Call to order

At 10:04 a.m., Dr. Ayaz Samadani called the meeting to order.

Administration

Review of minutes from October 14 and November 4, 2005, meetings

Dr. Gary Gilmore requested that some indication that the November 4 meeting was a special session be included. John Bartkowski made a motion to approve both sets of minutes written with the addition of an appropriate heading on the November 4 minutes. Richard Perry seconded the motion. The motion was unanimously approved.

Evaluation report

Dr. Samadani reviewed the evaluation for the meeting. He said that he was concerned about the lower scores in the items related to being prepared for the meeting and asked for suggestions for improving this. Dr. Samadani suggested sending the materials to the members a little earlier. Cathy Frey requested that when the materials are sent out, the Executive Committee should identify questions for the Council to consider. This will provide a structure for the discussion at the meeting.

Semi-Annual Report

Ms. Wood provided an overview of the report, which was provided in the packets to the members. She reported that the Council had decided to provide a semi-annual report. Julie Willems Van Dijk requested that where an action item is referenced, the final document contain these as attachments.

Report from the University of Wisconsin-Madison and University of Wisconsin-Milwaukee on the vision for public health education and training

Dr. Phillip Farrell, Dean of the University of Wisconsin School of Medicine and Public Health, began by noting that the Council will probably want regular updates on the status of educating the public health
workforce. He said that updates are provided on a regular basis through materials on the School of Medicine and Public Health Web site, including an annual report. He reported that the Department of Population Health has the largest graduate program at the University of Wisconsin-Madison, with over 600 students in a variety of programs.

Dr. Patrick Remington said that there are 90 students in the Department’s combined MS, MPH, and PhD programs, of whom 30 are in the newly formed Master of Public Health (MPH) program. Of the students in the MPH program, about a dozen work in public health or a public health-related field. Relatively few of these individuals will have an MPH as their only graduate degree. The school is just now beginning to accept applications for its second class of MPH students. The School of Medicine and Public Health is looking to become accredited through the Council on Education for Public Health (CEPH) with a generalist focus. Initially, the School had elected a 36-credit program, which could be completed in one year, but with recent increased credit requirements by CEPH the program will need to be a two-year program. The School is in the process of establishing two dual degree programs with the School of Nursing and the LaFollette School of Public Health, allowing for a one-year addition to their graduate studies to receive this degree. In the future, the School may focus on epidemiology and international health, which students have expressed a lot of interest in and the School has sufficient infrastructure to support.

Dr. Remington also touched on the Fellowship Program, which will have 10 fellows across the state for two-year programs, and the Healthy Wisconsin Leadership Institute, which will provide one-year on-the-job training to public health practitioners (broadly defined) to learn applied skills that focus on leadership but build on competency.

Dr. Randall Lambrecht, Dean of the College of Health Sciences, was present to represent the University of Wisconsin-Milwaukee. He reported that UW-Milwaukee is the only school in the United States with an urban doctoral research program and supports public health through courses within each of the programs offered. Dr. Lambrecht reported that the University of Wisconsin-Milwaukee has a number of efforts centered in locations within the community, such as clinics, which serve as a learning lab for students. Dr. Lambrecht acknowledged that there has been a push for UW-Milwaukee to deliver more formal public health education and training, but it has not had the resources. He noted that one of the needs expressed concerning workforce in Wisconsin is diversity in the public health workforce. He reported that UW-Milwaukee can begin to work on this issue through a focus on diversifying its faculty. Planning for the future includes developing a PhD in public and community health (in collaboration with the Medical College of Wisconsin), offering professional graduate degrees in public and community health, looking at the credentialing tiers, and broadening the influence of public health through others schools within UW-Milwaukee.

Thai Vue asked about programs or services that provide education for minority or disadvantaged groups. Dr. Lambrecht reported that UW-Milwaukee has been successful in recruiting and retaining minorities in their programs, operates a number of pre-college programs, and offers support networks to assist students with their education. Mr. Vue responded that he thinks these efforts need to go further so the issue is not just addressed by the educational institutions (for example, sensitizing parents).

Dr. Gary Gilmore asked about ways to link current and emerging public and private entities to effectively and efficiently use resources across the state. Dr. Remington said that students and faculties are currently working across the state, but they could work to better understand the programs to determine the best area for students to get the education they need. The School of Medicine and Public Health is exploring options to use distance learning and other methods to partner with other programs. Dr. Lambrecht said that these efforts need to examine the strengths that each partner brings to the table to establish an effective partnership or collaboration that results in effectively working across programs.

John Bartkowski said that the Sixteenth Street Health Center serves as a training site for the health educator program in Milwaukee. He expressed concern over the idea expressed by Dr. Farrell that there are more graduates than there are positions and stressed there is a need to focus on community-based agencies that are addressing public health. Mr. Bartkowski suggested we need to broaden our discussion of the public health
workforce to include private entities. He said that he has more physicians with MPHs seeing patients, but noted that only about 40% of clinic activities are done within the confines of the clinic – the rest are done out in the community by staff without public health experience. Dr. Remington responded that the vision of the School of Medicine and Public Health is to incorporate both medicine and public health practice. He also said that the program hopes to place members from their fellowship program in private as well as governmental public health positions.

Sandy Anderson asked about the focus on rural sites. Dr. Farrell said that there is a misconception that the UW-Madison School of Medicine and Public Health is a Madison school when it is in fact a statewide school. Dr. Farrell reported that the School of Medicine and Public Health is confident it will continue to address the concerns of both rural and urban health.

Julie Willems Van Dijk asked about the timeline for implementing a distance-based MPH program at the School of Medicine and Public Health. Dr. Remington responded that the initial program was designed to be campus-based because over two-thirds of the MPH students are engaged in special training. So, although the School recognizes the need for distance-based education, its next step is to develop training in a continuing education format. Dr. Remington said that the source of the training is not as important as the quality, and as a result the School would need to go back to the partnerships and collaboration mentioned earlier to identify existing distance-based efforts among both public and private entities before investing in a distance-based program.

Jeanan Yasiri suggested that if the Council wants to be thoughtful about this issue, it should study what can be done to keep graduates in the state and make appropriate proposals to that end to the Governor and the Secretary.

Dr. Samadani requested that Council staff send a letter of appreciation to Dean Farrell and Dean Lambrecht, identifying those items that were of importance to the Council, including accreditation, funding, the need for coordination and collaboration among the academic institutions, and addressing the needs of minority populations (both as students and as clients).

**Avian influenza report**

Dr. Jeffrey Davis, Chief Medical Officer for Communicable Diseases and Preparedness in the Division of Public Health, reported that there is a pandemic plan in place, which is based on the influenza plan. He described the process for the creation of this plan, which describes how the different partners (state and local government and other agencies) would take action based on the level of the pandemic. Dr. Davis said that the State Health Officer would have primary responsibility for implementation of this plan. He provided a handout that outlined the main elements of the influenza plan and Wisconsin’s preparedness related to avian influenza.

**Open forum**

Ms. Weidmann reported on the status of the Public Health Advisory Committee (PHAC). She reported that at the last PHAC meeting a resolution was passed on the proposed concealed-carry legislation, and an in-depth discussion occurred on new eligibility requirements for the Medicaid program.

**Education and Training Advisory Committee (EdTRAC) briefing**

Moira Lafayette, Training and Education Coordinator for the Division of Public Health, provided an overview of the EdTRAC system. EdTRAC is a forum for DPH and other public health training partners to address training and workforce issues, and to make recommendations to key stakeholders and partners on training needs assessment; linkage to workforce standards and competencies; continuing education and curriculum development; linkage to education and training partners; workforce enumeration and recruitment; and emerging workforce trends and initiatives. Representatives in EdTRAC include academic institutions, local and state government, professional associations and organizations, and community-based organizations.
Dr. Samadani said that there is a lot of crossover between EdTRAC and the Public Health Leadership Institute, and asked how they differ. Ms. Lafayette said that she sees the Public Health Leadership Institute as targeting those already in a leadership role, whereas EdTRAC is to focus on a competency-based approach.

**Emergency Preparedness Committee Report**

Dennis Tomczyk reported on behalf of the Emergency Preparedness Committee. He said that the Committee has continued to meet as scheduled, has voted on a list of issues that were identified by the Committee, and from the priorities that have emerged have begun to identify which issues they feel should be addressed by each of the committees of the Council. Mr. Tomczyk said that the list was developed by the Committee, which offers a fairly broad representation of the partners across the state, but is in no way a scientific means of establishing priorities for the Committee.

Dr. Charles LaRoque noted that as the only tribal member on the Council, he was concerned about the low scoring for the issue related to funding for the tribes. Mr. Tomczyk said that he will take these comments to the next Committee meeting.

**State Health Plan Committee Report**

Richard Perry distributed a report on the activities of the State Health Plan Committee. He highlighted a few concerns, including the lack of funding support for maintaining the evidence-based practices Web site and the fact that the Committee is seeking to add diversity to its membership.

Ms. Willems Van Dijk asked if the Committee had discussed planning for the next state health plan and what the role of the Council will be. Herb Bostrom said that this has been discussed, and other options have also been discussed, such as a five-year plan. Such a plan would allow for real short-term objectives to be established and evaluated.

**Announcements**

Tom Anderson, Division of Public Health, reported that a meeting will be held on January 18, 2006, to begin discussing preparedness options for the care of special needs populations and those in health care facilities.

Cathy Frey announced that the Nominating Committee has met and sent an e-mail request for nominations from Council members. She reported that the Committee will meet following the January 11 deadline to develop the slate of candidates, and will provide that to the Council.

**Adjournment**

Dr. Samadani adjourned the meeting at 2:58 p.m.