Program Review & Planning (PRP)

COMPREHENSIVE PART 1: BASIC UNIT INFORMATION

Program Review is a self-study of your unit. For non-instructional program review, the definition of what is a unit varies based upon your division. A unit may be a department (e.g., Information Services, Institutional Research and Planning, Financial Aid), a program (e.g., EOPS, TRIO), or a division (Human Resource Services). The Vice Presidents for each division have identified/defined the units that will complete the review cycle.

Regardless of whether your unit is a program, department, or division, program review is about documenting the plans you have for improving Institutional Effectiveness in your area and sharing that information with the college community. Through the review of and reflection on key elements, program review and planning identifies program strengths as well as strategies necessary to improve the operation of your area. With that in mind, please answer the following questions:

Date:	11/25/2019
Unit Name:	
Department Name:	Student Health Center
Division Name:	Student Services
Name of person responsible for the Program/Unit:	Judy Harris
Website address for your unit:	https://www2.palomar.edu/pages/healthservices/

Please list all participants in this Program Review:

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Name	Position
Judy Harris	Director, Student Health Center
Patrick Savaiano	Asst. Director, Behavioral Health
Kimberlee Ahinger	Admin Assistant

SECTION 1: Program/Unit Mission Statement

What is your Program/Unit's mission statement (click here for how to create a mission statement):

The mission of Palomar College Student Health Centers is to support student learning for success. This goal is achieved by supporting the physical, emotional, and social well-being of students through accessible, high quality health and wellness services. The primary goal is to assist students in establishing healthy lifestyles, which will have long-term benefits for them, their families, and the community. Palomar College Student Heath Centers are also committed to ensuring a healthy and safe environment that supports student learning and staff productivity.

Describe how your mission aligns with and contributes to the College's Vision and Mission.

The mission of Student Health Centers aligns with the overarching commitment of Palomar College to help our students achieve the learning and personal outcomes necessary to contribute as responsible global citizens in an interdependent and ever-changing world. The health and wellness services provided at the Student Health Centers promote student retention, empower students to succeed in their personal and academic goals, and directly support the vision of "learning for success."

SECTION 2: Program/Unit Description

<u>Staffing</u>

Full-time Staff		Part-time Staff		
Total Number of Full-time Staff	9	Total Number of Permanent Part- time Staff	0	
Number of Classified Staff	9	FTE of Part-time Staff (2X19 hr/wk = .95)	9	
Number of CAST Staff	0	FTEF of Part-time Faculty	2	
Number of Administrators	2			
Number of Full-time Faculty	0			

Describe additional temporary hourly or contract staff support this unit and/or department? (Include FWS/District Student Worker/Veteran Student Worker)

Student Wellness Advocacy Group (SWAG) = 6 student/short term employees; College Physician Student Affairs Case Manager (working under Office of Student Affairs), paid for by the Mental Health Allotment Grant.

As part of this PRP cycle, Human Resource Services has sent organizational charts to all non-instructional units. Please review the charts and make any needed changes. Attach a copy of the chart when you are submitting your review or provide the link to your organizational chart if it is online.

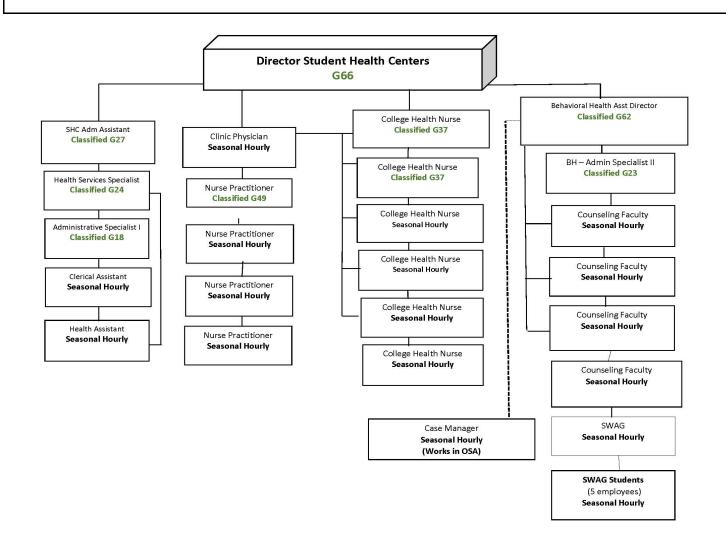
OR

If you cannot create an organizational chart, or did not receive one from Human Resource Services, list the positions in your unit showing reporting relationships (e.g., Manager Facilities with the following direct reports, Supervisor Position A, Supervisor Position B, Supervisor Position C; Supervisor Position A with direct reports, Position A, Position B, Position C)

How will you submit your organizational chart?

X Upload document

Provide web link Describe organizational structure



Program/Unit Description

Who utilizes your services?

Eligible students, whom are currently enrolled and have paid the student health fee; college employees that require TB Risk Assessment every 4 years as a requirement by HR for continued employment.

What services does your program/unit provide (Describe your program/unit)?

The Student Health Centers program provides health and wellness services for the student population; coordinate outreach and campus events to promote healthy lifestyles and student success.

COMPREHENSIVE PART 2: PROGRAM/UNIT ASSESSMENT

SECTION 1: Service Area Outcomes and Assessment

GOT SERVICE AREA OUTCOMES?

Outcomes are statements written in support of student learning to show direct support (instruction) or indirect support (services) provided on campus. Assessment is the way we measure how well we are achieving our outcomes.

For non-instructional areas, outcomes are called Service Area Outcomes (SAO).

So, what is an SAO?

A Service Area Outcome (SAO) is a statement about what a client will experience, receive, or know as a result of a given service. Clients can be students, faculty, staff, or community members.

As part of our three-year planning and review cycles, all non-instructional units are asked to:

- identify at least two SAOs,
- develop a plan and assess their SAOs,
- reflect on the results,
- and take action, as necessary.

Palomar has adopted TracDat as our official repository for SLO and SAO Assessment information.

Review and/or define your SAOs and assessment plans and ensure they are entered in TracDat by:

- 1) Login to Nuventive Improve (TracDat) <u>https://www2.palomar.edu/pages/sloresources/2015/08/10/tracdat/</u>. Your Palomar username and password is your login.
- 2) Update or add your SAOs and assessment plans.

NEED HELP?

TracDat:

1) If you need help with anything TracDat related such as login, unit identification, entering SAO info, contact Marti Snyder at <u>msnyder2@palomar.edu</u>.

2) Check out this video on how to enter SAOs in TracDat: https://youtu.be/b1sRa68wm4c

Defining and Assessing SAOs:

Not sure if your SAOs make the grade? Need some help writing an SAO? Not sure about how to assess your SAOs?

- 1. <u>Hartnell's SAO Guide</u> is a nice resource! Thank you Hartnell!
- 2. Contact Michelle Barton at <u>mbarton@palomar.edu</u>. We have a resource support team to help.
- 3. The SAO template at the end of this document is a useful template for defining an SAO and assessment plan. It is modeled off what we enter in TracDat.

Are all of your unit's SAOs and assessment plans entered in TracDat?	YES	X	NO	
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If NO, describe why and identify a data by which they will be entered.

For each SAO in TracDat, summarize what you learned from the assessment and what improvements you have implemented or plan to implement as a result of your SAO assessments.

1) Each semester conduct student satisfaction surveys to improve services provided to students.

2) Analyze student comments regarding improvement of services and develop/implement an action plan to correct deficiencies.

3) On a weekly basis, current wait times for non-urgent initial behavioral health appointments will be assessed in order to learn average wait times.

4) At the end of each semester, data from EMR will be analyzed to determine percentage of non-urgent initial appointments that were scheduled within 10 business days. Systemic adjustments will be made as necessary.

SECTION 2: Other Assessment Data

<u>List all other quantitative and/or qualitative measures you use to track, monitor, and/or evaluate the effectiveness of your program/Unit:</u>

Quantitative Data

	Values				
Measure	2015-16	2016-17	2017-18	2018-19	Definition/Description of Measure
Student Health Centers Visits – All sites	27,578	24,970	23,085	18,453	Total number of medical visits (reception, RN, NP, and MD), Behavioral Health and outreach activities
Behavioral Health Counseling Services – All Sites	290	746	1,043	1,218	Total number of behavioral health counseling visits (reception and counselors)
Student Health Centers – No Shows – All Sites	N/A	N/A	137	208	1.25%- no show is defined as an appointment is not attended and without a phone call to cancel or reschedule the visit.
Behavioral Health Counseling Services – No Shows – All Sites	N/A	N/A	123	155	12%- no show is defined as an appointment is not attended and without a phone call to cancel of reschedule the visit.
Student Health Centers Visits - Urgent	N/A	N/A	107	60	Urgent visits include student accident and acute medical complaints.

Behavioral Health Counseling Visits- Urgent	N/A	N/A	51		Urgent visits include emergency referrals from faculty and staff or student for a severe behavioral health crisis.
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Patient Insurance 2018 - 2019	Total of Students with Coverage
Private	1,461 = 45%
VA	215 = 6%
Medical	784 = 24%
Medicare	69 = 2%
No coverage	747 = 23%

Behavioral Health Counseling Visits 2018 - 2019	Total of Students
Case Management	39 = 3%
Individual Sessions	707 = 58%
Couples Intake	3 = <.01%
Couples Sessions	0 = 0%
Intake	359 = 29.5%
Phone Consult	11 = 1%
Reception	3 = <.01%
Triage	0 = 0%
Urgent	96 = 8%
Total Visits	1,218
Total No-shows	155 = 13%

Behavioral Health Counseling No Shows	San Marcos	Escondido	Rancho Bernardo	Total
Intake	48	6	1	55 = 35.5%
Individual Sessions	79	10	2	91 = 59%
Case Management	7	0	0	7 = 4.50%
Couples Intake	1	1	0	2 = 1%
Total	135	17	3	155

Wellness Activity	Total Individuals Reached
Nursing Orientation	85
Plenary - Faculty	85
Week of Welcome	210
Service Learning Fair	140
Campus Safety Month Event	35
Breast Cancer Awareness	35
Breast Health Workshop	15
Check Your Mood Day	60
Domestic Violence Unity Day	20
Music Wellness Event	65
Thanks Birth Control Day	25
Alcohol & Drug Awareness	35
World AIDS Day	25
Class Presentations/Outreach – San Marcos	135
Class Presentations/Outreach - Escondido	134
Healthy Relationship Event	20
Healthy Heart Event	20
Immunization Awareness	15
Distracted Driving Event	15
Skin Cancer Awareness	12

COMPREHENSIVE PROGRAM REVIEW AND PLANNING: Non-Instructional Programs

Movies for M	Iental Health	38
Mental Health Month Event 25		25
Love on a Leash 150		150
Discover Pal	omar	111
American Re	ed Cross Blood Drive	493
Sexual Assau	alt Prevention	50
	Medical Clinic	123
Total Healt	h Education Outreach Activities	2,176
Pay Acct	Classified Staff - Professional & Regular	Total Salary & Benefits
123600	Director	\$198,088
212310	Nurse Practitioner 12 months	\$184,860
141100	Asst Director, BH Manager 12 months	\$185,310
212300	College Health RN 11 months	\$138,435
212300	College Health RN 11 months - vacant	\$138,435
212200	Student Health Admin Asst 12 months	\$115,852
212200	Admin Specialist I 12 months	\$60,834
212200	Health Services Specialist 11 months	\$119,160
212200	BH Admin Specialist II 11 months	\$108,574
Subtotal Classified		\$1,249,548
	Seasonal/Hourly Staff	
231500	Physician 15 °/month	\$18,987
231500	Nurse Practitioner 36°/month	\$20,961
231500	Nurse Practitioner 16°/month	\$9,316
231500	College Nurse x 4	\$52,956
231100	Health Promotions Assist 12°/wk.	\$13,164
231100	Medical Receptionist 24°/wk.	\$29,812
231100	SWAG Students & Instructor x6	\$31,259
141100 Case Manager		\$19,442
141100	Behavioral Health Counselor x4	\$185,206
	Subtotal Seasonal/Hourly	\$381,103
	Total of Current Staffing (Classified & Seasona	al) \$1,630,651

FYE June 30, 2019	Student Clinic 0811050	
	Budgeted	Actual
Revenue Accounts		
889999 Beginning Balance Rollover		\$9,887.00
887600 Health Service Fee Student	\$15,000.00	\$19,609.00
887620 Health Services Physical Exam		
884150 Health Services Sale to		
Employee		
889900 Family Pact Reimbursement		
Revenue		
Total Revenue		\$29,496.00
Expenditure Accounts		
Salary & Benefits	\$0.00	\$0.00
400010 Clinic Supplies & Materials	\$20,470.00	\$18,268.00
500010 Other Operating Expenses	\$0.00	\$0.00
600010 Capital Outlay	\$0.00	\$0.00
Total Expenditures		\$18,268.00
<u>Carryover</u>		

COMPREHENSIVE PROGRAM REVIEW AND PLANNING: Non-Instructional Programs

Beginning Balance	\$9,887.00
Total Current year Revenue	\$19,609.00
Total Current Year Expenditures	\$18,268.00
Total Available Budget	\$11,228.00

FYE June 30, 2019	Employee Clinic 0811601	
	Budgeted	Actual
Revenue Accounts		
889999 Beginning Balance Rollover		\$6,169.00
887600 Health Service Fee Student		
887620 Health Services Physical Exam		
884150 Health Services Sale to	\$2,090.00	\$3,230.00
Employee		
889900 Family Pact Reimbursement		
Revenue		
Total Revenue		\$9,399.00
Expenditure Accounts		
Salary & Benefits	\$1,600.00	\$0.00
400010 Clinic Supplies & Materials	\$400.00	\$0.00
500010 Other Operating Expenses	\$0.00	\$0.00
600010 Capital Outlay	\$0.00	\$0.00
Total Expenditures		\$0.00
Carryover		
Beginning Balance		\$6,169.00
Total Current year Revenue		\$3,230.00
Total Current Year Expenditures		\$0.00
Total Available Budget		\$9,399.00

FYE June 30, 2019	Student Health Fee 1812090	
	Budgeted	Actual
Revenue Accounts		
889999 Beginning Balance Rollover		\$1,219,832.00
887600 Health Service Fee Student	\$950,000.00	\$820,303.00
887620 Health Services Physical Exam		
884150 Health Services Sale to		
Employee		
889900 Family Pact Reimbursement		
Revenue		
Total Revenue		\$2,040,135.00
Expenditure Accounts		
Salary & Benefits	\$1,780,378.00	\$1,365,569.00
400010 Clinic Supplies & Materials	\$80,000.00	\$60,539.00
500010 Other Operating Expenses	\$198,215.00	\$102,604.00
600010 Capital Outlay	\$100,000.00	\$47,739.00
Total Expenditures		\$1,576,451.00
<u>Carryover</u>		
Beginning Balance		\$1,219,832.00
Total Current year Revenue		\$820,303.00

COMPREHENSIVE PROGRAM REVIEW AND PLANNING: Non-Instructional Programs

Total Current Year Expenditures	\$1,576,451.00
Total Available Budget	\$463,684.00

FYE June 30, 2019	Mental Health Allotment 1612196	
<u></u>	Budgeted	Actual
Revenue Accounts		
889999 Beginning Balance Rollover	\$162,034.00	\$162,034.00
887600 Health Service Fee Student		
887620 Health Services Physical Exam		
884150 Health Services Sale to		
Employee		
889900 Family Pact Reimbursement		
Revenue		
Total Revenue		\$162,034.00
Expenditure Accounts		
Salary & Benefits	\$0.00	\$0.00
400010 Clinic Supplies & Materials	\$0.00	\$0.00
500010 Other Operating Expenses	\$162,034.00	\$7,884.00
600010 Capital Outlay	\$0.00	\$0.00
Total Expenditures		\$7,884.00
Carryover		
Beginning Balance		\$162,034.00
Total Current year Revenue		\$0.00
Total Current Year Expenditures		\$7,884.00
Total Available Budget		\$154,150.00

FYE June 30, 2019	Mental Health Grant 1612197	
	Budgeted	Actual
Revenue Accounts		
889999 Beginning Balance Rollover	\$250,000.00	\$250,000.00
887600 Health Service Fee Student		
887620 Health Services Physical Exam		
884150 Health Services Sale to		
Employee		
889900 Family Pact Reimbursement		
Revenue		
Total Revenue		\$250,000.00
Expenditure Accounts		
Salary & Benefits	\$219,486.00	\$51,993.00
400010 Clinic Supplies & Materials	\$9,000.00	\$1,201.00
500010 Other Operating Expenses	\$21,514.00	\$12,922.00
600010 Capital Outlay	\$0.00	
Total Expenditures		\$66,116.00
Carryover		
Beginning Balance		\$250,000.00
Total Current year Revenue		\$0.00
Total Current Year Expenditures		\$66,116.00
Total Available Budget		\$183,884.00

FYE June 30, 2019	Family Pact 1812095	
	Budgeted	Actual
Revenue Accounts		
889999 Beginning Balance Rollover		
887600 Health Service Fee Student		
887620 Health Services Physical Exam		
884150 Health Services Sale to		
Employee		
889900 Family Pact Reimbursement	\$50,000.00	\$12,514.00
Revenue		
Total Revenue		\$12,514.00
Expenditure Accounts		
Salary & Benefits	\$0.00	\$0.00
400010 Clinic Supplies & Materials	\$20,000.00	\$4.00
500010 Other Operating Expenses	\$30,000.00	\$1,244.00
600010 Capital Outlay	\$0.00	\$0.00
Total Expenditures		\$1,248.00
<u>Carryover</u>		
Beginning Balance		\$0.00
Total Current year Revenue		\$12,514.00
Total Current Year Expenditures		\$1,248.00
Total Available Budget		\$11,266.00

Reflect on your quantitative data and summarize your findings or interpretations.

Total visits- the total number of visits for the medical clinics has decreased by 20% in FY 2018-19 whereas Behavioral Health Counseling (BHCS) visits increased by 14% when compared to 2017-2018 figures. Interpretation- It has been expected that Behavioral Health Counseling visits would show an increase as major efforts have been dedicated to informing the entire campus community of this service to students and the addition of a fifth part time BH Counselor. Additionally, this mirrors the national trend of annual increases in college students requesting and seeking mental health support on campus. The majority of the BHCS visits are in the individual session category as most students require a number of sessions to resolve emotional conflicts and gain tools necessary for healthy coping strategies. It was somewhat surprising that medical clinic visits have been declining steadily over the past 4 years. Though classroom presentations are offered each semester to all faculty, only a few faculty requests these visits on a regular basis. In addition, medical insurance benefits counselors (enrollment specialists) from various medical community clinics visit campus on a monthly basis to provide Covered CA medical plan enrollment to students, thus connecting students to community medical resources. Though enrollment at the Rancho Bernardo Center has increased in the Fall 2019 semester, few students seek services at the student medical clinic, though the BHCS counselor has a full schedule of students most weeks. Outreach efforts by the Rancho Bernardo clinic nurse have been implemented, with visits to classrooms (when invited) and department meeting with full time staff and faculty, but not vielded an increase in students seeking services.

<u>No show visits</u>- Medical clinic no show rates have typically been very low over the years because of adequate staffing to handle walk in appointments (a high percentage of acute medical appointments are not scheduled). On the other hand, BHCS has consistently had increase in no show rate each year (13% this year, 11.2% last year) and this year the rate is higher among individual sessions. This is not an uncommon problem in BHCS, as typical no show rate by ACHA is usually 8% as students tend to "drop out" of sessions when they are not experiencing emotional symptoms and crisis situations have been resolved. Additionally, the nature of the student body at Palomar College (commuter/non-residential, predominantly part-time, frequently working) creates additional obstacles for students in keeping their follow-up appointments. BHCS staff consistently send text and phone call reminders of appointments to students in an effort to decrease the no show rate. A fee of \$5 (student acknowledges this fee by signing an informed consent) is also charged if a student no shows for individual session and case

management appointments. These two strategies still have not decreased the no show rate among BHCS appointments. At the time of midterm until the end of the each semester (our busiest time at BHCS), students may have to wait up to 2 weeks for an initial, non-urgent appointment. BHCS administrative staff attempt to contact students to fill cancelled and no show appointments to reduce the waiting time for new student appointments.

<u>Urgent Visits</u>- For the medical clinics, urgent visits decreased by 43% whereas Behavioral Health visits increased by 88% FY 2018-19. Urgent visit data is collected to determine the work load placed upon staff to handle these type of crisis/emergency visits that require immediate response of medical professionals. The increase in Urgent Behavioral Health Visits may, in part, be due to the increased awareness of the department amongst faculty and staff who regularly refer students in crisis. Based upon this data, staffing at the medical clinic doesn't support the need for additional staffing but consideration for additional staff at BHCS is a strong recommendation to reduce BH counselor burn-out and cancellation/rescheduling of BH student appointments. Additional counselor staffing could provide crisis intervention counseling without affecting scheduled student appointments.

<u>Insurance</u>- of the 3,276 students that indicated medical insurance, the majority of these students (45%) have private insurance whereas 24% indicated Medi-Cal and 23% have no insurance. This indicates that close to 50% of students provided services by the Student Health Center program (medical and behavioral health) are low income and/or do not have medical insurance. Student Health Center program provides vital medical services to almost a quarter of the students that have no means of obtaining consistent primary medical care.

<u>Wellness Activities</u>- Per the chart above, outreach and health educational programs are offered almost on a weekly basis throughout the Spring and Fall semesters. In addition, Alternative Medical Van has expanded services this year to include not only pregnancy testing, with ultrasound, but also urine testing for sexually transmitted infection and treatment at no charge to the Palomar College students. The medical van is on site at the San Marcos, Escondido and Rancho Bernardo campuses on a weekly basis during Spring and Fall semesters. Planned Parenthood holds once a month activities on the San Marcos campus that includes enrollment in Family PACT, birth control, HIV and sexually transmitted infection testing. North County Health Services provides dental services, family planning and birth control education and medical insurance enrollment services once a month during the Spring and Fall semesters at San Marcos, Escondido and Rancho Bernardo sites. Vista Community Clinics provides rapid HIV testing once a month at the San Marcos, Escondido and Rancho Bernardo sites.

<u>Operational Budget</u>- In 2015, the Student Health Center budget demonstrated a rollover of 2.7 million dollars. Over the past 4 years, the rollover amount has been steadily declining, related to increased operational expenses (salary and benefits) and decreased income. In 2018-2019, the income again decreased to the lowest amount in 4 years (820K) while salaries increase and the rollover was down to 463K. In 2019-2020, it is anticipated that a budget rollover will not occur unless operational costs are reduced, manly salary and benefits costs, and income is increased.

Regarding income, the Student Health Fee Report produced in August 2019, demonstrated a continual loss in revenue over the last 4 years due to default in student health fee payments- over 120K with the highest amount lost in 2018-2019 of 56K (3,000 students didn't pay the fee). In addition, the Student Health Fee at \$19 (Fall/Spring)/ \$16 (Summer) hasn't been increased since 2012 and this year the Chancellors Office authorized a fee increase to \$21 (Fall/Spring) and \$18 (Summer). In 2016, Administrative Policy 5030 (fee) in which the Student Health Fee policy was changed and included additional exemptions from students being charged a health fee. These exemptions were: students exclusively attending classes at a site that didn't offer a student health clinic and students exclusively attending distance (online) education. Prior to implementation of these student health fee exemptions, student health fee income was over 1 million dollars a year.

Other income producing programs were implemented in 2018. Family PACT Services program was started in October 2018, which provides reimbursement from Medi-Cal for contraceptive services provided to low income students. Local Education Agency (LEA) program was implemented in Spring 2018 for Medi-Cal reimbursement of behavioral health counseling visits provided to low income students. Unfortunately, while LEA claims have been submitted for reimbursement (approximately \$800), the college has yet to receive a check from Medi-Cal, due to a delay in regulation language changes.

Two Mental Health related grants (totally over 400K) were received from the Chancellors Office in 2018-19. These grant funds supported hiring an Assistant Director, Behavioral Health, a part time social worker for the Student Affairs Office, Student Wellness Advocacy Program Coordinator and student workers. Without the funding provided

by these grants these positions would not have been possible. Moving forward, these grant supported programs and positions have to be institutionalized, which will require increased revenue in Student Health Center budget or another funding source.

Strategies are currently being implemented to reduce operational costs including reduction of full and part time medical clinic positions and operational hours for all sites. Further discussion of these plans is listed in Goal 1-Balanced Budget.

Qualitative Data

Describe any qualitative measures you use and summarize the results.

Satisfaction Surveys, Input from Behavioral Health and Wellness Committee (BHWC), Health Services Association of CA Community Colleges (HSACCC), Mental Health and Wellness Association (MHWA). Results: Knowledge of both Family PACT and LEA Programs were obtained from HSACCC conferences. Input from BHWC members suggested changes AP-5030 to allow online students to pay the health fee thus allowing access to Behavioral Health Counseling Services (at the request of a Professor in the Psychology Dept). Satisfaction surveys will be implemented in Spring 2020. Consultation with MHWA members has led to the possibility of adding telemental health to bolster services that can be offered for Palomar students at no charge.

What improvements have you implemented or plan to implement as a result of your assessment of quantitative and/or qualitative data described above.

Family PACT Program, LEA Program, Mental Health Intern Program (plan to implement Spring/Summer 2020), addition of Telemental Health offerings (hope to also implement by Summer 2020)

SECTION 3: Achievements and Other Relevant Information

Describe your program's achievements or this past year. Where possible, describe how these achievements are related to our students and their success!

1. Hired Assistant Director, Behavioral Health funded through Mental Health Grant 18-2020 (serves on the BIT team and supervises BH Counselors, provides direct services to students and de-escalation training to staff and faculty) 2. Hired 16 hour/week Case Manager Student Affairs Office funded through Mental Health Allotment Grant 19-2020 (provides direct services to students connecting them to on/off campus resources and support regarding basic needs, food insecurity, homelessness, etc.)

- 3. Established 3 MOU/Partnership Agreements with Vista Community Clinic, Neighborhood Healthcare and North County Health Services- allows for warm referral for Palomar College students to receive specialized medical Services including long term Behavioral Health Counseling Services
- 4.Established Fallbrook Center Behavioral Health Counseling Services, one day a week for 5 hours, during Summer and Fall 2019 semesters- funded by Mental Health Grant 18-2020
- 5.Established Family PACT Program (October 2018)- provides free contraceptives services to Medi-Cal eligible students
- 6.Established LEA Program in Spring 2019: reimbursement of Behavioral Health Counseling Services for Medi-Cal eligible students, which has yet to be received. Pending legislative changes required to current Law
- 7. Awarded Chancellors Office Mental Health Grant (400K) for FY 2020-2021- the grant provides funding for the Assistant Director, Behavioral Health and a full time Case Manager for the Student Affairs Office
- 8. Established a Partnership Agreement with Rezolve, Inc., a telemedicine company that offers students low cost (self-pay) MD visits.

9. Created the Comets Care Network team, comprised of members from all Student Services departments and chaired by the Assistant Director, Behavioral Health; designed to create action items for improving mental health and wellness across campus and improve communication between departments who regularly interface with our students (i.e. Office of Student Affairs, Student Health Centers, Disability Resource Center, Veterans Resource Center, Associated Student Government, Palomar PRIDE Center, General Counseling Dept).

10. Implemented mental health screenings on campus, including PHQ9 depression screenings at all intake points for the Student Health Centers; these screenings allow our health professionals to track how Palomar students are functioning

11. Began discussions with CSUSM MSW graduate program to develop formal relationship; this will hopefully lead to implementation of a mental health internship program by the Fall of 2020.

Describe any recent changes in legislation, policies, procedures, processes, and/or technology (software and hardware) that have impacted or will impact your program/unit? What effect will these changes have on your program/unit?

Behavioral Intervention Team Policy and Procedures-effect streamline policy and procedures for students that may require ongoing mental health support for academic success; LEA legislation to change to allow for reimbursement of Behavioral Health Counseling visits for Medi-Cal eligible students- a source of revenue for services currently provided at no charge to students.

In addition to (or in response to) the changes listed above, what board policies, procedures, and processes need to be updated, created, or deleted?

AP 5030- Fee specifically Student Health Fee requires the following:

- 1. Inclusion of automatic fee increase when authorized by the Chancellors Office
- 2. Removal of exemptions: student at exclusively attend sites without a student health clinic and students that exclusively attend distance education
- 3. Inclusion of text: "VPSS or Director of Health Services are the only authorized persons to approve student health fee "waivers".

Student Heath Fee payment at time of registration to decrease the growing student health fee default account each year. Assistant Director of BHCS is also working to create an official BP/AP for the college's Behavioral Intervention Team, comprised of representatives from Student Affairs, BHCS, and Campus Police.

COMPREHENSIVE PART 3: PROGRAM/UNIT EVALUATION AND THREE-YEAR PLANNING

Program Evaluation and Planning is completed in two steps.

Section 1: Overall Evaluation of Program

Reflect on your program/unit, the results of your assessments in Part 2 above, and your vision for the future. Then, working together answer the following questions. Summarize your answers in the grid below.

- 1. What are our greatest strengths?
- 2. What are our best opportunities?
- 3. What is our preferred future, what do we aspire to do?
- 4. What are the measurable results that will tell us we've achieved that vision of the future?

Section 2: Establish Goals and Strategies for the Next Three Years

Once you have completed your overall evaluation, identify a set of goals and strategies for accomplishing your goals for this upcoming three-year planning cycle. Use the template in Section 2 below to document your goals, strategies, and timelines for completion. Goals should be Specific, Measurable, Attainable, Relevant, and Time –Specific (SMART). Following the goal template below will help you create SMART goals!

SECTION 1: Overall Evaluation of Program

	1. Discuss your Program's/Unit's Strengths, Opportunities, Aspirations, and Results (SOAR) and summarize your discussion below.	
Strengths:	Dedicated medical professionals that have a passion to promote students' healthy lifestyles, maintain body/mind/soul balance, reduce stress, illness and other factors that interfere with student retention and success. Provide high standard medical and behavioral health counseling services and compassionate care to all persons whom seek services	
Opportunities:	Increase medical and behavioral health services to all eligible student; decrease wait times for new behavioral health counseling appointments, balance budget to decrease deficient spending and increase income to re-establish rollover/reserve account, reduce # of students with health fee default, stabilize staffing by replacing short term hourly with permanent contract positions.	
Aspirations:	Expansion of services by establishment of additional community partnerships (free or low cost medical services), Mental Health Intern Program to expand BH services, telemedicine/tele psych services to support online students, massage therapy services for stress reduction. Student Health Centers space that includes Behavioral Health Counseling Services (BHCS), into a comprehensive "One Stop Shop" for Student Services on the San Marcos campus.	
Results:	Increased number of students, including online, that are provided timely services, minimal wait times for new BHCS appointments, establishment of new clinic area that also includes BHCS Offices, balanced budget that includes at minimum a 500K rollover/reserve funds each fiscal year, over 90% high scores on student satisfaction surveys.	

SECTION 2: Progress on Prior Goals

List current or prior goals your program/unit has been working on and provide an update by placing an "X" in the appropriate status box.

Goal	Completed	Ongoing	No longer a goal
The "no show" appointment rate for medical appointments will be below American College Health Association (ACHA) acceptable average of 8% . Last 2 years tracking this goal has been consistently 3.4 and 4%			х
The "no show" appointment rate for Behavioral Health (BH) will be below the ACHA average of 8% (rate in 2017-18 was 11.7%)		х	
Students requesting BH appointments will be scheduled within 2 weeks of the request.		х	

Add any comments related to your work on prior goals, if needed (e.g., successes, challenges, reasons for eliminating a goal).

1. No show medical appointment goal was not needed as the rate of no show continues to be below the ACHA average of 8%. No shows for BH appointments is still a challenge, even with implementation of text and phone call reminders and no show fee for missed individual session appointments. The highest rate of no show appointments in FY17-18 occurs with the first appointment (known as intake), where the students are not charged a no show fee.

SECTION 3: Establish Goals and Strategies for the Next Three Years

1. New Goals: Please list all goals for this three-year planning cycle:

	Goal #1
Goal	Balanced budget
Strategies for implementation	 Propose increase in Student Health Fee to maximum allowed by Chancellors Office Remove the following Student Health Fee exemptions from AP-5030 (Fees): students that exclusively attended sites that do not have a student health clinic and students exclusively attending distance (online) education Include language in AP-5030 that allows for automatic increase to Student Health Fee, as authorized by the Chancellors Office Investigate and revise the fiscal process for the collection of student health fee payment. Decrease # of waivers for student health fee payment by including in AP 5030 " VPSS or Director of Health Serivces are <u>only</u> authorized to approve "waivers" for payment of Student Health Fee" Hold on hiring any vacant full time staff positions Decrease staffing expenses by decreasing the operational

	 hours and staffing at Educational Centers (Escondido and Rancho Bernardo) 8. Decreasing stock of prescription medications and office supplies 9. Increasing service fee charges for medications/vaccines, lab and medical procedures. 10. Increase revenues from Family PACT and LEA programs- continue to submit bills to Medical Billing Technologies for reimbursement by DHCS for Medi-Cal related services provided to Medi-Cal eligible students. Encourage student enrollment in Family PACT and LEA programs.
Timeline for implementation	Started in Fall 2019 and anticipated to be ongoing
Outcome(s) expected (qualitative/quantitative)	End of year budget balance for all accounts (except grants) will have rollover money to be applied to FY 20-21 budget.
How does this goal align with your unit's mission statement?	Will demonstrate that Student Health Center is fiscally solvent and can continue in meeting the mission to serve students.
How does this goals align with the College's <u>Strategic Plan 2022</u> ?	Goal 1: STUDENTS: Increase student access, progress, and completion, while decreasing equity gaps. Student Health Center will be able to support this college goal by supporting students towards retention, completion of academic goals and ultimately career success. Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college- Objective 2- financial stewardship plan. Student Health Center will remain fiscally solvent to continue to provide support services to students.
	Goal #2
Goal	Stabilize Staffing- Convert short term hourly to contract part time positions (as required by Ed Code)
Strategies for implementation	 Consider reorganization of the department: current 11 month positions for conversion to 12 month positions; reclassification of current job descriptions (with possible grade increase) and if operational budget can support the additional salary costs Develop staffing pattern based upon visit/usage data from Point N Click EMR statistics (time of visit, frequency of visits, # visits per day) for all clinics Determine FTE required for contract part time position to provide adequate staffing at San Marcos and other satellite clinics Compile salary cost including benefits based upon FTE calculation Determine if operational budget can support the establishment and ongoing costs of the position (consider yearly step increases and COLA) Submit Position Authorization to VPSS for approval Following approval, HR will place positions on list for hiring and will assign HR recruiter to establish hiring process. Hiring committee will have to be formed Hiring process takes about 3-6 months from when HR assigns a recruiter.

	IN REVIEW AND FLANNING. NON-INSTRUCTIONAL FLOGRATIS	
Timeline for implementation	Need to have balanced budget with rollover/reserves to consider implementation –possibly FY 21-22	
Outcome(s) expected (qualitative/quantitative)	90% of the current staff will be full time employees with benefits or contract part time employees. Hourly employees will be considered seasonal and only utilized during times of anticipated high volume visits: flu vaccine campaign, start of each semester (first 2 weeks) for academic physicals, TB skin testing and immunization review visits.	
How does this goal align with your unit's mission statement?	Provide efficient, high quality, consistent and timely medical services to all students. This goal will increase student retention and promote success towards academic goals.	
How does this goal align with the College's <u>Strategic Plan</u> ?	Goal 1: STUDENTS: Increase student access, progress, and completion, while decreasing equity gaps. Staffing at each clinic can be planned months ahead and medical providers will become established at the individual clinics. This will result in the development of long standing relationships between student-medical provider. This human connection will encourage students to seek medical services earlier to prevent serious medical or mental health illness. ion and success t will be provided efficient and consistent medical services in a timely manner, reducing waiting time. Medical services will be provided by established medical providers, which will reduce confusion and misinformation provided to students. Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college. Having well established medical staff at each of the clinics will increase effectiveness, decrease staff turnover and improve consistency of medical services provided, reducing confusion and misinformation given to the students.	
	Goal #3	
Goal	Establish a Student Health Clinic at Fallbrook Education Center	
Strategies for implementation	 Contact person for this project is Ryan Williams; Dr Patrick Savaiano will be the Student Health Center contact Spring 2019- Student Health Clinic floor plan has been reviewed by Judy Harris, with suggestions made and revised by architects Starting Summer 2019 -Behavioral Health Counselor was scheduled one day a week for 5 hours to provide services. The counselor was paid out of the Mental Health Allotment grant. Summer 2019- Ryan Williams has been sent a list of medical supplies and equipment, computer (Point N Click) equipment/software and office supplies required for the Student Health Clinic Dr Savaiano will attend regular meetings of the project committee and provide input related to Student Health Clinic construction Plan operational hours, staffing and budget for clinic when completion date for construction is known. 	
Timeline for implementation	Spring 2019- 2022 or 2023?	
Outcome(s) expected (qualitative/quantitative)	Opening and operation of the Student Health Clinic at the Fallbrook Center	

How does this goal align with your unit's mission statement?	This goal provides expansion of Student Health Services to an underserved student population	
How does this goals align with the College's <u>Strategic Plan 2022</u> ?	Goal 1: STUDENTS: Increase student access, progress, and completion, while decreasing equity gaps. Expands Student Health Services to students that are currently not provided medical services at this Education Center.	
	Goal #4	
Goal	Establish a Mental Health Internship Program for Behavioral Health Counseling Services	
Strategies for implementation	 Connect with local graduate programs (i.e. the MSW program at Cal State University, San Marcos) to build informal and formal relationships for prospective interns. Obtain quote from Facilities for remodel costs of NB-1B, which will include 3 private offices, a conference room and possibly a bathroom (Fall 2019) Seek possible sources of funding for the remodel project, including the Mental Health Allocation Grant from Chancellors Office (Fall/Spring 2020) Write and submit a Foundation Grant to assist with funding for the remodel project (January 2020) Request Facilities develop a work plan with cost breakdown and timeline for project completion (Fall 2019/Spring 2020) Develop Mental Health Intern Program Policy and Procedures (Summer 2020) Collaborate with HR regarding hiring procedures/stipends for Mental Health Interns (Spring/Summer 2020) Advertise available position(s) and conduct interviews with prospective Mental Health Interns (Summer 2020) Establish an operational Mental Health Internship Program (Fall 2020) 	
Timeline for implementation	Fall 2020	
Outcome(s) expected (qualitative/quantitative)	 Provide an additional 4-6 initial, non-urgent appointments for students each week. Provide support groups and psychoeducational workshops for students to supplement their work in individual counseling and promote healthy coping skills. Provide supportive forums for historically underrepresented and atrisk student populations (i.e. students of color, first-gen students). Decrease in wait times for initial, non-urgent appointments by 20%. Increase in student satisfaction with services provided by BHCS. 	
How does this goal align with your unit's mission statement?	Provide efficient, high quality, consistent and timely behavioral health services for our students. This goal will increase student retention and promote success towards academic goals.	
How does this goals align with the College's <u>Strategic Plan 2022</u> ?	Goal 1: STUDENTS: Increase student access, progress, and completion, while decreasing equity gaps. Student Health Center will be able to support this college goal by supporting students towards retention, completion of academic goals and ultimately career success.	

Goal 3: COMMUNICATIONS & COMMUNITY: Strengthen internal and external communications, marketing, and partnerships. Behavioral Health Counseling Services will develop closer relationships and partnerships with mental health graduate programs in the local community (i.e. MSW graduate program at CSUSM).
Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college. Having an internship program will help us to spread out the workload for each of our mental health professionals, increasing morale, reducing burnout and turnover. This will also provide more timely appointments for our students, increasing the overall effectiveness of the department.

How do your goals align with the College's value of equity and diversity?

Expansion of Student Health Services provides medical and behavioral health service to students that may be disenfranchised by being homeless, low income, not or underinsured without the means to obtain these services. Increases services to all eligible students, including online students

The Strategic Plan 2022 includes the College's Vision for Success (VfS) outcomes. Review the VfS goals and reflect on how your unit supports these outcomes. Identify one strategy your unit will implement to help the college meet these outcomes. Click here to access <u>Strategic Plan 2022</u>.

Student Health Centers mainly supports outcomes (see comments above) as listed in Goals 1 and 5 and in addition supports Goal 3: Communications and Community. Related to Goal 3, Student Health Centers has entered into partnerships with local community medical clinics (Vista Community Clinic, North County Health Services, Neighborhood Healthcare) to establish referral processes for students that required specialized and/or ongoing medical/behavioral health care. In addition, Planned Parenthood and Alternatives Medical Van come on campus monthly and provide medical testing and services to students free of charge. Student Health Center staff continually seek out and establish relationships with vetted and accredited community based medical services to provide free/ low cost services to the entire student population.

COMPREHENSIVE PART 4: RESOURCES

Reflect upon the three year plan you created above, your current operations, and any upcoming factors (retirements, changes in legislation, and changes in policies or procedures). How will you allocate resources to implement your plan? Describe additional resources needed to improve the effectiveness of your unit/program. All resource requests must be aligned with the College's <u>Strategic Plan 2022</u>.

SECTION 1: Reallocation or Reassignment of Resources

Summarize any reallocation/re-organization of resources you are making based upon your three-year plan, your current operations, and any upcoming factors in legislation. Describe the impact of the reallocation of resources to your unit.

Hold on hiring second full time College Nurse (due to retirement in August 2019) and conversion of short term hourly registered nurse into contract part time positions until fiscal status improves. Reorganization (specifically converting 11 to 12 month positions) to decrease need for short term hourly employees is also a consideration but not feasible until fiscal situation improves.

SECTION 2: Need for Additional Resources STAFFING If you are requesting STAFF, please fully complete this section. If not, you can skip to the next resource section. Title Three New / **Describe Need:** Strategic Plan 2022 Goal/ Obj. Year Vacant / Plan Modified / Temporary Goal Vacant as 1) Director Goal 5: Required position per Title 5 to provide supervision 1 INSTITUTIONAL and oversight of the Student Health Centers. of Dec EFFECTIVENESS: 2019 Improve the

		institutional effectiveness of the college.		
2) College Nurse (FT)	2	Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college.	Vacant	To provide medical services at satellite clinics (Escondido and Rancho Bernardo) and backfill San Marcos Clinic as needed.
3)College Nurse 32 hr/week	2	Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college.	New	To supplement registered nurse coverage at San Marcos and other satellite clinics.
4)Nurse Practitioner 16hr/week	2	Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the	New	To provide medical services at the San Marcos Clinic and backfill for full time NP absence.

		institutional effectivenes the college.			
				TECHNLOGY	
If you are re section.	equesting T	ECHNOLOGY,	please fu	lly complete this section. If not, skip	to the next resource
Resource	Unit's Three Year Plan Goal	<u>Strategic</u> <u>Plan 2022</u> <u>Goal/ Obj.</u>	Cost (\$\$\$)	Describe need and identify if the technology need will require: 1) extra wireless access, 2) integration with existing technology (hardware and software such as PeopleSoft), and/or 3) operational maintenance and support.	For each item, assign a PRIORITY number (1 = most important, 2= next important, and so on) across <u>ALL</u> of your Technology, Equipment, or Other Resource Requests.
None at present					

EQUIPMENT (Other than technology)							
If you are requesting EQUIPMENT, please fully complete this section. If not, skip to the next section.							
Resource	Three Year Plan Goal	<u>Strategic Plan</u> 2022 Goal/ Obj.	Cost (\$\$\$)	Describe need:	For each item, assign a PRIORITY number (1 = most important, 2= next important, and so on) across <u>ALL</u> of your Technology, Equipment, or Other Resource Requests		
1) Copier/Printer/ Fax- HC Building	1	Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college.	\$3,000	Replace machine that will no longer be serviceable. Increased cost anticipated against the Student Health Fee budget for servicing old equipment.	1		
2) Copier/Printer/Fax- NB Building Room 2	1	Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college.	\$3,000	Replace machine that will no longer be serviceable. Increased cost anticipated against the Student Health Fee budget for servicing old equipment.	2		
	OTHER RESOURCES						
If you are requesting OTHER RESOURCES not described above, please fully complete this section. If not, CHEERS!!! You are DONE!!!							
ResourceThree YearStrategic Plan 2022 Goal/ Obj.Cost (\$\$\$)Describe need:For each item, assign a PRIORITY							

	Plan Goal				number (1 = most important, 2= next important, and so on) across <u>ALL</u> of your Technology, Equipment, or Other Resource Requests
1) Remodel NB Building Room 1-B	4	Goal 5: INSTITUTIONAL EFFECTIVENESS: Improve the institutional effectiveness of the college.	Currently awaiting quote from Facilities	Remodel NB Room 1-B in order to house Mental Health Intern Program. 3 Private offices are required for expansion of Behavioral Health Counseling Services. Plan to submit a request for a Foundation Grant or Mental Health Allotment funding (possibly available next year from the Chancellors Office) to pay for this remodel project	1
2)					
3)					

COMPREHENSIVE PART 5: FEEDBACK AND FOLLOW-UP

Once your Program/Unit PRP is completed, your division or planning council should review and discuss based on your Vice President's planning process. This area is intended for summary feedback and recommendations from the divisional review.

Confirmation of Review by Division / Planning Council				
Person/Group/Council Who Reviewed PRP	Aiden Ely, Acting VPSS			
Date	12/17/19			

Feedback			
1. Strengths and successes of the program/unit as evidenced by the data, analysis, and assessments:			
2. Areas of Concern, if any:			
Potential future deficit in budget. Reliance on grants for Behavioral Health Services.			
3. Recommendations for improvement:			

SERVICE AREA OUTCOMES TEMPLATE

Date Identified or Last Reviewed	Description of SAO (What is your SAO?)	Assessment Method (How will/do you measure or assess it?)	Criterion (How will/do you know if you met the outcome?)	Date of Assessment	Date of Next Assessment
1)11/15/2019	90% of students surveyed will indicate that they were satisfied with services received at the Student Health Center Medical Clinics.	Provide 13 item survey to students following medical visit	Analysis of the answers collected from the survey	May 15, 2020	
2) 11/19/2019	90% of Initial, Non-Urgent Appointments will be available within 10 business days of when a student is requesting the appointment.	Weekly tracking of data found in the Electronic Medical Record.	Comparison of date each initial appointment is requested with the date it is scheduled.	May 22, 2020	
3)					
4)					