

Annual Student Services Program Review 2011-2012

HEALTH SERVICES, FOOTHILL COLLEGE

Student Service Program Mission:

The mission of Health Services & Psychological Services is to strengthen student learning, retention and success. This is facilitated by supporting the physical, emotional, and social well-being of students through accessible, high-quality, health activities and services. Our primary goal is to assist students in establishing healthy lifestyles which will have long-term benefits for them, their families and the community.

Program Review Team:

Name	Department	Position
Naomi Kitajima	Health Services	Director of Health Services

Section 1. Data and Trend Analysis

1.1. Program/Department Data

Dimension	2008-2009	2009-2010	2010-2011
Students Served	3,433 (with IZs)	9,624 (with IZs)	6,449 (with IZs)
Full-time FTEF	1	1	1
Part-time FTEF	0	0	0
Full-time Staff	2	2	2
Part-time Staff	3	3	3
Students	2	2	2

1.2 Using the data provided above, include a short narrative analysis of the following indicators. Please attach supporting studies or data to the final program review submitted to your Dean.

1. Students served --How was this tracked? NeuSoft & NexGen

What is the trend?

- There is a downward trend of students without Health insurance.
- The current freshman student is more likely to be obese with a diet high in sugar/carbohydrates/fast foods and is more likely to have pre-diabetes and borderline hypertension.
- As the International student population increases the clinic load increases.
- International students:
 - require more time due to language barriers.
 - require detailed health education and prevention.
 - require twice the appointment time for an annual/PAP exam or reproductive visit.
- * Primary care visits are increasing dramatically, theoretically because of the increase

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in International students and there are less students with private insurance.

- * Peak times of utilization of the Health Services:
 - 8:30 to 1:00pm
 - Mon-Thurs
 - Fall, Winter, Spring
- Approximately 40% of the students qualify for State Office of Family Planning (SOFP) sliding-scale services and are considered low income. 36% of the clinic appointments are SOFP funded visits.
- * International students are required to have entrance-screening vaccines/TB testing during their orientation. They come first to Health Services for any health concern and referrals to waive a co-pay.
- * The Allied Health programs require the physicals, labs and immunizations to be performed at the Health Services for ease of communications and standardized screenings. There are approximately 200-250 physicals/year.
- The staffing at Foothill College is primarily a Planned Parenthood staff. The Health Services Director is the only Foothill employee, plus two part-time Foothill students. Health Services is clinically compliant with all State and Federal regulations, but the PP employees are under the dictates of Planned Parenthood. When an employee is hired, Foothill is not part of the hiring process for the employee that is assigned to the Health Services.

2. Demographics analysis (Is the ethnic breakdown of students you serve proportional to the general college ethnic distribution?) Yes

2010-11 Foothill College (18,000 students) 2010-11 Health Services (6,449 student visits)

Unknown	2%	1.77%
Amer Ind/Nat	0.2%	0.18%
Asian	27%	26.8%
Black	4%	3.59%
Multiracial	5%	4.78%
Other	13%	13.4%
Pac Isl/Haw	1%	1.19%
White	28%	28.09%

3. Staffing structure (Does the staffing structure meet the program's or department's needs?)
Health Services staff reflects the population served:

- 3 Asians
- 2 Blacks
- 3 Whites

Translation Service "Pacific Interpreters" is provided through Planned Parenthood in 180 languages

Health Services staff has 1 full-time employee fluent in Tagalog,
1 employee -- 2 days/week conversant in Chinese

Health Services staff educational level:

- 1 Doctorate/MD

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2 Master's

3 Bachelor's

1 Medical Assistant/Student

1 Student

If yes, please explain. If not, consider the following prompts in framing your answer.)

i. Which aspects of the work are key to the institution's mission?

1. Transfer (Entry and transfer physicals and immunizations to meet program standards)
2. Reproductive health (birth control, STI, Emergency contraception, HIV and pregnancy testing)
3. Public Health Infectious disease control (Flu vax, Pertussis vaccine, TB screening, immunizations, pandemic surveillance)
4. Safety/Disaster (Emergency response in clinic, AED, District committees)
5. Preventative Services
Screenings: (Lipid, Diabetes, HIV/AIDS, hypertension, diabetes)
Campaigns/Education: Breast Cancer, Nutrition, Smoke Cessation, Rape Prevention, Drug and Alcohol education, Suicide Prevention

ii. Has the staff increased, decreased or remained the same to meet those changes? Decreased: Registered Dietician 1 day/wk

Nurse Practitioner 2 day/wk

iii. Has technology made it possible to do more work with the same staff?

No

Or, has technology increased your workload (adding web features which need updating for example)?

Increased

In what way?

We now need to open a chart for every immunization and TB test.

Does the workload have significant peaks and valleys during the fiscal year?

If so, describe.

Yes, Summer intense physicals and immunizations.

More workload and detailed tasks for each patient

During Academic year recesses have less clients

iv. Do you anticipate the workload will increase, decrease or remain constant in the upcoming one to three years?

Increase, because more students/parents do not have insurance.

Is this a temporary situation? No

v. If your workload is increasing and resources will not allow for increased staffing, how do you anticipate being able to ameliorate the negative consequences of too much work and maintain a positive atmosphere?

The Health Services Director currently absorbs excess workload, functions as the Nurse Practitioner 2 days/week and back up clinician, plus functions as

Administrator of the Health Services and Director of the Health Education programming, lecturing. The Director works throughout

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the summer and breaks (out of contract) and averages 50 hrs/week.

The Director is contracted to work 185 days/yr (academic calendar) 35hrs/week.

The Health Services Director is responsible to organizations Foothill College and Planned Parenthood and attends all meetings for both organizations, as well as functioning as the Clinician throughout the year 2-3 days per week.

To remain in budget and maintain a healthy, sane staff, the recommendations are as follows:

- Close last two weeks of August and December
- Close Spring Recess
- Schedule clinic 4 days/week (closed Fri)

vi. What steps can be taken to improve your program or department's organizational efficiency within its current budget?

- Close last two weeks of August and December
- Close Spring Recess
- Schedule clinic 4 days/week (closed Fri)

vii. What strategies have been used to improve the delivery of support services within the program or department?

- Continuing to incorporate electronic medical records. Currently, the EMR provides appointments, but within The next year will provide EMR for patient charting and records.
- Continuing to request reestablishing staff: Nurse Practitioner and Registered Dietician

4. Workload measures. Describe the program's workload measures as developed within the Student Services process.

Peak times –When school is in session

Low census-Last two weeks of Aug and Dec, Spring Break.

Lower census-Fridays

5. Budget analysis categories of *expenditures* (A Budget, Equipment, Supplies) (See attachment FY09-10 Budget & FY10-11 Budget).

Section 2. Learning Outcomes Assessment Summary

2.1. Insert – Previous year's Four Column Report for SA-SLO Assessment from TracDat, please contact the Office of Instruction to assist you with this step if needed.

(See TracDat 4 column report—Health Services attached)

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Unit Assessment Report - Four Column

Foothill College SA - Health Services

Service Area SLOs (SA-SLOs)	Means of Assessment & Target / Tasks	Assessment Findings	Reflection/Action & Follow-Up
<p>SA - Health Services - 1 - Smoking Cessation Services - Student will be aware of the college smoking policy and cessation services.</p> <p>Year(s) to be Assessed: 2010-2011 2011-2012</p> <p>Start Date: 07/01/2011</p> <p>End Date: 06/30/2012</p> <p>SA-SLO Status: Active</p>	<p>Assessment Method: * American College Health Association (ACHA)/National College Health Assessment Survey (NCHA) administered Fall 2010 (every 2 yrs to 139 Postsecondary College campuses (95,712 students). * Foothill College Health Services administered the same survey Spring 2010 (1,102 students)</p> <p>Assessment Method Type: Survey</p> <p>Target: Increase student awareness of smoking cessation services.</p>	<p>10/13/2011 - Smoking habits extracted from the ACHA-NCHA survey and the FHDA District smoking survey:</p> <p>1) What were the most important findings from your data? #1 FHDA 2011 survey revealed: 87% are aware of the current smoking policy 58% want a 100% smoke free campus 32% were aware of the Smoke Cessation Program 36% encounter second hand smoke regularly on campus 79% are affected by secondhand smoke on the campus 58% believe that a smoke free environment would improve their learning/working environment 76% feel the current policy is not enforced 65% state that needs better signage 58% would like the campus to be 100% smoke free (including parking lots) 3% smoke daily 1% have used e-cigarettes 3% have used tobacco from a water pipe 30% encountered 2nd hand smoke on campus</p> <p>Result: Target Met</p> <p>Year This Assessment Occurred: 2010-2011</p> <p>Resource Request: Necessity: Increased signage on the campus Increased butt receptacles Increased personnel to monitor and enforce the current District Smoking Policy</p>	<p>10/13/2011 - a) Improved signage on campus, floor signage b) Explore grants with Santa Clara County c) Explore smoke free workplace options with District/campuses with Administration/District d) Continue class presentations and campus orientation e) Continue Student Health 101 Newsletter to all students/staff 2010-11. f) Tabling at Health/ campus fairs: Great American Smoke Out, Environmental fair, Volunteer fair, Club Day, Transfer/Career Fair, Welcome Week g) Continue Smoke Cessation Program (Free one-to-one counseling, free nicotine gum/patches) h) Sponsor speakers on smoking addiction i) Host every 2 yrs Smoke Cessation counselor workshops for HSACCC and CYAN j) Continue District-wide Non-Smoking Policy Committee k) Work with District Wellness Committee and advocate for inclusion of smoke cessation for employees. l) Marketing with LCD in Dining Lounge, large banners, T-shirt campaign, web site, Fusion and Student Health 101</p>

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2.3.a Service Area Student Learning Outcomes

What findings can be gathered from the SAOs assessments?

Health Services is highly productive, serves a representative campus population, is researched based, attempts to guide District policy on health issues and supports the mission of the college.

2.3.b Does any of the data suggest that revisions might be necessary in order for students to successfully achieve the SAOs?

The national/resident students are not always able to access the Health Services because of The high International Student utilization of the Health Services.

2.3.c Do the SAOs reflect the knowledge, skills and abilities students need from those services in order to succeed? Yes

SAO#1-4

Knowledge-District Policies and Health Services programming are published in all FH College Website, Fusion, Brochures, Student Handbook, Signage on Campus. Counseling 50 classes, student Orientations and tabling/health fairs.

Utilization/student skills and abilities:-Clinic census, appointments reflect student need for services.

2.3.d How has assessment of SAOs led to improvement in student success at the institution?

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SAO #1	Improve health on individual student and improve the learning environment.
SAO#2	Increase student's awareness of sliding scale educational and clinical services available a Planned Parenthood and the FH Health Services; reflected in the census.
SAO #3	Provide preventative immunizations, screenings for students; thus providing a "herd" protection of the Foothill Community.
SAO #4	Provide triage and first line primary care, reproductive health, primary care, transferring services provided at FH Health Services.

2.4 Annual Action Plan and Summary: Using the information above, list the program's action steps, the related [Core Mission objective](#), SLO assessment data and the expected impact on student success.

Action Step	Related SAO assessment	Related ESMP Core Mission Goals	How will this action improve student learning/success?
• Collaboration and communication with students and campus community by instituting a Medical Advisory Committee and continuing on campus/district committees that enhance the learning environment on campus and adds to the success of students academically.	SAOs #1-4	Communication	Collaboration and communication with students and campus community will enhance the learning environment on campus and adds to the success of students academically.
• Remove Academic Counselors from the Health Services account in compliance with Title V Reg 54702.	SAOs #1-4	Resources	Provide adequate funding for Health Services staffing.
• Implement a DFSCA activities and Biennial Review	SAOs #1-4	Compliance	Re-establish compliance with the Federally mandated (DFSCA) Drug-Free Schools and Communities Act and Campuses Regulations.
• Collaborate to establish a Campus wide Behavioral Intervention Team	SAOs #1-4		Collaboration and communication with students and campus community will enhance the learning environment on campus and adds to the success of students academically.

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Section 3: Program Goals and Rationale

Program goals should be broad and incorporate some sort of measurable action that connects to Foothill's core missions, [Educational & Strategic Master Plan \(ESMP\)](#), the division plan, and SLOs.

3.1 Program relation to college mission/core missions

Create a healthy learning environment to decrease absenteeism and allow the individual to maximize a level of well-being to participate in college academics.

3.2 Previous program goals from last academic year

Goal	Original Timeline	Actions Taken	Status/Modifications
SAO #1-4 Same as 2010-11			
SAO #1	2011	* Passed AB795 * Fall 2011 Smoking Survey * Spring 2012 Explore District Smoking Policy change	* Completed * Completed * In progress
SAO #2	2011	* Increased the census	* Completed
SAO #3	2011	* PR'd and provided the "Whooping Cough" immunizations as per Santa Clara County Public Health recommendations. * Administered 914 flu vax	* In progress * Completed
SAO #4	2011	* Increased the census	* Completed

3.3 New Goals: Goals can be multi-year

Goal	Timeline (long/short-term)	Supporting Action Steps from section 2.4 (if applicable)	How will this goal improve student success?
Hire FTE Nurse Practitioner	Long-term		* Ability to see patients
Re-hire part-time Registered Dietician	Long-term		Augment Health Services Team with

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Section 4: Program Resources and Support

4.1 Using the tables below to summarize your program's resource requests.

Full Time Faculty and/or Staff

Position	\$ Amount	Related Goal from Table in section 3.3	Possible funding sources
Nurse Practitioner FTE	\$97,000/yr		MAA, International Students and Academic Counselors
Registered Dietician	\$20,000		MAA, International Students and Academic Counselors

B Budget Augmentation

B Budget FOAP	\$ Amount	Related Goal from Table in section 3.3	Possible funding sources
	\$110,000	See 3.3	MAA, International Students and Academic Counselors

Facilities and Equipment

Facilities/Equipment Description	\$ Amount	Related Goal from Table in section 3.3	Possible funding sources
Complete construction and installation of disability accessible door for Psychological Services	\$12,000	*Compliance with National Ambulatory Care Accreditation standards. *Provide better access to services. *Provide efficient usage to the Health Services and Psychological Services	

One-time/Other: (Release time, training, etc.)

Description	\$ Amount	Related Goal from Table in section 3.3	Possible funding sources
N/A			

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Section 5: Program Strengths/Opportunities for Improvement

5.1 Use the matrix provided below and reflecting on the program relative to students' needs, briefly analyze the program's strengths and weaknesses and identify opportunities and challenges to the program. Consider external and internal factors, such as demographic, economic, educational, and societal trends. Some considerations may include current and future demand for the program, similar programs at other comparable institutions, and potential auxiliary funding.

	INTERNAL FACTORS	EXTERNAL FACTORS
Strengths	<ul style="list-style-type: none"> * FH Health Services: <ul style="list-style-type: none"> * Facilitates transfer and entry of students to programs and colleges. * Provides Reproductive health (birth control, PAPs, STI, Emergency contraception, HIV and pregnancy testing) * Provides Public Health Infectious disease surveillance * Provides Safety/Disaster District guidelines and surveillance. * Provides public health screenings and Preventative Services Screenings: (Lipid, Diabetes, HIV/AIDS, hypertension, diabetes), Campaigns/Education: Breast CA, Nutrition, Smoke Cessation, Suicide Prevention. Campaigns/Education: • Compliance with Federal/State/Title V/District Board Policy—Programs such as Violence/Rape Prevention, Drug and Alcohol Prevention, HIPPA, Smoke Cessation all strive for a safer, healthier student population. 	<ul style="list-style-type: none"> * Students are currently less likely to be insured. * Collaborates with Planned Parenthood * Collaborates with Santa Clara County Public Health Dept. * Collaborates with ACHA (Amer College Health Assoc), HSACCC (State Health Services Assoc) & CCC Chancellor's Office *Follows Public health guidelines State & Fed
Weaknesses	<ul style="list-style-type: none"> * Inadequate staffing * Continue to educate the students on Health Services at FH. 	<ul style="list-style-type: none"> *Academic Counseling diverts \$100,000/yr.

Program:

Updated:

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Opportunities	<ul style="list-style-type: none"> • Explore grants through Santa Clara County, the CCC Chancellor's office, Breathe California 	Grants are highly competitive and allocating staffing for generating grants is difficult.
Threats	<ul style="list-style-type: none"> * Provide less availability of services 	Planned Parenthood also is having financial cutbacks.

5.2 Are there any critical issues you expect to face in the coming year? How will you address those challenges?

Yes, a \$200,000 deficit

5.3 What statements of concern have been raised in the course of conducting the program review by faculty, administrators, students, or by any member of the program review team regarding overall program viability?

- * Will there be less availability of services for our students?
- * Are International Students displacing National students from needed services?
- * Are we burning out the Health Services staff?
- * Are you in compliance with the Drug Free Schools Act and AB1088 (Rape Prevention Act)?
- * Do you have a Medical Advisory Committee?
- * Doesn't your campus need a Behavioral Intervention Team?

5.4 Address the concerns or recommendations that were made in prior program review cycles.

- Collaboration and communication with students and campus community by instituting a Medical Advisory Committee and continuing on campus/district committees that enhance the learning environment on campus and adds to the success of students academically.
- Collaborate to establish a campus wide Behavioral Intervention Team

5.5 After reviewing the data, what strengths or positive trends would you like to highlight about your program?

* The Health Services is highly productive, fiscally sound & research based. The professional, diverse staff provides on-site emergency care, triage, first-line primary care, reproductive health, primary care, preventative education/screening, immunizations and physicals for transferring & entry students. The Health Services monitors safety and public health standards for the college and maintains critical communication with the CCCs, California State and Federal agencies concerning health issues.

Section 6: Feedback and Follow Up

6.1 Strengths: The Health Services program at Foothill College is comprehensive and used extensively by students at Foothill Hill College.

6.2 Areas of Concern: The demand for services appears to be increasing while funding has remained fairly constant. The declining budget balance presents a significant funding concern as existing staffing has been funded in part by utilizing the fund balance. Without a restructure and reallocation of funds the program will be in deficit funding by the end of the 2012-2013 academic year.

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I am also concerned that the resource request represents an expansion of services that at this time is inappropriate to consider until we address the fund balance issue.

6.3 Recommendations for Improvement: Rather than recommendations for improvement, I am working with district staff to determine funding options. I do not believe this is an “area for improvement,” – rather it is a process of re-education of personnel as to what we can financially afford to offer and what we may need to reduce in the near future.

6.4 Recommendation for next steps: Proceed as planned on program review cycle.

Pat Hyland

Program:

Updated: