ADVISORY BOARD MEETING SUMMARY

University of Wisconsin Population Health Institute
March 11, 2010
10:30 AM to 1:30 PM
Wisconsin Hospital Association, Madison, WI

Members Present: Kyle Fischer (for Rep. Charles Benedict), Steve Brenton, Cheryl DeMars, Curt Gielow, Sheri Johnson, Gregory Nycz, Christopher Queram, Peggy Rosenzweig, Ayaz Samadani (by phone), Tim Size, Arvid Tillmar, Susan Turney

Staff Present: Patrick Remington, D. Paul Moberg, Donna Friedsam, Tom Oliver, Colleen Comeau


Guests: Phoebe Frenette, Media Specialist, and Kristen Malecki, Associate Director from Survey of the Health of Wisconsin (SHOW) and Network for Health Equity in Wisconsin (NHEW).

A. Introductions and Review of Agenda
The meeting was called to order at 10:30 AM. Introduction of Kyle Fisher, MD/MPH student intern who attended for Rep. Charles Benedict.

B. Review of Minutes
The minutes of the last meeting were approved with a motion by Steve Brenton and seconded by Dick Tillmar.

C. New Business
Paul Moberg introduced Kristen Malecki, Associate Director for SHOW and NHEW, who presented information on quality health care measurements. Information about show is available at http://www.show.wisc.edu/. SHOW was awarded an additional NIH grant to support the NHEW. NHEW will monitor the effects of economic and policy changes on cardiovascular and respiratory health in Wisconsin communities. The effort will focus on identifying causes of health inequities, particularly in access to health care and the quality of health care systems. Advisory Board members raised several questions, among them:

- If this is a two-year grant, where do you see the sustainability? The two-year funding through the National Institutes of Health is to help build infrastructure and after a two-year period they would look for products that would allow them to apply for funding that would allow them to sustain the program numbers.
- What is the annual budget? The annual budget is $2.5 million from NIH and $1.5 to $2 million from MERC Partnership Fund. The operating budget in 2014 will be $3 to $4 million per year.
- Will the cohort of people from whom you are taking samples in 2008 continue to be followed throughout the life of the study? Yes, we will do periodic annual follow up with telephone contact.
• Are you taking samples in the American Indian population? Unless they have agreed specifically to participate in the survey, we do not take any block groups on Native American tribal land. We do include block groups on the Menominee tribe through a separate agreement. We are working with the Great Lakes Inter-Tribal Council to encourage participation.

• What kind of medical advice is given to participants after screening results are received? This is not an exam, but the study staff will inform participants if results indicate that they should see a provider. A protocol is in place for emergency care.

Discussion continued on the access to information presently gathered at WCHQ, hospital organizations, randomization of choosing households, pooling resources, and using presently-established advisory boards versus organizing a new board. Also the definition was given for the mapping procedures used on rural and urban household measures. The goal of having the multiple levels of data is to link the outcomes to the care of the community characteristics.

It was suggested to link with the RWJF Aligning Forces for quality initiative and WHA’s Checkpoint data. Paul Moberg and Pat Remington also suggested other promising data sources.

D. Unit Updates - Unit Directors reviewed the information in the handout.

**Education and Training**

In addition to the handout, Tom Oliver described the past and upcoming seminars and reported on new Fellows and leadership teams. Advisory Board members raised questions, including the following:

• Is there commitment to better dispersion of Fellows to rural parts of Wisconsin? Service outside of Milwaukee has been an issue for a long time, rural areas are not being covered, and this was to be a state-wide program. Discussion followed that the model was set up with Fellows based at the State DHS, but they can link with DHS regional offices for training, supervision and core content. The idea is not to abandon the model but to look at what is missing in using the state health department to get into the rural areas. Tim Size emphasized the need to promote public health beyond governmental agencies.

• Pat Remington suggested [1] revisit the commitment to geographic diversity, [2] look at the objectives to see if they need to be reset, [3] look at strategies if the goal is for continued diversity including rural placements and what is the strategy to do that (rural positions were previously offered and the Fellows had greater interest in Madison or Milwaukee positions and there were spousal employment issues). Others noted that a strong body of research and experience exists to demonstrate what factors contribute to recruitment of candidates interested in rural careers, and that Bryon Crouse has expertise in this area.

• Pat Remington said he would ask the program for a report on the objectives, what have been the experiences and what is implied for the future. They have discussed having the Fellows spend time, in the summer, in a setting other than urban. Paul Moberg suggested this topic be addressed at the next meeting.

• Speakers for Population Health Sciences, including those speaking on global health initiatives, are listed on the Department website [http://www.pophealth.wisc.edu/](http://www.pophealth.wisc.edu/)

**Population Health Assessment**
Pat Remington further detailed the summary handout on the program. Board members applauded the press on Juneau County used for the County Health Rankings. Julie Willems Van Dijk works on the County Health Rankings which included 100+ media interviews with feedback from around the country. Sherry Johnson raised a question regarding the science behind the determinants. Pat Remington discussed a paper showing the determinants and model for the rankings. He noted that County Health Rankings are driving their work and encouraged viewing the website [http://www.countyhealthrankings.org/](http://www.countyhealthrankings.org/) The model and a paper describing how the various components are weighted are both available on the website.

**Health Policy**

Donna Friedsam reviewed the handout. She discussed the continuing evaluation of Medicaid and BadgerCare Plus and the completion of a two-year RWJ grant under the SHARE program. She also discussed a new hire, Daphne Kuo, who has her doctorate in quantitative sciences and sociology. She is working on a project with the Wisconsin Collaborative Health Care Policy to look at the high disparities rate of Black/White diabetic amputations.

Steve Brenton expressed interest in the near-term financial viability of BadgerCare and what we might learn from the evaluation. Donna Friedsam explained that the Institute study does not provide a financial audit but rather evaluates enrollment and take ups, crowd out, and will be starting to assess trends in utilization and cost of services.

**Evaluation Group**

Paul Moberg reviewed the handout. He noted his staff’s continuing work with Childhood Fitness with stimulus money that came into the Wisconsin Division of Public Health to increase physical activity. A discussion was held on the Childhood Fitness program and tracking physical fitness levels with pilot schools. If a State mandate is issued, the program is ready to be put in place.

**E. Old Business**

Acting Director – Paul Moberg has been in this position for nine months. The Department is negotiating with the UW School of Medicine and Public Health for filling this position. They are looking for a split between the Department and the Institute. The decision was made to include both a tenure track and a non-tenure CHS track. There will be a nation-wide recruitment.

Transition to the UW School of Medicine and Public Health – Pat Remington discussed the 2008 plan to provide feedback on research, service, engagement and education. The plan needs to turn from a vision statement to development of aims, objectives and goals with costs, faculty positions, etc. It was suggested the strategic plan should look at budget transition and parameter changes. Committees need to be developed in these areas and ways to back the work. The plan will be presented to the Executive Committee with approval by the UW School of Medicine and Public Health. Pat Remington said he will present the ideas of the committees to the Advisory Board.

**F. Members** - Members provided brief updates and the meeting was adjourned at 2:00 PM