Proposed Alternate Partnership Program

Better verification of supplanting of funds
Existing plan calls only for a 'pledge' of non-supplanting; should be a more investigative and pro-active procedure.

Make "stewardship" a core tenet of the RFPs.
The medical schools should make it clear that these funds do not belong to them but are the property of the people of Wisconsin

Remove Deans from the process.
Both schools' plans give the Deans a major voice in the approval of applications for partnerships. Given that medical school faculty will be submitting project proposals, this represents a conflict of interest.

Make "Access" a priority.
Healthiest Wisconsin 2010 makes "Access" to health care a top priority. The RFP should reflect this and weight it accordingly in the application language.

Define the terms of faculty involvement.
Both schools require 'faculty involvement' in community partnerships. The schools need to define whether this means that a faculty member must be a salaried staff member or whether he or she can simply serve on the board of directors

Expand 'voluntary appointment' process.
UW Medical School's plan includes a provision to allow persons not affiliated with the medical school to get a 'voluntary appointment' to the school and thus serve as the faculty partner to a local project. This is important for projects outside Milwaukee and Madison.

Modify pre-approved university initiatives.
UW Medical School says it has already pre-approved several projects initiated by their own staff. These projects should either not be funded out of funds dedicated to community partnerships or should have to apply and compete like any other group

Explain faculty availability.
Since both medical schools require the involvement of medical school faculty, it should be asked whether medical school faculty will be required or even encouraged to volunteer for these community-based projects. Will the medical schools pay for their time or will the projects themselves be expected to bear that cost?