MINUTES OF THE REGULAR MEETING
of the
BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM

Madison, Wisconsin

UW-Madison
Held in 1820 Van Hise Hall
Thursday, November 9, 2006
10:00 a.m.

- President Walsh presiding -

PRESENT:
Regents Bartell, Bradley, Burmaster, Connolly-Keesler, Crain, Cuene, Davis, McPike, Pruitt, Rosenzweig, Salas, Semenas, Smith, Spector, and Walsh

UNABLE TO ATTEND:
Regents Loftus and Randall

REPORT BY THE UW SCHOOL OF MEDICINE AND PUBLIC HEALTH ON ITS ACTIVITIES IN MILWAUKEE

Regent Vice President Bradley presiding

In introductory remarks, Regent Vice President Bradley reviewed the status of three issues that formed the background for the report.

First, when the Board of Regents approved the renaming of the UW Medical School to the UW School of Medicine and Public Health in November 2005, the school was asked to engage in good faith dialogues with UW-Milwaukee and the City of Milwaukee on strategies to address the significant public health challenges of the city. The school was further directed to provide the board with an annual report on its collaboration with UW-Milwaukee and the City of Milwaukee and its activities addressing the public health issues facing Milwaukee. This report is being presented at this meeting.
Second, the Board of Regents asked the School of Medicine and Public Health to report on the medical education provided to students at the Milwaukee Clinical Campus through its affiliation agreement with Aurora Health Care. Specifically, the board asked that, upon assuming the position of dean of the school, Dr. Robert Golden give prompt and careful attention to how best to address the need for physician and medical school involvement with the diverse populations found in Milwaukee’s central city as part of its affiliation agreement with Aurora. Dean Golden’s report is to be presented at this meeting.

Third, at the December 2006 meeting, the board is to receive a report on the planning process to assess health-related initiatives at UW-Milwaukee and options by which the university might better address the health needs in the region.

Introducing Dean Golden, Regent Bradley indicated that he assumed the deanship in July 2006, coming to the UW from his previous position as vice dean of the University of North Carolina School of Medicine and former chair of the UNC Department of Psychiatry. In more than 20 years at UNC, Dr. Golden held the Stuart Bondurant Distinguished professorship and proved himself a highly effective leader in academic medicine, launching a number of creative new programs.

In opening remarks, Dean Golden noted that he went to medical school in Boston, where students were involved with two hospitals – one that cared for the under-served and a university hospital that served a very different patient base. While both provided high quality care, there were differences in a number of areas, including access to care and attitudes toward patients. His professional work has always been in public institutions, with a key focus on breaking down those kinds of differences.

The first portion of his presentation concerned a report on collaborations in Milwaukee. These collaborations, he explained, are supported by the Wisconsin Partnership Program and by the UW School of Medicine and Public Health.

The Wisconsin Partnership Program collaborations involve a growing number of organizations, including the City of Milwaukee Health Department, Milwaukee research sites, UW-Milwaukee, the Center for Urban Population Health, the Medical College of Wisconsin, and organizations associated with the Community-Academic Partnership Fund.

The Community-Academic Partnership Fund, totaling $1.4 million, includes seven grants to community health organizations, amounting to $25,000 - $450,000 per grant. The purpose of these grants is to address public health needs and eliminate health disparities. Representative projects include:

- Improving birth outcomes in minority populations
- Providing social support and case management for women at risk for partner violence
- Promoting healthy and safe neighborhoods.

The next cycle of grants, for which 20 Milwaukee organizations have applied, are to be awarded in December 2006.
The City of Milwaukee Health Department was granted $1.069 million to promote the department as a flagship education and training site, with the expectation that many of the professionals trained there would stay in Milwaukee and serve the local populations. The grant also is intended to address critical public health issues, such as serving African Americans with cancer and a city-wide effort to create a HIV/AIDS service plan.

The Wisconsin Partnership Program granted $450,000 to Milwaukee research sites for the following efforts:

- Survey of the Health of Wisconsin (SHOW), long-range study of the health status of Wisconsin residents
- Wisconsin Health Research Network (WiNHR) of state-wide health care organizations
- Focus on health disparities, health status, access to care, and health promotion in under-served populations.

A grant of $1.3 million for UW-Milwaukee includes salary support for faculty and staff affiliated with the Center for Urban Population Health and funds to establish the regional partnership network with UW-Milwaukee and CUPH to reduce disparities in cancer care.

Funding of $299,839 was provided to the Center for Urban Population Health for a special initiative to address the health of Milwaukee public school children and to remove health-related barriers to learning -- a collaborative effort with UW-Milwaukee and the Milwaukee Public Schools.

Funding of $30,000 was provided to the Medical College of Wisconsin for the Healthy Wisconsin Leadership Institute, a statewide public health leadership training program, jointly supported by MCOW and the UW School of Medicine and Public Health, that created five community teams, one in Milwaukee, to reduce risky sexual behavior among adolescents.

In addition to the Wisconsin Partnership Program, the School of Medicine and Public Health is involved in other collaborations with United Community Center, UW-Milwaukee, the Milwaukee Clinical Campus, the Center for Urban Population Health, the UW Center for Tobacco Research and Intervention, and the Institute for Clinical and Translational Research.

United Community Center, a comprehensive human service organization serving Hispanics in Milwaukee, received $124,000 from the school to support development of clinical and research programs for Hispanics with Alzheimer’s Disease and to educate physicians on treatment and diagnosis of Alzheimer’s Disease in this population.

UW-Milwaukee received $50,000 to explore creation of a school of public health on that campus.

The Milwaukee Clinical Campus, which receives $500,000 annually, is considered an essential element of the school’s commitment to clinical learning experiences with urban under-served patients.
The Center for Urban Population Health, a partnership with Aurora Health Care, UW-Milwaukee, and the School of Medicine and Public Health, receives $380,000 annually for its work in improving the health of urban communities through health services research, education and training, and health promotion.

The UW Center for Tobacco Research and Intervention receives $2 million annually. The center has established an active outreach and research presence at Aurora Sinai for under-served populations; has expanded smoking cessation services to other Milwaukee clinics serving minority communities; and has collaborated with a network of minority populations on tobacco control programs.

The Institute for Clinical and Translational Research receives $200,000 annually to support the clinical and population health research infrastructure at Aurora Sinai. The school has applied for substantial support from the National Institutes of Health for this effort.

In total, the Wisconsin Partnership program has provided $4.6 million for Milwaukee collaborations, and the School of Medicine and Public Health has provided $3.25 million in support of Milwaukee programs, for a grant total of $7.86 million.

Dean Golden then made a statement to the board regarding the Milwaukee Clinical Campus.

Since his graduation from medical school, the dean indicated that he had chosen to work only at public institutions and was attracted to the UW School of Medicine and Public Health because of its well-developed statewide campus, which helps to advance the Wisconsin Idea. He stated his firm belief that the education of health sciences students should span society’s economic, geographic, ethnic, and cultural spectra.

To learn about Milwaukee’s complex healthcare and training issues, he had taken a number of steps:

- He made six visits to the city and toured community-based clinics, hospital units, and training sites.
- He visited United Community Center and discussed its health care programs with Director Ricardo Diaz.
- He toured Aurora Health Care’s under-served clinic network, including the Walker’s Point free clinic and clinical programs at Aurora Sinai Medical Center.
- He met with community health leaders, including the City of Milwaukee Commissioner of Health, directors of federally designated community health centers and other public and community health organizations.
- He met with Milwaukee faculty and medical students at Milwaukee training sites.
- He met with Dean Michael Dunn of the Medical College of Wisconsin and with leadership of Aurora Health Care, including the new CEO, Dr. Nick Turkal, a former member of the UW’s Milwaukee faculty.
He scheduled meetings with Mayor Tom Barrett and with Chancellor Carlos Santiago.

He learned that, while many resources are in place to provide effective clinical training, there are areas of concern that must be addressed and monitored.

First, the majority of medical students have requested clinical rotations in Milwaukee because of their wish to work with patients from under-served populations. The transition of Milwaukee faculty into the Aurora medical practice group resulted in turnover in a few key positions in Aurora Sinai that are now filled by new faculty leaders. Students based in Milwaukee were exposed to vocal unrest among a few departing faculty and there was, in some instances, inadequate attention to student training needs. While the majority of students’ clinical experiences in Milwaukee are with under-served populations, not all have received the opportunity to work with this patient group.

Second, in discussions with Milwaukee community leaders, Dean Golden heard their deep concern about the health of Milwaukee residents and their request that UW-Madison play a more significant role in solving the problems of inadequate access to health care, along with related social and economic issues.

In the area of medical student education, he reported that a task force recently completed cataloguing a wide array of learning opportunities with under-served populations and recommended ways to enrich that portion of the curriculum and increase such opportunities. Implementation of those recommendations is proceeding rapidly. In addition, the dean directed that student learning experiences at the Milwaukee Clinical Campus be closely monitored to insure that they receive high quality education about health care needs of the under-served.

Based on what he had learned to date, Dean Golden reported that he had formed the following conclusions:

- The new seven-year affiliation agreement with Aurora provides a solid foundation for the school’s continuing relationship with the underserved populations in Milwaukee. In that regard, he noted that Aurora is the primary provider for Milwaukee’s at-risk populations and the only one that has a hospital in the most disadvantaged area of the city. Aurora has made a public commitment to maintain Aurora Sinai Medical Center and has invested substantial resources in the facility.

- Problems of poor health and inadequate access to health care in Milwaukee are longstanding; and the “safety net” has gaping holes, especially as hospitals close, leaving Aurora Sinai as the primary inpatient resource for central Milwaukee.

- Aurora’s decision to reduce the number of its clinics in central Milwaukee and the transition to an Aurora employment model for teaching physicians has created the potential to reduce the number of student learning opportunities with under-served people. Stating that students must have access to such opportunities, he said that steps have been taken to insure that this occurs and that new training opportunities are being negotiated with community-based health centers outside of the Aurora system.
The new medical group established by the School of Medicine and Public Health and Aurora Health Care is now fully staffed and has a governance process that includes strong university input.

The school will continue to place as many students as possible in Milwaukee, with about 150 students there this year. Nearly two-thirds will learn some aspect of clinical medicine in Milwaukee during their time in medical school.

The education of medical students is not complete unless they learn, from physician role models who practice in these environments, of the unique health risks experienced by urban, disadvantaged populations. One of the school’s most important contributions to improving health care in Milwaukee may be the continuous production of physicians who choose to practice in under-served areas. Studies have shown that students who train in these settings often select them as sites for their practices.

The School of Medicine and Public Health supports the Milwaukee Health Care Partnership, Inc., recently formed by the city’s five health-care systems to bring more physicians to the central city.

Enhancing the school’s relationship with Milwaukee is one of the top priorities of his deanship, Dean Golden said, adding that he has initiated a planning process for several new collaborations in Milwaukee, all designed to address unacceptable problems of health-care access. For example, the school’s initiative to increase the numbers of physicians in rural Wisconsin can serve as an excellent model for development of a parallel initiative for the central city.

Stating that the School of Medicine and Public Health will continue to work towards creation of the most effective possible collaborations, Dean Golden concluded his remarks by cautioning that the school cannot solve all the problems of the central city. However, he was convinced that the school, working with partners, can have a transforming effect on improving the situation over time.

In discussion following the presentation, Regent Salas remarked that, while student interest in training in Milwaukee is encouraging, Aurora has continued to trim its clinical presence in the city. He asked what could be done to expand services and provide more sites for student learning. With regard to faculty unrest over the new Aurora contract, he asked how many left and how many decided to stay.

In reply to the latter question, Senior Associate Dean Gordon Ridley indicated that ten physicians left, 30 remained, and seven appeals were pending.

Dean Golden added that, while the school could not control Aurora’s actions, Aurora would be encouraged to do as much as possible to provide services in the central city. In his view, Aurora was stepping up to meet the challenge. Noting that the school could not set up clinics, he said that the need to find adequate training opportunities led him to discussions with other providers. While the school could not fill the gaps in health care, it could partner with others to make a positive difference, he added.
Commending Dean Golden for his commitment to increasing opportunities for student learning experiences in the central city, Regent Davis asked how the Board of Regents could help in that regard.

In response, Dean Golden asked that the board continue to be an effective advocate for the UW System and, hence, for the School of Medicine and Public Health, so that the school would have the resources needed to advance its objectives.

Second, he asked that regents, especially those who are familiar with Milwaukee, be a continuing source of advice and counsel in order to provide him with valuable perspective going forward.

Regent Burmaster commended initiatives with Milwaukee Public Schools on health issues. Noting a shortage of school nurses, she asked what could be done to alleviate that problem.

Dean Golden replied that he would share the concern with the dean of the School of Nursing, with whom he collaborates on a regular basis.

Regent Bartell asked if medical students are required to spend some time training in Milwaukee.

Replying in the negative, Senior Associate Dean Susan Skochelak explained that students spend 16 months in different rotations around the state, so that they train in different environments. Locations include Milwaukee, Marshfield and La Crosse. Students choose the rotations they want; and, while they are not required to go to Milwaukee, they are encouraged to do so. Currently, 88% train in under-served locations – a percentage that Dean Golden wants to raise.

In response to a question by Regent President Walsh, Dean Golden said that, while he did not know what could be done to encourage re-establishment of medical facilities in Milwaukee to replace those that closed, the School of Medicine and Public Health will partner with others in doing as much as possible to improve health care in the city.

Regent Vice President Bradley referred to a petition submitted on behalf of the SMPH classes of 2009 and 2010 and signed by more than 80 students, expressing concern about lack of adequate health care and training opportunities in central Milwaukee. Thanking the students for their comments, he noted that the issues they raised had been addressed in Dean Golden’s presentation and that they would receive further attention going forward.

Thanking Dean Golden for his presentation, Regent Vice President Bradley asked the dean to combine this report in future years with the annual report on the Wisconsin Partnership Program, presented to the board in May.

The meeting was adjourned at 11:00 a.m.
Submitted by:

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Judith A. Temby, Secretary