

Evergreen Valley College Student Affairs Program Review Self-Study

Department/Program Name: EVC Student Health Services

Last Review: 2007-2008

Current Year: 2014-2015

Program Review Submitted: 03/05/15

Program Review Feedback Received: 11/17/15

Updated Program Review Submitted: 03/23/16

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Dean/Vice President: ~~Irma Archuleta~~ Victor Garza & Mark Gonzales

FONT COLOR KEY:

EVC Mission and Strategic Initiatives

Financial Requests for Funding

Non-financial Requests for Assistance

Department/Program Summary

Student Health Services exists to provide health care and support for all currently enrolled students at Evergreen Valley College. Our health care services include direct medical care on site, referrals to outside community clinics and agencies for services not provided in our department, collaboration with primary care physicians through a student's health insurance plan, and mental health services and referrals. The direct medical services provided include: first aid, diagnosis and treatment of medical conditions, family planning services, STD testing and treatment, TB testing, immunizations, physical examinations, provision of medications on site in addition to prescriptions for outside pharmacies, and performing and following up with lab tests. In addition, our department assists with submission of Student Insurance accident claims, provision of information regarding healthcare coverage through Covered California and Medi-Cal, smoking cessation support, and diet, exercise, and other health information.

These services are valuable to our students, because many students do not have private health care insurance, and we are their only source of affordable health care. Allowing students to access health care on campus provides a convenient way for them to address their health care needs in a timely manner without sacrificing class attendance. Our services also allow students to discuss health concerns in a confidential setting, separate from their family's health insurance plan.

Part A: Overview of Program

1. Identify your department's Commitments to Action for this year.

The Commitments to Action for the Student Health Services Department:

MENTAL HEALTH

- Train EVC students and employees in Mental Health awareness and appropriate actions to take when a distressed student is encountered. This online training has been made available through the California Community College Student Mental Health Program in conjunction with Kognito Mental Health.
- **Distribute the Distressed Student Handbook.**
- Gather information about starting a Behavior Intervention Team (BIT) as an official college entity.
- **Work to submit a relevant job description** and **find funding for a Crisis Counselor/ Behavior Intervention Team Chair.** Provide input to hiring managers and HR regarding the job classification, so that the college is not hindered in hiring the correct person in relation to:
 - Hours of availability (year-round availability desired)
 - Confidentiality issues for licensed mental health personnel
 - Transfer opportunities for tenured faculty members

OUTREACH

- **Make presentations in Department Meetings** and in classrooms to educate faculty and students about the services offered in our department and to promote the Kognito online mental health training and the online Student Health 101 magazine.
- **Make presentations in classrooms** on health-related topics.
- Coordinate with community vendors to schedule their visits to campus to present information, resources, and assistance on health-related topics.
- Work to engage students in the activities of our department through monthly e-mails, message board announcements, and bulletin board displays.
- Coordinate with Student Health 101 to customize a digital health magazine for EVC students to access online.
- **Continue to request training on sending student e-mail blasts.**
- **Continue to request that the college publish the necessary announcements regarding FERPA and "Directory Information" so the college can allow approved outside agencies (such as Student Health 101) to e-mail students directly with health-related information.**

IMPROVEMENTS IN DEPARTMENT AND ON COLLEGE CAMPUS

- Development of SHS Satisfaction Survey and purchase of a "comment box."
- Transfer to use of Electronic Health Records (EHR).
- Transfer of all department forms to electronic versions.
- Development of written medical procedures, protocols, and standing orders.
- Expansion of available vaccines offered to students.
- Increase of hours that department is open with addition of a 12-month office assistant.
- Increase in Smoking Cessation resources and community partnerships with an effort to **move toward a smoke-free campus or enforcing the use of smoking areas on campus.**
- **Request Business Services to send an employee to be certified as a Notary Public.**

2. Explain how your program's CTA's are aligned with the goals of the college. How does your program help the College fulfill its Mission, Strategic Initiatives, and Commitments to Action?

EVC Mission

With equity, opportunity and social justice as our guiding principles, Evergreen Valley College's mission is to empower and prepare students from diverse backgrounds to succeed academically and to be civically responsible global citizens.

The Student Health Services Department helps the College fulfill its mission of helping students succeed academically by offering health care to all currently enrolled students at the lowest out of pocket cost possible, while remaining within the budget. We do not deny services, even if they have not paid their health fee. We offer lab tests and medication on site for nearly the same price that it costs us to pay for them. These services are offered at significantly cheaper prices than our uninsured students could obtain at a community health clinic or even at the Santa Clara County Public Health Department. We offer information in multiple languages when available. We offer same-day appointments on campus, which decreases the number of class hours that would be missed if they had to leave campus to seek medical attention. We have increased the hours that our doors are open, which offers increased access to students.

We support students in many other ways, such as by offering birth control options and free condoms. This allows students to be in control of the timing of becoming parents, which can help students to succeed academically and complete their educational goals. Having access to free condoms allows them to practice safer sex. Offering low cost STD testing helps prevent the spread of disease between sexual partners. All of these outcomes align with the College's mission of encouraging our students to become civically responsible global citizens.

Health Services also supports students through the availability of mental health counseling on campus. Mental health counseling allows students to decrease their stress, set goals, manage their emotions, and correct their behaviors. When students are mentally healthy, they are better able to succeed academically. In addition, the classroom experience and campus safety is improved for the individual, other students, and faculty members as student conduct issues are dealt with through counseling. All of these outcomes align with the College's mission of encouraging our students to become civically responsible global citizens.

EVC Strategic Initiatives

- *Student-Centered: We provide access to quality and efficient programs and services to ensure student success. Areas of focus are:*

- *Access*
 - Increased hours that our doors are open to students
 - Brochures in multiple languages
 - Electronic health brochures on website
 - Free medical appointments
 - Low cost lab tests and medications
 - Late afternoon appointments available upon request for availability to evening students

- *Curriculum and Programs*
 - Student Health 101 – digital health magazine
 - Kognito - online mental health training

- *Services*
 - Low cost physical exams, vaccines, and lab tests for fulfilling academic program requirements
 - Medi-Cal Family PACT Program-Birth Control and STD Testing
 - Sole source of medical care for some International Students
 - Low cost Mental Health Counseling Services

- *Community Engagement: We create a trusting environment where everyone is valued and empowered. Areas of focus are:*
 - *Increase Visibility*
 - **Classroom presentations** about health and services
 - **Presentations at Department Meetings**
 - Student and employee e-mails, message boards displayed on campus, bulletin boards/brochure racks outside clinic

 - *Develop Strategic Partnerships*
 - Medi-Cal Administrative Activities Program – increases revenue with unrestricted funds reimbursed from the government
 - Medi-Cal Family PACT Program- birth control and STD testing
 - Council Connections – lower cost supplies and services
 - Kognito – Mental Health training online
 - Student Health 101 – Online health magazine
 - Public Health Department – free flu vaccines and low cost supplies provided for students and employees

 - *Building Campus Community*
 - Participation in Spooktacular Student Services Event, 10/31/13, 10/30/14, and 10/29/15
 - Participation in Open House event, 04/12/14 & 03/21/15
 - Participation in Days at the Green event as able with available staffing

- Volunteering at Information Tables Spring-2014 & Fall-2015
- Random Acts of Kindness Outreach Activity in February, 2015
- Participation in Students First Event, 2013-2014
- Participation in Non-Violent Communication Training, 11/05/14 & 11/19/14
- Participation in Non-Violent Communication follow-up and community building celebration, 12/19/14
- Participation in Knowing Your Management Style PDD Class, 03/14/14
- Attendance at ongoing “Student Services Supportive Lunch Meetings”
- Attended a disabled student’s wheelchair basketball tournament at Cal State East Bay, 12/20/14
- Sharing treats with other Student Services Departments
- Participation in Safety and Facility Committee Meetings
- Participation in Fiscal Services Business Process Review Meetings, 10/24/14, November 11-13, 2014, & 01/30/15-03/18/16 (ongoing)
- Attendance at Nursing Department and Business Workforce Community Advisory Meetings, 11/03/14 & 11/13/14
- Collaborating with Nursing Department to allow nursing students to practice giving injections during flu shot clinics, Fall-2013, Fall-2014, Spring-2015 & Fall-2015
- Attendance at Board of Registered Nursing review meeting for Nursing Department Accreditation, 10/19/15

Organizational Transformation: We will transform the college image and enhance partnerships with community, business and educational institutions. Areas of focus are:

○ *Student Access: Completion of Educational Goals*

We have supported students in a variety of ways that have been instrumental in supporting them in completion of their educational goals:

- Offering appointments for diagnosis and treatment for acute illnesses or injuries, allowing the student to miss minimal class time while meeting their health needs.
- Helping students to access their health care providers using their insurance coverage.
- Connecting students with community agencies that will assist them in signing up for health care insurance.
- Offering referrals to a variety of community agencies.
- Providing ice packs, free over-the-counter medication, water bottles/snacks, or a quiet area to rest for students who are not feeling well during their school day.
- Allowing breast-feeding mothers to pump milk and store it in our refrigerator, which supports them in continuing with their education while feeding their infants economically and healthfully.

- *Employee Development*
 - Online mental health training for employees
 - Sending our SHS employees for training on the following topics:
 - Birth Control Updates
 - STD Updates
 - Alcohol Abuse Screening Techniques
 - Family PACT Updates
 - Training for Medcat (Electronic Medical Records)
 - CPR and First Aid
 - Best Practice Guidelines
 - TB Mandates
 - FERPA Compliance
 - National Behavior Intervention Team Association Training/Certification
 - Professional Organization Conferences
 - Title IX Training

- *Transparent Infrastructure*
 - Collaboration with President and Vice Presidents for development of MAA fund disbursement plan for participating departments.
 - Written medical protocols, standing orders, and clinic procedures.

3. State at least three recent program accomplishments that contribute to the College's success:

- TB Tests
 - 2012-2013: Employees-4 Students-62
 - 2013-2014: Employees-100 Students-16
 - Fall 2014: Employee-32 Students-44
 - 2015 Employees-53 Students-128

- Flu Shots
 - 2012-2013: Employees-39 Students-457
 - 2013-2014: Employees-9 Students-158
 - Fall 2014: Employees-64 Students-257
 - 2015 Employees-56 Students-186

- Expanded Type of Vaccines Offered (February 2015)
 - Hepatitis A
 - Hepatitis B
 - Human Papillomavirus
 - Measles, Mumps, Rubella
 - Tdap

- Students Served for Mental Health Issues (2014-2015 academic year)

- Staff Consultations Regarding Students of Concern: 14
- Instructor Referrals: 12% of cases
- Students Served: 102
- Student Contact Hours: 414
- Students Undergoing Ongoing Therapy: 58
- Average # of Therapy Sessions: 7
- Mental Health Appointment Reasons
 - Anxiety/Stress: 40%
 - Relationship Issues: 12%
 - Depression: 26%
 - Family Issues: 9%
 - Identity/Gender Issues: 5%
 - Sexual Assault/Trauma: 3%
 - Anger: 3%
 - Other: 2%

- Students Served for Physical Health Issues (2015 calendar year)

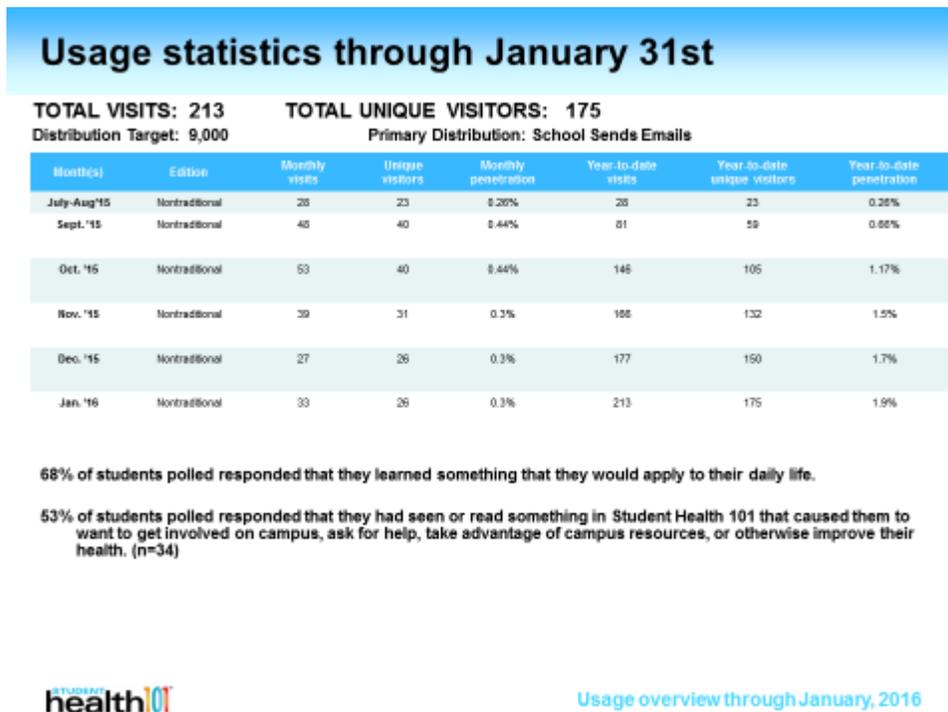
- Appointments: 818
- Walk-in: 157
- Flu Shots: 242
- Total number assisted for medical reasons: 1217

- Implementation of Student Health 101 digital health magazine (February 2015)

DATE		VISITORS TO SH 101 WEBSITE	UNIQUE VISITORS	COMMENTS		
February	2015	2	2			
March	2015	22	3			
April	2015	602	470	04/02/15	245 visitors	229 unique
May	2015	122	79	05/06/15	25 visitors	22 unique
June	2015	32	24			
July	2015	13	12			
August	2015	15	14			
September	2015	48	40			
October	2015	53	40			
November	2015	39	31			
December	2015	27	26			
January	2016	33	26			
February	2016	29	25			
March	2016	14	13			

From January 2015 through March 9, 2016, there were 1002 visits to the Student Health 101 online magazine with 707 unique visitors. These visits were accessed from the following sources:

- Desktop Computer 269
- Mobile Phone 687
- Tablet 46



- Health Insurance Informational Tables for Covered California and Medi-Cal
 - O'Connor Hospital Health Benefits Resource Center
 - Asian Americans for Community Involvement (AACI)
 - (8 events since Fall 2013)
 - 02/09/14
 - 03/04/14
 - 12/11/14
 - 12/18/14
 - 1/29/15
 - 02/05/15
 - 02/12/15
 - 02/19/15
 - 10/29/15

- Kognito Mental Health Online Training for Employees and Students

AT RISK TRAINING

Launched 08/06/12

DATE DATA GATHERED	# OF FACULTY LEARNERS	FACULTY COMPLETION RATE	# OF STUDENT LEARNERS	STUDENT COMPLETION RATE	COMMENTS
04/01/14	No Data	No Data	0	0.00 %	
07/01/14	No Data	No Data	12	66.67%	
09/02/14	No Data	No Data	12	75%	
10/01/14	10	30%	39	51.28%	09/17/14: sent e-mail to students 27 new learners in past 30 days
11/03/14	No Data	No Data	41	53.66%	
12/01/14	15	20%	44	52.27%	
01/02/15	16	25%	44	54.55%	
02/02/15	16	31.25%	No Data	No Data	
03/02/15	No Increase	No Increase	45	55.56%	
04/01/15	No Increase	No Increase	46	54.35%	
05/01/15	No Increase	No Increase	No Increase	No Increase	
06/01/15	17	35.29%	No Increase	No Increase	
07/01/15	No Data	No Data	No Increase	No Increase	
08/01/15	No Data	No Data	No Increase	No Increase	
09/01/15	18	38.89%	No Increase	No Increase	
10/01/15	No Data	No Data	54	61.11%	
11/02/15	No Data	No Data	No Increase	No Increase	
01/04/16	No Increase	No Increase	No Increase	No Increase	
02/01/16	No Increase	No Increase	No Increase	No Increase	
03/01/16	No Increase	No Increase	62	66.13%	

VETERANS TRAINING

Launched 08/06/12 for Faculty and 08/01/13 for Students

DATE DATA GATHERED	# OF FACULTY LEARNERS	FACULTY COMPLETION RATE	# OF STUDENT LEARNERS	STUDENT COMPLETION RATE	COMMENTS
04/01/14	0	0.00%	0	0.00%	
07/01/14	1	100%	No Data	No Data	
09/02/14	No Increase	No Increase	3	0.00%	
10/01/14	No Increase	No Increase	5	20%	09/17/14: sent e-mail to students
11/03/14	No Increase	No Increase	No Increase	No Increase	
12/01/14	No Increase	No Increase	No Increase	No Increase	
01/02/15	2	100%	6	33.33%	
03/03/15	No Increase	No Increase	No Increase	No Increase	
04/01/15	No Increase	No Increase	No Increase	No Increase	
05/01/15	No Increase	No Increase	No Increase	No Increase	
06/01/15	No Increase	No Increase	No Increase	No Increase	
01/04/16	No Increase	No Increase	No Increase	No Increase	
02/01/16	No Increase	No Increase	No Increase	No Increase	
03/01/16	No Increase	No Increase	No Increase	No Increase	

LGBTQ TRAINING

Launched 08/01/13

DATE DATA GATHERED	# OF FACULTY LEARNERS	FACULTY COMPLETION RATE	# OF STUDENT LEARNERS	STUDENT COMPLETION RATE	COMMENTS
04/01/14	0	0.00%	0	0.00%	
07/01/14	2	50%	4	50%	
09/02/14	No Increase	No Increase	5	40%	
10/01/14	No Increase	No Increase	9	44.44%	09/17/14: sent e-mail to students
11/03/14	3	33%	No Increase	No Increase	
12/01/14	4	25%	No Increase	No Increase	
01/02/15	5	40%	10	50%	
03/03/15	5	60%	No Increase	No Increase	
04/01/15	No Increase	No Increase	No Increase	No Increase	
05/01/15	No Increase	No Increase	No Increase	No Increase	
06/01/15	No Increase	No Increase	No Increase	No Increase	
01/04/16	No Increase	No Increase	12	50%	
02/01/16	No Increase	No Increase	No Increase	No Increase	
03/01/16	No Increase	No Increase	No Increase	No Increase	

- Distressed Student Handbook (Mental Health Guidelines for Employees)
 - Fall 2014 Content completed
 - Spring 2015 Added in Title IX information
 - Summer 2015 Sent for Printing
 - October 2015 Ready for Distribution – Awaiting Administration Approval

- Added an additional Mental Health Counseling Intern for a total of 3 interns (2014-2015)

- Hired a previous campus bookstore employee
(Helped the college provide the promised job placement when the bookstore closed.)

- Health Clinic Compliance
 - Medical Waste Disposal
 - Laboratory Registration
 - AED Log
 - Family PACT Registrations (in process)
 - Lab Equipment Calibration
 - Microscope
 - Audiometer

4. State the department/program's goals and focus and explain how these contribute to the mission and priorities of the College and District: (see # 2 above)

5. Missing on the template.

6. Missing on the template.
7. If applicable, identify department/program productivity (WSCH/FTEF). N/A
8. Missing on the template.
9. Highlight what areas need to be addressed more effectively.
 - Medica Electronic Record use/implementation
 - Mental Health Crisis Plan
 - Development of a Behavioral Intervention Team
 - Location for Mental Health counseling interns to work
 - Advertisement of online resources (Kognito and Student Health 101)

Part B: Management Information Systems

N/A

Part C: Demographics

ACCESS

1. Ethnicity, Age, and Gender of students who accessed Student Health Services.

Mental Health Counseling Appointments

2014-2015 Data

(Data based on the academic year)

ETHNICITY	PERCENTAGE SERVED	COLLEGE DEMOGRAPHIC	COMMENTS
African American	7%	2.22%	When compared to college demographics, Mental Health Services are over-utilized by African Americans, Hispanics, and Whites and under-utilized by Asians: However, the college demographic for "other" is very high, which skews the comparison. Percentages are near equal for Native Americans and Pacific Islanders.
Asian	16%	27.05%	
Hispanic/Latino	44%	22.72%	
Nat. Amer./Pacific Islander	-----	.89%	
White	26%	4.59%	
Other	7%	42.52%	

Average Age: 25-26

Physical Health Appointments

2015 Data

(Data based on calendar year)

ETHNICITY	PERCENTAGE SERVED	COLLEGE DEMOGRAPHIC	COMMENTS
African American	4.73%	2.22%	When compared to college demographics, Health Services is over-utilized by: African Americans, Asians, Hispanics and Whites; However, the college demographic for "other" is very high, which skews the comparison. Percentages are near equal for Native Americans and Pacific Islanders.
Asian	35.30%	27.05%	
Hispanic/Latino	35.60%	22.72%	
Nat. Amer./Pacific Islander	1.48%	.89%	
White	9.75%	4.59%	
Other	13.14%	42.52%	
GENDER	PERCENTAGE SERVED	COLLEGE DEMOGRAPHIC	COMMENTS
Female	66.77%	53.42%	Health Services is over-utilized by female students and under-utilized by male students when compared to the college demographics.
Male	33.23%	46.07%	
Unknown	-----	0.51%	

AGE	PERCENTAGE SERVED	COLLEGE DEMOGRAPHIC	COMMENTS
18	3.84%	23.51%	College Demographic includes 16-18 year olds. Health Services only assists patients over 17.
19-24	40.62%	42.44%	Percentages are near equal.
25-29	23.49%	10.63%	Health Services are over-utilized by students in the 25-54 age range when compared to the college demographics.
30-34	11.82%	6.17%	
35-54	16.69%	11.57%	
55-64	2.36%	2.64%	Percentages are near equal.
65+	1.18%	1.00%	Percentages are near equal.
Unknown	-----	0.28%	Percentages are near equal.

2. Does the program's population reflect the college demographic data?

See tables/comments above with comparisons of Health Services student utilization based on ethnicity, gender, and age. The Health Services percentages were compared to the published college demographics provided in the document titled "San Jose Evergreen Community College District Fast Facts 2014-2015."

<http://www.sjcccd.edu/RIE/Documents/fast%20facts%202014.pdf>

After the Student Health Services Department began using Mediat, our Electronic Health Record, in March 2015, demographic data was able to be obtained from 03/01/15 through 12/21/15. This is the data on which the demographic percentages were based.

Previously, I asked several people from various Student Services departments if we could capture demographic information specific to the students seen in the Student Health Center, and I was told that we could not gather that information from SARS. I had also spoken with Ying-Fang Chen, a Research Analyst from the Institutional Effectiveness & Student Success Department at San Jose/Evergreen Community College District, and she said that because our department offered services to all college students, we could state that the demographic data in our department matched the demographic data for the college. Again, this is the reason that only demographic data from after March 2015 could be obtained, because that is when Health Services began using Mediat for scheduling appointments, allowing us to capture that data.

The comparison of age and gender are valid, because the data for college demographics show very low percentages for the “unknown” category. However, the comparison for ethnicity is skewed, because the data for the college demographics show very high percentages for the “unknown” category.

The data shows that Health Services should increase outreach to male students and possibly to 18 year old students; although, the data is skewed for that age, because the college collects data on 16-18 year olds. Health Services is not legally allowed to assist students under 18 years of age without parental consent.

3. Describe any areas of concern with access.

- A. Access to the Student Health Center is affected by the fact that many students do not know we exist. **A description of the services we offer is not part of the new student online orientation**; although, the request was made by Health Services to include information about our services. Only a few instructors announce information about the Student Health Center in their classrooms. **We are not able to send e-mails directly to the students**. We have to get approval and then ask another department to send out the e-mail through Datatel. Also, our webpage needs a lot of work to make it more interesting, but it is also not easy to find, so I don't think many students are accessing the Student Health Services webpage.
- B. Access for evening students appears to be limited; however, we have not seen a high demand for evening appointments. We were open until 7:00 p.m. on Thursday evenings during the 2013-2014 academic year, but after reviewing the appointment schedule, we noticed that no appointments were made after 5:30 p.m. during the Spring-2014 semester. Therefore, during the 2014-2015 academic year, we decided to offer late afternoon appointments until 5:00 p.m. on Wednesday evenings. The demand for these late afternoon/early evening appointments was still minimal. During the 2015-2016 academic year, late afternoon appointments were scheduled as needed. Late afternoon appointments for flu shots were offered on three dates. Late afternoon and Friday appointments for TB testing were accommodated as needed. During Spring-2016, an adjunct mental health faculty member was hired part-time, and one day a week the

employee regularly worked until 6:00 p.m. The employee also flexed scheduled hours to include late evening hours as needed, based on college programming. (For example, the employee flexed hours on 03/29/16 to stay on campus until 9:00 p.m. to be available during and after a showing of "Hunting Grounds," which is a film about sexual assault on college campuses.)

- C. The other access problem area I have observed is related to the language barrier for Vietnamese speaking students. We have called upon several employees to assist with translation, but it would be wonderful if we had a Vietnamese speaking employee in the department.
 - D. Many students do not have health insurance, and they cannot afford the insurance offered through Covered California.
 - E. Many students have Medi-Cal health insurance, but they might not know how to sign up for a doctor or how to make an appointment.
4. Describe any plan for improving access.
- A. Health Services has been trying to improve access in the following ways:
 - **Making presentations** to students and faculty so that they are aware that we exist and what services we offer. It is time consuming for our limited number of employees to continually make personal presentations, and Health Services is only invited to make presentation by a few faculty members.
 - The Director of Health Services spoke with Alex Duran, the former Dean of Counseling, requesting that **information about Health Services be included in the content of the online orientation**. She said that Health Services information could not be added to the online orientation, because it was already too long and detailed, but she was willing to **include information about the Student Health Center in the orientation informational packets**.
 - The Dean of Counseling was also willing to have the videographer she hired make a **video clip of the services offered in the student health clinic**.
 - The Director of Health Services met with Sylvia Min, faculty member who teaches a film class, to discuss **hiring a student worker from the film class to make an informational video** that could be posted online and that faculty could show at the beginning of each semester. Ideally, the video could be included in the online orientation or played on the TV monitors in the Counseling Department.
 - We have worked with the International Student Department to ensure that the International Students are aware of Student Health Services. We have both presented at the International Student orientation and provided printed information about our services, health insurance, and community health agencies.

- We would like to inquire about whether one of the employees in our department could have **access for sending student e-mails directly**, so we don't have to rely upon another department to send out e-mails for us.
- The Health Services Office Assistant continues to update our webpage to make it more accessible, applicable, interesting, and colorful, with various health-related resources.
 - Health Services webpage has direct link on front page of the EVC website.
 - Health related events are posted on the front page of the EVC website.
 - The Health Services webpage is continuing to be updated with improved organization and tabs for simplified searching.
 - ❖ Mental Health and Wellness Resources
 - Suicide Prevention
 - Stress Management
 - ❖ Downloadable Medical Forms
 - ❖ Electronic Health Brochures on a Variety of Topics
 - Nutrition and Fitness
 - Sexually Transmitted Diseases
 - Drug and Alcohol
 - ❖ College & Community Resources and Referrals
 - Student Accident Insurance
 - Community Health Clinics
 - Domestic Violence
 - Rape Hotlines
 - Title IX Process
 - ❖ Training and Education Opportunities
 - Student Health 101
 - Kognito Mental Health
 - Smoking Cessation

- B. As mentioned above, there has not been a high demand for evening appointments. As we work with instructors and technology to spread the word about our services, maybe that demand will increase, and we will need to consider adjusting our hours.
- C. I have been in contact with Lena Tran regarding a **partnership with the Patient Navigator program at EVC**. We were discussing ways that the student interns from the program could be helpful in assisting our Vietnamese speaking students with access to health care at the Student Health Center. The interns could also help with referrals to community health agencies in addition to providing information about signing up for health care insurance. Another way the Patient Navigator interns could assist students is to help them find a medical home accepted by their health insurance plan.
- D. We have coordinated with several community agencies, allowing them to come onto the EVC campus several times per month to present information about health care

insurance. We have also printed lists of community agencies that are offering personal assistance with applying for health care.

- E. Our department has assisted students as needed in getting medical appointments using their health insurance. We have also made calls to inquire about insurance coverage for various medical tests, helping students determine if it would be more economical for them to receive their health care at the Student Health Center.

5. What programs and services do you feel specifically contribute to student access?

- A. The Spooktacular event at the end of October always helps educate students about the services our department offers, community resources, and training/educational opportunities.
- B. Health Services set up an informational table at the Open House for prospective students in Spring-2014 and Spring-2015, as an effort to promote our department to prospective students.
- C. Health Services presented ideas to VP Archuleta regarding having a Student Services Resource Table at the Days at the Green event, which would be a more effective method of outreach than the Open House event, because Days at the Green targets already enrolled students.

SUCCESS

1. How well do the program students perform compared to the total college population?

We are not aware of a way to gather this information. Our program is available to the entire college population. See description above under Demographics #2. We will work with the Research Department to find out if there is a way to compile student performance data based on the student ID numbers associated with those students seen in the health clinic.

2. Describe areas where you have concern about student success.

- A. Alcohol and drug use are a concern related to student success.
- B. The availability of healthy food choices on campus are also a concern for student's health and success.

3. What programs and services do you feel specifically contribute to the success of students at your college?

- A. Having access to healthcare on campus directly improves student success. Students can have their health needs taken care of quickly and conveniently, which helps decrease the number of days they would have to miss class. Our clinic offers some medication on

site, so this convenience helps ensure the students begin the prescribed medication therapy right away.

- B. Our Nurse Practitioner and Registered Nurse have both attended trainings and become certified in Screening, Brief Intervention, and Referral to Treatment (SBIRT) for students who have a substance abuse or alcohol abuse problem.
- C. We have the ability to refer our students over to a Smoking Cessation program at SJCC. *The Pfizer grant is completed now, and this resource is no longer available to EVC students, as of December 2015.*
- D. The Family PACT program is available to uninsured students to meet their family planning needs. This allows students to receive birth control for free, which has a direct impact on student success. When students can control the prevention or timing of pregnancies, they are able to continue working toward their educational goals.
- E. Our clinic also offers low cost Sexually Transmitted Disease (STD) testing and treatment. STDs are a concern for many college students, and having a confidential place to be tested and treated is a crucial benefit for students.
- F. Our department offers mental health counseling to the students, helping to reduce stress, anxiety, or depression related to personal problems. The counselors are effective in guiding the students in making personal goals for improving the issues with which they are struggling. The counselors also have the liberty to refer their clients to our Medical Doctor or Nurse Practitioner if medications for anxiety and depression need to be prescribed.

Part D: Compliance

1. Describe the criteria used in determining student's eligibility and how these criteria are communicated in your program's information/handouts.
 - A. Student Health Services is looking in Datatel to find out if they are a currently enrolled student. According to Octavio Cruz, Dean of Enrollment Services, "currently enrolled students" includes students who have enrolled in classes for the following semester. Therefore, students who have enrolled for spring semester classes will be eligible to access Student Health Services for approximately the last month of the previous fall semester.
 - B. California Education Code 76355 also lists payment of student health fees as criteria that should be used for program eligibility. This has been an area of discussion between Student Health Services and the VP of Student Affairs, the Dean of Enrollment Services, and the Director of Fiscal Services. Our department has been encouraging students who have not paid their health fees to go to Admissions and Records and pay them.

However, at this time, **there is not a mechanism in place to allow a student with outstanding fees to designate their health fee to be paid.** Any payment a student makes will be applied to their account and the overall fees due will be reduced, but it will not be applied to the health fee. This problem has been discussed with the Vice Chancellor of Administrative Services, Vice Chancellor of IT, and the Campus Works Consultants. It does not make sense to encourage students to pay the health fee or deny services until they are paid, until there is a system set up for students to designate payment of the health fee. It is not clear in the CA Ed Code or the California Community Colleges Chancellor's Office Student Fee Handbook whether services at the health clinic should ever be denied based on fee payment. It is the policy of the SJECCD to send student a collection agency notice at the end of the year if the student health fees have not been paid.

2. Describe the process used to monitor continued program eligibility.
 - A. Our process will remain the same until the problems listed above are addressed.
 - B. As we move toward using the Electronic Health Record system, only currently enrolled students will show up as eligible on that system.
 - C. **A policy needs to be written regarding the district's position on whether student fee non-payment will affect student access to Health Services.**
3. If applicable, describe the process for assisting students in completing their Student Educational Plan (SEP) and making necessary revisions. N/A

Part E: Program Requirements

1. Indicate if the program is required to have a full-time director and meet specific qualifications.
 - A. The program is required to have a master's prepared director or equivalent.
 - B. At EVC, our director is a faculty member, which is a 32.8 hour per week job for 32 weeks per year.
 - C. Other California Community Colleges have various classifications of their clinic directors.
2. Is the program mandated to have an advisory committee? N/A
3. What type of documentation is the program required to maintain?
 - A. We are required to abide by OSHA regulations for medical waste disposal and to keep documentation of the pick-up dates and **certificates of destruction.**
 - B. We are required by the Department of Healthcare Services to pay laboratory registration fees and submit documentation regarding which employees will be handling lab specimens.
 - C. We are required to maintain various medical records and logs, such as:

- Health records
- Medications dispensed and discarded
- Abnormal pap smears
- Calibration of equipment
- Updated medical protocols
- Observation of Medical Assistant's skills

Part F: Program Services

1. Describe program services. Indicate those services you are mandated to provide.

A. The Health Center provides the following services:

- Urgent care for acute illnesses & injuries
- Vaccine administration
- TB skin testing
- Confidential HIV/STD testing
- Physical Exams
- Nutrition and Health Education
- Mental Health Counseling
- Pregnancy Tests/Birth Control
- Family Planning Through Family Pact
- Low cost fees for labs & some medications
- Medical providers available for questions/concerns
- Referrals available for community health agencies

B. The Student Health Fee does **NOT COVER** the following:

- Ambulance
- Family Coverage
- Fees involving off-campus care
- Hospitalizations
- Ongoing medical care
- X-Rays
- Pharmacy Items (Except FAMILY PACT)
- Laboratory Tests (Except FAMILY PACT)
- Physical Exams

C. The specific qualifications we are required to meet are to maintain the level of health services that were in place during the 1986-1987 fiscal year.

- Ed Code 76355

(e) Any community college district that provided health services in the 1986-87 fiscal year shall maintain health services, at the level provided during the 1986-87 fiscal year, and each fiscal year thereafter. If the cost to maintain that level of service exceeds the limits specified in subdivision (a), the excess cost shall be borne by the district.

2. If the program does not offer all mandated services, which ones are not offered and why?

Our department is not aware of what level of service was offered during the 1986-1987 fiscal year. We need information to be provided to us regarding what services the Student Health Services Department provided at that time. We will reach out to the Research Department and the Institutional Effectiveness Committee to obtain this data.

3. If counseling is a mandated service, how are the required counseling contacts documented?

- A. Academic counseling is not mandated for our program.
- B. Health Services offers Mental Health Counseling.
 - The counseling appointment requests are documented in a binder.
 - The counseling records are hand-written in client files by the interns and Psychological Services Supervisor.

Part G: Student Learning Outcomes

1. Indicate core activity.

- A. Presentation to students about Health Services
- B. Kognito online mental health training student access and completion
- C. Student Health Services Satisfaction Survey
- D. Student Health 101 online health magazine student access

2. Indicate program's SLOs based on core activity.

- A. After a Health Services presentation (at least two per semester), students will be able to answer questions on a post-test with 80% accuracy. The post-test questions are related to the following topics:
 - Identification of Student Health Services Department location
 - Identification of the services provided in the health clinic
 - Identification of the necessary steps to be prepared for an appointment
 - Indication of who to call in the event of a campus emergency

B. The implied goal is that there will be an increase from the previous academic year in the number of students and employees who participated in and completed the online mental health training offered through Kognito. The goal for this SLO may sound low, and the goal is qualitative and not quantitative. Health Services employees can only *promote* the training opportunity, but we cannot *ensure* participation in or completion of the training. The measurable goal that Health Services can ensure an outcome for is that Health Services will promote the training two times per semester with 100% compliance, by using the methods listed below:

- Sending out student e-mail blasts with information about the Kognito training.
- Sending e-mails to faculty requesting that they assign the Kognito modules as homework or extra credit.
- Posting Kognito flyers on campus and in Student Services Departments.
- Promoting the Kognito training through Student Health 101 online magazine.
- Promoting word-of-mouth encouragement to complete the Kognito training.
- Promoting Kognito training at campus events.
- Promoting Kognito training at staff meetings in various departments.
- Contacting the instructors of the high school students who attend EVC to request that they encourage their students to complete the Kognito training.

C. Students will rate their satisfaction with the services provided at the clinic with an average score of 80% or higher.

D. The implied goal is that there will be an increase from the previous academic year in the number of students who accessed the Student Health 101 (SH101) online health magazine. The goal for this SLO may sound low, and the goal is qualitative and not quantitative. Health Services employees can only *promote* the availability of the resource, but we cannot *ensure* an increase in student access of the website. The measurable goal that Health Services can ensure an outcome for is that Health Services will promote Student Health 101 two times per semester with 100% compliance, by using the methods listed below:

- Sending out student e-mail blasts with information about SH 101.
- Sending e-mails asking faculty to encourage students to visit the SH 101 portal.
- Posting SH 101 flyers on campus and in Student Services Departments.
- Promoting word-of-mouth encouragement to visit the SH 101 portal.
- Promoting SH 101 at campus events.
- Promoting SH 101 at staff meetings in various departments.
- Contacting the instructors of the high school students who attend EVC to request that they encourage their students to visit the SH 101 portal.

3. Indicate the target population for the core activity.

A. New and Continuing PE and Affirm/OASSIS Students.

Any student in a class where Health Services was invited by a faculty member to make a presentation.

- B. All currently enrolled EVC Students.
 - C. Students who visited Health Services and were willing to fill out the survey.
 - D. All currently enrolled EVC Students.
4. Indicate assessment tool and timeline selected for core activity.
- A. Pre-test immediately before the presentation and post-test immediately after the presentation.
 - B. Data Statistics provided by Kognito about the number of licenses activated and the number of training modules completed. The data will be analyzed yearly.
 - C. Student Satisfaction Survey. The data will be analyzed yearly.
 - D. Data statistics provided by Student Health 101 about the number of students who accessed the website. Data will be analyzed yearly.
5. Provide a summary of assessment findings, including the number of students assessed and how data was collected.
- A. Before the Health Services presentation, students took a pre-test consisting of 9 questions. After the presentation, students took a post-test consisting of the same 9 questions. 228 students listened to the presentation and completed the pre-test and post-test. The average score on the pre-test was 38% and the average score on the post-test was 84%, which is an increase in knowledge of 46% between the pre-test and post-test. **These presentations have only reached students in the classrooms where instructors have scheduled a presentation with SHS, so many students are missing out on hearing the information.**
 - B. Data from Kognito: Health Services effort to date has not been as successful as we had hoped. Only 80 students and 25 employees have accessed the training since the various modules were launched over the last 3-4 academic years. (March 2016)

“At Risk” Training:

Student Licenses Activated:	62
Student Completion Rate:	66%
Employee Licenses Activated:	18
Employee Completion Rate:	39%

"LGBTQ" Training

Student Licenses Activated:	12
Student Completion Rate:	50%
Employee Licenses Activated:	5
Employee Completion Rate:	60%

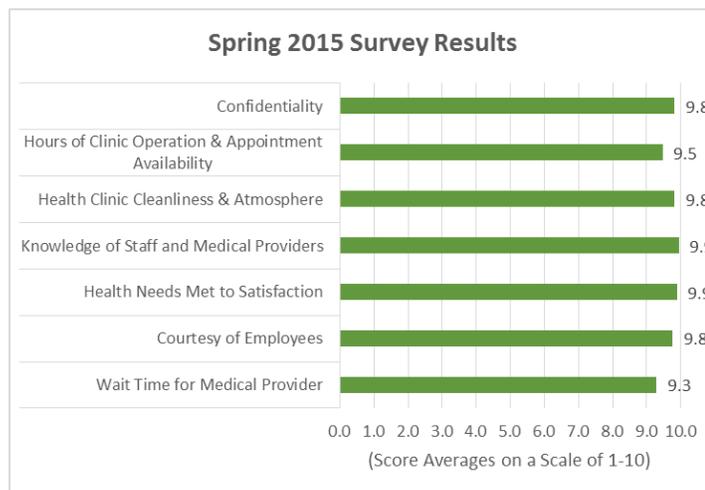
"Veteran" Training

Student Licenses Activated:	6
Student Completion Rate:	33%
Employee Licenses Activated:	2
Employee Completion Rate:	100%

C. At the beginning of Spring-2015, Health Services employees had created the list of questions to ask students, typed the questionnaire, purchased the comment box, and had the comment box mounted in the clinic. Surveys were distributed to students who visited the clinic. 17 students were willing to complete the survey.

See results below for Spring-2015. The overall satisfaction rate was 97%. The two lowest percentages were for:

- Wait time to see a provider: 93%
- Clinic hours of operation/Availability of appointments: 95%



D. Data from Student Health 101:

From January 2015 through March 9, 2016, there were 1002 visits to the Student Health 101 online magazine with 707 unique visitors. These visits were accessed from the following sources:

- Desktop Computer 269
- Mobile Phone 687
- Tablet 46

Student Health 101 was first launched in February 2015.

- February 2015: 2 website visits 2 unique visitors
- March 2015: 22 website visits 3 unique visitors
- April 2015: 624 website visits 475 unique visitors
- May 2015: 748 website visits 554 unique visitors

We need to find out what we did in April and May 2015 to increase the website access and repeat those efforts.

From July 2015-January 2016, 34 students were polled after accessing SH 101.

- 68% of students polled responded that they learned something that they would apply to their daily life.
- 53% of students polled responded that they had seen or read something in Student Health 101 that caused them to want to get involved on campus, ask for help, take advantage of campus resources, or otherwise improve their health.

6. Provide summary of analysis: What changes will be implemented as a result of program findings?

A. The use of technology could help meet this goal more efficiently and across a broader population. Ideas for technological implementation for the presentations:

- Collaborate with a Media Arts faculty member and student to create a video production about Student Health Services. All faculty members could show the video at the beginning of each semester to educate students. Ideally, the video would be included in the mandatory student orientation for all in-coming students.

- The pre-test and post-test could be done through an online survey program, so the results would be automatically tabulated. However, this would require that the classroom that we presented in had computers, laptops, or tablets available.
- Plan to target freshman classes or new student orientation with the “in person” or recorded presentations, so that all incoming freshman receive the information. Cooperation from faculty members is necessary to coordinate either type of presentation.

B. EVC Faculty members and staff members would be instrumental with increasing the number of students who are trained. If faculty require this as an assignment or offer it as extra credit, more students would participate. Ideas to increase the number of students trained:

- Send an e-mail to the Deans of each department asking them to encourage the teachers to assign the training.
- Continue to present the training opportunity to faculty members when Health Services is invited to make presentations at department meetings.
- Continue to present the training opportunity when Health Services is invited to make class presentations.
- Reach out to various departments and speak to the employees at the front desk and encourage them to not only allow us to post the flyer, but request that employees actively engage the students in conversations about the online mental health training.
- Ask Administrators to endorse promotion of Kognito to Deans, faculty, and staff.

C. We will use the results of the Student Satisfaction Survey to improve services. As previously mentioned, the average satisfaction results showed 97% overall satisfaction.

- Health Services will increase the number of surveys collected to obtain a larger student sample to be sure the results are indicative of the larger student body opinion.
- Health Services will change the survey questions as needed to determine areas for improvement for the department.

D. EVC Faculty members and staff members would be instrumental with increasing the number of students who access Student Health 101. Ideas to increase the number of students who access Student Health 101:

- Send an e-mail to the Deans of each department asking them to encourage the teachers to ask the students to access Student Health 101 in class.
- Continue to present this online health resource to faculty members when Health Services is invited to make presentations at department meetings.
- If faculty members assign students writing prompts based on one of the online articles or offer extra credit for writing a paper on one of the topics, more students would participate.
- Continue to present this health resource when Health Services is invited to make classroom presentations.
- Reach out to various departments and speak to the employees at the front desk and encourage them to not only allow us to post the flyer, but request that they actively engage the students in conversations about the online health magazine.
- Ask Administrators to endorse promotion of SH101 to Deans, faculty, and staff.

Part H: Funding Expenditures & Accountability

1. How do you ensure that categorical funds are only used for allowable and mandated costs?

California Code of Regulations: Title 5, Section 54702 states what can be paid for with Student Health Fees.

§ 54702- Proper Use of Funds

The health supervision and services fee which the governing board of a district may require students to pay shall be expended only to cover the direct and indirect costs necessary to provide any, all of, or a portion of the student health programs and services approved by the governing board for offering within the district, which may include the following:

(a) Clinical Care Services

- (1) assessment, intervention, and referral for health services*
- (2) first aid and basic emergency care*

- (3) health appraisal*
- (4) communicable disease control*

(b) Mental Health Services

- (1) crisis management*
- (2) short-term psychological counseling*
- (3) alcohol/drug counseling*
- (4) eating disorders counseling*
- (5) stress management*
- (6) suicide prevention*
- (7) sexual harassment/assault recovery counseling program*
- (8) mental health assessment*

(c) Support Services

A variety of services supporting the clinical and mental health efforts including, but not limited to: maintenance of health records in a confidential and ethical manner, laboratory, radiology, and/or pharmacy services.

(d) Special Services

- (1) health education and promotion*
- (2) teaching and research*
- (3) student insurance programs*
- (4) environmental health and safety, including illness and injury prevention programs.*

The local district governing board establishing a health supervision and services fee shall decide what scope and level of services will be provided. The board policy will be available to all students.

When the burden of supporting a student health program is shared by all students through a general fee, the programs and services for which the funds are expended must be sufficiently broad to meet health care needs of the general student body. Those programs and services directed at meeting the health care needs of a select few to the exclusion of the general student body shall not be supported through student health fees.

Nothing within these provisions shall prevent an exclusive service to a select group of students or service to the college faculty or staff; however, these services must be supported from sources other than the student fee.

Note: Authority cited: Section 70901, Education Code. Reference: Section 76355, Education Code.

2. Is the College mandated to provide a match/maintenance of effort? N/A

3. Describe the process for developing and obtaining local, state or federal Budget and Expenditures approval. N/A
4. Indicate the process for completing the program's fiscal reports and relationship to the district's year end program accounting. N/A
5. Did the reports get submitted on time? N/A

Part I: Technology

1. Describe efforts made to automate and /or introduce technology (i.e. convert hardcopy documents to electronic versions).
 - A. Our department had previously purchased an Electronic Health Records (EHR) system in 2008 or 2009 to replace the paper medical charts. It is my understanding that the system has not been used since December 2012 due to some technological issues. Our department now pays to have the EHR hosted by Mediat, the company from which the software was purchased. We are currently being trained through Mediat and are using the Practice Management part of the software. We will be trained on the Electronic Health Record portion in the next couple of months, and we anticipate using the fully implemented EHR system by the end of the Spring-2015 semester.
Due to our Nurse Practitioner being assigned to perform jury duty for a murder trial for 8 weeks during the Spring-2015 semester, our Department was unable to "go live" with our EHR in Spring-2015. The Department began using the EHR for all documentation on 02/01/16.
 - B. Our department has worked to convert all of our forms, procedures, and Medical Protocols to an electronic format. We are posting our forms online, allowing students to print them and fill them out before their appointments. We are also moving toward putting our forms online through the Mediat student portal, which would allow the students to type information into the forms online.
 - C. Our department has worked to convert our health information brochures to electronic versions.
 - D. Our department continues to submit electronic information for publication in the Student Health 101 online magazine. This information is customized for EVC students.
2. Explain how the new technology helped to improve program efficiency and effectiveness.
 - A. We are in the process of being trained by Mediat in order to fully implement our EHR. At this point, it is cumbersome and slow, because everyone in the department is

learning the system. However, in the future, it will provide easy access to a student's medical record for authorized providers. Using templates and electronic forms will reduce the time it takes to chart in the EHR. This system will allow for more thorough reporting on data and statistics.

- B. Electronic documents provide for ease of editing and helps ensure that they are seamlessly passed on to future employees. This will allow for continuity when staffing changes occur. Using the Mediat student portal for students to fill out health forms will automatically populate the Electronic Health Record with this information, which will decrease the work of scanning the documents and increase the ease of finding the information for medical providers.
- C. The electronic versions of health brochures can be posted on the webpage for wider circulation. This also allows privacy for students to access health information without others finding out. Students may be uncomfortable accessing paper brochures on private or sensitive topics (sexually transmitted diseases, domestic violence, suicide prevention) which could be seen by other students or family members.
- D. Publication of health information in the Student Health 101 magazine is yet another way to increase student access to pertinent and accurate health information. Sometimes when students search the internet for health information, they do not know how to analyze the validity of a particular website and the information it contains. They might read information from a blog or a message board and consider it to be accurate medical information, when in reality, it is just a post of a lay person's opinion.

3. Describe future plans to implement new technologies in an effort to eliminate manual processes. Identify projected needs and timelines.

- SJCC used grant money to purchase Student Health 101, a digital health magazine, for both college campuses. This subscription offers many opportunities to engage our students in health-related topics. With our permission, the company will send out e-mail blasts and manage social media sites for the college in a way that looks like it came directly from the college. They also give us access to printable flyers to post on campus. Our department can be involved in customizing the site, or we can allow all of the work to be done by Student Health 101. The projected needs are to develop an efficient plan for distributing Student Health 101 to our student body. **The timeline for the development of this plan is for it to be in place in March 2015.** We have obtained approval for distribution of the magazine and the customization of the magazine has taken place for EVC. The March 2015 issue is almost ready for distribution. We need to promote and advertise the magazine, which will be done through e-mailing students and faculty, hanging posters on campus, and distributing access information at the resource table during Days at the Green. *Student Health 101 has been available to students for a year now, since March 2015.*

- Health Services needs to be able to send out student e-mail blasts to alert students to health-related information (flu shots, insurance assistance, community resources) and to advertise the online health resources (Student Health 101 and Kognito Mental Health Training). There are only three employees on the EVC campus who are trained to send out e-mail blasts, and it is difficult to have our e-mails sent out quickly and easily when these employees are busy with their own work. Health Services continues to request that we be trained to send out e-mail blasts. Approval for e-mail content would still be obtained, but it would allow for us to send out information in a timely manner.
- The best way to advertise access to Student Health 101 is to allow Student Health 101 to send out e-mails on our behalf to students. These e-mails are professionally written, customized to look as if they are coming directly from our college, and have catchy titles and graphics, which will capture the attention of our students. This is a service that is already being paid for through the Pfizer grant, but Health Services has been told that accessing this service will not be authorized. **One of the problems that stands in the way of allowing advertising directly from Student Health 101 is that EVC has not properly notified students in writing that their e-mail address could be shared with outside agencies that are approved by the college. FERPA allows “directory information” to be shared as long as students are notified in writing that “directory information” may be shared unless students inform the school or district that they do not want “directory information” shared.**

Per 34 C.F.R. § 99.37(d): A school or school district may adopt a limited directory information policy. If a school or school district does so, the directory information notice to parents and eligible students must specify the parties who may receive directory information and/or the purposes for which directory information may be disclosed.

See the links below to the government document with sited regulations and to the legal interpretation of the law.

<http://www2.ed.gov/policy/gen/guid/fpco/ferpa/mndirectoryinfo.html>

http://extranet.cccco.edu/Portals/1/Legal/Ops/11_05.pdf

- Our Student Health Services website needs to be updated to include:
 - Links to health-related topics
 - Forms to download
 - Information about health-related applications for mobile devices.

This is an ongoing task of expanding our webpage. Health Services has already worked on including health topic links and posting downloadable forms. Work is still being done to include information about health apps for mobile devices.

- A future goal would be for the District to allow Health Services to send students text messages regarding health topics and clinic announcements. Student Health 101 upgraded their technology to include mobile access. EVC students can text EVC to 40691 in order to receive the digital health magazine on their mobile phone.
- We would like to have assistance making an online video of the services we offer to students, so that faculty could show it to all of their classes at the beginning of each semester. Ideally, we would like to have the video included in the online orientation, so that time and effort would be preserved. This would help us spread the word about our services, without using so many man-hours to schedule live presentations. It would help a higher percentage of students receive the information about Health Services immediately upon entrance to Evergreen Valley College.
- We would like to implement an online survey for students to provide feedback on their experience in our department. An idea would be for us to mount an iPad onto the front counter for students to take a survey as they check out.
- We would like to implement an online pre-test and post-test for our SLO data collection related to classroom presentations. Our department has been issued log-in information for Lime Query, the online survey tool for the district. We would need to borrow a “class set” of iPads in order to facilitate the online testing.

Part J: Planning Agenda

1. Identify any plans you may have to modify, automate and/or create additional services within your program.

The plans are grouped according to their link to the following Health Services Commitments to Action (CTA).

The plans listed below are directly linked to the Health Services Mental Health CTA.

- We need to work toward developing a Behavior Intervention Team (BIT) on our campus. Many college campuses have these advisory teams, which are a resource for faculty and staff to report odd, non-compliant, or violent student behaviors. The idea is to identify these behaviors early and offer support services before they become a crisis situation.
- There will be potential costs associated with effectively developing this team, depending on the construction of the team.

- Hiring a Mental Health Professional to act as the BIT Chair and to provide immediate crisis intervention and employee consultation during an incident on campus. This is a new employee category, with specific qualifications needed to carry out the job tasks effectively. This job description has not previously existed on our campus. If it is categorized as a faculty position, it needs to be at least an 11-month assignment to allow for coverage for most of the year. It may not make sense to allow employees from existing faculty positions to automatically transfer into this position, as they may not be qualified. This job requires recent crisis intervention experience.
- Purchasing Maxient Software for tracking at-risk students. This is in process through the SJECCD. It is important to be sure that Maxient is set up to allow all faculty, staff, and students to report into the system, but not allow them to read other entries, which would ensure privacy. It is too cumbersome to only have certain people who can submit an incident on Maxient. This will cause a back-log of incidents that need to be typed up and submitted. It will increase the amount of communication that needs to occur between the person who witnessed the incident, and the person who is typing it up.
- Membership and training through NaBITA (National Behavior Intervention Team Association)
- Registering for Online NaBITA Tool (\$500/year)

The plans is below are directly related to the Health Services Outreach CTA.

- A future goal, when funding becomes available, is to hire a health educator to make more classroom presentations, so we can educate students about preventive health care topics. We would like to have this health educator also be trained in smoking cessation.
- We can work to enlist community agencies to provide Certified Enrollment Counselors (CEC) for Covered California to assist students in applying for health insurance under the Affordable Care Act. Another option would be to send someone from the college for training to become a CEC.

The plans below are directly related to the Health Services Improvements CTA.

- We need to partner with the International Student Program and Enrollment Services to develop best-practice standards for health screenings and immunization requirements.
- We would like to move toward adopting policies for a smoke-free campus or, at the very least, enforcing the use of designated smoking areas.

- Health Services has needed to obtain notarized signatures multiple times to complete a Medi-Cal application for the Family PACT program. A suggestion is that the College send one of the Administrative Assistants for the necessary training to become a Notary Public. Ongoing costs for the college would be decreased since a trained employee would then be able to assist all departments with any notarization needs that may arise in the future.

2. Indicate if you are receiving or planning to request funds beyond the state or federal categorical allocation.

- After discussions with Irma Archuleta, VP of Student Services, the Psychological Services Supervisor's hours were increased by 5.5 hours per week, and a third mental health counseling intern was hired, but these hours were supposed to be paid for under a different budget. While waiting for the funding decisions to be made, all of these charges for the additional hours for the 2014-2015 year have continued to be taken from the Health Services budget. As a result of declining enrollment, we may not have sufficient funds to pay for the salaries of our staff and supplies, and we certainly do not have funds to expand our services within the current budget.
- We requested financial support through Equity funds to pay the salary for our Supervisor of Psychological Services and to pay the stipends of our three Mental Health Counseling Interns. Some Equity Funds were allocated in 2014-2015 and again in 2015-2016, but this is not a stable and on-going source of funding.
- Along with SJCC Health Services, EVC Health Services made a proposal to the AFT Union to remove the clinic nurse from the classification of Adjunct Faculty, because a salary of \$76.41 per hour is too high for our budget to absorb. In addition, according to the current classification, an RN with a two-year AA degree is paid the same amount as a Master's Prepared Nurse Practitioner, who has a 6-year degree. A Nurse Practitioner's degree allows them the privileges and responsibility of diagnosing and prescribing. This proposal to remove the 2-year RN from the adjunct faculty pool was denied because the union stated that they are not in the business of decreasing membership or salaries. Since the Health Services budget is too small to pay that level of salary to a nurse, we are unable to hire a clinic RN. The outcome of that decision is that the Director of Student Health Services is doing the job of the clinic RN in addition to the job of the Director. This results in either the Director having to work extra hours without compensation, completion of tasks being postponed, or the clinic not having RN coverage on some days during the week. We would like to begin discussions regarding support for the Health Services Department through the General Fund, rather than just from student health fees. Another way of increasing funds for Student Health Services is to increase the percentage of the MAA funds that are given to SHS.

- We would like to propose that the Stericycle service to pick up medical waste, sharps, chemicals, and expired pharmaceuticals be paid for by the college. Health Services pays for a monthly sharps and medical waste pick-up to comply with OSHA regulations, but the Nursing Department and the Biology Department bring their sharps containers to the Health Services Department for disposal under the contract paid for by our budget. The Custodial Department is instructed to bring any waste associated with clean-up of bodily fluids to our department to be disposed of in the red bags. The Biology Department has a separate Stericycle account for pick-up of animal remains and used petri dishes, etc. The District could be liable for OSHA fines if departments are not abiding by the OSHA regulations. It seems that oversight of each department to ensure compliance with OSHA Regulations would be easier if there were only one Stericycle account for the entire District with someone assigned to monitor compliance.
- We would like to request that Health Services is not required to pay a portion of the Student Health Insurance fee at this time, since our funding is so limited. \$5000 is currently allocated from the Health Services budget to be used for this purpose.
- We would like to explore whether there is a safe and confidential manner for our IT Department to host our Mediat Electronic Medical Record System, so that we do not have to continue to pay \$8350/year to have it hosted by Mediat. However, if this can't be done effectively and easily, then we will need to continue to pay the fees to have it hosted through Mediat to ensure the security of our patient records.
- We need to open discussions regarding the need for individual professional liability insurance for the medical practitioners in our clinic, beyond the general liability coverage offered under the District insurance plan. If more insurance is needed, we would submit that this cost should be covered as a College or District expense or that applicants hired would be required to carry their own insurance.
- We request that all costs and monitoring requirements associated with the Automated External Defibrillator (AED) in/near Health Services be paid for by the College in the same manner that the AEDs located in other buildings on campus are paid for and maintained by the College. This request includes paying for the AED to be installed in a cabinet outside the Health Services door, paying for new pads and batteries as they expire, and including the AED in the online monitoring system that is set up for the other AEDs on campus.

3. Identify and discuss the facilities, equipment and equipment maintenance needs.

- We need to purchase an effective blood drawing station where the students can position their arm correctly for easier blood draws. The budget is too low to pay for this equipment, unless there is assistance from the General Fund of the MAA Fund.

- We need a machine to measure blood hemoglobin, which does not require daily calibration. The calibration drops are too expensive for the amount of students who need hemoglobin testing.
- We need a light brown rolling table (24x60) to match the table we have in our conference room. We have such a small space in our conference room, so we need to have two smaller tables to provide flexibility for the room set up, depending on what we are using the room for (staff meetings, flu shot clinics, lunch breaks). There are many of these types of tables in the reading lab next door, and we would like to request that we are given one of those tables in exchange for the folding table (30x60) that we received from the warehouse. This other table is too wide, and it does not allow for the chairs to be fully pushed in, which takes up our limited floor space.
- We need a more confidential space for Mental Health Counseling. This would also require some funds for furniture and decorations to make the space comfortable and conducive for counselling sessions.
- We need a confidential space for triaging and interviewing patients regarding their medical needs as they check in. This is a remodeling project.
- We have a copier in the Director's office which ITSS has been unable to connect for use. We would like to have this copier up and running, so we have a backup copier.
- We need to have access to update our own computers, or at least be placed on a revolving schedule with ITSS for updates to be installed, so that our computers are working as well as possible.
- We need the Admissions and Records Department to work with IT and Campus Works in order to resolve the problem of students not being able to designate their registration payment to be applied to the student health fee.
- We need maintenance on our autoclave sterilizing equipment, which the current budget cannot support.