KATHERINE S. NEWMAN  
PROVOST AND EXECUTIVE VICE PRESIDENT  
UNIVERSITY OF CALIFORNIA  

Re: Approval of School of Population and Public Health (SPPH) at UC Irvine  

Dear Katherine:  

In accordance with the Universitywide Review Processes for Academic Programs, Academic Units, and Research Units (the “Compendium”), the Academic Council solicited input from the Coordinating Committee on Graduate Affairs (CCGA), the University Committee on Planning and Budget (UCPB), and the University Committee on Educational Policy (UCEP), regarding UC Irvine’s proposal to establish a School of Population and Public Health (SPPH). The Senate’s three Compendium committees are unanimous in their support of UCI’s proposal.  

Because the SPPH is a new school, Academic Council must approve it per Senate Bylaw 125.B.7. The Academic Council endorsed the proposal, including the donor naming request, at its May 22, 2024 meeting. I am enclosing the reviews conducted by CCGA, UCPB, and UCEP. I respectfully request that your office complete the process of obtaining the president’s approval.  

Sincerely,  

James Steintrager, Chair  
Academic Council  

Cc: Academic Council  
Institutional Research and Academic Planning Analyst Procello  
UCI Senate Division Executive Director Kim  
Executive Director Lin  

May 28, 2024
ACADEMIC SENATE CHAIR JAMES STEINTRAGER

Dear Chair Steintrager,

On April 3, CCGA met and reviewed a proposal from the Irvine campus for a School of Population and Public Health (SPPH). After discussion, the committee decided to return to the campus for additional information and clarification about the proposal. That information was subsequently provided, and the proposal was approved via email.

The establishment of the SPPH will fill a meaningful gap in the public health infrastructure of Orange County and the Southern California region at large. In Orange County, significant health challenges include undertreated mental health problems, opioid abuse, disproportionate adverse impacts of chronic and infectious disease, and a need to focus on successful aging. In addition, the slow response time and lack of an emergency plan for the COVID-19 pandemic highlighted the critical need for emergency preparedness and underscored the need for public health education and communication to be coordinated at the community level.

UC Irvine’s current Program in Public Health is unique in the system for being designated as a Hispanic-Serving Institution (HSI) and an Asian American/Native American Pacific Islander Serving Institution (AANAPISI). With a larger and more diverse undergraduate program than almost any other public health program in the country, the Program focuses on addressing health equity in research, teaching and service. Transitioning the Program to a School will ensure training of diverse future leaders in health through research, public education, and community engagement.

Creating a School of Population and Public Health at UC Irvine will:

- Elevate the existing faculty research portfolio and enhance and unite the public health research performed by various units across UCI.
- Validate the relative importance of public health among other academic disciplines or schools on campus, and improve the program’s national rankings.
- Fortify the University’s competitive position in recruiting the best faculty.
- Enhance the unit’s ability to recruit the brightest students at the undergraduate and graduate levels.
- Allow faculty to compete for large-scale funding available only to schools.
- Increase opportunities for philanthropy.
Strengthen UCI’s capacity for training a larger and more diverse public health workforce for the State of California.

CCGA secured internal and external reviews from faculty with deep experience to evaluate this proposal. The reviewers responded favorably and felt that the proposal was thorough and detailed and that its approval will “commit UCI, Orange County, the UC, and California to a much-needed expansion of public health research, training, and practice that should safeguard and improve population health through collective evidence-driven action.” Reviewers also felt that the existing program was essentially functioning as a school with well-established degree programs and a diversified research portfolio. Overall, comments were strong and supportive. There were some concerns expressed, which were addressed by the proposers. However, one reviewer noted a significant flaw and suggested that the proposed degree programs would not pass Council on Education for Public Health Accreditation. The campus responded with this reply:

“Over the last year we notified CEPH of our intention to move the MS and PhD in Epidemiology and Environmental Health Sciences under their accreditation umbrella (both degrees were previously offered by the School of Medicine, and not accredited under CEPH), and provided them with the existing curricula and preliminary competency mapping for those degrees. CEPH raised similar concerns, so our faculty revisited the curricula for both degree programs, and have proposed modifications that are responsive to these concerns (the Epidemiology MS and PhD revisions are currently under review by our Graduate Council, and Environmental Health Sciences MS and PhD revisions will be submitted this Spring).

“Certain public health courses are shared between master's and doctoral levels. This is consistent with practices in specialized fields where foundational knowledge is essential for all students. A key distinction between our master's and doctoral programs lies in the nature of the culminating projects: the master's thesis versus the doctoral dissertation. The public health dissertation demands original research that contributes novel insights to our field, while the master's thesis focuses on synthesizing existing knowledge and applying research methods within a narrower scope. Nonetheless, we recognize the importance that our doctoral programs provide advanced coursework, expanded research opportunities, and a deeper level of study beyond that which is offered at the master's level. Moreover, the progression from bachelor's to master's and from master's to doctoral levels must demonstrate a clear trajectory of increasing complexity and specialization. Towards that end, we have requested permission from our Graduate Council to bifurcate our previously cross-listed required graduate biostatistics and epidemiology sequences into separate sequences designed to enhance the rigor of courses that are tailored to meet the needs of specialists and doctoral students, e.g., for biostatistics the PUBHLTH 207AB for MPH students in most tracks, versus EPIDEM 204ABC for MS in Epidemiology students, versus EPIDEM 204ABCD for PhD in Epidemiology students. Details can be found in the attached graduate degree modification proposal packets, submitted to our Graduate Council in Winter 2024.

“We are presently engaged in an 18-month CEPH reaccreditation self-study process aimed at refining our curriculum to better accommodate the distinct needs and expectations of students at different degree levels. This includes ensuring that each course explicitly differentiates between master's and doctoral-level expectations, thereby facilitating a more seamless progression through our public health program offerings.”

With the receipt of this information, CCGA voted to approve the proposal for the new School. The Lead Reviewer’s letter, with more details, is attached. I submit this action for your review; please do not hesitate to contact me if you have questions regarding the proposal.
Sincerely,

[Signature]

Dean J. Tantillo
Chair, CCGA

c: Steven Cheung, Academic Senate Vice Chair
   Monica Lin, Academic Senate Executive Director
   Michael LaBriola, Academic Senate Assistant Director
   CCGA Members
   Chris Procello, Academic Planning and Research Analyst
   Gillian Hayes, UCI Dean of the Graduate Division
   Jisoo Kim, UCI Academic Senate Executive Director
   Thao Nguyen, UCI Academic Senate Analyst
Summary
The Coordinating Committee on Graduate Affairs (CCGA) recommends approval of the UC Irvine proposal to establish School of Population and Public Health.

Background
The School of Population and Public Health will build on existing programs and faculty in the UCI Program in Public Health, which currently includes four departments in Epidemiology and Biostatistics, Environmental and Occupational Health, Health Society and Behavior, and Population Health and Disease Prevention. Current educational programs include a large undergraduate major program offering a BA or BS, a moderately sized MPH program and three PhD tracks. Highlights of the undergraduate teaching programs include enrollment of a diverse student population, focus on health equity and community engagement, and an honors practicum track for advanced students. The transition of to a School promises to increase training of future leaders in public health, strengthen faculty expertise, enhance research opportunities and training for diverse populations, and improve the public health workforce needs of California.

Materials and Reviews
CCGA and reviewers considered a proposal, appendices, and cover letter from UCI Academic Senate Chair Arvind Rajaraman.

Reviews were solicited over a 2 month period from 13 experts from inside and outside the UC system, resulting in 4 final reviews, two of which were from outside the UC. Two of these reviewers elected to remain anonymous, and two agreed to share their identities with the proposers.

Reviewer 1
Full Professor of Health Economics at an existing UC School of Public Health
PhD in Economics
Research specializing in health insurance

Reviewer 2
Associate Dean and Professor of Epidemiology at a prominent non-UC School of Public Health
Research specializing in cardiovascular disease

Reviewer 3
Onyebuchi A. Arah, MD, MSc, DSc, MPH, PhD
Associate Dean, UCLA Division of Graduate Education
Former Associate Dean, UCLA Fielding School of Public Health
Research specializing in biostatistics

Reviewer 4
Christine M. Arcari, PhD MPH
Senior Associate Dean for Academic Affairs
Tulane University School of Public Health and Tropical Medicine
Research specializing in public health education
Reviewers were asked to focus their comments on the following areas:
• Quality and academic rigor of the program
• Adequacy of the size and expertise of faculty to administer the program
• Adequacy of the facilities and budgets
• Applicant pool and placement prospects for the graduates

The four reviewers were broadly supportive of the proposal and made many positive comments, as follows:

**Reviewer 1**
Reviewer 1 notes, “Overall, this proposal will establish new a school based largely on existing resources but with modest expansions in areas with important gaps. The quality of the existing programs is high. The new PhD program (which I reviewed separately) is rigorous, and new faculty will provide expertise to manage these courses.”

**Reviewer 2**
Reviewer 2 notes, “I found the proposal thorough and detailed with respect to the plans for the new school and with many strengths including a strong foundation from the existing program.” They also applaud that “Strong institutional-level support is present most notably through the provision of ten new faculty lines” as well as $14 million in philanthropy.

**Reviewer 3**
Reviewer 3 notes, “To the close observer, it is not so much a question of whether to approve an SPPH at UCI as it is one of how to scale it in some unique consequential direction and with what resources. Approving this proposed school will commit UCI, Orange County, the UC, and California to a much-needed expansion of public health research, training, and practice that should safeguard and improve population health through collective evidence-driven action.”

**Reviewer 4**
Reviewer 4 notes, “Overall, the UCI Program of Public Health is essentially functioning as a school with well-established degree programs and a diversified research portfolio. Faculty are successful in securing research funding, teaching needs are being met, and the student population is unique and will be competitive in the work force.”

However, the Reviewers also provided many constructive points of feedback, and one noted a “fatal flaw” in the proposal, and suggested that the proposed degree programs would not pass Council on Education for Public Health Accreditation.

Reviewer 1 provided no substantial critical comments. Reviewer 3 was also almost entirely positive, though they suggested that the School “consider strategically developing biostatistical and population health data science research areas and degree and certificate programs.” Reviewers 2 and 4 provided very detailed reviews with many suggestions for points of improvement. Reviewer 2 notes that “the proposed structure of the four departments is largely maintenance of the existing program structure with added faculty and staff” and that the “the rationale for maintaining this structure, which is fairly unique for a school of public health, versus strategic visioning of a new structure is not provided.” They also note that “plans or
structure as to how to build community among, faculty, staff and students is not outlined”. They also express concerns about plans for promoting teaching excellence, student wellbeing, a need for greater focus in biostatistics, and a large student to faculty ration, inter alia. Finally, Reviewer 4 makes a number of constructive comments, but concludes their review by noting that their “only critical concern is the documentation provided is not in alignment with the updated CEPH accreditation criteria. CEPH accreditation is important for the success and recognition of a school.”

CCGA shared these reviews with the proposers and received a reply from Michael Hoyt, Professor of Population Health & Disease Prevention at UCI. CCGA reviewed these replies and found them satisfactory, noting that in initiatives were underway that dealt with the most important reviewer comments. However, one area was concerning to CCGA, flowing from the comments of Reviewer 4.

First, Reviewer 4 made the following comment:

“I have some concerns about the interdigitation of the three levels of degrees – bachelors, masters, and doctoral. It is essential the three degree levels complement and build upon the previous levels, and this does not appear to be happening. Using the MS and PhD in Epidemiology as an example, according to the materials provided, the same ten courses are used for the MS and PhD degrees. It appears the only difference is in the PhD dissertation compared to the MS thesis. This is a fatal flaw in the design of these degree programs, and they will not pass CEPH accreditation standards.”

The proposers noted in their reply that they had notified CEPH of their intention to move the MS and PhD in Epidemiology and Environmental Health Sciences under their accreditation umbrella, and that they had undergone “an extensive review program for the MPH and PhD degrees offered by the Program in Public Health to ensure they meet requirement for CEPH accreditation.” They noted that this included a process of differentiating their masters and doctoral-level programs and courses.

Reviewer 4 also noted:

“It is imperative that the program closely review the updated criteria and participate in the CEPH AOW workshop. There are major changes in the accreditation criteria which are not demonstrated in the proposal leaving me to wonder if the degree programs are out of compliance. For example, every degree that is reported as a public health degree (vs other degree) must have five unique competencies. For MPH degrees, there are twenty foundational competencies and in addition, each focus area must have five additional competencies. There is no evidence of program-specific competencies in the information provided for the program of study for each of the degrees.”

The proposers replied that they had recently participated in the CEPH AOW workshop and had begun the process identifying precise competencies and assessments for each degree within their public health program. They note that they are currently working to submit curriculum changes
to their Academic Senate that would result in compliance with the required program-specific
competencies.

In addition to evaluating these replies, CCGA also contacted the Associate Dean Scott Michael
Bartell, who provided further information. This included their acknowledgement that “the
progression from bachelor's to master's and from master's to doctoral levels must demonstrate a
clear trajectory of increasing complexity and specialization” and that to meet this goal they had
requested permission from their Graduate Council to divide their “previously cross-listed
required graduate biostatistics and epidemiology sequences into separate sequences designed to
enhance the rigor of courses that are tailored to meet the needs of specialists and doctoral
students”. They also noted that they were currently engaged in “an 18-month CEPH
reaccreditation self-study process aimed at refining our curriculum to better accommodate the
distinct needs and expectations of students at different degree levels.”

**CCGA Recommendation**

Based on the proposal, the reviews, and the subsequent replies that were received, CCGA held a
vote and approved the proposal unanimously. CCGA judged that the creation of the School
would help expand the mission of the existing units at UCI, to expand the research and
instructional capacities on campus, while serving a diverse student body, and the goal of
augmenting the state’s health services workforce. While CCGA was initially concerned about the
question of CEPH accreditation, these concerns were addressed by responses provided by the
proposers. CCGA also judged that additional areas for improvement that were flagged by
reviewers were thoughtfully considered in the proposer replies, and did not constitute barriers to
approval. We therefore recommend approval of the UCI School of Population and Public Health.

Signed,

David Barner
April 12, 2024

JAMES STEINTRAGER, CHAIR,
ACADEMIC COUNCIL

RE: UC IRVINE SCHOOL OF POPULATION AND PUBLIC HEALTH PROPOSAL

Dear Jim,

The University Committee on Planning and Budget (UCPB) was pleased to review the proposal to establish a UC Irvine School of Population and Public Health. This represents a transition from the existing Program in Public Health, whose four departments function essentially as a school now. The transition is seen as a strategic initiative to grow and enhance existing programs, increase grant funding, hire additional faculty, and address increasing healthcare needs in Orange County and the inland counties of Southern California.

UCPB is generally pleased with the proposal’s responses to the few concerns the committee outlined in its previous review of the pre-proposal to establish the School. The initial faculty hiring plan is well underway, with half of the positions envisioned filled and several additional searches ongoing. Student enrollment is robust at both undergraduate and graduate levels. In particular, healthy growth puts the MPH program on track to reach its final target enrollment in 2025-26 as planned. Notably, the Program represents the most diverse student body of any public health program in the UC system.

The committee feels confident in the School’s continuing financial solvency despite a few lingering questions. The proposal still indicates, without explanation, growth in the indirect cost recovery (ICR) that does not correlate with expected FTE faculty growth. It appears that a $14M gift commitment claimed in the pre-proposal has been secured, evidently to fund 7 endowed chairs. While other private support is being actively explored, including perhaps a naming gift, plans for financial stability no longer depend on these. The professional degree supplemental tuition (PDST) for the MPH is low relative to that at other UC campuses, offering a potential opportunity for revenue growth.

UCPB concluded that the proposal has merit and anticipates that the School will be successful. A point raised during the discussion, however, concerns a perceived overgrowth of public health programs in the UC system, potentially outpacing the number of students interested in public health careers. Systemwide review is one protective element against this possibility, but it may also indicate a need for some central census of programs, their growth potential, and concerns about diluting quality by replicating smaller programs benefiting individual campuses versus creating a critical mass for excellence at fewer locations.
With that concern noted, UCPB arrived at clear consensus and offers its broad support of the UC Irvine proposal for a School of Population and Public Health.

Sincerely,

Donald Senear, Chair
UCPB

Attachment
cc: UCPB, CCGA, UCEP
Review UCI Proposal to establish a School of Population and Public Health (SPPH)

1. **Rationale:**
   Proposing faculty and administrators argue that transitioning from a program to a school is a strategic imperative that will grow and enhance existing programming, faculty and students, increase the size and success rate of grant applications, and respond to community needs. They note that the proposal responds to recommendations following their most recent program review and changing, increasing needs in Orange County as well as Southern California, more generally, including: an aging population, prevalence of mental illness, and overall lack of sufficient care and health care insurance. They claim that existing UC resources are inadequate to meet the needs of students and communities regionally.

### Campus | Related Schools/Departments
---|---
Berkeley | School of Public Health  
1st West of Mississippi
Davis | SOM Department of Public Health Sciences
Irvine | Department of Population Health and Disease Prevention  
Proposed School of Population & Public Health
Los Angeles | SOM Division of Population Behavioral Health  
Fielding School of Public Health
Merced | Department of Public Health
Riverside | SOM Department of Social Medicine, Population and Public Health
San Diego | Herbert Wertheim School of Public Health and Human Longevity Science
San Francisco | SON Health Policy and Public Health

**Existing & Proposed UC Units Featuring Public Health**

2. **Description:**
   The proposed SPPH will transition a single academic unit to a larger academic unit with four departments: Epidemiology and Biostats, Environmental and Occupational Health, Health Society and Behavior, Population Health and Disease Prevention. Collectively, research and training will emphasize: health equity, chronic disease, environmental and occupational risk, global health and biostatistics. SPPH programs will consist of:

   - Public Health: UG minor, MPH, MS, Ph.D.
Proposers indicate that adequate space for the SPPH exist in the Health Sciences Complex (completed 2022), with dedicated lab space available in other buildings; they explain that research and other scholarly activity will also take place in the Chao Family Comprehensive Cancer Center (2023).

If supported, the SPPH would open its doors with 43 faculty, increasing by 10 over 5 years, approximately 1300 UG students, 30+ professional masters students, and other graduate students at various stages of their ongoing degree programs.

The existing Program in Public Health is CEPH (Council on Education in Public Health)-accredited, and the proposed SPPH would seek this accreditation.

3. Financial Considerations
Proposing faculty and administrators argue that because establishing the SPPH amounts to transitioning from an effective and financially well-managed program that operates as a de facto school already, the SPPH will require no significant change in funding. Prior UCPB noted the following financial considerations:

- Addition of 10 faculty: additional $2.5 million over 5 years
- Increased staff (5): additional $400K
- Indirect Cost Recovery (ICR) growth > rate FTE growth
- Unclear why ICR would vary in any particular way, other than increase, with greater number of faculty. Note that stated increase in earlier review ($300K - $1.4 million) seems to reflect promised support in excess of new faculty salaries during year 1 ($300K in temporary support + $1.4 million in base support) Perhaps some text or explanation was missing.
- Professional to increase ($400K-$1.2 million) due to anticipated rise in professional masters students (to 158)
- Considerable permanent campus support ($3.7 million by 2025-26)
- Explanation of projected balance inadequate. I did not find any new language in the narrative to explain its calculation.

Financial Narrative appears on p. 57/Budget appears on p. 723

Income considerations appear to be as expected narrative begins on p. 57, with budget summary on p. 723)
● 10 additional FTE over 5 years with average start up funds at $54K
● 13.75 permanent TA
● 21.5 staff (5 additional from current)
● Associated benefits
● Permanent unallocated 19900 funds
● ICR 17% annual rate, allocation is as follows:
  ● 50% at school level.
  ● 20% to PIs
  ● 10% PI dept.
  ● 20% Dean of Research
● Founding Dean funds
● Funding for existing clinical faculty and staff
● Summer session funds
● Temp funds for UG
● NRST
● Professional fee ($8292/student per year) - 33% RTA with remainder contributing to the program. *This fee will increase by 5% annually and remain low relative to comparable fees on other campuses for some time.*
● University aid program/Masters block funding ($3528/MPH student tuition)
● Grad division support for ASE/TA/GSR
● PhD block grant
● Grad Division funding - flexible/varies
● Philanthropy/Gifts
● Permanent Campus Support
● Temp Campus Support
● Faculty Growth
● Faculty/Staff Salaries
● Instructional Salaries/Support
● Academic program RTA
● Shared Services Fee
● Carry forward balances
May 14, 2024

JAMES STEINTRAGER, CHAIR
ACADEMIC COUNCIL

RE: UCEP REVIEW OF THE UC IRVINE PROPOSAL FOR A SCHOOL OF POPULATION AND PUBLIC HEALTH (SPPH)

Dear Jim,

The University Committee on Educational Policy (UCEP) has carefully examined the full proposal for UC Irvine’s School of Population and Public Health (UCI SPPH). Consistent with other reviewing bodies, we applaud the thorough and thoughtful proposal and find it responsive to the previous reviews. We endorse the creation of the UCI SPPH. We believe the UCI SPPH will be of great benefit to the Irvine campus, to the UC System and to the people of Orange County, and strongly support its approval. Below, we summarize our findings within key review categories and provide suggestions that we hope may be helpful during the school’s transitional period and early years.

Present Structure: UCI Public Health currently exists as a program (PPH) with four area groups that will become the founding departments: Epidemiology and Biostatistics (DEB), Environmental and Occupational Health (DEOH), Health, Society and Behavior (DHSB) and Population Health and Disease Prevention (DPHDP). The PPH is already effectively functioning like a school and has been ramping up administrative hiring and infrastructure, so the transition should be very smooth.

Instructional Programs: The UCI PPH already has a large and successful undergraduate program, which offers a BA in Public Health Policy and a BS in Public Health (~1300 majors, expected to be steady state), in addition to some smaller academic masters and doctoral programs (MS and PhDs in Epidemiology, Environmental Health Sciences and Public Health). There is also an existing Master of Public Health (MPH) program, the gold-standard professional degree, which is small but which they hope to grow to ~150 students over the next three years.

Research: The UCI PPH has a vibrant program of research in areas including health equity, chronic disease etiology and prevention, environmental and occupational risk factors, global health, emerging and infectious diseases, and quantitative methods, all of which are laid out in impressive detail in the proposal. Faculty are involved in numerous interconnected research collaborations, both within the PPH and more broadly at UCI and other institutions. As noted below, there are some gaps in coverage of key areas and the faculty will need to grow strategically, but the core group is very strong.
Mission: The stated mission of the SPPH is to conduct “research and instruction to reduce the burden of disease and disability in culturally diverse communities in Southern California and around the world.” The focus on health equity and community engagement, with particular attention to culturally diverse, vulnerable, and/or underserved populations is a great strength of the proposal. Moreover, UCI will be particularly well positioned to deliver on this promise given its status as a Hispanic Serving Institution (HSI) and an Asian American and Native American Pacific Islander Servicing Institution (AANAPISI). The PPH already has an extremely diverse student body and a rich set of active research programs serving these goals.

Need: The UCI SPPH will serve a large urban/suburban population in Orange County. The region is facing significant health crises in areas ranging from mental health to opioid abuse to chronic and infectious diseases, and has a large aging population. The need for public health professionals in the workforce is high and will significantly accelerate in the coming years. Student demand for these programs is correspondingly high, as evidenced by the success of the current instructional programs, particularly the undergraduate majors.

Benefits of Transitioning to a School: Formal conversion to school status will help with increasing extramural (grant) funding, advancement and development efforts, and visibility/national prestige. It is also a critical step for the unit’s next review by the Council on Education for Public Health (CEPH) which is the accrediting body for schools and programs in the discipline, particularly with respect to the MPH program.

University Commitment: UCI has shown a very strong commitment to the SPPH in terms of allocation of permanent major funding, faculty lines, resources, and space in the new building for the College of Health Sciences. The continued support of the campus will be crucial as the new school expands.

Responsiveness to Prior Reviews: The reviews of the pre-proposal for the SPPH were extremely positive at both the UCI and system-wide level, with relatively few substantive issues identified. Most of the points mentioned, including requests for additional information about diversity, equity, and inclusion (DEI) plans, examples of how faculty have achieved health equity in Orange County, the extent to which the school’s funding may depend on not yet realized donations, and an apparent discrepancy between expected rate of growth of faculty FTEs and indirect cost recovery, have been well-addressed in the current proposal.

Points for the School to Consider Going Forward: While UCEP does not see any issues that stand in the way of transitioning to school status, the committee members do have some suggestions which UCI and SPPH leadership may wish to consider over the next few years to maximize the success of the new school:

- The core public health disciplinary areas, as operationalized by the CEPH, are biostatistics, community health sciences, environmental health sciences, epidemiology, and health policy and management. The current UCI-SPPH structure proposes four departments, two of which (Epidemiology & Biostatistics; Environmental and Occupational Health) align well with this, but it is not clear exactly how the other two departments (Health, Society & Behavior; Population Health and Disease Prevention) map to the other two disciplinary areas. Moreover, PHDP as described in the proposal reads more like a multidisciplinary research focus group than a traditional department. While not suggesting that the current structure needs to be changed, it will be important to clearly delineate to CEPH, and to the public health community more generally, how all of the core disciplinary areas are covered. A similar statement applies to the degree programs.
- Consonant with the point immediately above, and as acknowledged by the internal proposal, there are gaps in expertise in health policy and biostatistics. Hiring in these areas over the next few years will be crucial to building the SPPH’s research and instructional programs and to the success of its anticipated school-level accreditation review.
- The proposal states there is a commitment from the university for ten new faculty positions but in another section of the report it is indicated that nine have already been hired. This makes it somewhat unclear just how much of a mandate there is to grow from the current faculty size, and in particular how many additional FTE will be provided by UCI. It will be important to have a clear plan around growth and the optimal steady
The state balance of faculty, staff, and administrative positions (the latter, not surprisingly, has grown most rapidly as the transition to school status has been approaching).

- The teaching requirement of two (quarter) classes per faculty member seems relatively low. It would be good to lay out in more detail how that will be sufficient to support the educational mission of the school. While some of the load can be handled by lecturers and adjuncts, ensuring that students have contact with the Senate research faculty is very important.

- The school’s focus on health equity and underserved/vulnerable populations is a great strength. The leadership is already working on a DEI plan, one of their faculty is principal investigator on a successful proposal to the UCI Black Thriving Initiative Faculty Cluster Hiring Program, and the pilot skills-based mentorship program for first generation students described in the proposal are all important steps. However, many of the current DEI activities listed are somewhat ad hoc, involving individual faculty serving on a committee or giving a presentation or attending an event. It will be important to continue building a systematic structure and expanding it into as many areas as possible. The successful hiring of an Associate Dean of DEI, in 2023, to lead and coordinate these efforts is a clear demonstration of UCI’s commitment to this mission. Leadership in this area will be critical to success.

- The proposal indicates that at this time no additional degree programs are planned, although there has been ongoing discussion of a 4+1 undergraduate plus master’s degree option. It is unclear why the latter has not yet been implemented, as it seems like a good idea and was recommended by the prior review, as was a graduate program in health management. We would also expect growth in the number and size of academic graduate programs over the next decade; establishing a priority order for expansion will be key.

- Finally, the prior review noted that limited faculty were available to serve as professional mentors. Support for career preparation is an area that will need to grow with along with the new programs.

UCEP appreciates the opportunity to comment on this important proposal and hopes that these notes may be helpful to the UCI SPPH, particularly in meeting future accreditation requirements. We laud UCI for this very thorough, comprehensive, and responsive proposal and wish you success with your new school!

Sincerely,

Melanie Cocco, Chair
UCEP