Public Health Council

STATE OF WISCONSIN

MINUTES OF THE MEETING OF AUGUST 5, 2005

Council Members Present: Ayaz Samadani (Chair); Sandy Anderson (Vice-Chair) (teleconference); Gary Gilmore (Secretary); Bevan Baker; Christopher Fischer; Stephen Hargarten; Terri Kramolis; Charles LaRoque; Loren Leshan; Corazon Loteyro; Douglas Nelson; Richard Perry; Kurt Reed (teleconference); Thai Vue; Julie Willems Van Dijk; Jeanan Yasiri

Council Members Absent: John Bartkowski (Vice-Chair); José Avila; Jayne Bielecki; Catherine Frey; June Munro; Elizabeth Radueg; JoAnn Weidmann

Division of Public Health Staff: Sheri Johnson, Administrator; Herb Bostrom, Deputy Administrator; Pat Guhleman; Thomas Haupt; Stacia Jankowski; Henry Nehls-Lowe; Marianne Peck; Margaret Schmelzer; Dennis Tomeczyk

Guests: DeAnnah Byrd, American Cancer Society; Patrick Remington, UW Medical School, Department of Population Health Sciences; Matthew Stanford, Wisconsin Hospital Association

Call to Order
At 10:05 a.m., Dr. Ayaz Samadani called the meeting to order.

Administration

Review of minutes from June 10, 2005, meeting
Mr. Richard Perry made a motion to approve the minutes as written. Dr. Corazon Loteyro seconded the motion. The motion carried unopposed.

Letterhead
The Council requested the following:
- Center the mission statement; and
- Use the blue version that photocopies the best.

Committee Business

Executive Committee
Dr. Samadani provided an overview of the items discussed at the last meeting including:
- Semi-annual report, for distribution in October;
- Nominating committee appointments and planning for the election of 2006 officers;
- Coordination and collaboration between the Emergency Preparedness Committee and the State Health Plan Committee; and
- A joint meeting composed of members from the Executive Committee and the Public Health Advisory Committee (PHAC) to discuss the current status and future of PHAC.

Emergency Preparedness Committee
Dr. Kurt Reed provided an overview of the changes incorporated into the Emergency Preparedness
Committee Charter. He reported that Committee members have been asked to review the items listed under “Assignments,” identify the top three to five priorities, and provide activities that are relevant to those priorities.

The Council requested the following changes:

- Second paragraph, spell out Emergency Medical Services (EMS) the first time it appears.
- Within the mission statement, include the Homeland Security Council and Statewide Trauma Advisory Committee (STAC) and reference public health preparedness and hospital preparedness programs instead of CDC and HRSA programs in the following way: “Members will work to ensure the engagement of local health departments and hospitals, EMS and their key partners in the program and will facilitate the integration of the public health preparedness and hospital preparedness programs and the activities of the Homeland Security Council and Statewide Trauma Advisory Committee (STAC) with other emergency preparedness efforts that are statewide.”
- To more broadly capture the partners now and in the future, state the first line of the mission statement to include community-based in the following way: “The Public Health Council Emergency Preparedness Committee will provide guidance and oversight to the planning and implementation of the public health, hospital and pre-hospital, and community-based emergency preparedness programs.”

Dr. Reed asked for information regarding Assembly Bill 385. This bill would provide liability coverage for providers licensed at any time within the past ten years and give local authorities the ability to designate these individuals as agents of the state in case of an emergency. Herb Bostrom said that the bill has been sent to the Senate and hearings were held in July.

**State Health Plan Committee**

Mr. Perry reported that a small workgroup has been developing a year-long plan, which will be a topic of discussion at the August 19, 2005 meeting. He proposed collaboration between the Emergency Preparedness Committee and the State Health Plan Committee to reduce duplication. The Council was in favor of collaboration.

Dr. Gary Gilmore noted that the dashboard strategic planning approach has been mentioned multiple times by the Council. He has sought and received approval to share the American Cancer Society’s version of the model with the Council.

**Homeland Security Council follow-up discussion**

Dr. Samadani raised the issue of how the system should continue to operate efficiently with limited funding. Dr. Stephen Hargarten suggested that a summit of the emergency preparedness and public health leadership (e.g., Homeland Security Council, HRSA programs) be called under the broader scope of the Council to allow a forum for collaboration and to identify budgetary issues. Dr. Samadani asked that this suggestion be considered for future discussions on the agenda.

Dr. Samadani also asked that communication about emerging issues between existing councils, such as with the Homeland Security Council, be discussed at a future meeting. Julie Willems Van Dijk asked that the Council remember its role as a policy-maker.

**Infant mortality**

DeAnnah Byrd provided an overview of the issue brief, “Reducing Black Infant Mortality in Wisconsin: Best Practices and Model Programs.” She used the most recent five years of data from the Department’s Wisconsin Interactive Statistics on Health (WISH) database for this analysis. Ms. Byrd reported that even after adjusting for known risk factors available in the database, there still remains a disparity in infant outcomes based on race, suggesting that there are unmeasured factors not being accounted for. The leading causes of black infant death were short gestation and low birth weight. She said that, although she did not
evaluate the methods used for reducing this rate, other states are providing services that go beyond prenatal care to address associated behavioral risk factors, such as smoking and alcohol abuse.

Dr. Samadani said that the Executive Committee will discuss the issue of infant mortality at its next meeting.

**Public Health Leadership Institute**

Dr. Patrick Remington said that the University of Wisconsin Medical School and the Medical College of Wisconsin are working on a joint program that they are referring to as the “Healthy Wisconsin Leadership Institute.” This institute will bring the two schools together with the public health community to train the public health leaders of today and the future. Dr. Remington reported that the planning for this institute is in the final stages, and implementation will begin in September. The funding commitment from each medical school is $200,000. Programs will be implemented through community teams, health policy forums, distance-based learning, and mentored teaching. Dr. Remington asked that people contact him or Dr. Peter Layde if they are interested in public health leadership as participants, mentors, or learners.

**Report on public health accountability in Scandinavia**

Dr. Gilmore provided an update that he had presented in four Scandinavian countries in late May through mid-June in concert with a Stockholm conference of the International Union for Health Promotion and Education regarding the results of the six-year national Competencies Update Project (CUP) research effort he chaired on entry and advanced-level health education competencies. Dr. Gilmore presented an overview of the CUP research, significant results, trends in public health education in European countries, and collaboration efforts that are being discussed. Dr. Gilmore provided the following link to the list of core public health competencies from the Council on Linkages:

www.trainingfinder.org/competencies/list.htm.

**Methamphetamine report**

Henry Nehls-Lowe, of the Division of Public Health, provided a report on the impact of methamphetamine, its prevalence in Wisconsin, and activities that are occurring within the Department of Health and Family Services to address the many facets of this problem.

**Pandemic influenza report**

Thomas Haupt, of the Division of Public Health, presented an overview of the threat of pandemic flu.

**Announcements**

No announcements were made.

**Agenda Items for Next Meeting**

- Obesity, nutrition, and physical activity
- Emergency preparedness with limited funding
- Communication with other councils (e.g., Homeland Security Council)

**Adjournment**

Dr. Samadani adjourned the meeting at 2:28 p.m.