

Santa Rosa Junior College

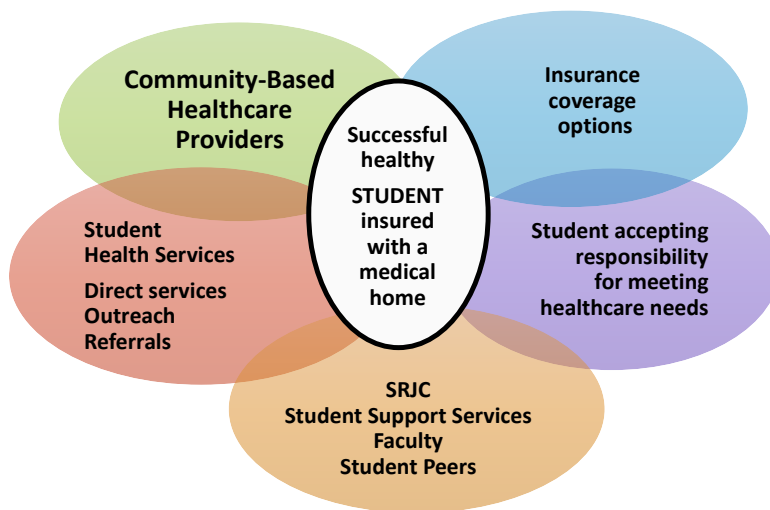
Program Resource Planning Process

Student Health Services 2024

1.1a Mission

The Student Health Services Vision is:

To have healthy, academically successful students, learning in a healthy college community, with access to health support resources.



The mission of Student Health Services is to maintain and improve the physical, mental, and social health of students through culturally-responsive care at Santa Rosa Junior College, and to strengthen and inspire the well-being of the diverse college community, towards supporting student success and life-long learning.

Values: Health, Learning, Academic Excellence, Sustainability, Diversity, Community, Beauty, Compassion, Innovation

1.1b Mission Alignment

SRJC passionately cultivates learning through the creative, intellectual, physical, social, emotional, aesthetic and ethical development of our diverse community.

The mission of Student Health Services is to maintain and improve the physical, mental, and social health of students through culturally-responsive care at Santa Rosa Junior College, and to strengthen and inspire the well-being of the diverse college community, towards supporting student success and life-long learning.

Student Health Services (SHS) is strongly aligned with the District's mission statement. Both describe a developmental model (improve, strengthen, learn, inspire, cultivate) and are multi-dimensional towards addressing the whole. A healthy community is articulated in both mission statements.

Our mission explicitly uses the terms "physical, social and mental" health, as this is the World Health Organization's definition of health. In aligning the two mission statements, this is a fairly simple translation. For example, mental health, used in our mission statement, includes intellectual and emotional health, as stated in the District statement; social health is related to ethical development, etc. When students have contact with SHS, they learn something about themselves (physical/mental/social) and how to improve their health. Improved health enhances their learning capacity, and contributes to their success in college and in life.

See section 3 for more information on SHS's work and alignment with Strategic Plan Goals

1.1c Description

Student Health Services is described via a Board of Trustees approved "Health Services Plan". Allowable scope of services, staffing minimum requirements for supervision, and appropriate use of Health Fee funds are regulated by both Education Code Section 76355 and Title 5.

[Board Policy 8.4P \(hyperlink\)](#)

The college community and individuals are served by a variety of activities to maintain and improve health. Through a combination of District hired staff, contracted professional services,

and collaboration with community agencies, services include Clinical Services, Mental Health Services, Health Promotion Services (individuals, classrooms, and college-wide events), and District Support Services (health and safety, risk management, policy advising and staff consultation services).

The Student Health Services programs and services provided are focused on student retention and success.

By providing free access to individualized healthcare services on two campuses, many health barriers to student success are addressed early and effectively. As demonstrated in SRJC's student access and success reports, students who access SHS's individual professional services in the health centers are retained at higher levels, and have higher completion rates than students who do not access SHS services.

The health promotion and outreach functions of the department provide health-related information to students in classrooms and on campus, and also educate students about the various health services available for them at the college. SHS has organized and sponsored many college events in collaboration with various academic and student service departments, in order to increase student engagement campus-based activities, provide educational forums and bring visibility to health related issues as connected to student success.

Student Health engages in a variety of risk management processes in support for the District. Leadership for the B:CARE team is provided, offering support to faculty in addressing distressed, disruptive and dangerous behaviors in students so they may get back on track with their academic performance and success. Environmental health issues, communicable disease control and disaster preparedness are other areas of SHS support provided.

1.1d Hours of Office Operation and Service by Location

Prevention and health promotion services, outreach events, staff consultations (CIRT and other), classroom presentations and other District support services are throughout the District Monday through Friday, with variable scheduling by professional staff, including evenings.

Student Health Services currently maintains two office locations. On the Santa Rosa Campus, clinical services are located in the Bertolini Building. On the Petaluma Campus, clinical, mental health, and health promotion services are all housed collectively in the Richard W. Call Building.

Hours of Operation:

SANTA ROSA CAMPUS

Bertolini Building Office Hours:

Mon - Thursdays 8:30 AM – 5:00 PM

Friday 8:30-5

(Closed Fridays during June/July)

Services for Individual Students:

Nurse Practitioner	Monday through Friday
Physician	Tuesdays and Fridays
Mental Health Counselors	Monday through Friday

PETALUMA CAMPUS**Richard W. Call Building Office Hours (except summer):**

Mondays 9:00 AM -12:30 PM
Wednesdays 9:00 AM to 5:00 PM

Services for individual students:

Registered Nurse	Mondays
Nurse Practitioner	Wednesdays
Mental Health	Wednesdays
<i>* Petaluma Health Center</i>	Wednesdays (monthly)

(FAM-PACT reproductive health services)

** Italicized services are provided by community agency partners at no-cost to the students or SRJC.*

1.2 Program/Unit Context and Environmental Scan

Describe any changes in the social, business, cultural, educational, technological or regulatory environment that could impact your program/unit over the next three years.

The COVID-19 Pandemic exacerbated a persistent trend in decreasing enrollment that dates back to the 2017 fires. This are still impacting services, programs and the economic dynamics of the local environment significantly.

There is a national trend of low enrollment in colleges of all shapes and sizes. One could argue that SRJC isn't a traditional 2 or 4 year college and that our vocational programs (nursing, public safety, etc) will provide enough of a draw to buffer us.

Black Lives Matter and DEI awareness brought about a focus on serving the underserved. Since 2020, Student Health has provided services to non-credit (mostly English language learners). This is not sustainable without a funding source. We are looking at that the summer of 2024 as we revise our board

policy and procedures. Also, especially with a Spanish speaking therapist, it has renewed our efforts to provide Spanish speaking front office staff. We often have a student health aide or two who are bilingual and we hired two medical assistants. Our new front office manager is bilingual bicultural.

The end of the pandemic has given state and local funders the opportunity to focus on the next pandemic: mental health. The Chancellor's Office has greatly increased the mental health allocation and a local bond measure has given us the money to relieve some of the pressure on the health fee budget. Furthermore, our county outreach grant has been renewed. These 3 sources will provide support for the next 5 to ten years. However, as COLAs come around and step raises increase, there is less money to help with the health fee. We will have to work hard to cut costs.

COVID-19 testing and vaccinating had been free from the state. The money to pay for COVID related activities ended with the fiscal year 22-23 with nor more likely to come. The state of California has dropped the COVID-19 State of Emergency. Our Covid Team winding down with elimination of vaccine mandate but we are still left with the OSHA requirement to notify employees of COVID exposure. That regulation will not expire until February 2025. This year covid-19 vaccines had to be purchased by the District for our students. We had enough covid-19 tests to last us until graduation and a possibility of getting more.

2.1a Budget Needs

Student Health Services went remote suddenly in 2020 due to the pandemic.

	<u>22-23</u>	<u>21-22</u>	<u>20-21</u>	<u>19-20</u>	<u>18-19</u>	<u>17-18</u>
4000	19,902	16,417	5,478	17,770	23,060	22,637
5000	65,362	58,694	48,339	33,418	26,207	44,283

Supplies (4000s): are down from pre-pandemic including medical supplies for students as part of the provision of health services. We are seeing fewer in person visits.

Contracts (5000s): Part of our 5000 expenditure is our electronic medical records. We have added many modules due to pandemic (vaccine reporting) and remote work (patient portal). The other 5000s are primarily mandatory physician contracts which remain stable.

We will be able to cover 4000 and 5000 budget needs.

2.1b Budget Requests

Rank	Location	SP	M	Amount	Brief Rationale
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2.2a Current Classified Positions

Position	Hr/Wk	Mo/Yr	Job Duties
Health Promotion Specialist	24.00	12.00	Coordinate PEI Grant activities, classroom presentations, community liaison work, suicide prevention trainings, BCARE member, health awareness and outreach activities. Plan, implement and evaluate health promotion programs. Certified trainer for many MH curriculums.
College Nurse Practitioner(2 positions)	60.00	12.00	Direct individual services for acute illnesses and injuries, immunizations, screenings, referrals, and health education. Public health consultations and prevention services for the college community. Administrative support tasks, as assigned.
Medical Assistant (2 positions)	60.00	12.00	Under general supervision, perform administrative, clinical and technical support services for Student Health Services department; provide a variety of direct and indirect health-related services.
Therapist/Outreach -Spanish speaking	40.00	12.00	Provides individual mental health therapy to students. Performs district wide mental health outreach.
Health Services Assistant	40.00	12.00	Under general supervision perform support services for Student Health Services, requiring related technical skills and expertise; perform administrative duties requiring initiative, independence, and confidentiality in one or more of the areas of office management, fiscal management, customer relations or other specialized services, including risk management; develop and maintain online and print information.
Therapist/Outreach - African American	40.00	12.00	Provides individual mental health therapy to students. Performs district wide mental health outreach.
Health Services Specialist	40.00	12.00	Under general supervision perform complex support services for Student Health Services, requiring related technical skills and expertise; perform administrative and technical duties requiring initiative, independence, and confidentiality in the areas of office management, fiscal management, customer relations or other specialized services, including risk management; develop and maintain online and print information.
Coordinator, Student Health Promotion	40.00	12.00	Under general direction, coordinates and organizes the promotion of health and wellness in the SRJC community through preventive health programs, including faculty and student educational presentations, online outreach, campus events, and community collaborations.
social workers (2)	80.00	12.00	connecting students with Basic Needs resources, including special housing project (we pay for 1/2 their salaries, Basic needs pays the other half)

2.2b Current Management/Confidential Positions

Position	Hr/Wk	Mo/Yr	Job Duties
Director, Student Health Services	40.00	12.00	Administrative oversight of SHS budgets and programs, personnel supervision, BCARE and MAA Coordinator, college-community-state liaison, disaster planning, District policy and procedure development, contract supervision and clinical and program quality assurance. District communicable disease control.
Manager, SHS-Mental Health Programs	40.00	12.00	Administer mental health programs, mental health grants oversight, supervise mental health internship site, SPS and PEI (Prevention and Early Intervention-MHSA) personnel supervision, CIRT, college-community-state liaison, District policy and procedure development, program quality improvement.

2.2c Current STNC/Student Worker Positions

Position	Hr/Wk	Mo/Yr	Job Duties
PEI FUNDED Student Health Aide pool	72.00	10.00	Peer student mental health support activities; health promotion
HSI FUNDED PE Licensed MH Provider pool	11.00	10.00	Provide individual and group supervision for mental health interns, training, direct services.
HSI FUNDED STNC Mental Health Interns pool	120.00	10.00	Provide direct mental health services, (crisis intervention, individual, couples, group therapy), presentations on mental health topics.
Health Fee FUNDED CNP STNC backfill pool -assorted	4.00	11.00	CNP duties - backfill hours for CNP Sick, Vacation, Jury Duty, etc. Also COVID vaccinations.
Health Fee FUNDED Student Health Aide pool	100.00	12.00	Reception and intake for 2 facilities, support administrative and outreach functions.
ATHLETICS FUNDED CNP STNC pool - project	6.25	4.00	Direct individual services to support Athletic screenings and exams, providing medical clearance for SRJC athletes to participate in sports competitions. Episodic work..
Health Fee funded Health Services Assistant	4.00	12.00	Reception and Intake- backfill hours for PTO, also Petaluma coverage
Administrative Assistant III	4.00	12.00	Reception and Intake- backfill hours for PTO
Health Fee Registered Nurse	10.00	12.00	Coverage for Petaluma clinic, Santa Rosa clinic while the MAs are in meetings, and vacation coverage when NPs are out for provider on deck

2.2d Adequacy and Effectiveness of Staffing

Student health services is well staffed including 2 medical assistants to keep the physical health clinic running smoothly (MA visits, COVID team, supporting nurse practitioners). However, the 0.5 MA is due to be cut in February 2025 with the end of the OSHA non-emergent COVID-19 regulations. We are looking at other funding sources of income such as insurance enrollment counselor training and mental health billing.

Our two classified therapists and 8 trainees provide excellent mental health access for students, along with the supervisors.

Our front and back office support staff are adequate and efficient (3 classified).

Nurse practitioner staffing is adequate but the occasional use of an STNC registered nurse (who can monitor MA work) has made us more flexible with vacations and trainings.

We have been able to fund 2 full time social workers for Basic Needs.

2.2e Classified, STNC, Management Staffing Requests

Rank	Location	SP	M	Current Title	Proposed Title	Type
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2.3a Current Contract Faculty Positions

Position	Description
	NOT APPLICABLE

2.3b Full-Time and Part-Time Ratios

Discipline	FTEF Reg	% Reg Load	FTEF Adj	% Adj Load	Description
	0.0000	0.0000	0.0000	0.0000	NOT APPLICABLE

2.3c Faculty Within Retirement Range

2.3d Analysis of Faculty Staffing Needs and Rationale to Support Requests

2.3e Faculty Staffing Requests

Rank	Location	SP	M	Discipline	SLO Assessment Rationale
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2.4b Rationale for Instructional and Non-Instructional Equipment, Technology, and Software

STUDENT HEALTH SERVICES TECHNOLOGY AND SOFTWARE NEEDS

Current Environment:

In addition to standard network connections to the College’s Outlook, Escape and Student Information (SIS) systems, the Student Health Services department **utilizes a software system (Medicat) specific for healthcare information processing.** Permanent employees, contractors, student workers and psychology interns utilize the system for management of student appointments, to document student services rendered, tracking for clinical case management purposes, engage in continuous clinical quality improvement activities, and to access internal reporting, analysis and program evaluation functions. The software system interfaces with the College’s student database, via a regular schedule of uploads from SIS, when demographic student information populates selected fields in Medicat. Up to 45 separate users shared the department’s 34 desktop computers and 6 laptops, located in three different facilities on two campuses, and used during outreach events. The current District policy is to replace hardware every 7 years.

The Medicat system was moved from a dedicated server on site in SRJC's IT department, to a web - based remote server system provided by our software contractor, in 2016. This improved network security as the company provides the highest level of HIPAA certified security. This also was a cost savings for IT, but increased the cost of the system, which was then transferred to the Student Health Services budget. Additional software functions were added as part of the migration, including confidential communication between students and providers, self-check-in capacity in the health centers, online student health with appointment access 24 hours/ 7 days a week, and more. All of these technology functions are compatible with reducing workforce labor in SHS as part of "right sizing", as well as achieving the highest standards of confidentiality from both a technical, and operational perspective. These functions are slowly being phased in to the workflow, as facilities, hardware support and database management by SHS staff allows. Modules have been added to modernize lab and medication ordering, also reducing the chances of medical errors. Modules have been added for use during the pandemic to facilitate vaccine and covid test results to the state.

SHS Technology Goals

Evaluate and adjust appropriately technology solutions in the health centers on the Petaluma and Santa Rosa campuses to best support providers/staff, students and the clinical practice towards:

- a) Quality improvement in the clinical practice.
- b) Achieving the highest standard of medical confidentiality for students.
- c) Secured confidential communications between providers and students to support case management follow up.
- d) Increase health support services for on-line students.
- e) Ergonomic integrity for all.
- f) Most effective and efficient charting/documentation methods.
- g) Optimum communicable disease control (early alerts).
- h) Optimum technology support for student learning in the SHS department.
- i) Other enhancements as new technologies emerge to meet healthcare and educational industry standards.

Budget/Financial Strategies

- ITG Bond Fund Revenue: District/Bond support is critical. Whereas the facility is priority, any needed tech/hardware items will be requested via this route.
- Instructional/Non-Instructional Equipment Funding as appropriate
- Health Fee revenue – Resources as available
- External and grant funding as available for projects upgrading our technology capacities.

STUDENT HEALTH SERVICES OTHER EQUIPMENT NEEDS

With a significant portion of the department's function being healthcare services delivery, there are a number of equipment needs required for the practice. The department has purchased and maintains equipment such as audiometers, vision screening machines, blood pressure monitoring equipment, otoscopes, microscopes and more.

STUDENT HEALTH SERVICES FURNITURE NEEDS

Mostly met by the purchases associated with moving from Race to Bertolini. Also from Measure O.

2.4c Instructional Equipment Requests

Rank	Location	SP	M	Item Description	Qty	Cost Each	Total Cost	Requestor	Room/Space	Contact
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2.4d Non-Instructional Equipment and Technology Requests

Rank	Location	SP	M	Item Description	Qty	Cost Each	Total Cost	Requestor	Room/Space	Contact
0001	Santa Rosa	04	08	electronic key card on Bertolini 3rd floor staff lounge	1	\$8,500.00	\$8,500.00	Rebecca Norwick	4825	Rebecca Norwick

2.4f Instructional/Non-Instructional Software Requests

Rank	Location	SP	M	Item Description	Qty	Cost Each	Total Cost	Requestor	Room/Space	Contact
0001	ALL	01	02	Medicat EMR	0	\$750.00	\$750.00	Rebecca Norwick	SHS Santa Rosa and Petaluma	Brian Chetcuti

2.5a Minor Facilities Requests

Rank	Location	SP	M	Time Frame	Building	Room Number	Est. Cost	Description
0001	Santa Rosa	02	02	1 Year	Bertolini	exam rooms and director's office	\$0.00	new, light blocking blinds needed for patient care, director's blinds are ripped.
0001	Santa Rosa	02	03	Urgent	Bertolini	therapy rooms	\$0.00	sound proofing
0001	Santa Rosa	02	05	Urgent	Bertolini	Staff Lounge 4825	\$8,000.00	electronic lock on door
0001	ALL	00	00	Urgent			\$0.00	

2.5b Analysis of Existing Facilities

IMPROVE FACILITIES AND TECHNOLOGY - Provide, enhance, integrate, and continuously improve facilities and technology to support learning and innovation.

Santa Rosa: Student Health Services finally moved into one facility on the Santa Rosa Campus that houses the clinical (SHS), mental health (SPS), health promotion and administrative support functions in our department, to improve effectiveness, efficiency and an integrated health support student service experience. Our move to Bertolini succeeded in bringing SHS and SPS together but without Health Promotion.

It is not ideal that Health Promotions is housed elsewhere in an inadequate space.

Petaluma: This facility meets the utilization and safety needs for SHS operations adequately, and all of the space is not fully utilized at all times. The design of the front reception area, with a window and locked door between the public and staff supports lower staffing levels for safety.

3.1 Academic Quality

List anything that your program/unit has done to support Strategy 1: Academic Quality:

Goal 2: Inspire and prepare students for transfer, degree or certificate completion, and lifelong learning through critical thinking and civic engagement.

Promote robust professional development and maintain professional development resources on culturally responsive andragogy and practices that are annually reviewed and updated.

Student Health Services utilizes student health aides and we have a mandate to support them. While the student empowerment academy fell by the wayside during the pandemic, we continue to encourage them to better themselves through department and District trainings.

Furthermore, we have many years of data showing the students who utilize Student Health Services resources have a statistically significant improvement in retention and completion.

3.2 Student Success and Support

3.2 STRATEGY 2: STUDENT SUCCESS AND SUPPORT

In this section, list anything that your program/unit has done to support Strategy 2: Student Success and Support:

Goal 1: Build a culture and ecosystem that creates a sense of belonging and purpose for all students.

- Prioritize student services events and activities which sustain a community committed to student learning and development

Goal 2: Leverage basic needs services in support of student success while at the college and in the community.

Provide all students with comprehensive learning opportunities on accessing basic needs in support of wellness

Events include mental health preventive outreach such as "reducing test anxiety" and "mindfulness." We also have events for health science students such as vaccination clinics in the building where the classes are held.

SHS excels at meeting lifelong educational needs of communities, as it pertains to improving physical, mental and social health, and developing knowledge and skills in navigating the healthcare system. Examples:

- Work is being done with at-risk students without health insurance. This is a predictor of poor academic retention, traumatic financial distress with unplanned health events, and is associated with health conditions worsening without treatment, such as depression and anxiety. A major educational initiative on the Affordable Care Act was launched by SHS during 13-14 when the federal mandate began, and has continued to develop. Students, staff, adjunct faculty and community members have accessed enrollment counseling services provided in the health centers. Educational outreach is done. The information and skills shared with this work contributes to the lifelong skills of learning how to navigate the rather complicated healthcare system in this country.
- Working with students around their health related behavioral choices contribute to lifelong learning, including communication and relationship skills, substance use, contraception, nutrition, exercise, and recognizing signs of acute and chronic health conditions needing intervention.

SHS provides substantial student employment opportunities, with up to 16 student employees working in the department at times. Our student workers (Student Health Aides and Student Health Aide Peer Support workers) are typically pursuing some aspect of the health care field as their educational goal. These employees are provided with structured trainings, including core workplace skills, professionalism, and health education, as well as focused work experience. SHS also has a mental health internship program (Masters, Doctorate and Post-Doctorate students from graduate programs throughout the Bay Area) on site, training psychologists.

Cultural Competency:

SHS provides services for individual students in Spanish, provides staff development opportunities for employees on multi-cultural issues, and has in-house quality improvement review systems that include culturally sensitive interventions as a criteria.

- SHS actively recruits diverse staff with demonstrated skills in multicultural responsiveness. With the awareness that front desk staff literally are the “face” of SHS, we seek to hire Student Health Aides that represent a broad range of diversity. Mental health interns, selected annually, also are considered in terms of their ability to contribute to the diversity of SHS’s staff. The ability to hire bilingual-Spanish licensed/certified healthcare workers is increasingly challenging, as the broader healthcare community is expanding rapidly due to the demand for services with the coverage expansions under the Affordable Care Act, and every health care agency is targeting bilingual-Spanish workers, making it very competitive in an environment when there clearly are not enough bilingual licensed health care workers to begin with. It is a crisis within the local healthcare community.

3.3 Responsiveness to Our Community

3.3 STRATEGY 3: RESPONSIVENESS TO OUR COMMUNITY

In this section, list anything that your program/unit has done to support Strategy 3: Responsiveness to our community

Goal 1: Offer SRJC programming that impacts all members of our community.

- SRJC programs regularly assess their purpose in relation to diverse needs in education, community, and economics.

Goal 2: Provide equitable access to District opportunities in recognition of diversification in county population.

All new and updated policies, procedures, and practices will be reviewed to ensure equitable access to District opportunities (i.e., programs, enrollment, and employment).

1. The pandemic has brought an increased awareness of the importance of our essential workers programs (health sciences, public safety, dental, etc). Student Health Services has a special mandate to work with these groups on immunizations and tuberculosis screening. We vaccinated our health science students early in the pandemic when no one else was willing to. We work to provide access for tuberculosis screenings and refer uninsured students to the Jewish Community Free Clinic for the expensive quantiferon blood test when necessary.

We receive athletic fees to support our student athletes. We have a robust pre-sports screening program that encompasses not only physical but mental health issues. We have a mental health trainee specializing in sports psychology embedded in the athletic department. We coordinate case management of athletes of concern with the athletic trainers. This is unusual in a community college. Students come to SRJC because of our athletics programs and Student Health Services is an integral part of that.

2. Our bilingual services (physical and mental health) improve access for students of diverse backgrounds and support the District claims to being a Hispanic Serving Institution. During the pandemic, we expanded services to non-credit students who do not pay a health fee. Very few non-credit students have utilized this opportunity but, to continue, we will need a regular

funding source for this. Board policy says health services are for credit students and the state and federal states of emergency have been lifted.

3.4 Campus Climate and Culture

3.4 STRATEGY 4: CAMPUS CLIMATE AND CULTURE

In this section, list anything that your program/unit has done to support Strategy 4: Campus Climate and Culture:

Goal 1: Formalize a campus climate that is culturally aware and prioritizes efforts in support of inclusion, diversity, equity, antiracism, and accessibility (IDEAA).

- Establish and regularly assess an identifiable campus climate and culture for everyone who interacts with SRJC.

Goal 2: Promote a community culture of sustainability.

Identify annual goals for sustainability, including the creation and regular assessment of a District Sustainability Plan that achieves the Presidential Climate Commitment.

1. See 3.1-3.3

2. Student Health Services has become much less paper dependant since the pandemic. For example, the big athletic screening paper packet is now on-line in our electronic medical records. Furthermore, we have been filling up our compost bucket at such a rate that we ordered a larger one.

3.5 Establish a Culture of Sustainability

ESTABLISH A STRONG CULTURE OF SUSTAINABILITY - Establish a culture of sustainability that promotes environmental stewardship, economic vitality, and social equity.

Infuse Sustainability Across the Curriculum and Promote Awareness Throughout District Operations:

SHS staff have participated in sustainability committee work, and internally, staff are actively engaged in efforts to improve operational processes that will assist in accomplishing environmental goals. SHS has made great strides in recent years in regards to sustainability.

- At staff meetings all agendas and other documents are projected electronically instead of printing support documents.
- The conversion to a centralized Faxing system, allowing email connection to our department FAX machines, has contributed towards the use of less paper.
- All medical and mental health records are now done electronically, eliminating paper records.
- Intake paperwork in the department remains, which could be reduced with software enhancements requested (self-check-in).
- Some staff members drive electric cars

- We use rechargeable batteries in some of our devices.
- Video discs used by mental health interns to record sessions may be recorded over, such that we keep using the same discs.
- We recycle paper for printing needs, using both sides, assuring confidential student information is not on paper utilized in this fashion.
- Health information handouts are reduced through more “on the spot” printing for students as desired, not printing as many copies of outreach flyers, offering email to students as an option for receiving information, and referring students to our web page where some of the handouts are also available for viewing.
- Outreach for department events have reduced paper based methods tremendously in the last several years, and increased use of our web page, Facebook, Twitter and our online health magazine contribute to sustainability efforts.
- The department extends its recycling practices internally to include plastic and cans generated by staff, and handled through staff volunteerism.
- SHS orders recycled toner cartridges to save money and to be more environmentally responsible.

Promote Social and Economic Equity in the Communities We Serve:

SHS places a substantial focus on social and economic equity. The foundation of our model, providing access to health services for many students that have not had access to health services due to economic barriers, infuses the values of social and economic justice into the work of every employee in our area. We have staff that are passionate about equity issues, and work very hard to address issues through educational and referral interventions. Recently, the Affordable Care Act has been SHS’s main focus, yet the day to day work constantly is addressing social and economic issues with individuals being served. Examples include pregnancy prevention, which for many young women, early parenting can result in not completing college and subsequent poverty. Food and nutrition issues are being addressed by leadership for Food Bank services on the Petaluma Campus, and efforts to reduce stigma around health issues support equitable access to care. Prevention work is very gratifying for our staff.

Ensure Economic Sustainability By Leveraging Resources, Partnering with Our Communities, and Contributing to the Economic Growth of the Region:

(See developing financial resources section for more dialogue on this issue.)

Due to the unique funding formula for SHS, via the health fee, our economic sustainability requires a balancing act on how to best serve the many health needs of students. Leveraging community healthcare resources towards service provision on campus (free of charge) and having strong relationships with community partners to enhance low cost referral systems is absolutely required, and central to our strategy. SHS’s connections with the community are strong, but as healthcare is a rapidly transforming system, this will take effort on our part to navigate our way through these

changes and assure connections remain strong, as well as developing relationships with newly emerging partners.

4.1a Course Student Learning Outcomes Assessment

4.1b Program Student Learning Outcomes Assessment

SALO 22-23 was to complete the Health Minds Study of our students in conjunction with other community colleges. We achieved that goal.

4.1c Student Learning Outcomes Reporting

Type	Name	Student Assessment Implemented	Assessment Results Analyzed	Change Implemented
Service/Program	SHS - NCHA Assessment	Spring 2007	Fall 2007	Fall 2007
Service/Program	SHS - SPS	Summer 2008	Summer 2008	Fall 2008
Service/Program	SHS - Clinical Services-TB PLO	Fall 2008	Spring 2009	Fall 2009
Service/Program	SHS - Clinical Services-TB SLO	Spring 2009	Spring 2009	Spring 2009
Service/Program	SHS - Classroom Hlth Ed	Fall 2009	Spring 2010	Fall 2010
Service/Program	SHS - SHA Skills-SLO	Spring 2009	Spring 2009	Summer 2009
Service/Program	SHS - NCHA Assessment	Spring 2010	Summer 2010	Fall 2010
Service/Program	SHS - Clinical HPV SLO	Fall 2010	Spring 2011	Summer 2011
Service/Program	SHS - Classroom Hlth Ed	Fall 2010	Spring 2011	Spring 2010
Service/Program	SHS - SPS	Spring 2011	Summer 2011	Fall 2010
Service/Program	SHS - Classroom Hlth Ed	Spring 2012	Fall 2012	Fall 2012
Service/Program	SHS - NCHA Assessment	Spring 2013	Fall 2013	Fall 2014
Service/Program	SHS- Affordable Care Act	Fall 2013	Spring 2014	Fall 2015
Service/Program	SHS -Clinical and SPS visits	Spring 2015	Spring 2015	Spring 2015
Service/Program	SHS- SPS visits	Fall 2015	Spring 2016	Fall 2016
Service/Program	SHS - NCHA Assessment	Spring 2016	Summer 2016	Fall 2016

4.2a Key Courses or Services that address Institutional Outcomes

Course/Service	1a	1b	1c	2a	2b	2c	2d	3a	3b	4a	4b	5	6a	6b	6c	7
Affordable Care Act Education/Enrollment	X	X		X	X	X	X			X	X					X
Classroom Health Education		X		X	X	X	X	X	X	X	X		X	X		X
Clinical Services		X		X	X	X	X	X	X	X	X					X
Hlthcare Referral Srvces.		X		X	X	X		X	X	X	X					X
Mental Health Crisis Drop In				X	X	X			X	X	X					X
Mental Health Services				X	X	X	X	X	X	X	X	X	X	X		X
On-Line Mental Health Screenings		X		X	X	X				X	X					X
Prevention and Early Intervention PEI		X		X	X	X	X	X	X	X	X	X	X	X	X	X
Reproductive Health Services				X	X	X	X	X	X	X	X					X

4.2b Narrative (Optional)

SHS has done a regular cycle of assessment of its Student Learning Outcome statements for many years, resulting in program changes derived from analysis, dialogue and prioritized quality improvement initiatives.

Spring 2022 saw the completion of the HEALTH MINDS, in conjunction with many other community colleges from the Health Services Administration, California Community Colleges. This significant undertaking provides a rich collection of data on the health challenges of SRJC students. Our SALO for 23-24 was to analyze the data and make recommendations for program changes.

Our SALO for 24-25 is to make the patient portal interface for students more culturally informed and easier for those with limited computer literacy.

5.0 Performance Measures

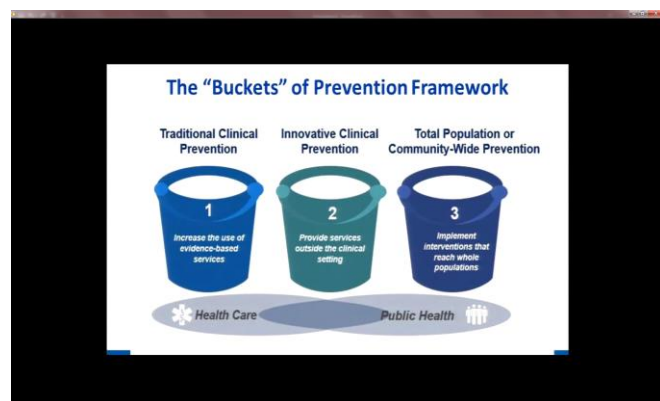
SECTION 5: PERFORMANCE MEASURES

5.0 Program/Unit Workload and Performance Measures

This section allows programs/units to define and report on their own unique workload and performance measures. The program/unit should identify any unique **non-academic** data elements that provide insight into the quantity and quality of the services you provide. Trend data is particularly helpful.

STUDENT HEALTH SERVICES PERFORMANCE MEASURES

From the perspective of a public health model, population based prevention interventions have a positive health impact on more students, with much less cost. These include health related social norms marketing campaigns (substance use), skills training (navigating the health system, asking for help), policy work (sexual assault prevention) and communicable disease control efforts. One on one professional visits for physical or mental health will perhaps have a greater impact on an individual student, yet is a much more expensive activity, and often involves treatment for conditions that could have been prevented. This service is critical to maintain, though, at some level, as this is the safety net for many students, where serious and high risk conditions otherwise would go unrecognized and/or treated. Resources spent this way, though, on a small percentage of students, needs to be adequately balanced with health programs that impact the community's population overall.



Clinical Prevention – Integrated Service Model as best practice

SHS has implemented an integrated, student centered model of services that with nurse practitioners and mental health providers working closely together.

23-24 SPS

	2015-16	2016-17	2022-23	2023-24
Clients	521	519	428	479
Sessions	1987	1722	1734	1941

Notes:

I skipped from Fall 2017 until 2022 due to fires, pandemic, and remote classes.

From 2016 until 2022, enrollment dropped by 33%, while clients seen dropped by only 18%, and sessions actually increased slightly.

From 2022 until 2023, enrollment increased 18%, while clients seen increased by 12%, and sessions increased also by 12%.

While it is surprising that clients seen did not increase from last year to this year at least by as much as enrollment increased, it is still wonderful that we are providing about the same number of sessions as in 15-16 (and way more than in 16-17), despite much lower enrollment.

23-24 Nursing

NP/RN/MA visits:

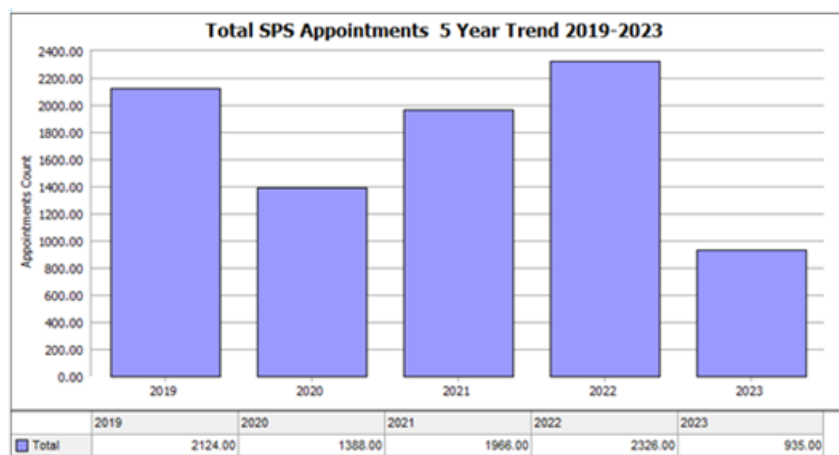
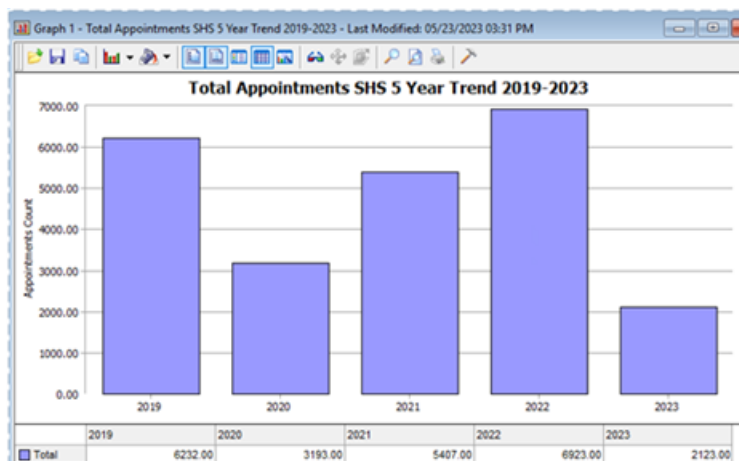
Provider Group		Provider	Clinic	Checked In	Month
		Year			
Reason Group	Reason Code	2023	2024		
<Ungrouped>	ClubSprtFR	0	3		
ACA clinic	CEC	44	56		
Athletics	Screen	615	170		
MD Clinics	Extended	1	0		
Nurse Practitioner Clinics	Acute30	409	446		
	AthleticMD	1	1		
	C19FrstVis	10	30		
	Covid19Vac	11	43		
	CovidTest	93	26		
	FirstVisSp	1	2		
	FirstVisit	279	256		
	Followup15	61	54		
	Immu1stVis	87	58		
	Immunizatn	69	55		
	NPIntervie	1	1		
	OrderLabs	10	5		
	PhoneAppt	64	147		
	ReproEstPt	1	0		
	ReproVisit	7	4		
	RoutinOrFU	40	36		
	TB1stVisit	97	139		
	TBReadClr	213	256		
	TBRiskAss	13	9		
	TBSkinTest	108	130		
	TrainingRm	0	1		
SPS	1stVisDRD	40	38		
	1visDRDadd	24	43		
Total		2,299	2,009		

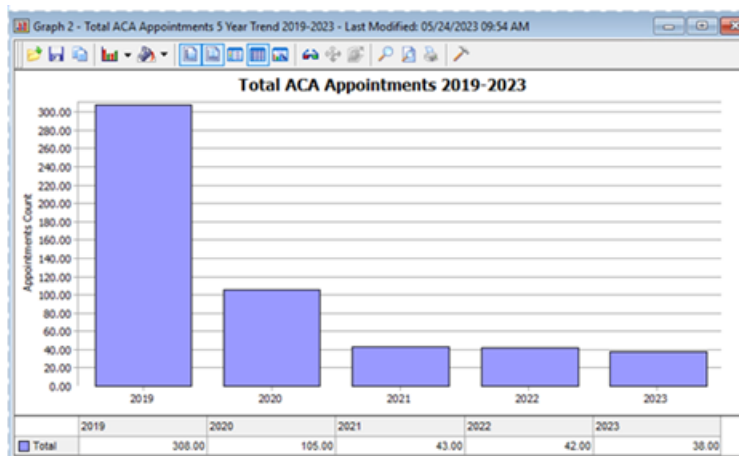
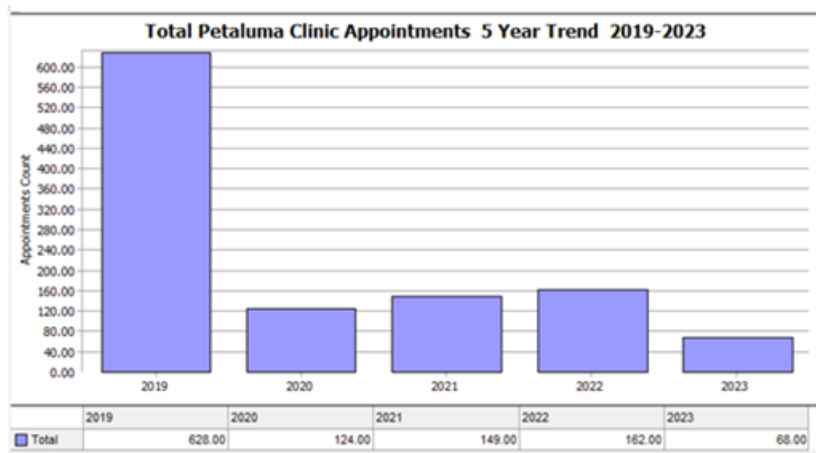
23-24 Employee visits

		Year	
Reason Group	Reason Code	2023	2024
Employee clinic	Acute30	8	8
	CovidTest	15	2
	ImmunizEmp	1	0
	PhoneAppt	3	0
	TBReadClr	13	18
	TBRiskAss	281	207
	TBSkinTest	27	12
Total		348	247

Past infographics:

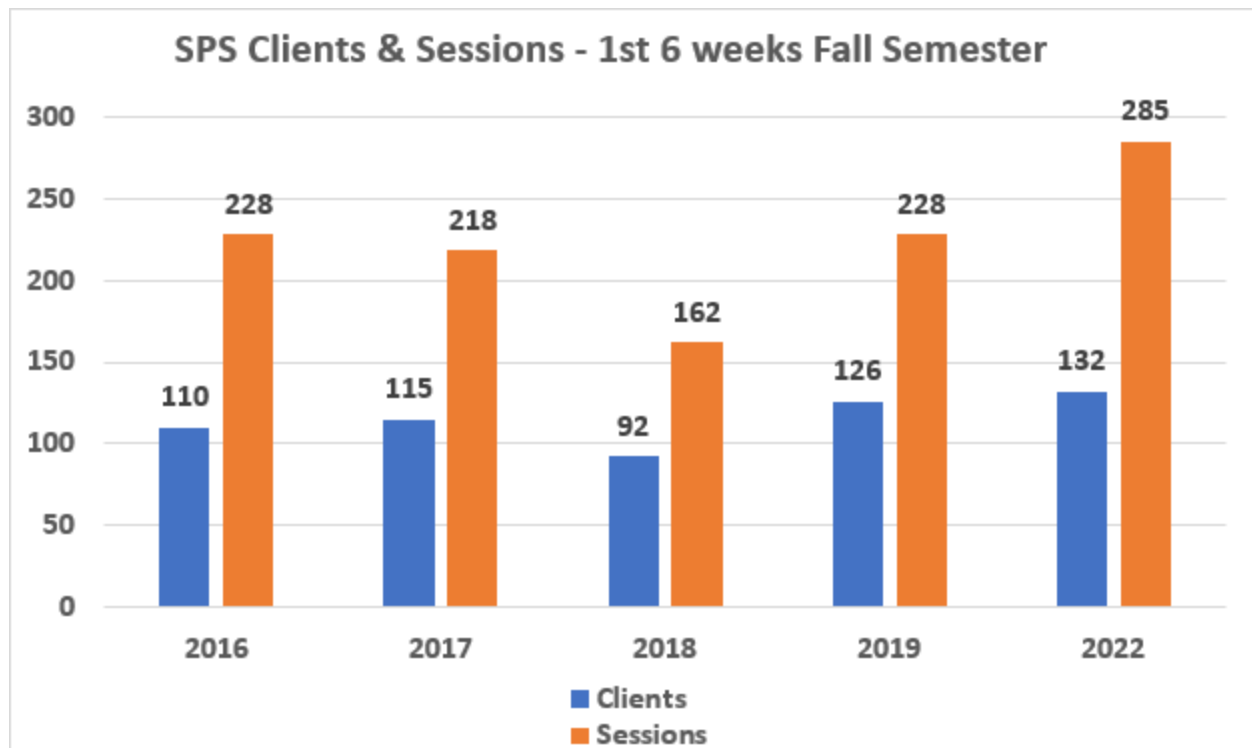
The following graphs are by calendar year, not semester. Which is why the 2023 numbers are so small.





Student Psychological Services wait list:

Data, purposely leaving out 2020 and 2021 given their abnormally low numbers with our exclusive remote service:



The first takeaway is what a fantastic job our therapists, supervisors, and front desk staff have done given the large number of students and student appointments. Everyone is working really hard to help our students. And, so many have benefited.

Included in the above numbers are DRD assessments. We now have nurse practitioners performing DRD assessments.

6.1 Progress and Accomplishments Since Last Program/Unit Review

Rank	Location	SP	M	Goal	Objective	Time Frame	Progress to Date
0000	ALL	00	00				
0000	ALL	03	02	Pandemic Modifications	The State of Emergency has been lifted and SRJC no longer has mask or vaccine mandates. The only remaining pandemic activity is the OSHA requirement to notify employees of exposure to COVID-19. This means that case tracking, website updating, union notifications, and student portal announcements will continue.	until 2025	Administrative support time and labor. All of the HEERF funding has been used up so this comes out of Health Fee. The most of the COVID-19 Team has been laid off except for medical assistants who will now do office work as well as covid work. Covid vaccine funded by District for students. Testing kits we still have but no more are coming. They expire 01/31/25.
0000	ALL	02	04	BCARE	Our fundamental work to prevent and respond to student crises through departmental trainings, risk assessments, and outreach. 988 suicide plaques on all campuses. Maxient cleanup and workflow revision to keep students from falling through the cracks. BCARE committee to be trained on trauma informed care, 5 sessions. Trained on-campus housing RAs on de-escalation and suicide prevention.	23-24	achieved
0000	ALL	02	03	On-campus housing	Welcomed students on move-in day. Assisted with training of RAs, specifically Narcan and student health services. Offered flu vaccine. Trained having students registering with Mediat patient portal to answer Meningitis yes/no question. Face to Face IV prevention Van came weekly with condoms, Narcan, HIV testing, etc. Outreach/PEERS hosted weekly info nights like safe sex, game night/stress reduction.	Fall 23	Mediat portal registration for vaccine question: Poor uptake and students don't know anyway. Will try in application instead. Face to Face HIV prevention Van came weekly with condoms, Narcan, HIV testing, etc. They are interested in placing a free Narcan kiosk.

Rank	Location	SP	M	Goal	Objective	Time Frame	Progress to Date
0001	ALL	02	02	SHS Funding Stabilization	Measure O and the Chancellor's Office Mental Health Allocation will take mental health out of health fee expenditures, helping to balance the budget. Health Fee will be raised to the maximum allowed slowly, as agreed upon with SRJC Board of Trustees. FPACT billing will increase as student enrollment hopefully increases.	1 year	Enrollment is up this year and the budget will balance. We also have been slowly increasing the health fee to match the chancellor's maximum allows. A contract has been signed with Medical Billing Technology to assist with billing efficiencies. They take a cut of what they bring in. The MAs are trained in FPACT enrollment so they can support the NPs, allowing FPACT to be rolled out to more providers. The mental health allocation continues to provide support.
0002	ALL	02	02	SHS Department Health: Communication, Relationships, Coordination and Efficiencies	<p>1) Continue / strengthen the CORE staff facilitated meeting model , with regular meetings 2x per month</p> <p>2) Continue interventions with individual students, colleagues and within the college community to promote health, clarity, needed structure and anxiety reducing communications in an environment of significant change related to pandemic.</p> <p>3) Maintain/develop MOUs for obtaining critical services on campus for students and sustainable working relationships with healthcare agency partners in Sonoma County including Siyan (psychiatry).</p> <p>4) Work within the college community to maintain, strengthen and/or initiate relationships for collaboration in the best interest of the students. 5) Increase Spanish language support at front with SHAs, MAs, and HSAs. Implement more Spanish intake forms. 6. Outreach and athletics collaboration for domestic violence awareness game, etc.</p>	Ongoing	Outreach Team continues to do preventive work by communicating with students on social media and through in person as well as on-line services. Siyan MOU has been maintained. We have lost our MOU with Petaluma Health Center for reproductive care due to liability concerns. We lost our MOU with Aliados for remote insurance enrollment. We can continue to send students to their location for in-person services. We had Bilingual, bicultural, Spanish speaking front office manager, student health aides, medical assistants, and therapists. Spanish intake forms are successful.

Rank	Location	SP	M	Goal	Objective	Time Frame	Progress to Date
0003	ALL	04	02	Technology Development and Applications in SHS	. New modules include a lab ordering and results interface, eprescribing, and interface with the state immunization database. Troubleshooting will continue to maximize the effectiveness and efficiency of these modules. Piloted and implimented Protocall after hours clinical answering service.	Ongoing	achieved
0004	ALL	01	02	Student Development / Student Employees	<p>Student Development Workgroup for 23-24</p> <p>1) SHS SDWG to meet regularly for both internal student development issues and planning and to develop student training/meeting schedules.</p> <p>(Assess SLO using patient portal)</p> <p>2) Provide quality SHS student employee training and supervision to:</p> <p>-- Adequately cross train for operational supports as part of initial and ongoing training.</p> <p>-- Continue assessment and adjustment of SHA workflows to address changes in technology and SHA role.</p> <p>-- Assure understanding and practice of department and college guidelines, policies and procedures.</p> <p>-- Assign admin/operational support work to student's highest skill level as appropriate.</p> <p>3) Continued assessment of departmental needs for student employees related to right sizing of staffing. We have not been able to hire as many SHAs as we wanted.</p>	Ongoing	1. fewer student employees, workgroup rarely met. But SHA training and workflow are ongoing projects. 2. achieved, ongoing

Rank	Location	SP	M	Goal	Objective	Time Frame	Progress to Date
0005	ALL	01	02	Health Promotion	<p>Analyze Healthy Minds data to determine health topic needs and interests in health promotion support.</p> <p>Develop plan for events, workshops, web and social media postings; measure contacts, and outcomes as possible. Mental Health Field Day was successful in May. Likely 80 students participated in the later.</p> <p>Collaborate with VP Student Health on activities related to SRJC student health.</p> <p>Review methods to reach students re: SHS and health resources, with more efficient use of emerging technology (apps, online, institutional partners more, move upstream). Created student health services Canvas resource.</p> <p>Analyze intake data in health centers to determine how students learned of SHS resources to support outreach strategic planning</p> <p>Lead/coordinate SHS web page maintenance and updates. Student intern from Students in Recovery promoting awareness and use of NARCAN in classrooms and fairs, including giving out free Narcan. Coordinating with new Outreach Therapists.</p>	Ongoing	achieved

Rank	Location	SP	M	Goal	Objective	Time Frame	Progress to Date
0006	ALL	02	02	Program Quality Improvement in SHS	<p>Use of portal for secure messaging; students understand how to use portal</p> <p>Work with OIR towards linking SHS served students with unique student success outcome tracking.</p> <p>Quality improvement related to service continuity efforts and standardized guidelines</p> <p>Analysis of Healthy Minds data to improve patient care.</p>	Ongoing	achieved, ongoing

6.2b PRPP Editor Feedback - Optional

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6.3a Annual Unit Plan

Rank	Location	SP	M	Goal	Objective	Time Frame	Resources Required
0000	ALL	00	00				
0000	ALL	03	02	COVID 19	The State of Emergency has been lifted and SRJC no longer has mask or vaccine mandates. The only remaining pandemic activity is the OSHA requirement to notify employees of exposure to COVID-19. This means that case tracking, website updating, union notifications, and student portal announcements will continue. Plan to amend reporting form as it is awkward. People aren't filling it out and are just calling or emailing SHS. This will end by February 2025 by State Decree. The county wants to place an indoor kiosk to dispense free covid-tests.	until 2025	Administrative and staff time. District covering COVID-19 vaccine costs for students has been much appreciated. Hopefully this will continue.
0000	ALL	02	04	BCARE (CIRT) Team	Bring Director into CORE meetings since she is co-chair. Continue activities that support our team goals: The Behavioral Consultation, Assessment, Response & Education (B-CARE) Team has the primary mission to avoid crises before they occur. We accomplish this through prevention, early intervention, and response to concerning or inappropriate student behavior, in order to mitigate risk to the campus community and allow all students to safely pursue their academic goals. To that end, we offer Behavioral Consultation, Assessment, Response and Education.	Ongoing	Continued support from the District to give managers time for this committee and its activities. Continue to search for a way to create a crisis phone. Currently we are understaffed for this.
0000	ALL	03	05	Athletics	Continue to streamline athletic screening exam process already greatly improved by hiring classified MAs and moving all paperwork on-line. Add club sports remote paperwork review, consider fee for them. Advocate for more mental health warm handoffs during screenings, adding social worker. Support athletic department in Year of Mental Health in Athletics with SHS Outreach.	Ongoing	Coordination and cooperation with Athletics department. Possible athletic fee increase. Announcements on screen were more effective than tabling, giving out wristbands at the door. Maybe Fall and early Spring (basketball).

Rank	Location	SP	M	Goal	Objective	Time Frame	Resources Required
0000	Santa Rosa	02	03	On-campus Housing	Housing had no major infectious disease outbreaks. Plan for covid-19 and influenza vaccine clinics in housing. Also promotion of the meningitis vaccine and best way to get students to check yes or no. Found state sources for condoms, lubricant, and fentanyl strips so we no longer have to buy with mental health \$ or depend on F2F's irregular disbursements. Would be nice to provide menstrual supplies.	End of Fall 2025.	Free influenza vaccines from state, volunteer nurse. Would be nice to provide free menstrual supplies instead of buying them.
0001	ALL	02	02	SHS Funding Stabilization	Measure O has taken large amounts of mental health staff salary off the health fee, resulting in the first balanced budgets since 2017 years. This will likely remain for at least 5 years, maybe longer if enrollment improves. Also, we now bill Medi-Cal for reproductive health services, this may generate as much as \$1 per enrolled student. Effectively paying for our electronic medical records. We are also looking at adding LEA BOP, a Medical program that helps bill for individual visits, not just random moments in time like SMAA.	Fall 2024	District support in figuring out liability issues. Extra funding to pay for 0.5 medical assistant, otherwise she will need to be laid off to balance the budget. We may need to cut back on our EMR modules to cut costs.
0002	ALL	02	02	SHS Department Health: Communication, Relationships, Coordination and Efficiencies	Maintain Spanish language support at front with SHAs, MAs, and HSAs. ZOOM meetings and Teams rapid communication have really helped with our spread out team. Continue this. Director continue to find pertinent meetings to attend to build bridges with other departments (BCARE core, VPSS, hiring committees, etc)	Ongoing	Administrative and staff time Administrative support time and labor Hiring practices. Scheduling finesse

Rank	Location	SP	M	Goal	Objective	Time Frame	Resources Required
0003	ALL	04	02	Student Psychological Services	<p>-Continue to devote substantial time to budget work with Measure O/MH Allocation, share with SHS and SPS regularly, including short and long-term goals</p> <p>-Develop Brijit and Joseph into great leaders within SPS and SHS</p> <p>-Advocate for the best space for our PEI program</p> <p>-Given that we have a new VP of Student Services, a new President, and forthcoming new VP of Human Resources, work to help in any way possible our top line administrators.</p> <p>-Streamline BCARE processes, including Maxient reports</p> <p>-Increase collaboration with faculty to support student mental health</p> <p>-Continue to diversify our SPS trainees and share with SHS achievements.</p> <p>-Given possible loss of county PEI funding in two years, seek alternative funding for this program</p> <p>-Work with our new social workers to coordinate case management</p> <p>-In accordance with SRJC Strategic Plan, Strategy 1 - enhance our workshops provided to students to promote engaged learning</p> <p>-In accordance with SRJC Strategic Plan, Strategy 2 and 4 - work to ensure we have outreach programming that</p>		<p>Support from accounting, especially Stephanie Dirks. Use left over VIDAS money aimed at supporting out Latinx therapists to support Brigit. District support in making space for our PEI program.</p>

Rank	Location	SP	M	Goal	Objective	Time Frame	Resources Required
0004	ALL	01	02	Staff Training, life-long learning	Send Brian Chetcuti to a ACCCA leadership class. Finish MA training for health educator certificates. NPs and therapists \$1000+ each for CME. Make sure SHAs have first aide trianing, through Keenan. Send Director for NABITA training. Jeane interested in NASPA Conference (March 2026), membership	Ongoing	Staffing in such a way that employees can take time off for training. Jeane's funding is uncertain, coordinate with SS regarding NASPA.

Rank	Location	SP	M	Goal	Objective	Time Frame	Resources Required
0005	ALL	01	02	Health Promotion	<p>Health Promotion/Outreach Workgroup</p> <p>- Work with Jeane in new role and our newly hired Mathias to enhance prevention work, with a specific goal of reaching greater numbers of students</p> <p>Take part in Healthy Minds Study Spring 2025 as part of a study.</p> <p>Develop plan for events, workshops, web and social media postings; measure contacts, and outcomes as possible.</p> <p>Collaborate with VP Student Health on activities related to SRJC student health.</p> <p>Review methods to reach students re: SHS and health resources, with more efficient use of emerging technology (apps, online, institutional partners more, move upstream)</p> <p>Analyze intake data in health centers to determine how students learned of SHS resources to support outreach strategic planning</p> <p>Lead/coordinate SHS web page maintenance and updates Long-term funding for substance abuse intern, ideally AOD certificate or counselor. FIND NEW FUNDING! PEI is going away due to Prop1 that moved the money away from prevention towards housing. There may be money from the county for early intervention.</p>	Ongoing	<p>Staff time for workgroup, organizing, preparing for and providing health promotion services</p> <p>Coordinated funding of health promotion program from shared revenue sources</p> <p>Student support labor; SHAs and SHA-PEERS Work with county on funding. On the one hand they are being moved away from prevention but on the other hand they love that we do QPR and Mental Health First Aide, both evidence based prevention programs.</p>

Rank	Location	SP	M	Goal	Objective	Time Frame	Resources Required
0006	ALL	02	02	Program Quality Improvement in SHS	<p>Use of portal for secure messaging; students understand how to use portal</p> <p>Work with OIR towards linking SHS served students with unique student success outcome tracking.</p> <p>Quality improvement related to service continuity efforts and standardized guidelines</p> <p>Analysis of Healthy Minds data to improve patient care.</p>	Ongoing	<p>Administrator and Staff Time</p> <p>Administrative Support time</p> <p>Funding coordination</p>