dr. Coburn’s research focuses on the family of spiral bacteria that cause lyme disease (Borrelia) and leptospirosis (Leptospira).
Support for New Faculty in the Center for Biopreparedness and Infectious Disease - Kristich

**Principal Investigator:** Dara Frank, PhD, Department of Microbiology and Molecular Genetics  
**Collaborators:** Cancer Center; Department of Medicine; Department of Microbiology and Molecular Genetics; Department of Pediatrics, Division of Gastroenterology and Infectious Disease; Department of Physiology  
**MCW Program Development Fund:** $312,986 (2007-2010)  
**Focus Area(s):** Clinical and Translational Research

This project utilized faculty development funds to recruit Dr. Christopher Kristich to MCW's Center for Biopreparedness and Infectious Disease (CBID). CBID seeks to build an integrated program with specialists whose research expertise complements CBID's strengths in parasite biology, biochemistry, physiology and genetics. Dr. Kristich's research focuses on hospital-acquired infections; their etiology, spread and mechanisms of antibiotic resistance.

---

Translational Neuro-Oncology Research Program

**Principal Investigator:** Wade Mueller, MD, Department of Neurosurgery  
**Collaborators:** Shekar Kurpad, MD, PhD, Department of Neurosurgery; Mark Malkin, MD, Department of Neurology; Kathleen Schmainda, PhD, Department of Radiology  
**MCW Program Development Fund:** $1,000,000 (2008-2011)  
**Focus Area(s):** Cancer

This project expands the clinical Neuro-Oncology Program to include clinical research that will improve the care for patients with brain tumors. The major long-term goal of this program is to provide humane and expert care for patients with cancer affecting the nervous system, in the setting of an interdisciplinary disease-based hub within the framework of the new FMLH Cancer Center.

---

The Use of Myeloid Progenitors to Improve Immune Competence after HSC Transplantation for Tolerance Induction

**Principal Investigator:** Adrianus Domen, PhD, Department of Surgery  
**Collaborators:** Department of Surgery, Division of Cardiothoracic Surgery  
**Competitive Research Fund:** $150,000 (2008-2010)  
**Focus Area(s):** Cardiovascular Disease; Cancer

This project aims to evaluate whether high levels of donor-derived chimerism result in clinically robust tolerance to subsequently transplanted organs with the long-term goal of expanding the use of hematopoietic cell transplantation (HCT) for malignant and non-malignant disease.

---

Systems Biology Program in Cardiovascular Disease

**Principal Investigator:** Howard Jacob, PhD, Department of Physiology; Human & Molecular Genetics Center  
**Collaborators:** Carol Moreno-Quinn, MD, PhD, Department of Physiology; Melinda Dwinell, PhD, Department of Physiology  
**MCW Program Development Fund:** $1,000,000 (2008-2010)  
**Focus Area(s):** Cardiovascular Disease; Genetics; Population Health; Bioinformatics

This project proposes to develop technologies for whole genome characterization of structural variation and for enabling MCW to develop a systems biology program for cardiovascular disease. This program will transition the Program for Genomic Applications (PhysGen PGA) from a National Resource for Rat Reagent to a National Center for Systems Biology, focused on cardiovascular disease.
Health Improvement Through Research and Education

KEY FINDINGS AND ASSESSMENT

The impact of Research for a Healthier Tomorrow and Educational Leadership for the Health of the Public projects funded by the Advancing a Healthier Wisconsin (AHW) endowment will be 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 Wisconsin.

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.

The evaluation framework for AHW is comprised of three components: (1) Program key findings, (2) Project key findings, and (3) Program administration assessment. These components are informed by a commitment to continuous quality improvement.

- **Program Key Findings**: This component includes: assessing projects for fit with the overall AHW Five-Year Plan and its research and education priorities; and AHW Principles of Stewardship.
- **Project Key Findings**: As projects are completed, AHW evaluates project outcomes, dissemination of research findings through publications, additional funding leveraged, scientific awards and enhancement of public health and medical leadership. All funded projects are required to provide annual progress reports on funded project activities. These progress reports are presented to WUHF as part of the annual reporting process. A summary of the progress reports are made available to the public via the website.
- **Program Administration**: This component focuses on evaluating effectiveness of program administration through a continuous improvement process as well as through the assessment of the administration for the pre- and post-award process. Two full-time staff members dedicated to the AHW Research and Education Program support communication and overall coordination between the Program’s leadership, its funded investigators and key administrators.

PROGRAM AND PROJECTS: KEY FINDINGS

The framework and priorities for Advancing a Healthier Wisconsin through Research and Education are guided by the Principles of Stewardship which include: collaboration, prioritization, leverage, accountability and transformation.
### AT A GLANCE—KEY PROGRAM FINDINGS

| Collaboration | New and innovative collaborations have been developed as a result of the AHW Research and Education Funds.  
|              | • More than 95 percent of proposals report collaborators on funded projects.  
|              | • Projects reflect 124 inter-departmental, multi-disciplinary partnerships.  
|              | • Approximately 240 individual collaborators are identified including partnerships with other academic institutions, industry, community representatives, health care agencies and research centers.  |

| Prioritization | Projects aim to maximize 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.  
|               | • All 111 projects have leveraged MCW strengths in areas of research, faculty expertise, inter-institutional and industry alliances and state-of-the-art facilities. Examples include:  
|               | • Center for Biopreparedness and Infectious Disease  
|               | • Clinical and Translational Research Institute  
|               | • MPH and PhD Programs in Public and Community Health  
|               | • STAR Center  |

| Leverage | The program works to leverage funds by pooling existing resources, attracting additional dollars and encouraging sustainability for projects. The program recognizes the leveraging of MCW faculty expertise to benefit the health of Wisconsin residents.  
|          | • More than 64 projects in research and education have leveraged the assets of MCW and/or secured additional funding through National Institutes for Health (NIH), American Heart Association (AHA), National Heart, Lung and Blood Institute (NHLBI), matched funds, foundations and several other funding sources.  |

| Accountability | AHW through Research and Education is committed to ensuring accountability for the use of the funds. This includes both oversight responsibility and rigorous evaluation.  
|                | • Currently funds from all projects have been highly accounted for. The collaborations resulting have allowed for the expansion of additional research on campus, across disciplines, leading to innovation and greater overall impact on patient’s future health. It has also led to pooling of different types of resources. Results of funded projects are reviewed and analyzed for satisfaction and quality improvement to expand the accessibility and level of knowledge that can be afforded to all.  |

| Transformation | MCW investigators work to effect change by emphasizing prevention, capacity-building and expanding MCW’s focus on the health of the public and encouraging innovation. AHW funding will enhance the health of our community through research, education, and service, locally, statewide and, indirectly, nationally and internationally.  
|               | • The investment in research and education has led to increased understanding, prevention, diagnosis and treatment of human disease and has allowed for innovations in medical education through:  
|               | • the creation of the Healthy Wisconsin Leadership Institute,  
|               | • the development of a new PhD in Public and Community Health,  
|               | • an expanded MPH, and  
|               | • the development of new collaborations.  
|               | • Additionally, the investment in research and education provides the necessary infrastructure for multi-disciplinary, interdisciplinary, clinical and translational research programs and has cultivated an environment that fosters continuous improvement, organizational renewal and exceptional service to members of the community.  
|               | • The education of health professionals is also a continually transforming, dynamic process. New programs are offered, while others are revised to respond to the ever-changing challenges in health care. Educational programs must be constantly evolving to assure the transfer of new knowledge into the health professional workforce. |
### AT A GLANCE—KEY PROJECT FINDINGS

<table>
<thead>
<tr>
<th>Educational Leadership for the Health of the Public</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Approximately $.8M was committed for five projects that strengthen the relationship between patients and their health care providers and that offer education and training to health professionals across the state.</td>
<td></td>
</tr>
<tr>
<td>• More than $3.4M was committed for 20 projects to support training experiences and rapid advancement in new technology and scientific discoveries.</td>
<td></td>
</tr>
<tr>
<td>• More than $1.3M was committed for three projects that address public health professional leadership.</td>
<td></td>
</tr>
<tr>
<td>• More than $3.8M was committed for four projects to develop a doctoral degree program in Public and Community Health and expand the Master of Public Health (MPH) degree program.</td>
<td></td>
</tr>
<tr>
<td>• The PhD program is the only public health doctoral program in the nation that weaves community-based participatory research through the entire curriculum, resulting in student engagement with community partners for dissertation research.</td>
<td></td>
</tr>
<tr>
<td>• Approximately $150K was committed for one project to support excellence in education, research, community service and patient care.</td>
<td></td>
</tr>
<tr>
<td>• Over $150K was committed for one project to expand training and development of primary care physicians.</td>
<td></td>
</tr>
<tr>
<td>• More than $1.6M was committed for 11 projects to improve skills, knowledge and attitudes in residents and to explore innovations in education.</td>
<td></td>
</tr>
<tr>
<td>• Of 203 GI Medicine M3 Clerkship students who participated in the Objective Structured Clinical Examinations (OSCEs) during the 2007/08 academic year, 92 percent rated the overall quality of the PRE-OSCE program as Excellent (35 percent) or Good (57 percent).</td>
<td></td>
</tr>
<tr>
<td>• STAR Center hosted 679 separate events during the current reporting period, showing a 103% increase in usage from its first year that ended in June 2006.</td>
<td></td>
</tr>
<tr>
<td>• STAR Center’s environment and curriculum accommodate multiple training needs for medical and graduate students, residents, fellows, instructors, clinicians and allied health professionals.</td>
<td></td>
</tr>
<tr>
<td>• More than $3.4M was committed for six projects in biotechnology to advance new tools and methods to support emerging directions and technological advances.</td>
<td></td>
</tr>
<tr>
<td>• More than $1.6M was committed for five projects to advance investigations in cancer prevention, identification and treatment.</td>
<td></td>
</tr>
<tr>
<td>• More than $3.9M was committed for five projects to advance investigations into cardiovascular disease.</td>
<td></td>
</tr>
<tr>
<td>• Approximately $4.1M was committed for 10 projects to advance investigations in genetics.</td>
<td></td>
</tr>
<tr>
<td>• More than $.6M was committed for five projects to advance investigations in brain injuries, Alzheimer’s, Parkinson’s, epilepsy and stroke.</td>
<td></td>
</tr>
<tr>
<td>• Approximately $6.2M was committed for five projects to support improvements in community health.</td>
<td></td>
</tr>
<tr>
<td>• More than $11.5M was committed for 16 projects supporting collaborations between clinical and basic investigators to increase advances in patient care.</td>
<td></td>
</tr>
<tr>
<td>• Research in the area of cardiovascular disease has resulted in more than 23 inter-departmental collaborations among approximately 20 MCW faculty. This research has also facilitated inter-institutional collaborations including: Blood Research Center of Wisconsin, Indiana School of Medicine at South Bend, Marquette University, UW-Madison School of Medicine and Public Health and UW-Milwaukee.</td>
<td></td>
</tr>
<tr>
<td>• Individual investigators were trained in the culture and manipulation of human embryonic stem cells.</td>
<td></td>
</tr>
</tbody>
</table>
PROGRAM ADMINISTRATION: KEY FINDINGS

A n evaluation of the process including an internal merit review involving the Research Affairs Committee, the Society of Teaching Scholars (STS), the Research and Education Advisory Committee (REAC), the MCW Consortium on Public and Community Health and the MCW Board of Trustees has been established throughout the last four reporting periods. This has allowed for concentration on areas of emphasis, the application process, allocation investment, review process and appropriate policies.

Proposal Process: Explicit timeframes for proposal submission, merit review and award process were established. Each proposal must demonstrate alignment with the Principles of Stewardship and an explanation of alignment with the State Health Plan.

Technical Assistance: Organization of information and resources regarding the AHW research competitive fund process was provided to potential investigators via the AHW website as well as the Office of Research and Society of Teaching Scholars websites.

For the Education Request for Proposals (RFP) 2007-08 RFP cycle, program staff and STS coordinated to create six workshops to educate faculty about the proposal submission process and provide helpful tools and tips for proposal development.

A second staff position was created in the Office of the Senior Associate Dean for Public and Community Health for Advancing a Healthier Wisconsin through Research and Education. This staff position provides technical support to the competitive and program development process, support for the preparation of the next AHW Five-Year Plan, coordination with the Controller’s Office, STS and Research Affairs Committee and collaboration with the Healthier Wisconsin Partnership Program.

Review Process: The 2007-08 review process began with an internal merit review with the respective Research or Education Committee, moved to the Research and Education Advisory Committee (REAC), advanced to the Consortium for review and comment, with final approval granted by the Board of Trustees. Both the 2007-08 Research and Education funded proposals began July 1, 2008.

Administrative Requirements: Continuous quality improvements have been made to the formal notification and budget allocation process. The RFP cycle for research and education has shifted to include increased time for RFP submission and post-notification process.
Fund Management

INVESTMENT SUMMARY

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 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 and the spendable funds available for current and future program distribution are maintained. With respect to the 65% allocation of the funds for Health Improvement through Research and Education, accounts are maintained for the true endowed funds, immediately available funds available for current program distribution, and the spendable funds available for future program distribution.

True Endowment Fund distributions are based on the MCW Endowment Fund Spending Policy. Investment earnings that are not distributed to the Spendable Fund, in accordance with the MCW Endowment Fund Spending Policy, 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 Immediate Fund for the Healthier Wisconsin Partnership Program was fully expended as of June 30, 2008.

FINANCIAL STATEMENTS

A financial audit of The Medical College of Wisconsin, Inc. Advancing a Healthier Wisconsin Program was conducted by an external audit firm for the fiscal years ending June 30, 2008, 2007, 2006, 2005 and 2004. The following pages reflect the financial position for the fiscal years ended June 30, 2008 and 2007 and the activities for the fiscal year ended June 30, 2008.

Immediate Funds for program expenses are reimbursed on a one-month lag. The unreimbursed expenses are reflected on the schedules on pages 47-49 as Due to The Medical College of Wisconsin, Inc.
### Advancing a Healthier Wisconsin

#### Statement of Financial Position

For the Fiscal Years Ended June 30, 2008 and 2007

(in thousands)

<table>
<thead>
<tr>
<th></th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investments, at fair value:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spendable fund</td>
<td>$55,096</td>
<td>$43,201</td>
</tr>
<tr>
<td>Immediate fund</td>
<td>6,066</td>
<td>17,206</td>
</tr>
<tr>
<td>Endowment fund</td>
<td>322,181</td>
<td>348,823</td>
</tr>
<tr>
<td><strong>Total investments</strong></td>
<td>383,343</td>
<td>409,230</td>
</tr>
<tr>
<td>Collateral held under securities lending agreement</td>
<td>20,934</td>
<td>68,309</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td>$404,277</td>
<td>$477,539</td>
</tr>
</tbody>
</table>

| **Liabilities and Net Assets:** |          |          |
| Liabilities:                   |          |          |
| Payable under securities lending agreement | $21,404  | $68,309  |
| Due to The Medical College of Wisconsin, Inc. | 714      | 1,438    |
| **Total liabilities**         | 22,118   | 69,747   |

| Net Assets:                   |          |          |
| Temporarily Restricted        | $93,583  | $134,445 |
| Permanently Restricted        | 288,576  | 273,347  |
| **Total net assets**          | 382,159  | 407,792  |

| Total liabilities and net assets | $404,277 | $477,539 |
Advancing a Healthier Wisconsin
Statements of Activities and Changes in Net Assets
For the Fiscal Year Ended June 30, 2008
(in thousands)

<table>
<thead>
<tr>
<th></th>
<th>Healthier Wisconsin Partnership Program</th>
<th>Health Improvement through Research and Education</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Changes in unrestricted net assets:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted net assets, beginning of year:</td>
<td>$ —</td>
<td>$ —</td>
<td>$ —</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>4,678</td>
<td>5,976</td>
<td>10,654</td>
</tr>
<tr>
<td><strong>Expenditures:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty salaries</td>
<td>666</td>
<td>1,436</td>
<td>2,102</td>
</tr>
<tr>
<td>Staff salaries</td>
<td>707</td>
<td>955</td>
<td>1,662</td>
</tr>
<tr>
<td>Fringe benefits</td>
<td>403</td>
<td>679</td>
<td>1,082</td>
</tr>
<tr>
<td>Supplies, service and other</td>
<td>460</td>
<td>1,202</td>
<td>1,662</td>
</tr>
<tr>
<td>Subcontracts</td>
<td>2,437</td>
<td>45</td>
<td>2,482</td>
</tr>
<tr>
<td>Equipment</td>
<td>5</td>
<td>1,659</td>
<td>1,664</td>
</tr>
<tr>
<td><strong>Total expenditures</strong></td>
<td>4,678</td>
<td>5,976</td>
<td>10,654</td>
</tr>
<tr>
<td><strong>Change in unrestricted net assets</strong></td>
<td>$ —</td>
<td>$ —</td>
<td>$ —</td>
</tr>
<tr>
<td>Unrestricted net assets, end of year:</td>
<td>$ —</td>
<td>$ —</td>
<td>$ —</td>
</tr>
</tbody>
</table>

**Changes in temporarily restricted net assets:**

<table>
<thead>
<tr>
<th></th>
<th>Healthier Wisconsin Partnership Program</th>
<th>Health Improvement through Research and Education</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporarily restricted net assets, beginning of year:</td>
<td>$45,683</td>
<td>$88,762</td>
<td>$134,445</td>
</tr>
<tr>
<td>Investment income</td>
<td>3,135</td>
<td>5,911</td>
<td>9,046</td>
</tr>
<tr>
<td>Realized gains on investments</td>
<td>1,188</td>
<td>2,233</td>
<td>3,421</td>
</tr>
<tr>
<td>Unrealized (losses) on investments and collateral held under securities lending agreement</td>
<td>(14,777)</td>
<td>(27,898)</td>
<td>(42,675)</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>(4,678)</td>
<td>(5,976)</td>
<td>(10,654)</td>
</tr>
<tr>
<td><strong>Change in temporarily restricted net assets</strong></td>
<td>(15,132)</td>
<td>(25,730)</td>
<td>(40,862)</td>
</tr>
<tr>
<td>Temporarily restricted net assets, end of year:</td>
<td>$30,551</td>
<td>$63,032</td>
<td>$93,583</td>
</tr>
</tbody>
</table>

**Changes in permanently restricted net assets:**

<table>
<thead>
<tr>
<th></th>
<th>Healthier Wisconsin Partnership Program</th>
<th>Health Improvement through Research and Education</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanently restricted net assets, beginning of year:</td>
<td>$95,671</td>
<td>$177,676</td>
<td>$273,347</td>
</tr>
<tr>
<td>Contributions</td>
<td>5,330</td>
<td>9,899</td>
<td>15,229</td>
</tr>
<tr>
<td><strong>Changes in permanently restricted net assets</strong></td>
<td>5,330</td>
<td>9,899</td>
<td>15,229</td>
</tr>
<tr>
<td>Permanently restricted net assets, end of year:</td>
<td>$101,001</td>
<td>$187,575</td>
<td>$288,576</td>
</tr>
</tbody>
</table>
The MCW Consortium on Public and Community Health authorized the following changes in outstanding commitments for the Advancing a Healthier Wisconsin program (in thousands):

<table>
<thead>
<tr>
<th>COMMITMENTS:</th>
<th>Healthier Wisconsin Partnership Program</th>
<th>Health Improvement through Research and Education</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Inception to June 30, 2007:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Authorized funding</td>
<td>$20,375</td>
<td>$26,908</td>
<td>$47,283</td>
</tr>
<tr>
<td>Expenditures</td>
<td>(6,411)</td>
<td>(8,138)</td>
<td>(14,549)</td>
</tr>
<tr>
<td>Unused funds released from commitment</td>
<td>(49)</td>
<td>(720)</td>
<td>(769)</td>
</tr>
<tr>
<td>Outstanding commitments, June 30, 2007</td>
<td>$13,915</td>
<td>$18,050</td>
<td>$31,965</td>
</tr>
</tbody>
</table>

| **July 1, 2007 – June 30, 2008:**    |                                        |                                               |        |
| Authorized funding                  | 8,488                                  | 19,374                                        | 27,862 |
| Expenditures                        | (4,678)                                | (5,976)                                       | (10,654)|
| Unused funds released from commitment| (983)                                  | (1,349)                                       | (2,332)|
| Outstanding commitments, June 30, 2008| $16,742                                | $30,099                                       | $46,841|

These outstanding commitments will be funded on a reimbursement basis and recognized as expenditures after the amounts have been expended by the Medical College of Wisconsin and the community partners.
NATIONAL MERIT REVIEWERS – HEALTHIER WISCONSIN PARTNERSHIP PROGRAM

National merit reviewers, individuals who reside outside Wisconsin, are selected on the basis of their expertise in public and community health as well as community-academic partnerships to review Healthier Wisconsin Partnership Program proposals. Merit reviewers are a diverse set of community and academic leaders, all having distinguished experience in health promotion and disease prevention as well as experience with conducting reviews. Merit reviewers for the Healthier Wisconsin Partnership Program typically serve three-year terms. In order to ensure continuity among reviewers and to ensure that a minority of reviewers are rotating off at one time, reviewers were invited to serve staggered terms of one to three years.

Elaine S. Belansky, PhD  
Assistant Director  
Rocky Mountain Prevention Research Center  
University of Colorado Denver  
Boulder, CO

Beneta D. Burt, MPPA  
Chairperson  
Roadmap to Health Equity Community Steering Committee  
Jackson Medical Mall Foundation  
Jackson, MS

Chuck Conner  
Site Coordinator  
West Virginia Rural Health Education Partnerships  
Spencer, WV

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

Susan Ann Gust  
Co-Coordinator  
GRASS Routes  
Minneapolis, MN

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  
Oakland, CA

Matthew C. Keifer, MD, MPH  
Associate Professor of Environmental and Occupational Health Sciences, Occupational & Environmental Medicine; Associate Professor of Medicine, Division of General Internal Medicine  
University of Washington, Seattle, WA

Beneta D. Burt, MPPA  
Chairperson  
Roadmap to Health Equity Community Steering Committee  
Jackson Medical Mall Foundation  
Jackson, MS

Chuck Conner  
Site Coordinator  
West Virginia Rural Health Education Partnerships  
Spencer, WV

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

Susan Ann Gust  
Co-Coordinator  
GRASS Routes  
Minneapolis, MN

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  
Oakland, CA

Matthew C. Keifer, MD, MPH  
Associate Professor of Environmental and Occupational Health Sciences, Occupational & Environmental Medicine; Associate Professor of Medicine, Division of General Internal Medicine  
University of Washington, Seattle, WA

Daniel F. Korin, MD, FAAP  
Lutheran Family Health  
Bronx, NY

Lissette Lahoz  
Program Director  
Latinos for Healthy Communities  
Allentown, PA

Yvonne Lewis  
Executive Director  
Faith Access to Community Economic Development  
Flint, MI

Joan Miller  
Education Coordinator  
Health Research and Education Trust  
Chicago, IL

Lola Sablan Santos  
Executive Director  
Guam Communications Network  
Long Beach, CA

Rhonique Shields-Harris, MD, MHA  
Medical Director, Mobile Health Programs  
Children’s Health Project of DC  
Children’s National Medical Center  
Washington, DC
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