Call to Order

Dr. Ayaz Samadani called the meeting to order at 1:02 p.m.

Review of Minutes from Previous Meeting

Approval of the minutes was put on hold until the next meeting of the Committee.

Administration

Webcasting Council meetings

Herb Bostrom asked if webcasting the Council meetings was meeting the Council’s needs. He reported that from the February meeting the usage was as follows:

<table>
<thead>
<tr>
<th></th>
<th>Live</th>
<th>On-demand</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHFS staff</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
<td>15</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
<td>21</td>
</tr>
</tbody>
</table>

The Committee discussed and supported continued use of webcast for these events. The Committee discussed methods for publicizing the webcasts to other interested parties, such as the Educational Communications Board, Master’s in Public Health programs, and the UW Population Health Institute. Mr. Bostrom said that staff would look into all these options, develop a plan for getting this information out, and plan to revisit the issue in six months.

Resolution Dissemination and Communication Plan

Stacia Jankowski provided a draft document that outlined a process for communicating information about resolutions that are passed by the Council. JoAnn Weidmann said that she was not as concerned about how the resolutions are sent out, but in improving the feedback loop once they are distributed. Mr. Bostrom said that he can, as the Council’s legislative liaison, report back discussions that he may have heard, but that this would be a very subjective process and may not be the results the Council is looking for. Dr. Samadani asked that information about what happened to the resolution be recorded with the resolution itself. Gary Gilmore suggested that a brief handout that outlines the parts of a resolution, including a statement of purpose (whereas statements) and rationale, would help to sharpen the discussion and the proposal itself.

Ms. Weidmann also asked about what topics are brought before the Council. The Committee agreed that they do not see a reason to limit these topics, but do foresee a time when more thought may be needed to establish overarching goals that could guide the issues. Richard Perry expressed his concern about the purpose of the Council and allowing an open environment. Mr. Bostrom responded that as the Council is
currently structured, the committees are set to discuss and develop the resolution, leaving the Council to debate the policy. Mr. Baker noted that the Council needs more active participation of the full body of the Council, as many members remain silent in the meetings. He suggested that the Council encourage members to bring their issues forward.

Mr. Perry also asked about the limited staff resources as new issues are raised beyond the priorities that have been set for the committees. Mr. Bostrom responded that although staff resources in the agency as a whole are limited, Council staff will continue to work with the committees to meet their needs. In addition, he cautioned the committee to think beyond the staff that is supporting the Council. As issues are raised that are relevant to other areas, the Council may be asked to work with staff members that are expert in that area. Dr. Samadani said he did not want to see the progress of the Council hindered or diminished due to administrative restrictions. He suggested that the Council send a message to public leaders noting resources are stretched, and although staff have been helpful in meeting the needs of the Council, this problem is only going to get worse as competing priorities arise for staff.

The Committee discussed the possible creation of a new legislative committee to oversee all of these issues. The Committee decided this was not necessary, but Dr. Samadani suggested that all members of the Council meet with their legislators to discuss what the Council is about and its goals for the next year. He asked that staff prepare a list of committee members with their legislators identified, including phone and e-mail information if possible. In addition, legislative issues should be addressed through the two existing committees, possibly as a standing agenda item. The Committee expressed its interest in encouraging Council members to participate in a committee, but not to the point of requiring it.

**Committee Issues**

**Emergency Preparedness Committee**

Mr. Baker reported that the Emergency Preparedness Committee has twice proposed language on vaccine and antiviral distribution to the Council, but both times the Council sent it back to the committee because it needed to be broadened. He noted that this resolution should be in place before the next flu season, and asked for direction from the Executive Committee.

Mr. Bostrom noted that there is a similar effort occurring involving state staff and that he was interested in the two groups working together on this issue. Mr. Baker said that staff spoke to the committee at its last meeting and they are working to coordinate their activities. Dr. Samadani recommended that the Council vote on the language as it currently stands, and amend it once state staff have developed a plan. The Executive Committee agreed with this suggestion.

**State Health Plan Committee**

Mr. Perry reported that he and Mr. Baker had met to discuss how they should work together to ensure that there is no duplication across the two committees, and plan to keep in close contact. Mr. Perry said that Kelli Jones had provided a number of options for a definition of “health disparities” and the committee had agreed on a definition that would serve as a working definition. This definition will be referred to the minority health council that is being discussed by the minority health leadership team when it is formed. This definition will be brought before the Council for consideration.

**Discussion Items**

**Health Literacy**

Dr. Samadani said that he thought that literacy was an important issue to health, and asked that fact sheets be put together for the Council’s review. This item was to be added to the agenda for June 9 as a discussion item.

**Health Information Technology**

Dr. Samadani asked for an update on health information technology at the next meeting. Ms. Jankowski
said that she would follow up to see if Susan Wood would be available to speak at the next meeting.

**Miscellaneous**

Dr. Samadani suggested that the Council discuss options for instituting a standard pharmacy formulary that is cost effective and effective from a treatment standpoint. He would like this to be researched (including identifying the experts in this area, what is at stake, and the major players on this issue) and presented to the Council for their consideration. Ms. Weidmann cautioned that there may be unintended consequences related to such a proposal, so thorough investigation is necessary. Dr. Samadani asked that the State Health Plan Committee take on this issue.

Dr. Samadani stated that he thought the officers of the Council should serve the same term in office as their term on the Council. Ms. Jankowski said that her understanding of the statute was that an election had to be held at the first meeting of every year. If the Council chose to elect the same officers, that was its prerogative. Ms. Jankowski will send a copy of the relevant sections of the statutes to Executive Committee members for their consideration.

**Council Agenda**

The following additions were made to the June 9 agenda:

- Health Literacy
- Health Information Technology
- Resolution communication and dissemination as part of the Executive Committee report
- Background for the Nutrition and Physical Activity State Plan

**Next Meeting**

The next meeting of the Executive Committee is scheduled for July 21, 2006, from 1:00 to 3:00 p.m. at the Wisconsin Medical Society, 330 East Lakeside Street, Madison.

**Adjournment**

Dr. Samadani adjourned the meeting at 2:45 p.m.

Recorded by Stacia Jankowski
Bureau of Health Information and Policy