

9/16/24

## BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM

### **Education Committee**

Thursday, September 26, 2024  
10:30 a.m. – 12:00 p.m.

Ballroom A & B (Rooms 116/118)  
UW-Parkside Student Center  
930 Wood Rd  
Kenosha, Wisconsin  
& via Zoom Videoconference

- A. Calling of the Roll
- B. Declaration of Conflicts
- C. Proposed Consent Agenda:
  - 1. Approval of the August 22, 2024 Meeting Minutes of the Education Committee
  - 2. Approval of Appointments to the University of Wisconsin School of Medicine and Public Health Oversight and Advisory Committee of the Wisconsin Partnership Program
- D. Host Presentation by UW-Parkside: Studying the Arts Drives Student Success
- E. Discussion: Continuing Education Across the Universities of Wisconsin and the UW Strategic Plan
- F. Triennial UW Developmental Education Report

September 26, 2024

**APPOINTMENTS TO THE UNIVERSITY OF WISCONSIN SCHOOL OF  
MEDICINE AND PUBLIC HEALTH OVERSIGHT AND ADVISORY  
COMMITTEE OF THE WISCONSIN PARTNERSHIP PROGRAM**

**REQUESTED ACTION**

Adoption of Resolution C.2., approving appointments to the Oversight and Advisory Committee of the Wisconsin Partnership Program.

**Resolution C.2.** That, upon recommendation of the Chancellor of the University of Wisconsin-Madison and the President of the University of Wisconsin System, the Board of Regents approves the reappointment of Dr. Elizabeth Felton and Dr. Manish Shah as representatives of the University of Wisconsin School of Medicine and Public Health (SMPH) and Cedric Johnson and Greg Nycz as public members to the SMPH Oversight and Advisory Committee of the Wisconsin Partnership Program for four year terms effective November 1, 2024 through October 31, 2028.

**SUMMARY**

The Regents are asked to approve the reappointment of Dr. Elizabeth Felton, Cedric Johnson, Greg Nycz, and Dr. Manish Shah for four-year terms on the UW SMPH Oversight and Advisory Committee of the Wisconsin Partnership Program (WPP) effective November 1, 2024 through October 31, 2028.

**Presenter**

- Amy J.H. Kind, MD, PhD, Associate Dean for Social Health Sciences and Programs, UW School of Medicine and Public Health; Executive Director, WPP, on behalf of Robert N. Golden, MD, Dean, UW School of Medicine and Public Health; Robert Turell Professor in Medical Leadership; Vice Chancellor for Medical Affairs, UW-Madison.

**BACKGROUND**

The UW SMPH is home to the WPP, a grantmaking program within SMPH established because of a generous endowment gift from Blue Cross Blue Shield United of Wisconsin. The WPP, a

true embodiment of the Wisconsin Idea, is committed to improving health and advancing health equity across Wisconsin through investments in community partnerships, education, and research.

The WPP operates in full accordance with the Wisconsin Insurance Commissioner's Order (Order) of March 2000. The Order approved the conversion of Blue Cross Blue Shield United of Wisconsin from a nonprofit service corporation to a stock insurance corporation and the distribution of half of the proceeds from the sale of stock to establish the WPP endowment at the SMPH.

In compliance with the Order, the Board of Regents created the Oversight and Advisory Committee (OAC), consisting of four public members representing different community health categories and four SMPH representatives appointed by the Regents upon recommendation of the Dean of the SMPH, and one member appointed by the Wisconsin Office of the Commissioner of Insurance. The OAC is responsible for directing, approving, and monitoring the use of funds for community-engaged public health initiatives and public health education and training. Through WPP's annual reports, the OAC fulfills the obligations in the Order to report on the expenditure, use and evaluation of the full portfolio of WPP's funded programs and projects.

In accordance with the Order and the OAC Bylaws, the Board of Regents has the following oversight responsibilities for the WPP:

- Reviews annual reports;
- Receives financial and program audits, which are required at least every five years;
- Approves five-year plans; and
- Appoints OAC members upon recommendation of the SMPH Dean.

In accordance with the Order, Dean Golden recommends for reappointment:

A) Public members;

- **Cedric Johnson**, Manager of Advocacy and Alliances at Exact Sciences, will serve as a community health advocate concerning the health of children and families. Mr. Johnson has built strong partnerships with neighborhoods, community organizations, and businesses to drive systems change to improve health equity for underserved populations;
- **Greg Nycz**, Chief Executive Officer of the Family Health Center of Marshfield, Inc., will serve as a community health advocate concerning rural health. Mr. Nycz has dedicated his career to expanding access to health care for rural and low-income populations; and

B) School of Medicine and Public Health representatives:

- **Elizabeth Felton**, MD, PhD, Assistant Professor, Department of Neurology. Dr. Felton is a neurologist who specializes in epilepsy with an emphasis on clinical care for women with epilepsy. She created the UW Health Adult Epilepsy Dietary Therapy Clinic.

- **Manish Shah**, MD, MPH, Professor and Chair of the SMPH BerbeeWalsh Department of Emergency Medicine. Dr. Shah, who has served as chair of the OAC since May 2022, has dedicated his career to improving care for acutely ill or injured older adults. His work helped establish the field of geriatric emergency medicine.

## **ATTACHMENTS**

- A) Elizabeth Felton, MD, PhD, biographical sketch
- B) Cedric Johnson biographical statement
- C) Greg Nycz biographical sketch
- D) Manish Shah, MD, MPH, biographical sketch

**BIOGRAPHICAL SKETCH**

Provide the following information for the Senior/key personnel and other significant contributors. Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Felton, Elizabeth A

eRA COMMONS USER NAME (credential, e.g., agency login): [REDACTED]

POSITION TITLE: Assistant Professor of Neurology

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	Completion Date MM/YYYY	FIELD OF STUDY
Northwestern University, Evanston, IL	BS	06/1998	Chemical Engineering
University of Wisconsin, Madison, WI	MS	05/2002	Biomedical Engineering
University of Wisconsin, Madison, WI	PhD	05/2007	Biomedical Engineering
University of Wisconsin, Madison, WI	MD	05/2009	Medicine
Johns Hopkins Bayview Medical Center, Baltimore, MD	Intern	06/2010	Internal Medicine Internship
The Johns Hopkins Hospital, Baltimore, MD	Resident	06/2013	Neurology
The Johns Hopkins Hospital, Baltimore, MD	Fellow	06/2015	Epilepsy

**A. Personal Statement**

I am an assistant professor and board-certified neurologist with subspecialty certification in epilepsy in the University of Wisconsin-Madison Department of Neurology. My areas of clinical and research expertise focus on ketogenic dietary therapy for adults with epilepsy and on women with epilepsy, including hormone related seizure patterns (i.e., catamenial epilepsy).

During neurology residency and epilepsy fellowship I developed a strong clinical research interest in the use of ketogenic diets for adults with epilepsy. I was awarded the NINDS R25 Research Education Program for Residents and Fellows in Neurology grant. My research focused on women starting a ketogenic diet and the relationship between their menstrual cycle, seizures, and ketosis. A sub-project investigated improved treatment for women with catamenial seizure patterns (seizures that correlate with the menstrual cycle and are traditionally difficult to treat) on the modified Atkins diet (a type of ketogenic diet).

Now as an assistant professor at UW-Madison I am combining the fundamental skills developed during my PhD research with the clinical and research interests I developed during my neurology residency and epilepsy fellowship. I created the UW Health Adult Epilepsy Dietary Therapy Clinic and developed a clinical research program investigating the use of the ketogenic diet for adults with epilepsy. This is aimed at addressing the large gap in knowledge regarding the mechanisms, optimal patient selection, and potential beneficial effects (beyond seizure reduction) of ketogenic therapy for epilepsy in adults with a special emphasis on women with epilepsy. There is a paucity of rigorous clinical trials investigating dietary therapy for epilepsy and even less looking at women with epilepsy. I look forward to making contributions in this area and launching a research career with a special focus on ketogenic diets and women with epilepsy.

I am a graduate of the American Academy of Neurology (AAN) Diversity Leadership Program and serve as the UW-Madison Department of Neurology Diversity, Equity and Inclusion Officer. I am involved in several DEI

efforts locally as well as nationally with my professional societies. I am passionate about reducing neurology health disparities, educating about implicit bias and improving diversity and representation in the sciences.

I look forward to continuing to serve as a member of the Wisconsin Partnership Program Oversight and Advisory Committee. I will continue to bring my research background, interest in reducing health disparities, commitment to diversity and love of Wisconsin to my role.

## **B. Positions, Scientific Appointments, and Honors**

### **Positions and Employment**

2021 – present	Department of Neurology Diversity, Equity, and Inclusion Officer, University of Wisconsin School of Medicine and Public Health
2021 – present	Associate Director, Medical Scientist Training Program, University of Wisconsin School of Medicine and Public Health
2021 – present	Associate Program Director for Recruitment, Department of Neurology, University of Wisconsin School of Medicine and Public Health
2018 – present	Ketogenic Diet Program Director, University of Wisconsin School of Medicine and Public Health
2015 – present	Assistant Professor of Neurology, University of Wisconsin
2015 – present	Affiliate Faculty, Department of Biomedical Engineering, University of Wisconsin

### **Scientific Appointments**

2022 – present	Co-Chair, Fellows and Junior Investigators Professional Development Committee, American Epilepsy Society
2022 – present	Co-Chair, Dietary Therapies for Epilepsy Special Interest Group, American Epilepsy Society
2022 – present	Member, Fellowship Curriculum workgroup, American Epilepsy Society
2022 – present	Member, Diversity, Equity, and Inclusion Committee, American Epilepsy Society
2021 – present	Co-Chair, Education Workgroup of the American Neurological Associations Inclusion/Diversity/Equity/Anti-racism/Social Justice (IDEAS) Task Force
2020 – present	Abbott Sensors in Ketogenic Diet Advisory Board
2019 – present	Chair, Medical Scientist Training Program Diversity & Outreach committee, UW Madison
2019 – present	Member, Professional Advisory Board, Epilepsy Foundation of Wisconsin
2017 – present	Member, Epilepsy Benchmark Stewards Committee, American Epilepsy Society/National Institute of Neurological Disorders and Stroke
2015 – present	Member, American Neurological Association
2015 – present	Member, Wisconsin Neurological Society
2013 – present	Member, American Epilepsy Society
2013 – present	Member, American Clinical Neurophysiology Society
2005 – present	Member, American Academy of Neurology

### **Honors**

2022	Fellow of the American Epilepsy Society (AES)
2022	American Academy of Neurology (AAN) Diversity Leadership Program
2022	American Academy of Neurology (AAN) Health Care Equity Scholarship
2019	UW Health Patient and Family Experience Provider Champion Award
2018	Travel Award for the International Society of Neurogastronomy Symposium
2018	Travel Bursary Award for the 6th Global Symposium on Ketogenic Therapies for Neurological Disorders
2016	Epilepsy Board Certified, American Board of Psychiatry and Neurology
2015	Medical License, Wisconsin Medical Examining Board
2013	Neurology Board Certified, American Board of Psychiatry and Neurology

### C. Contributions to Science

1. Epilepsy Fellowship: The classic ketogenic diet and the modified Atkins diet (MAD) are both effective nonpharmacologic therapies for adults with epilepsy. Despite the increasing number of women of childbearing age starting ketogenic diets, little has been published about the diet's effect on the menstrual cycle. During my epilepsy fellowship I evaluated the relationship between the menstrual cycle, seizures, and ketosis in women of childbearing age on dietary therapy (specifically MAD) for epilepsy. Data from this work was presented at three conferences, including one that won a poster award (a below) and one that was selected for podium presentation in 2015 at the American Epilepsy Society Ketogenic Diet Special Interest Group (c below). A sub-project involved methods to better treat women who have a catamenial seizure pattern while on the modified Atkins Diet. Data collection is still ongoing, and UW-Madison is now a second data collection site. This research was performed under the mentorship of Drs. Mackenzie Cervenka and Eric Kossoff, internationally recognized experts in dietary therapy for epilepsy at The Johns Hopkins Hospital. These investigations laid the foundation for my current research.
  - a. **Felton EA**, Cervenka MC, Henry BJ. The Relationship between the Menstrual Cycle, Seizures, and Ketosis. American Epilepsy Society 69th Annual Meeting; 2015 December; Philadelphia, PA.
  - b. **Felton EA**, Kossoff EH, Henry BJ, Cervenka MC. An Evaluation of the Catamenial Seizure Pattern in Women on the Modified Atkins Diet for Treatment of Epilepsy. 4th Global Symposium for Dietary Therapies for Epilepsy and other Neurological Disorders; 2014 October; Liverpool, England.
  - c. **Felton EA**, Kossoff EH, Henry BJ, Cervenka MC. An Evaluation of Catamenial Seizure Patterns and the Relationship between the Menstrual Cycle, Seizures, and Ketosis in Women on the Modified Atkins Diet for Treatment for Epilepsy. American Epilepsy Society 68th Annual Meeting; 2014 December; Seattle, WA.
2. Since joining the UW-Madison Department of Neurology I developed the Adult Neurology Ketogenic Diet Therapy Clinic, which was new offering for the neurology department and one of only ~10 such clinics across the United States. My research is focused on developing a personalized medicine approach for dietary therapy customization and response prediction to reduce seizure burden and comorbidities in people with epilepsy. My sub-focus is investigating hormonal effects in women on ketogenic diets. I also have an interest in improving pediatric to adult transition for patients on ketogenic therapies.
  - a. Cervenka MC, Henry BJ, **Felton EA**, Patton K, Kossoff EH. Establishing an Adult Epilepsy Diet Center: Experience, efficacy, and challenges. *Epilepsy Behav.* 2016;58:61-8. doi: 10.1016/j.yebeh.2016.02.038. PMID: 27060389
  - b. **Felton E** & Faltersack K. "Initiation of Ketogenic Therapy – Adult – Inpatient Clinical Practice Guideline." 2018. UW Health, Madison WI.
  - c. Seaborg K, Faltersack K, **Felton EA**. Transition of Care for Adolescent and Young Adult Patients on Dietary Therapy for Epilepsy. *J Pediatr Epilepsy.* 2020; 9(4):114-8. doi: 10.1055/s-0040-1716550.
  - d. **Felton EA**, Henry-Barron BJ, Jan AK, Shegelman A, Faltersack K, Vizthum D, Cervenka MC. The Feasibility and Tolerability of Medium Chain Triglycerides in Women with a Catamenial Seizure Pattern on the Modified Atkins Diet. *Nutrients.* 2021;13(7):2261. PMID: PMC8308415
3. Since joining the UW-Madison Department of Neurology I have also become involved in the NIH U01 Epilepsy Connectome Project (ECP). This is a joint project between UW-Madison and the Medical College of Wisconsin. Imaging, neuropsychological data, and serology is being collected in 200 adult patients with temporal lobe epilepsy (TLE) to investigate brain connectivity changes. I have an interest in women with epilepsy and specifically catamenial (menstrual cycle related) seizure patterns, so am investigating differences in connectivity in women with temporal lobe epilepsy.
  - a. Williams L, Hwang G, Zhao G, Hermann B, Struck A, Nair V, Prabhakaran V, **Felton E**. "Epilepsy Connectome Project (ECP) – Cognitive Gender Differences in Temporal Lobe Epilepsy." American Epilepsy Society 73<sup>rd</sup> Annual Meeting; December 2019; Baltimore, MD.
  - b. Hwang G, Nair VA, Mathis J, Cook CJ, Mohanty R, Zhao G, Tellapragada N, Ustine C, Nwoke O, Rivera-Bonet C, Rozman M, Allen L, Forseth C, Almane DN, Kraegel P, Nencka A, **Felton E**, Struck A, Birn R, Maganti R, Conant L, Humphries C, Hermann B, Raghavan M, DeYoe E, Binder J, Meyerand ME, Prabhakaran V. Using low-frequency oscillations to detect temporal lobe epilepsy with machine learning. *Brain Connect.* 2019;9(2):184-93. PMID: PMC6484357

- c. Hermann B, Conant L, Cook CJ, Hwang G, Garcia-Ramos C, Dabbs K, Nair VA, Mathis J, Rivera Bonet CN, Allen L, Almane DN, Arkush K, Birn R, DeYoe EA, **Felton E**, Maganti R, Nencka A, Raghavan M, Shah U, Sosa VN, Struck AF, Ustine C, Reyes A, Kaestner E, McDonald C, Prabhakaran V, Binder JR, Meyerand ME. Network, Clinical and Sociodemographic Features of Cognitive Phenotypes in Temporal Lobe Epilepsy. *Neuroimage Clin.* 2020;27:102341. PMID:PMC7381697

**Complete List of Published Work in MyBibliography:**

<https://www.ncbi.nlm.nih.gov/myncbi/1Deyiz90OHe/bibliography/public/>



Cedric Johnson  
Manager, Advocacy and Alliances  
Exact Sciences, Corp.

Cedric Johnson is the Manager of Advocacy and Alliances with Exact Sciences, Corp., a molecular diagnostics company specializing in the detection of early-stage cancers. In this role, he helps develop and manage relationships with advocacy and public health organizations nationwide. His career experience spans the utility, non-profit, and advertising industries with an emphasis on strategic relationship management and corporate philanthropy. Outside of work, Cedric is an avid traveler, museum-goer, fan of film, fashion, art, and literature. He studied Creative Writing at Knox College in Galesburg, IL and is certified by the International Association for Public Participation. In addition to serving on the Oversight and Advisory Committee he serves on the boards of the Chazen Museum of Art, United Way of Dane County Foundation, and Friends of Madison Arts Commission.

## Biographical Sketches for Key Management Staff

**BIOGRAPHICAL SKETCH**

Provide the following information for the Senior/key personnel and other significant contributors in the order listed on Form Page 2.  
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Nycz, Greg, R		POSITION TITLE Chief Executive Officer, Family Health Center of Marshfield, Inc.	
eRA COMMONS USER NAME (credential, e.g., agency login)			
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY
University of Wisconsin, Stevens Point	B.S.	1972	Mathematics, Psychology Computer Science
U.S. PHS Primary Care Policy Fellowship	Fellowship	1997	Primary Care Policy

**A. Personal Statement**

I have been involved in one capacity or another with Family Health Center since its' planning grant in 1972, taking over responsibility for the program in 1980 and as Executive Director of the new corporation, Family Health Center of Marshfield, Inc. in 1990. I have been privileged to work for a wonderful Board of Directors comprised of dedicated people intent on improving access to basic health care services and reducing or eliminating health disparities throughout northcentral Wisconsin. Our dedicated staff are equally committed to our mission. Finally, we are fortunate to have many great partners who share our passion for improving the health of our communities and the wellbeing of all those who experience barriers to care.

**B. Positions and Honors.****Positions and Employment**

1972-73 Biostatistician, Marshfield Medical Foundation, Wisconsin Regional Medical Program Contract  
1973-75 Data Comptroller for Marshfield Medical Foundation, Harvard Center for Community Health and Medical Care Project  
1975-80 Director of Information Systems, Marshfield Medical Foundation  
1980-9/97 Director, Health systems Research Department, Marshfield Medical Research and Education Foundation, a Division of Marshfield Clinic, Wisconsin  
1980-1990 Director, Family Health Center program  
1990-present Executive Director, Family Health Center of Marshfield, Inc.  
2022-present Chief Executive Officer, Family Health Center of Marshfield, Inc.

**Other Experience and Professional Memberships**

Wisconsin Primary Health Care Association: Board Member, 1982 - present; Chair, 1986 – 4/89  
Wisconsin Dental Association, Access to Health Care Committee, 1993 - 2000  
Technical Advisory Panel for the Project HOPE Walsh Center for Rural Health Analysis, 10/96-2008  
Wisconsin Area Health Education Center System, January 97-04, Vice Chair 98-12/01, Chair 12/01-04  
Great Lakes Inter-Tribal Council, Honoring Our Children Project Advisory Committee, 10/98-2010  
Wisconsin Population Health Policy Institute Advisory Board, Summer 2001 – present  
State of Wisconsin, Governor's Health Care Worker Shortage Committee, Summer 2002  
University of Wisconsin School of Medicine of Public Health, Oversight and Advisory Committee, October 2002 - present  
Children's Health Alliance, Healthy Smiles for Wisconsin Coalition, 2002 – present  
University of Wisconsin School of Medicine of Public Health, Partnership Education and Research Committee, April 2004 – present  
National Institute of Health Director's Council of Public Representatives (COPR), April 2009 – March 2011  
PEW Children's Dental Campaign, Research Advisory Group, 2010  
Legislative Council Study Committee, Special Committee on Health Care Access, chaired by Sen. Olsen and

Rep. Kessler, July 2010

### **Honors**

American Dental Association Access Recognition Award, Milwaukee, WI, September 16, 1995  
National Association of Community Health Centers Advocacy Award for outstanding work to advance the legislative agenda of the health center movement, December 13, 1996  
Wisconsin Rural Health Association's "2000 Rural Health Achievement Award" in recognition of his leadership, innovation, and service for rural health in Wisconsin, presented at the Third Annual Rural Health Conference in Wisconsin Rapids, April 27, 2000.  
NACHC Grassroots Advocacy Hall of Fame, in recognition of long time efforts and dedication to building Health Center Advocacy power and furthering the Health Center Policy Agenda at the federal level, 3/20/07  
Wisconsin Primary Health Care Association Lifetime Achievement Award, Health Center Hall of Fame, in recognition of improving public health care access for all, February 3, 2009  
National Network for Oral Health Access, Oral Health Champion Award, October 26, 2010  
Marshfield Clinic Heritage Award, In recognition of outstanding service to Marshfield Clinic, State of Wisconsin and beyond, December 10, 2014  
2018 Geiger Gibson Program Distinguished Visitor, Milken Institute School of Public Health, 2018

### **Presentations**

Testimony of Mr. Greg Nycz to the Senate Special Committee on Aging, Washington, DC, September 13, 2006  
Testimony before the House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies Wednesday, March 5, 2008  
Primary Hlth Care All-Grantee Mtg, Oral Hlth: New Approaches for Financing Services, Nat'l Harbor, MD, 6/08  
Institute of Medicine, Committee on Oral Health Access to Services Public Workshop, San Francisco, CA, 7/27/10  
Healthcare Innovations Expo, Cannon House Office Building, Washington, DC, September 28, 2010  
Panelist, Kaiser Family Foundation Dental Forum, Filling the Gaps: Dental Care, Coverage and Access, Washington, DC, June 19, 2012.  
Testimony of Greg Nycz (invitation), Subcommittee on Primary Health and Aging, Senate Committee on Health, Education, Labor and Pensions (HELP), Dental Crisis in America: The Need to Address Cost, Washington, DC, September 12, 2013.  
NASHP 27<sup>th</sup> Annual State Health Policy Conference, Blossoming Opportunities to Improve Diabetes Care and Reduce Costs, The Importance of Medical/Dental Integration In the Care of Diabetic Patients, Atlanta, Georgia, October 8, 2014.  
Wisconsin Collaborative for Healthcare Quality Assembly Meeting, Operationalizing the Surgeon Generals' Pronouncement That Oral Health is Essential to General Health and Well-being, March 14, 2017  
National Association of Community Health Centers, Veterans Oral Health: A Role for Health Centers, NACHC Community Health Institute, August 28, 2017

### **Publications**

Glurich I, Nycz G, Acharya A (2017), Status Update on Translation of Integrated Primary Dental-Medical Care Delivery for Management of Diabetic Patients, Clin Med Res Volume 14, Number 2: 83-92; PMID: [28373288](https://pubmed.ncbi.nlm.nih.gov/28373288/).  
Rieselbach RE, Epperly T, Nycz G, Shin P: Community Health Centers Could Provide Better Outsourced Primary Care for Veterans, Journal of General Internal Medicine, October 5, 2018.  
Rieselbach RE, Epperly T, McConnell E, Noren J, Nycz G, Shin P: Community Health Centers: A Key Partner to Achieve Medicaid Expansion, J Gen Intern Med, 34(10); 2268-2272, October 2019.  
Nycz G, Acharya A, Glurich I: Solutions to Dental Access Disparity: Blueprint of an Innovative Community Health Center-Based Model for Rurally Based Communities, J Public Health Dent, 2019;1-5.  
<https://doi.org/10.1111/jphd.12347>.  
MacNeil R, Hilario H, Ryan M, Glurich I, Nycz G, Acharya A: The Case for Integrated Oral and Primary Medical Health Care Delivery: Marshfield Clinic Health System, J Dent Educ, 2020;1-8,  
<https://doi.org/10.1002/jdd.12289>.  
Nycz G, Shimpi N, Glurich I, et al: Positioning operations in the dental safety net to enhance value-based care delivery in an integrated health-care setting. J Public Health Dent. 2020;1-6. <https://doi.org/10.1111/jphd>.  
doi: 10.3389/froh.2021.670355  
Nagarajan R, Panny A, Berg R, Acharya A, Nycz G: Variations in temporal trends in non-traumatic dental condition related emergencies. J Public Health Dent. 2022;82:289-294. <https://doi.org/10.1111/jphd.12528>

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**BIOGRAPHICAL SKETCH**


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NAME: Shah, Manish N

eRA COMMONS USER NAME: XXXXXXXXXX

POSITION TITLE: Professor of Emergency Medicine, Population Health Sciences, and Geriatrics

**EDUCATION/TRAINING**

INSTITUTION AND LOCATION	DEGREE	Completion Date	FIELD OF STUDY
University of Chicago, Chicago, IL	B.A.	06/1992	Biology
University of Rochester, Rochester, NY	M.D.	05/1996	Medicine
Ohio State University, Columbus, OH	Residency	06/1999	Emergency Medicine
Robert Wood Johnson Clinical Scholar, University of Chicago, Chicago, IL		06/2001	Health Services Research
University of Rochester, Rochester, NY	M.P.H.	12/2006	Clinical Investigation

**A. Personal Statement**

I am a leading geriatric emergency care researcher, dedicated to improving illness care. My work is focused on developing, testing, and implementing innovative models of care for acutely ill older adults, particularly including prehospital paramedics and emergency medical technicians. I strive for these models to prevent avoidable emergency department (ED) visits and to deliver acute illness care in the community setting.

I have performed foundational studies to understand the extent of ED care provided to older adults and the drivers of using the ED for this care. Using these studies' data, I have developed community paramedicine-based models of care. With NIA funding, I have performed the first randomized controlled trial to test a specific application of community paramedicine for care transitions. I have also completed the only study to test the effect of telemedicine on the rate of ED use by senior living community residents. More recently, I have transitioned my work to focus more specifically on persons with Alzheimer's Disease and related dementias (ADRD), with studies developing and testing new models of emergency care. Through a recently completed K24 Midcareer Development Award from NIA and a newly-funded U19 from NIA I have been continuing this work to improve prehospital care of persons with ADRD.

As an established medical/surgical subspecialty-based aging researcher with extensive grant funding (e.g., Beeson K23, K24, and R01-level awards), I am committed to building the field by mentoring early career faculty as they develop independent research careers. I have served as a mentor on 11 career development awards (including a K24), mentor numerous faculty, and have held major research faculty development roles including as the Vice Chair of Research (Emergency Medicine), and the Director of the KL2 Program at the University of Wisconsin's NIH-funded Institute for Clinical and Translational Research (ICTR). Additionally, I serve as an advisory board member for the Wisconsin Alzheimer's Disease Research Center Research Education Core, the NIA Clin-Star Advisory Board, and the NIA Beeson (K76) Program Advisory Committee. Through these roles (and my own training), I have developed my skills as a mentor and coach, particularly for trainees and early career faculty.

Ongoing and recently completed projects that I would like to highlight include:

NIH. U19AG078105

Chodosh, Brody, Grudzen, Shah (MPI)

09/15/23-9/14/28

ED-LEAD: Emergency Departments LEading the transformation of Alzheimer's and Dementia care

NIH. R61AG069822/R33AG069822

Hwang, Shah (MPI)

09/30/20-05/31/25

Geriatric Emergency care Applied Research network 2.0 - Advancing Dementia Care (GEAR 2.0 ADC)

NIH. P30AG062715

Asthana (PI). Role: Co-Lead, Care Research Core

04/01/19-03/31/24

Wisconsin Alzheimer's Disease Research Center

NIH. 2KL2TR002374

Shah (PI). Role: Director, KL2 Program

The Institutional Clinical and Translational Sciences Award

07/01/2022-02/30/2027 (stepped down after becoming Department Chair)

#### Citations:

1. **Shah MN**, Jacobsohn GC, Jones CMC, Green RK, Caprio TV, Cochran AL, Cushman JT, Lohmeier M, Kind AJH. Care Transitions Intervention Reduces ED Revisits in Cognitively Impaired Patients. *Alzheimer's & Dementia: Translational Research & Clinical Intervention*. 2022;8(1):e12261. PMID: 35310533. PMCID: PMC8919246
2. Jacobsohn GC, Jones CMC, Cochran AL, Green RK, Caprio TV, Cushman JT, DuGoff EH, Kind AJH, Lohmeier M, Mi R, **Shah MN**. Effectiveness of a Care Transitions Intervention for Older Adults Discharged Home from the Emergency Department: A Randomized Controlled Trial. *Academic Emergency Medicine*. 2022;29(1):51-63. PMID: 34310796. PMCID: PMC8766871.
3. Yadgir SR, Engstrom C, Jacobsohn GC, Green RK, Jones CMC, Cushman JT, Caprio TV, Kind AJH, Lohmeier M, **Shah MN**, Patterson BW. Machine learning assisted screening for cognitive impairment in the emergency department. *Journal of the American Geriatrics Society*. 2022;70(3):831-837. PMCID: PMC8904269
4. Patterson BW, Engstrom CJ, Sah V, Smith MA, Mendonca EA, Pulia MS, Repplinger MD, Hamedani AG, Page D, **Shah MN**. Training and Interpreting Machine Learning Algorithms to Evaluate Fall Risk after Emergency Department Visits. *Medical Care*. 2019; 57(7) 560-566. PMCID: PMC6590914

## B. Positions, Scientific Appointments, and Honors

### Positions and Scientific Appointments (selected)

2023-Present Affiliate Faculty, Center for Demography of Health & Aging, University of Wisconsin-Madison

2022-Present Chair, BerbeeWalsh Department of Emergency Medicine, University of Wisconsin-Madison

2022-Present The Azita G. Hamedani Distinguished Chair of Emergency Medicine, University of Wisconsin-Madison

2022-Present Chair, Oversight and Advisory Committee, Wisconsin Partnership Program, University of Wisconsin-Madison (a \$400 million endowment to fund community-based research to enhance health and health equity)

2020-Present Beeson Program Advisory Committee, NIA-American Federation of Aging Research

2019-Present Clin-Star Advisory Board, NIA-American Federation of Aging Research

2019-Present Co-Lead, Care Research Core, Alzheimer's Disease Research Center, University of Wisconsin-Madison

2019-Present Member, Advisory Board, Wisconsin Alzheimer's Disease Research Center Research Education Core, University of Wisconsin-Madison

2018-Present Professor with Tenure, Depts. of Emergency Medicine, Population Health Sciences, and Medicine (Geriatrics), University of Wisconsin School of Medicine & Public Health

2016-2022 Director, KL2 Program, Institute for Clinical and Translational Research, University of Wisconsin-Madison

2015-2022 The John & Tashia Morgridge Chair of Emergency Medicine Research, University of Wisconsin-Madison

2015-2022 Vice Chair of Research, Dept. of Emergency Medicine, University of Wisconsin-Madison

2013-Present Editorial Board, *Journal of the American Geriatrics Society*

## Honors (selected)

2022	Pioneer Award from the Academy of Geriatric Emergency Medicine
2021	Academic Career Achievement Award from the Academy of Geriatric Emergency Medicine
2019	Gerson-Sanders Award from the Academy of Geriatric Emergency Medicine
2009	Lloyd Leve Emergency Medical Services Leadership Award
2009	Harriet Weber Emergency Medical Services Leadership Award
2008	Champions Award, US Administration on Aging for the Livingston Help for Seniors Program
2006	Society for Academic Emergency Medicine, Young Investigator Award
2006	Paul B. Beeson Career Development Award in Aging Research

## Clinical Licensures and Specialty Board Certifications

2015-	Wisconsin Medical License
2001-2016	New York Medical License
2000	Diplomate, American Board of Emergency Medicine (renewed 2010, 2020)

## C. Contributions to Science

1. Recruiting and retaining subjects into research studies to achieve the necessary sample size for data analysis is one of the greatest challenges faced by researchers, as the proportion of studies that fail to achieve the necessary sample size is unacceptably high. Techniques used to optimize identification and then enrollment of subjects, particularly the most vulnerable subjects, have been identified and communicated by my group. These techniques have been used successfully complete numerous prospective cohort studies and clinical trials.
  - a. **Shah MN**, Swanson P, Rajasekaran K, Dozier A. Repeat EMS use by older adults in a rural community: Impact on research methods and study length. *Prehospital Emergency Care*. 2009; 13(2): 173-178. PMID: 19291553; **PMCID: PMC2657922**
  - b. **Abar B**, DeRienzo V, Glick J, Wood N, **Shah MN**, Schneider S, Adler D. Implementation of an emergency medicine research associates program: Sharing 20 years of experience. *Western Journal of Emergency Medicine*. 2018; 19(3):606-612. PMID: 29760863; **PMCID: PMC5942032**
  - c. Mi R, Hollander MM, Jones CMC, DuGoff EH, Caprio TV, Cushman JT, Kind AJH, Lohmeier M, **Shah MN**. A randomized controlled trial testing the effectiveness of a paramedic-delivered Care Transitions Intervention to reduce emergency department revisits. *BMC Geriatrics*. 2018; 18:104. PMID: 29724172; **PMCID: PMC5934842**
  - d. Gilmore-Bykovskiy AL, Gleason C, Jin Y, Flowers-Benton S, Block LM, Dilworth-Anderson P, Barnes L, **Shah MN**, Zuelsdorff M. Recruitment and Retention of Underrepresented Populations in Alzheimer's Disease Research: A Systematic Review. *Alzheimer's & Dementia*. 2019; 5:751-770. PMID: 31921966; **PMCID: PMC6944728**
2. I have led numerous prospective cohort studies and clinical trials, the majority of which involved identifying and consenting older adults (including those with dementia) in the ED. These studies have successfully achieved their targeted enrollment levels, primarily through optimized identification and consent processes, robust operational oversight, and rapid response to the inevitable research challenges.
  - a. **Shah MN**, Jones CMC, Richardson TM, Conwell Y, Katz P, Schneider SM. Prevalence of depression and cognitive impairment in older adult EMS patients. *Prehospital Emergency Care*. 2011; 15(1): 4-11. PMID: 20977363; **PMCID: PMC2991565**
  - b. **Shah MN**, Wasserman EB, Gillespie SM, Wood NE, Wang H, Noyes K, Nelson D, Dozier A, McConnochie KM. High-intensity telemedicine decreases emergency department use for ambulatory care sensitive conditions by older adult senior living community residents. *Journal of the American Medical Directors Association*. 2015; 16(12): 1077-1081. PMID: 26293419 (PMC not applicable)
  - c. Holden T, **Shah MN**, Gibson TA, Weiss RE, Yagapen AN, Malveau SE, Adler DH, Bastani A, Baugh CW, Caterino JM, Clark CL, Diercks DB, Hollander JE, Nicks BA, Nishijima DK, Stiffler KA, Storrow AB, Wilber ST, Sun BC. Outcomes of patients with syncope and suspected dementia. *Academic Emergency Medicine*. 2018; 25(8):880-890. PMID: 29575587; **PMCID: PMC6156993**
  - d. Jacobsohn GC, Maru AP, Green RK, Gifford A, Lukasik MD, Bandara T, Caprio TV, Cochran AL, Cushman JT, Jones CMC, Kind AJH, Lohmeier M, Shah MN. Multimethod Process Evaluation of a Community Paramedic Delivered Care Transitions Intervention for Older ED Patients. *Prehosp*

3. Knowing the medical and social factors that drive emergency care use leads to the opportunity to develop and test models of care that 1) prevent problems from reaching such a point that they require ED care or 2) deliver unscheduled care in a manner that reflects the unique needs of older adults. My work has particularly focused on community-based and patient-centered interventions. Ambulance-based paramedics and emergency medical technicians are a highly skilled resource that has traditionally only provided life-saving interventions and transport to hospitals, but are a tremendous resource for broader community-health activities (called community paramedicine). I have performed much of the foundational research related to community-paramedicine's role for older adults.
  - a. **Shah MN**, Caprio TV, Swanson P, Rajasekaran K, Ellison JH, Frame P, Cypher P, Karuza J, Katz P. A novel emergency medical services-based program to identify and assist older adults in a rural community. *Journal of the American Geriatrics Society*. 2010; 58(11):2205-2211. PMID: 21054301; **PMCID: PMC3057729**
  - b. Mi R, Hollander MM, Jones CMC, DuGoff EH, Caprio TV, Cushman JT, Kind AJH, Lohmeier M, **Shah MN**. A randomized controlled trial testing the effectiveness of a paramedic-delivered Care Transitions Intervention to reduce emergency department revisits. *BMC Geriatrics*. 2018; 18:104. PMID: 29724172; **PMCID: PMC5934842**
  - c. Lau HS, Hollander MM, Cushman JT, DuGoff EH, Jones CMC, Kind AJH, Lohmeier MT, Coleman EA, **Shah MN**. A qualitative evaluation of the coach training within a community paramedicine care transitions intervention. *Prehospital Emergency Care*. 2018; 22(4):527-534. PMID: 29432041; **PMCID: PMC6028315**
  - d. **Shah MN**, Hollander MM, Caprio TV, Conwell Y, Cushman JT, DuGoff EH, Jones CMC, Kind AJH, Lohmeier M, Mi R, Coleman EA. Improving the ED-to-home transition: The community paramedic-delivered Care Transitions Intervention. *Journal of the American Geriatrics Society*. 2018; 66(11):2213-2220. PMID: 30094809; **PMCID: PMC6235696**
4. Technology provides significant potential to 1) prevent problems from reaching such a point that they require ED care or 2) deliver unscheduled care in a manner that reflects the unique needs of older adults. My work has particularly focused on the role of telemedicine for older adults, with a specific examination of the role of telemedicine for older adults with ADRD. I have led original research to investigate the potential of telemedicine as well as the feasibility, acceptability, validity, and outcomes of telemedicine to enhance the health of older adults.
  - a. **Shah MN**, Gillespie SM, Wood N, Wasserman EB, Nelson DL, Dozier A, McConnochie KM. High-intensity telemedicine-enhanced acute care for older adults: an innovative health care delivery model. *Journal of the American Geriatrics Society*. 2013; 61(11):2000-2007. PMID: 24164485 (PMC not applicable)
  - b. **Shah MN**, Wasserman EB, Wang H, Gillespie SM, Noyes K, Wood NE, Nelson D, Dozier A, McConnochie KM. High-intensity telemedicine decreases emergency department use by senior living community residents. *Telemedicine and e-Health*. 2016; 22(3):251-258. PMID: 26252866 (PMC not applicable)
  - c. **Shah MN**, Wasserman EB, Gillespie SM, Wood NE, Wang H, Noyes K, Nelson D, Dozier A, McConnochie KM. High-intensity telemedicine decreases emergency department use for ambulatory care sensitive conditions by older adult senior living community residents. *Journal of the American Medical Directors Association*. 2015; 16(12):1077-1081. PMID: 26293419 (PMC not applicable)
  - d. Gillespie SM, Wasserman EB, Wood NE, Wang H, Dozier A, Nelson D, McConnochie KM, **Shah MN**. High intensity telemedicine reduces emergency department use by older adults with dementia in senior living communities. *Journal of the American Medical Directors Association*. 2019; 20(8):942-946. PMID: 31315813; **NIHMSID: NIHMS1530853**

**Complete List of Published Work in MyBibliography:**

<http://www.ncbi.nlm.nih.gov/sites/myncbi/manish.shah.1/bibliography/40444380/public/?sort=date&direction=descending>

**UW-PARKSIDE HOST CAMPUS PRESENTATION:  
“STUDYING THE ARTS DRIVES STUDENT SUCCESS”**

**REQUESTED ACTION**

For information and discussion.

**SUMMARY**

Choosing to study the arts transforms student lives in profound ways. How? Majoring in theatre, music, or art and design fosters the development of what has recently been re-named “the power skills.”<sup>1</sup> These are skills such as teamwork, conflict management, communication, empathy, and creative problem-solving; they make up the toolkit of student and career success.

A brief example: Last fall, the turntable on which the entire set for *Meteor Shower* was built, jumped its central pivot point—rendering it inoperable—two days before opening night. The set weighed hundreds of pounds. Through teamwork, communication, creative problem solving and—given the stress of the situation—a little conflict management, theatre students and staff worked tirelessly together to avert disaster. Due to these power skills, the production opened on time, with its rotating set that impressed audiences!

This is but one example of the experiential learning in real-time and under real-life pressures that students in the arts learn to navigate on the road to life-long achievement. Provost Cecil will offer more ways in which studying the arts drives student success, inviting students themselves to speak about their individual journeys.

**Presenters**

- Matt Cecil, Interim Provost and Vice Chancellor, UW-Parkside
- Janet Jurado, Theatre Arts student
- Liam Simpson, Communication and Digital Media and Production student
- Gabe Cruze, Music student

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<sup>1</sup> <https://www.thomsonreuters.com/en-us/posts/legal/power-skills-rebranding/>



**CONTINUING EDUCATION ACROSS THE UNIVERSITIES OF  
WISCONSIN AND THE UW STRATEGIC PLAN**

**REQUESTED ACTION**

For information and discussion.

**SUMMARY**

The discussion will explain how Continuing Education (CE) teams across the Universities of Wisconsin will contribute to the goals of the UW 2023-2028 Strategic Plan in professional development, community engagement and other high demand non-credit programs. This item was originally planned for the August, 2024 meeting, but was moved to allow time for a full discussion.

**Presenters**

- John Fons, Director of Noncredit Programming, Continuing Studies, UW-Madison
- Beth Hein, Executive Director of Educational Pathways and Outreach, UW-Stout
- Jess Lambrecht, Executive Officer for Continuing Education & Workforce Training, UW-Green Bay
- Lynn Weiland, Director, Extended Learning in Graduate and Extended Learning, UW-La Crosse
- Jason Beier, Interim Associate Vice President, Office of Online and Professional Learning Resources, Universities of Wisconsin Administration

**BACKGROUND**

One objective of the UW Strategic Plan<sup>1</sup> is to “engage thoughtfully with the employer community to identify and address employer talent, support and research needs.” This includes engaging 500,000 Wisconsin residents by 2028 in professional development, workforce skills training, and community engagement.

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<sup>1</sup> [wisconsin.edu/president/strategic-plan/](https://www.wisconsin.edu/president/strategic-plan/)

Leaders in CE from four UW universities will discuss how their programs are actively working to achieve the goals outlined in the Strategic Plan. They will highlight the role of CE in strengthening the state's education pipeline through lifelong learning initiatives, the ways in which their teams are forging and nurturing partnerships with employers across Wisconsin, and the collaborative efforts taking place among CE education departments.

The discussion will begin with an overview and snapshot of enrollments and programming in CE specific to Strategic Plan goals. CE directors will then explain and provide examples from across the UWs of their contributions to lifelong learning and the educational pipeline, their connections with regional employers and corporate engagement, and their collaborations across campuses to reach as many students as possible.

### **Related Reports and References**

- Universities of Wisconsin [Academic Program Planning, Review, & Array Management](#)

### **Related Policies**

- Wisconsin Statutes § 36.05(7): "[Definition of Extension](#)"
- UW System Administrative Policy 125: "[Maintaining Continuity of Extension, Statewide Outreach and Public Service Following the 2017 University of Wisconsin System Restructure](#)"
- UW System Administrative Policy 127: "[Identification of the Extension Function in the University of Wisconsin System](#)"
- UW System Administrative Policy 130: "[Programming for the Non-Traditional Market in the UW System](#)"

### **Discussion Questions**

- What barriers do we face as CE leaders while looking at expanding programming?
- How are decisions made when establishing collaborative programs between universities?
- Where do CE leaders around the state see opportunities for growth? How are those opportunities evaluated?
- Are there barriers to program array planning, particularly those that the Regents could address?
- What other information, questions, or considerations might Regents want to know about program planning on campus?

## **TRIENNIAL UW DEVELOPMENTAL EDUCATION REPORT**

### **REQUESTED ACTION**

For information, discussion, and to inform future decision-making.

### **SUMMARY**

The Universities of Wisconsin Office of Policy Analysis and Research will share highlights from the 2024 Developmental Education Report. A summary of results in each area is provided in Attachment A, and the [full dashboard report can be found here](#).

### **Presenter**

- Dr. Ben Passmore, Associate Vice President for Policy Analysis and Research, UW Administration

### **BACKGROUND**

In November 1988, the Board of Regents adopted Resolution 5088, requiring students who are not well-prepared for college-level mathematics or English courses to take developmental coursework to ensure they have the skills needed to succeed in their course of study. The Board also requires, under Resolution 7382, that the UW report on the status of developmental education every three years.

That report on developmental education is organized and presented as an interactive dashboard. This dashboard allows the Regents and public to examine the performance of different universities and of different groups of students in detail. The dashboard provides a tool for UW universities to evaluate the success of efforts with different populations on their campuses.

Pursuant to the Board resolution, the report provides information of developmental education in the areas of:

1. Students requiring and completing developmental education.
2. College level course enrollments and completion.

3. Retention and graduation outcomes by developmental education status.
4. Outcome by developmental education status and courses taken in the 1<sup>st</sup> year.
5. Institutional efforts to reduce developmental education needs and promote student success.

## **ATTACHMENTS**

A) Summary Results of the 2024 UW Report on Developmental Education

## 2024 UNIVERSITIES OF WISCONSIN REPORT ON DEVELOPMENTAL EDUCATION: SUMMARY OF RESULTS

The [2024 UW Report on Developmental Education](#) provides information on developmental education in five areas:

1. Students requiring and completing developmental education;
2. College level course enrollments and completion;
3. Retention and graduation by developmental education status;
4. Student outcome by developmental education status and course taken in the 1<sup>st</sup> year; and
5. University efforts to reduce developmental education needs and promote student success.

### 1. Students requiring and completing developmental education.

- Among fall 2023 new freshmen, 4,572 or 17% were required to enroll in developmental math education. The percentage of students requiring developmental math education varied between 17% (2016, 2021) and 22% (2019) over the last ten years.
- The percentage of new freshmen requiring developmental English education was 6% (1,653 students) for fall 2023 cohort. In the last decade, this percentage was highest in fall 2014 (8%) and lowest in fall 2020 (5%).
- Of fall 2022 new freshmen requiring developmental math education, 63% (3,135 students) completed the requirement in a year. This rate is higher than it was in fall 2021 but well below the highest completion rate in 2014 of 72%.
- Of fall 2022 new freshmen requiring developmental English education, 1,217 or 64% completed the requirement in a year. This is the highest completion rate since 2014, though still well below the 2014 high (73%).
- First-generation college students, non-immediate new freshmen (those students who do not move immediately from high school to university), low-income students, and underrepresented minority (URM) students are more likely to require developmental math and English and less likely to complete the requirement in a year.

### 2. College-level course enrollments and completion.

- Of fall 2022 new freshmen, 68% enrolled in a college level math course in 2022-23. This percentage has been stable around 70% for the last few years.

- Among fall 2022 new freshmen who enrolled in college level math course, 92% successfully completed at least one college level course in the 1<sup>st</sup> year.
- Of fall 2022 new freshmen, 65% enrolled in a college level English course in 2022-23. This percentage has been decreasing from 70% in the last few years.
- Among fall 2022 new freshmen who enrolled in a college level English course, 91% successfully completed at least one college level course in the 1<sup>st</sup> year.
- Enrollment in a college level math course in the 1<sup>st</sup> year is much lower for students requiring developmental math education. Of fall 2022 new freshmen who required developmental math education, 62% enrolled in a college level math course in a year, compared to 70% for those who did not require developmental math.
- Completing a college level math course is lower for students who required developmental math. Of fall 2022 new freshmen who required developmental math and enrolled in a college level math course in the 1<sup>st</sup> year, 85% successfully completed at least one college level math course in the 1<sup>st</sup> year, compared to 93% of those who were not required to enroll in developmental math.

### **3. Retention and graduation by developmental education status.**

- Students who were required to take developmental education and completed the requirement in the first year have comparable 2<sup>nd</sup> year retention as those who were not required to take developmental education. Students who required but had not completed developmental education have a much lower 2<sup>nd</sup> year retention rate.
- The second year retention rate at the same UW university is 85% for students not required to take developmental math, and 81% for those who were required to take developmental math and completed the requirement in the 1<sup>st</sup> year, and it is 50% for those who required developmental math but did not complete the requirement in the 1<sup>st</sup> year.
- For English, the second year retention rate at the same UW university is 84% for students who were not required to take developmental English, and 79% for those who were required to take developmental English and who completed in the 1<sup>st</sup> year, and it is 42% for those who required developmental English but did not complete the requirement that period.
- For those who completed developmental math in the 1<sup>st</sup> year, the most recent 6-year graduation rate at same UW university is 57%, compared to 25% for those who didn't complete developmental math. Students not required to take developmental math graduated from the same UW university at a rate of 71%.

- For those who completed developmental English in the first year, the 6-year graduation rate at the same UW university is 51%, compared to 29% for those who did not complete developmental English. Students without required developmental English graduated from the same UW university at a rate of 68%.
- The gap in retention and graduation rates between students who required developmental education and completed the requirement, and those who required developmental education but did not complete the requirement has persisted over the last two decades.

#### **4. Outcomes by developmental education status and courses taken in the 1st year.**

- Students who took a college level course in the 1<sup>st</sup> year have an advantage over other students in both retention and graduation rates. Students who were required to take developmental education but did not take the required developmental courses have the lowest retention and graduation rates among all groups of students.
- Overall, the retention rate is 86% for students that took college level math in their first year; 72% for those who took developmental math in their first year; and 54% for those who required developmental math but did not take a course in their first year.
- The 6-year graduation rate for new freshmen who took at least one college level math course was 71%. The graduation rate is 49% for those who took developmental math and 34% for those who were required to take developmental math but did not take any math course.
- Similarly, the 2<sup>nd</sup> year retention rate for students who took college level English in the first year was 82%. The retention rate was 65% for those who took a developmental English course in the 1<sup>st</sup> year, and 41% for those required to take developmental English but who did not take a course.
- The 6-year graduation rate for new freshmen who took at least one college level English course in the first year was 64%. The graduation rate is 43% for those who took developmental English in the 1<sup>st</sup> year, and 27% for those who were required to take developmental English but did not take any English course.

#### **5. UW efforts to reduce developmental education needs and promote student success.**

Over the last decade, UW universities have developed multiple programs and procedural efforts to ensure developmental education is more effective for those needing it.

Across the UWs, these efforts have included the UW Math Initiative and the establishment of a common math placement cut score to ensure consistent placement across university. UW universities have focused on creative placement approach, the design of co-requisite developmental courses, and new pathways to credit-bearing courses to improve student success. Summer bridge programs and additional support are also provided to students to aid student success. Additionally, UW universities have engaged in modifying curriculum, improving course instruction, and using new course delivery modes to help students in developmental education. Highlighted university efforts are presented in the [Dashboard](#) with brief summaries and links to individual university's detailed report are provided.