

**Request for a new Charles Stewart Mott Department of Public Health
at the Michigan State University College of Human Medicine
Submitted January 26, 2022
Updated February 28, 2022**

Note: Process for requesting establishment of a new department at MSU:

- Dean first seeks endorsement of the request from the CAC, then Dean takes proposal to the EVP/Provost.
- EVP/Provost will send the request through academic governance for consideration and a recommendation (i.e., University Committee on Faculty Affairs; University Committee on Faculty Tenure; the Steering Committee).
- EVP/Provost makes decision to support the request or not and confers with President.
- EVP/Provost takes request and recommendation for approval to Board of Trustees.
- Board of Trustees is required to approve the creation of any new department of the University.

A. Rationale for a new Charles Stewart Mott Department of Public Health

The Division of Public Health (DPH) was founded with the express purpose of becoming a national leader in community-partnered public health research, education, community engagement, and service, with the proximal and sustained goal of improving the health of Flint-area residents. This was a vision created in partnership with residents and institutions in Flint including about \$4.5 million in support from the college's partnering hospitals, about \$12 million in grant support from the Charles Stewart Mott Foundation (Mott Foundation), and additional Mott Foundation funding to rehabilitate space for the college.

To fulfill this vision, the college partnered with community members through the Flint Public Health Research Advisory Committee (Advisory Committee), which included 29 community and university members. College of Human Medicine (CHM) faculty and staff attended or held more than 100 community meetings and collected data from 4,000 returned surveys. This Advisory Committee recommended the DPH research focus be on healthy behaviors, chronic disease, and behavioral health with a specific focus on addressing the social determinants of health and interventions to reduce health disparities. There was also a clear interest from the Advisory Committee in focusing on solutions rather than simply documenting 'what is.'

The Division of Public Health, in seven years, has exceeded all expectations. Establishing the Division of Public Health in the MSU College of Human Medicine has been transformative for Flint and for public health regionally and nationally. In that time the DPH faculty and staff have been instrumental in the community's response to the Flint Water Crisis, the SARS CoV-2 pandemic, and the creation of the Flint Lead Registry among many other [notable programs and achievements](#). Included in these successes are

the unit's successful efforts to achieve accreditation for the Masters in Public Health degree, [NIH programs to reduce suicide](#), [nutrition programs incorporated into the US Farm Bill](#), [programs to address inequity in Flint](#), [programs to reduce inequity in cancer](#), [programs to address maternal and child health](#), [programs to address food deserts](#). Beyond the approximately \$90 million in awarded grants and more than \$9 million in yearly NIH/CDC expenditures, the division created more than 875 job years of employment between 2015 and 2020 to the community, and more than 30 jobs at community agencies that partner with the division.

The division is actively working to reduce the silos in medicine, health, health care, and public health work. Members of the division have partnered with more than a dozen departments and units at MSU. Further, the communities with whom the division engages are at the heart of everything the division does. DPH faculty and staff, funders, and the vast array of community partners are deeply committed to the 'Flint Model' (i.e., building in partnership with those we seek to serve) and to growing our public health efforts in Flint and beyond.

In December 2021, the Mott Foundation board approved and funded a \$25 million proposal for the division to add 18 tenure stream faculty to the division and additional support for a new expansion of the division's space by adding a new wing on the Flint Journal Building. (The building is owned by Flint's Uptown Reinvestment Corporation, so the cost of the building expansion is not a grant to the college but is an important added investment by the foundation in our public health work.) With these additional faculty, the division will be larger and more complex than many existing departments at the college and the university.

Naming of the new department in honor of the Charles Stewart Mott Foundation would occur pending usual approvals by MSU academic governance and administration. Including the Charles Stewart Mott name will help maintain the new department's ties to the Flint community and the unit's unique origins. The name also emphasizes the faculty's tradition of transdisciplinary work that aims to have a wide impact.

To best enable continued upward growth in research, education, and service as well as support faculty, and continue the unit's leadership in the community and field, the members of the division, with the support of the dean and the executive vice president, seek to convert the Division of Public Health to the **Charles Stewart Mott Department of Public Health**. The current configuration of the DPH, described in greater detail below, will form the basis for the proposed Charles Stewart Mott Department of Public Health. The division currently includes 18 full-time professors constituting one of the most diverse units in the college (7 tenure-system, 11 fixed-term, 40% African American); 17 part-time teaching faculty; a fully online, asynchronous Master of Public Health Program; multiple funded research projects, centers (e.g., the NIH-funded Flint Center for Health Equity Solutions), and programs (e.g., the Hurley-MSU Pediatric Public Health Initiative).

B. Background - Why convert the Division of Public Health into the Charles Stewart Mott Department of Public Health

A new Charles Stewart Mott Department of Public Health will bolster our ongoing growth and expansion and fulfill multiple goals including:

Goal 1: Preserve the unique identity of the unit and enable unit level academic governance that will ensure equity, and recruit and retain high-caliber, high-performing research and teaching faculty

Division of Public Health faculty holding an academic rank include 18 full-time and 17 part-time research and teaching faculty. The departmental academic “homes” for these full-time faculty are spread across five other departments in the College of Human Medicine including the departments of Epidemiology and Biostatistics (n=3), Family Medicine (n=4); Pediatrics and Human Development (n=4), Obstetrics, Gynecology, and Reproductive Biology (n=2); and the Office of Medical Education Research and Evaluation (OMERAD; n=5). While the partnerships with these departments have been invaluable for their growth, faculty in the public health division need the ability to self-manage as well as to tenure and promote their unit faculty rather than depending on these other five departments that have their own governance, expectations, and bylaws. This will ensure equity in terms of promotion and tenure of faculty within the unit and will foster recruitment and retention of faculty and academic staff.

This is particularly the case as the unit will soon grow rapidly. The current faculty economic model is based on seven tenure stream faculty with 11 fixed term faculty. The addition of another 18 tenure-stream faculty through the Mott Foundation supported expansion will likely result in more than 25 additional fixed-term faculty if the current ratio holds. It is not reasonable to expect other departments to provide academic homes for more than 60 faculty in a division of the dean’s office. In addition, the inequity that would result from such varied and diverse appointments in different departments will significantly affect recruitment and retention of faculty and academic staff that will profoundly affect the mission of the public health unit.

Among other advantages, departmental status will simplify the process of faculty promotion and tenure by empowering the unit—as the primary appointment and place of work for our faculty—to make those decisions in a way that is most rigorous and appropriate for the faculty and the mission of the unit. Departmental status would also greatly simplify faculty recruitment, focusing attention on attracting and hiring the best possible faculty to support the unit mission without the complication of burdening another department functioning as the academic home. Finally, providing unit faculty with a single home and a single set of expectations (rather than one for each appointment) will also facilitate faculty success by enhancing their ability to focus on their scholarship, teaching, and service to a unit focused on their field.

In a statement signed by all DPH faculty and academic staff in January 2019: ‘The Division (of Public Health) would like to become a department to solve some immediate challenges, preserve our unique identity, and provide additional opportunities for self-

governance and self-determination without compromising existing status of subunits. (Appendix 1, page 22)

Goal 2: Support accreditation of our existing Master of Public Health program

After 10 years in existence and under the administrative leadership of Dr. Wayne McCullough since Fall 2018, the Master of Public Health program is actively in the professional accreditation process and completed a site visit in Fall 2021. The Council on Education for Public Health (CEPH) assures quality in public health education and training to achieve excellence in practice, research, and service, through collaboration with organizational and community partners. Our Master of Public Health program is one of the first fully online, asynchronous programs to be accredited in the country. The program worked closely with CEPH and was officially approved to enter the accreditation process in June 2019. After approval of our initial application, the program officially entered the self-study phase, and the self-study document was submitted on June 9, 2021 (Appendix 2). The site visit report is unambiguously positive. Currently, the program awaits the final vote of the CEPH council.

The accreditation process requires a strong and supportive program infrastructure. Our CEPH consultant advised that housing the MPH program in a department (versus a division) with the ability to self-manage and promote and tenure its own faculty would strengthen program outcomes. Having tenure-system faculty teaching in the program—will further strengthen the likelihood of success in the accreditation process and more importantly, enhance the student learning experience. These are critical steps for assuring the continued success of the MPH program, which has been in existence for 13 years and is on the brink of professional accreditation. Over the life of the program, we have graduated more than 650 Masters students, expanded Flint’s global imprint, and provided opportunities for public health training across multiple different sectors, including healthcare through the available DO-MPH and MD-MPH programs.

Goal 3: Bolstering the progress toward the university strategic goals of staff and faculty success, progress on DEI, scholarship and innovation, student success for impact, stewardship and sustainability, and sustainable health

There has been tremendous growth in public health education, research, practice, service, outreach, and engagement efforts at Michigan State University in the past several decades. In May 2019, former Division of Public Health Director Dr. Debra Furr-Holden—by appointment of former MSU Provost June Youatt—chaired the Provost’s Public Health Advisory Committee. The Provost’s Public Health Advisory Committee was tasked with serving as a neutral convener of stakeholders across campuses to gather information from the MSU community and answer the broad question, “What might MSU be able to do in the arena of public health that will continue to improve our efforts if we were organized in a School of Public Health?” Fifty listening sessions were held across campuses, inclusive of all colleges, between October 2018 and March 2019 to gather insights on opportunities and challenges, as well as next steps to strengthen the public health infrastructure at MSU.

The major finding from this process was that there is great enthusiasm for a stronger infrastructure to support the growing public health development at MSU from university leaders, faculty, staff, students, and community partners. The proposed Charles Stewart Mott Department of Public Health would be one piece of the expanded public health infrastructure. Any work toward a school of public health depends on the initial creation of this department. A final copy of the report from this work is included as Appendix #1 *Exploring the Future of Public Health at MSU: Final Report of the Provost's Public Health Advisory Committee*. This report was available on the Provost's electronic desk for public comment for 90 days.

C. Description - Goals/functions/purpose of the Department of Public Health

The underlying purpose and expectations of the Charles Stewart Mott Department of Public Health are rooted in the major goals of the College of Human Medicine expansion in Flint which include:

- Provide a national and international model for how academic units can be built in partnership with those they seek to serve (e.g., communities, patients, etc.).
- Establishing a unit dedicated to community-based participatory research and interventions to reduce disparities
- Establish Flint as an education center for advanced degrees in public health
- Establish Flint's national reputation in community-engaged public health research, practice, and translation; and
- Establish Flint in the College of Human Medicine's vision and community campus model.

The goals of the Charles Stewart Mott Department of Public Health remain consistent with the goals of the Division of Public Health, but include expansion of these goals (while retaining the strengths of our Flint Model) and include:

- Attract and retain a core of NIH-funded and acclaimed researchers with a record of accomplishment, including promising early-stage investigators, and an emphasis on community-driven areas of focus;
- Attract and retain a core of experienced public health practitioners focused on educating and mentoring future public health professionals;
- Support and collaborate with community voice at the forefront of our research, service, outreach, and engagement efforts;
- Utilize participatory processes and feedback that include a broad array of community, university, and multi-sector stakeholders to continue to inform our work and expansion;

The research foci of the proposed department were born from the Advisory Committee and reflect the active research of current faculty, and include:

- A focus on solutions, and equity-centered public health interventions, rather than simply documenting 'what is.'
 - The original areas of focus (healthy behaviors, behavioral health, and chronic illness with a focus on interventions to reduce health disparities) were created

through the work of the Flint Public Health Research Advisory Committee. These continue to be the focus of the unit.

- As an integral part of the upcoming faculty expansion, the division will reconvene the group to review the areas of public health research the community and university should partner to address.

The educational goals of the proposed department include:

1. Development of excellent professional education in public health through the MPH program and its accreditation. Next steps could include the creation of a professional doctorate program, the DrPH.
2. Expanding the understanding of public health broadly by continuing and expanding community educational programs and existing entry-level college and high school courses like the HM 101 – Introduction to Public Health course. Additional undergraduate course work and programs are a long term opportunity as the faculty body grows.
3. Building upon the success of the Flint research model and the best practices of schools and programs of public health from around the country, retaining the engagement of community in the instructional design of content.
4. Capitalizing upon the success of recruiting teaching faculty into the MPH program, requiring that instructional faculty come with and represent experience in the practice and/or research of public health issues, especially the social determinants of health (SDoH) and health disparities. These perspectives will enhance the infusion of public health practice and research into the educational process.

The service/outreach/engagement foci include:

1. Community-engaged public health research, practice, and translation with communities we serve;
2. Building partnerships with local stakeholders across sectors;
3. Fostering public health service-learning opportunities for students and MSU trainees; and
4. Supporting local public health research and service initiatives in Flint and other communities.

D. Benefits to the university: How will creating this new department benefit Michigan State University?

This new department strengthens our public health profile and ability to recruit and retain high-caliber public health professionals and students within the university and multiple colleges across the state. Multiple faculty across campus with public health degrees or scholarship have expressed interest in a joint or adjunct appointment within the division, and department status will advance these opportunities. For some, a public health identity through a secondary appointment in a public health department is an opportunity. For many a strong and growing public health department is an important opportunity for additional collaboration and transdisciplinary work.

For students and educational collaborators, the creation of the department allows an expansion of undergraduate and professional programs. The faculty of the unit are interested offering a Doctorate of Public Health (DrPH), which is a terminal degree in public health practice. The college currently has a popular, on-line introduction to public health course (HM 101), which would move into the new department.

As the Charles Stewart Mott Department of Public Health grows toward more than twenty-five tenure stream faculty and likely more than sixty faculty total, the effort of providing an academic home for those faculty, including their tenure and promotion process, is considerable. The creation of this department will lighten the load of departments providing this service now.

Lastly, becoming the Charles Stewart Mott Department of Public Health fosters a continuing and strong relationship with the Mott Foundation, which has been a major funder of many colleges and departments on campus. The foundation understands that departmental status is a decision entirely within the domain of the university and is not a transformation donors can mandate. That said, the expansion of the Flint campus and the creation of the Division of Public Health came out of work done with Mott Foundation and their initial \$9 million endowment and \$2.8 million in grants provided to establish and expand the public health footprint in Flint. The current philanthropy is an opportunity otherwise unavailable to the university, college, and division. The existing partnership with the community and foundation is unique and the result of excellent faculty and staff work as well as diligent partnership at all levels of the university.

E. Programmatic, operational and financial considerations

1. Alignment with existing departments/units of the college and the university

The department faculty, staff, and students will continue the work of the Division of Public Health, which includes active research and educational collaborations across the College of Human Medicine and multiple colleges of MSU. Because the people of the division are multi-disciplinary and focused on the community, versus discipline-based, they have developed particularly strong collaborations across the university, with multiple levels of government, and across the nation to expand the educational and research missions related to public health.

There are multiple units in the college and the university that have faculty and students who do public health research. The expanding Charles Stewart Mott Department of Public Health creates new opportunities and potential collaborations for these faculty and students. Naming the unit after a Flint-based philanthropic foundation should help identify the community ties of the department. There is nothing about the department that would limit the ability of other colleges or departments from hiring faculty in public health related fields.

2. Department structure

The Charles Stewart Mott Department of Public Health will have a chair, who will report to the dean of the College of Human Medicine. The current subdivisions of the Division

of Public Health include the MSU-Hurley Pediatric Public Health Initiative (PPHI) and the Master of Public Health Program. These units each have a director who currently reports to the division director and will subsequently report to the department chair. The department will employ the same administrative staff as the division. The current Division of Public Health organization chart is included as an attachment.

3. Faculty and External Partners

Faculty will include the existing Division of Public Health faculty, reflecting 18 full-time and 17 part-time research and teaching faculty. The full-time faculty on the tenure- and fixed term tracks are spread across five departments in the College of Human Medicine described previously. The Charles Stewart Mott Department of Public Health will become the academic home, including tenure and promotion, for all current Division of Public Health faculty. Faculty will have the option to retain an affiliation (e.g., adjunct appointment and in some cases a dual appointment) in their previous tenure granting unit. The new department will also be the academic home for new faculty hired as part of the Mott Foundation supported expansion.

New faculty appointments for fixed-term and tenure-system faculty will continue to be processed through our standing 18-member Division of Public Health Search Committee, which includes a search chair, fixed-term and tenure-system faculty from the division, two department chairs in CHM, and community members. The departmental chair will make the final decision on faculty appointments with input from the search committee.

The department will also have options for non-paid faculty who want an academic appointment in the Charles Stewart Mott Department of Public Health. As an example, several clinical faculty, who train medical students and residents in the three Flint hospitals, have non-paid faculty appointments in other CHM departments (e.g., Pediatrics and Human Development and Obstetrics, Gynecology, and Reproductive Biology). Several public health clinicians have asked for appointments in the Division of Public Health, which can be formalized once the unit is a department. In addition, we have non-paid faculty appointments for other stakeholders (e.g., the Genesee County Health Officer). These appointments will also be vetted through our standing search committee with final appointments decided by the Department Chair.

4. Chair selection

The current director of the Division of Public Health will serve as the interim chair of the Charles Stewart Mott Department of Public Health. Once a permanent dean of the College of Human Medicine is hired, and no later than two years from the initial interim chair appointment, a formal search will be launched for a founding chair. This will ensure a traditional college and university process is followed in selecting a chair to serve long-term, but not delay becoming a department now. The current division director is already responsible for oversight of the Division of Public Health, including fiscal management, stakeholder engagement, and faculty and student review and success.

F. Department operations, governance, bylaws and RPT criteria

The department will operate in a manner consistent with other departments in the College of Human Medicine and will adopt a shared governance model. Shared governance with the existing faculty, staff, and students will include leveraging the existing MPH student board and existing faculty group, called D-Squared. D-Squared reflects all faculty and academic staff in the Division of Public Health with a doctoral degree operating across the three core missions of research, teaching, and service/outreach/engagement.

Bylaws will be developed by a bylaws committee, which formed in June 2021 by inviting all faculty in the D-Squared group to participate in the development process. The group includes five faculty members and one outside Department Chair who serves on the University committee that reviews bylaws. At least one student and one community member will be added to this committee before bylaws are finalized. Bylaws will be voted on and approved by a majority of faculty before ratification. A scaffolding of the bylaws and major sections has already been identified and minimally will include sections on organization; governance; committees; RPT; grievances and complaints; and faculty (e.g., composition, meetings, appointment, reappointment, promotion, tenure, responsibilities, etc.)

Reappointment, promotion, and tenure criteria will align with the College of Human Medicine criteria which are written, well-specified, and available on the CHM Faculty Affairs website at <https://chmfacultyaffairs.msu.edu/> under the 'Promotion and Tenure' tab. An RPT committee will be established within the Department of Public Health to work with the chair to manage the process of annual faculty reviews and support the annual RPT process.

G. Department Finance

1. Current Funding Status, Allocation, and Reserve Funds

The DPH had an FY21 allocation of \$2,142,589, constructed in a manner consistent with the research intensive department/unit funding model of CHM, providing 100% support for core administrative staff and 60-100% for faculty appointments depending on prior agreements and needs. The annual budget and allocation have increased progressively since the division's inception. Faculty research funding expectations for tenure-system research faculty increase annually by 20% starting at zero percent in Year 1 and capping out at 60% in Year 4 and beyond. All fixed term faculty have been hired with a 3-year funding plan to support 100% of their salaries through research and a minimum of 5% salary support from general funds. To date, all research faculty have met or exceeded salary expectations and generated salary savings and indirect cost (IDC) returns from funded research projects. These savings and returns have yielded \$4,619,705 in reserve funds, with an estimated additional \$1 million in reserve funds being generated from FY21. At present, \$2,969,289 of the \$4,619,705 reserve funds reside in a general funds account for DPH at the discretionary use of the Division Director (note: remaining funds are distributed across faculty accounts) with an additional \$594,622 in the general fund account of the DPH Master of Public Health Program. The MPH Program is a revenue-

based initiative (RBI); it has consistently generated positive income, covers its own operational costs from program revenue, and reliably covers its space, security, and administrative costs.

2. Projected financial needs and how financial obligations of the department, including administrative costs will be met

Projected financial needs are centered around ongoing recruitment and retention of high-caliber faculty to support our education, research, and service missions. The growth and expansion of the Division of Public Health and the subsequent savings outpaced expectations, due in large part to the foundational work of establishing hospital and philanthropic financial support of the Division of Public Health, and especially due to the productivity of our faculty and the revenues generated from our MPH Program.

The unit is treated financially as a department by the college with its own administration, staff, space costs, communications support, security costs, reserve requirements, and performance expectations. There should be no additional costs related to the transition to departmental status.

The unit already has a curriculum committee for the MPH and an infrastructure for supporting the educational mission. There should be no additional costs related to the transition to departmental status.

The current college allocation and reserve funds more than meet the projected financial needs and financial obligations of the proposed department, including administrative costs.

The \$25 million Mott Foundation grant from December 2021, matching philanthropy, additional Mott Foundation support for the building expansion, three tenure stream positions from the college, three tenure stream positions from the university will cover the proposed faculty expansion. The college and division expect additional philanthropy as well.

3. Oversight of the curriculum

The Master of Public Health Program is the current educational program of the Division of Public Health/ proposed Charles Stewart Mott Department of Public Health. The MPH program director currently reports to DPH director but will report to the department chair upon conversion of the division to a department. Given that the MPH program is a revenue-based initiative, it is afforded a certain degree of financial autonomy. Subaccounts were created for the MPH program within the division to inspire entrepreneurship for its' ongoing growth and expansion, and promotion of the MPH program director as a leader within the college and on campus. The MPH program director will retain oversight authority of the MPH program, with key financial decisions being approved by the department chair (formerly the division director) before implementation. The division, and then the new department, is responsible for the financial success of the MPH program and obligated to resolve any financial concerns of the MPH program.

H. Evaluation of departmental effectiveness

The new department will enter the standardized process for assessing departmental effectiveness consistent with all departments at CHM. There will be the usual five-year department and chair review as well as annual chair reviews. In addition, following the accreditation of the Master of Public Health program (anticipated Spring/Summer 2022), a self-study will be conducted every seven years, consistent with the Council on Education in Public Health guidelines for accredited programs. Overall department effectiveness will include measures of programs, faculty, students, staff, and community partners across all missions. Minimum measures will include:

- Faculty success – time in rank, tenure, promotion, research grants/awards.
- Student success – time in program, graduation rate, program satisfaction.
- Staff success – retention, performance evaluations, staff feedback.
- Education/Curriculum/MPH Program success – continued growth, expansion, and impact.
- Financial performance based on college funding formulas, the Flint space pro forma, and reserve analysis.
- Outreach/engagement/service success – percentage of funds deployed to community, annual feedback from community stakeholders, faculty, and staff engagement in service work.

I. Assurances

For the university and college, the creation of this department will help solidify and expand the scholarly opportunities for students and faculty across the institution. With the transition from division to department, the unit will grow, adding to NIH funding in support of AAU metrics and building on the reputation of the existing faculty and programming. The creation of the department also follows on the already described campus wide discussions outlined in the report by the former provost's Public Health Advisory Committee (Appendix 1).

The leadership of the division and/or the college has discussed the creation of the department with related departments and units including meetings with leadership and faculty of the Department of Epidemiology and Biostatistics, the Institute for Health Policy, and the leadership of the Office of Health Sciences, as well as similar units at Henry Ford, including their Department of Public Health Sciences.

It should be noted that faculty grant activity is attributed to their academic home for Blue Ridge Rankings, and with the creation of the department, faculty attribution will move from the current academic home to the new department. This will have some impact on departmental rankings, but it is in the best interests of the faculty to have an academic home in their home unit.

Many people across the university do work related to public health, just as many people across the university do work related to medicine. The existence of the College of Human Medicine does not limit the scholarly opportunities of others in the university, and this department will not change or limit the activity of faculty interested in public health across

the institution. In fact, the success and expansion of this division/department increases opportunities for all.

Distribution of proposal for endorsement, assurances, or concerns:

- CHM Department of Epidemiology by email 2022-01-26 The department raised its concerns to the CAC including a letter dated from May 2021, well before this proposal.
- Dean of the College of Osteopathic Medicine by email 2022-01-26 - The deans met on February 4, 2022. The dean of COM asked that the department be joint between the two colleges, and the CHM dean declined that opportunity.
- Dean of the College of Nursing by email 2022-01-26. Interim Dean Small responded with congratulations and a request to discuss collaborations and those conversations are continuing.
- Dean of the College Veterinary Medicine by email 2022-01-26 – The deans met on February 7, 2022 to discuss collaborations and opportunities in One Health. Dean Puschner was supportive of the proposal.
- Dean of the College of Social Sciences by email 2022-01-26
- Dean of the College of Communication Arts and Sciences by email 2022-01-26 The deans are working on an MOU between the two colleges especially focused on the exemplary work of the health communications unit in the College of Communication Arts and Sciences.
- Dean of the College of Natural Sciences by email 2022-01-26. Dean Duxbury's response on 1-26-22 was congratulatory and supportive.

College Advisory Council Summary

The CHM CAC met on 2/8/2022 and 2/21/2022 to discuss the proposal for a new Department of Public Health. The members of the CAC were given the proposal and asked to distribute the document to members of their faculty for input. At both meetings, questions and comments about the proposal were addressed. Questions were centered around the lack of transparency with the CAC prior to the public announcement. While the Dean consulted the CAC steering committee, the Dean and the steering committee were prohibited from sharing information prior to the public announcement. Other points of conversation included faculty appointments, impact on existing partnerships, and financial implications. The CAC asked that bylaws be written and submitted to the CAC before the proposal was submitted to the University Committee on Faculty Affairs. Overall, the CAC members were very supportive of the proposal.

- Recommendation/endorsement
The CHM CAC endorsed the proposal for a new Department of Public Health by a majority vote on 2/21/2022.

Appendix #1:

EXPLORING THE FUTURE OF PUBLIC HEALTH AT MSU

A Report by the Provost's Public Health Advisory Committee

https://michiganstate.sharepoint.com/:w:/r/sites/CHM-DivisionofPublicHealth/Shared%20Documents/Departmental%20Application/Background%20documents/Final_FOPH_Report_05_20_19.docx?d=w66da22b5e4b94a25902c5de88360fbe5&csf=1&web=1&e=OJeaOf

Appendix #2:

[Self Study Draft 7_June 21.docx](#)

MPH Self Study Draft

Appendix 3:

[DPH Org Chart](#)

[PPHI & Flint Registry Org Charts](#)