Health Services Program Review

MODESTO JUNIOR COLLEGE

June 2017

Modesto Junior College
Health Services Program Review

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Program Mission and Accomplishments

The Mission of Modesto Junior College

MJC is committed to transforming lives through programs and services informed by the latest scholarship of teaching and learning. We provide a dynamic, innovative, undergraduate educational environment for the ever-changing populations and workforce needs of our regional community. We facilitate lifelong learning through the development of intellect, creativity, character, and abilities that shape students into thoughtful, culturally aware, engaged citizens.

Provide a brief overview of the program and how it contributes to accomplishing the Mission of Modesto Junior College.

Modesto Junior College Health Services (MJCHS) mission: To promote the health of students through health education and services to optimize their overall well-being.

Overview: MJCHS serves as a supplement to each student's primary healthcare provider for students enrolled at MJC. For many students, however, MJCHS is their only source of health care. Nurses, physicians, and therapists evaluate and treat most minor, temporary physical and/or emotional conditions that require short-term care. Many concerns require a referral to a community medical or other service provider, and every effort is made to assist students in establishing off-site care as needed.

MJCHS is aligned with the District's mission statement. Both describe a developmental, multi-dimensional model that addresses the whole student.

- MJCHS promotes the well-being of students as a necessary component to the development of thoughtful, aware, and engaged citizens.
- Improved health enhances students' learning capacity and contributes to their success in college and life.

Promoting students' well-being is critical to the pursuit of the institutional mission. MJCHS designs programs and services that foster student retention and success.

- MJCHS provides free access to healthcare services on two campuses, many health barriers to student success are addressed early and effectively.
- The health promotion and outreach functions of the department provide health-related information to students and the various services available to them, encouraging them to seek help early, often leading to successful completion of coursework.
- The Behavioral Intervention Team (BIT), led by MJCHS' Director of Mental Health, promotes faculty and staff engagement with students by providing in addressing distressed, disruptive, and threatening student behaviors.

MJCHS has organized and sponsored college events in collaboration with ASMJC and other departments to increase student connection to health and wellness. In the 2016-2017 academic year, MJCHS offered:

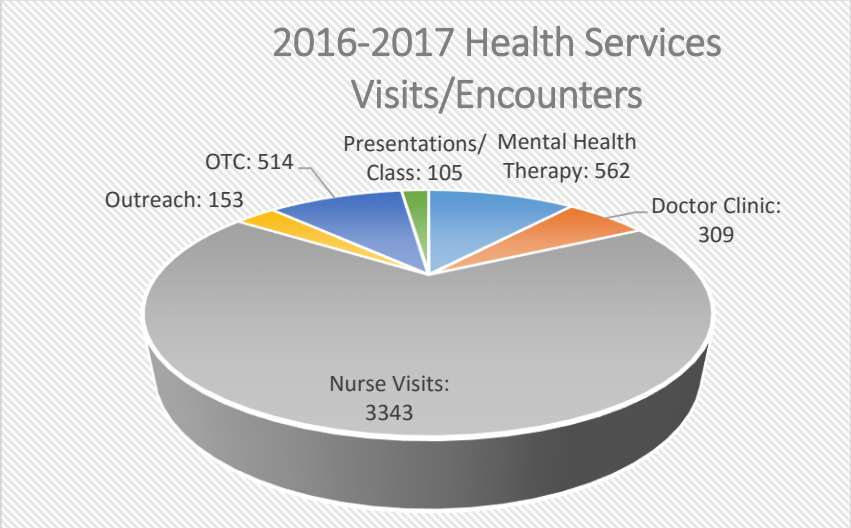
- Mental Health First Aid (3 trainings)
- Health and Wellness Fair (October 2016)

- Health Living presentations (fall 2016/spring 2017)
- Documentary events (fall 2016)
- Faculty/Staff On-Boarding (on-going)
- Mental Health Fair (May 2017)

Briefly describe the activities and accomplishments of the department since the last program review.

Direct Services:

There were 4989 student encounters in Health Services in the 2016-2017 academic year, with nurse visits being the most common encounter and access point for students with health and wellness needs. Most students self-refer and some are escorted to Health Services by an instructor or academic counselor. Through triage and assessment, nurses may refer students to additional MJC and/or community services.



MJCHS nurses continue to provide services to Allied Health, Workforce Development, Child Development, and Emergency Medical Technician students requiring Health Clearances. This partnership requires ongoing inter-departmental collaboration to ensure students are well-informed, supported, and ultimately cleared to fulfill clinical duties.

In partnership with Valley Medical Consortium for Medical Education, medical residents receive oversight from our Medical Director to provide direct medical services to students 1-2 days per week. Diagnostic medical consultations, prescriptions, lab referrals, imaging referrals, and follow-up services are provided.

MJCHS, in collaboration with Allied Health, sponsored a Health and Wellness Fair on October 25, 2016 on both campuses. Several booths were set up and manned by various community agency representatives. Allied Health students provided BMI screens, flu vaccines, and blood pressure screens. Annually, flu vaccines are provided by Stanislaus County Public Health free of charge, and offered to students for free.

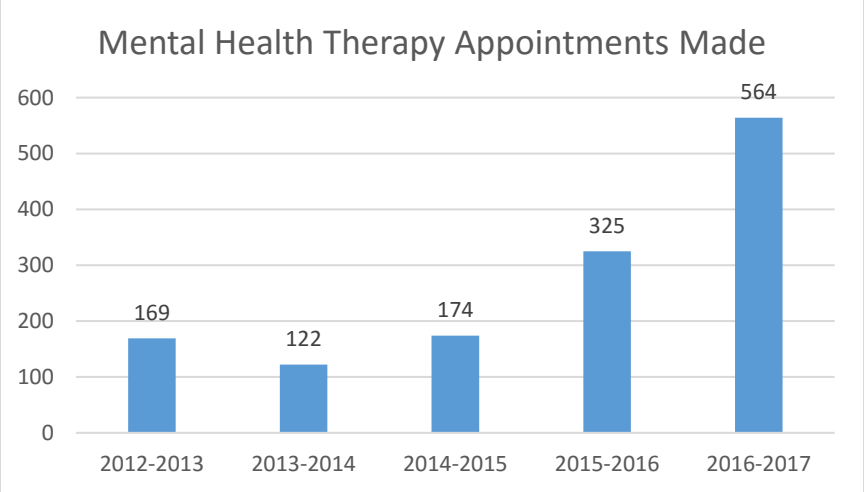
Students who participated in the Fair were asked to complete a survey. Many participating students did not complete a survey, so a total count of students in attendance can only be estimated. 94 student surveys were collected. On a scale of 1-5 (1 being "poor" and 5 being "great"), students rated the fair a 4.7. During the 2016-2017 flu season, 241 Influenza vaccines were given, with over half (129) given during the Health and Wellness Fair.

Personnel and Leadership:

Personnel changes in 2016-2017:

1. Hired: Director of Health Services (Amy Yribarren)
2. Hired: Director of Mental Health (Lonita Cordova)
3. Hired: Health Services Senior Nurse (Chandni Gulati)
4. Transferred/Promoted: Ginny Bounyavong
5. Temporary Out-of-Class Assignments: Araceli Baliel, Noel Moreno

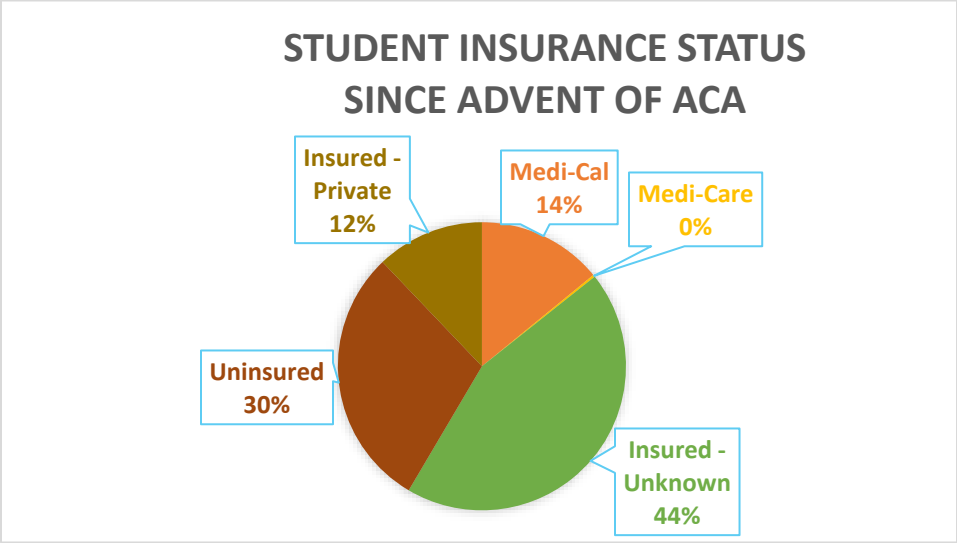
With the increased demand for mental health services, a Director of Mental Health was hired to increase therapeutic supports and provide oversight of mental health activities. MJCHS established a Memorandum of Understanding with California State University, Stanislaus to provide clinical hours for Professional Clinical Counselor (PCC) student trainees through MJC Health Services.



Community Engagement:

Community engagement enhances MJCHS staff understanding of community needs, improves our knowledge of outside resources, and leverages offerings to students. In 2016-2017, MJCHS staff participated in several Stanislaus County collaborative efforts: Breastfeeding Coalition, Teen Pregnancy Prevention Coalition, Community Advisory Committee, Youth Success Initiative, and Stanislaus Wellness Partnership.

2017 marked the fourth year of enrollment in California's health insurance marketplace, Covered California. Although there has been an increase in county-wide health insurance enrollment, MJCHS staff continue to consult with uninsured students about enrollment requirements, benefits of insurance, and how to get covered (see below). Two representatives from Health Plan of San Joaquin, one of the main providers of Medi-Cal managed care in Stanislaus County, visited MJC monthly to provide information and outreach material to students.



The Stanislaus Wellness Partnership is a collaboration funded by Prop 63 prevention funds. This collaboration allowed Prop 63 funds to be used by Stanislaus county agencies to educate the community about the stigma around mental health disorders. The partnership includes California State University Stanislaus, the Stanislaus County Office of Education, Stanislaus Behavioral and Recovery Services, and Modesto Junior College. This team met on a quarterly basis to plan documentary video screening events, keynote speakers, and campus trainings. The following events were funded through this collaborative:

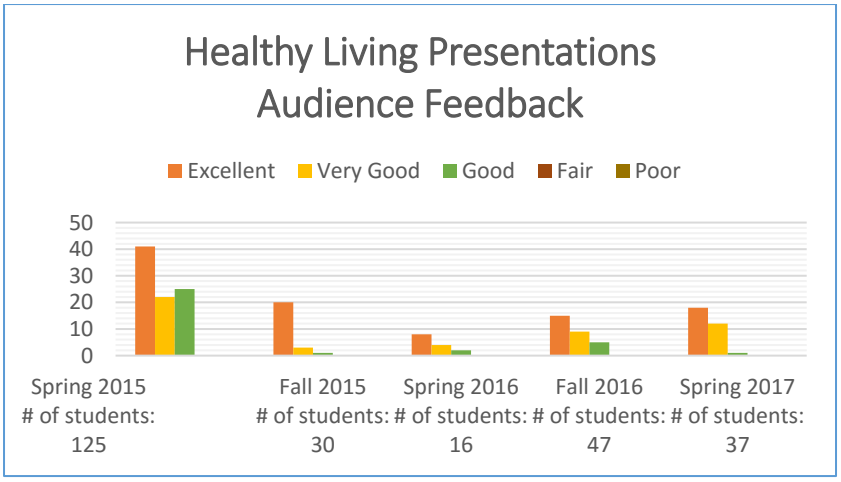
- 11/10/16: Documentary: The Mask You Live In
- 2/25/17 African American Education Conference: And Still I Rise – Discussing help seeking behaviors toward mental health
- 3/18/17 Hispanic Education Conference: Breakout Session- Nurturing Resiliency and addressing the stigma around mental health
- 5/25/17: Mental Health Awareness/Foster Care Awareness presentation

Outreach and Campus Engagement:

Health and wellness presentations are offered each semester to staff, faculty, and students. MJCHS Health Living presentations featured a wide range of topics from various subject matter experts in the community:

9/15/16:	Matching Bone Marrow Donors
9/29/16:	Managing the "I" in Anxiety
10/13/16:	Vital Social Skills Development for Academics and Life
10/27/16:	Sexually Transmitted Infections
2/9/17:	Psychosis
2/23/17:	Domestic Violence
3/9/17:	Learning Disabilities
3/30/17:	Stress Less
4/6/17:	Integrative Restoration

Participant feedback was positive, with the vast majority rating the presentations as "excellent" or "very good:"



Two MJCHS nurses are certified instructors of Mental Health First Aid. Classes are offered to faculty for Flex credit, staff, and students in an effort to increase understanding of mental health disorders and how to offer help. 53 campus members were trained in the 2016-2017 academic year.

Mental Health trainings were conducted by the Director of Mental Health for faculty and classified professionals during the Fall 2016 and Spring 2017 semesters:

- Behavioral Intervention Team (5 trainings)
- Understanding the Culture of Poverty (5 trainings)
- Eliminating Barriers to Learning (5 trainings).

Additionally, 4 trainings in the FA16 and 7 trainings of SP17 were given to CARE and Bridge students. These trainings served over 250 students in developing life skills:

- Coping with Anxiety
- Nurturing Healthy Relationships
- Finding your Purpose.

During the Fall and Spring Institute Days MJC personnel were also offered opportunities to attend training on BIT reporting and how to initiate mental health referrals through Health Services. During each of the aforementioned trainings information was given out about Kognito as a FLEX and professional development opportunity.

Addressing food and housing insecurities has become a statewide focus within the community college system. Student challenges with food/housing insecurity coupled with mental and physical health and wellness have bolstered the need for broader interdepartmental discussion around the mental, physical, and social needs of students. Collaborative efforts are underway to develop a Health and Wellness Center. Input, suggestions, and resources and currently being considered and gathered to ultimately create a Center that reflects the needs and interests of the MJC student body.

MJCHS was awarded a grant to purchase and customize two Wellness on Wheel (WOW) carts. With several health and wellness plans being considered, MJCHS must increase student engagement to promote services. The WOW carts will increase student access to resources in an interactive, innovative, and educational way, and will allow MJCHS staff to engage large numbers of students using a non-threatening, inclusive, and interactive approach.

MJCHS Professional Development:
MJCHS staff engage in weekly professional development consisting of peer learning and teaching, local field trips, and presentations from community representatives. This program was launched in January 2017 with the following objectives:

Objectives:

1. To enhance knowledge and understanding of relevant, current, and evidence-based health information, research, and best practices.
2. To uphold quality assurance principles and guidelines.
3. To share, reinforce, and enhance knowledge of nurse assessment.

Topics covered in 2016-2017 included:

- Hand Hygiene
- Lynda.com
- Nutrition – Choosemyplate.org
- Ear, Nose, and Throat assessment
- Neurology assessment
- Musculoskeletal assessment
- LGBTQ resources
- Planned Parenthood
- Sutter Community Library
- Mandated Reporting
- Disability Services and Programs (DSPS)
- Title IX
- Common Sports Injuries
- Legal Issues for Nurses

Other trainings attended by MJCHS staff:

- CPR
- Community Resiliency Model
- The Other End of the Stethoscope

- Mental Health First Aid Instructor Summit
- Hemocue (for hemoglobin and glucose screening)
- Problem-Solving Workshop

All MJCHS staff are current with district-mandated trainings:

- Blood-Borne Pathogens
- FERPA
- Ergonomics
- Injury/Illness Prevention
- Preventing Slips, Trips, and Falls
- Teamwork, Awareness, Respect, Communication (TRAC)

MJCHS Director of Health Services met with instructors from MJC's Associate Degree of Nursing program to inquire about opportunities for professional development for MJCHS nurses. Collaborative opportunities include observing and/or participating in simulation lab activities as well skills lab. Instructors shared their skills lab calendar for MJCHS nurses to visit and observe "check-offs" with student nurses. Future opportunities may include student nurses volunteering time in the Health and Wellness Center.

Beginning in the Fall 2016 semester a weekly Case Staffing teleconference meeting was implemented for all of the PCC trainees and clinicians to discuss cases from their weekly appointments. These meetings allow the mental health professionals to confidentially support each other by offering suggestions about the students served. Some examples are: referring transgender LGBTQ students to community groups or services for support, advising on filing a child protective services investigation form when appropriate, or identifying if bias may be impeding the therapeutic session. This weekly interactive meeting also incorporates trainings about procedures or data collection that takes place in each session and allows the trainees and therapist to adopt uniform processes when serving students.

MJCHS maintains memberships to:

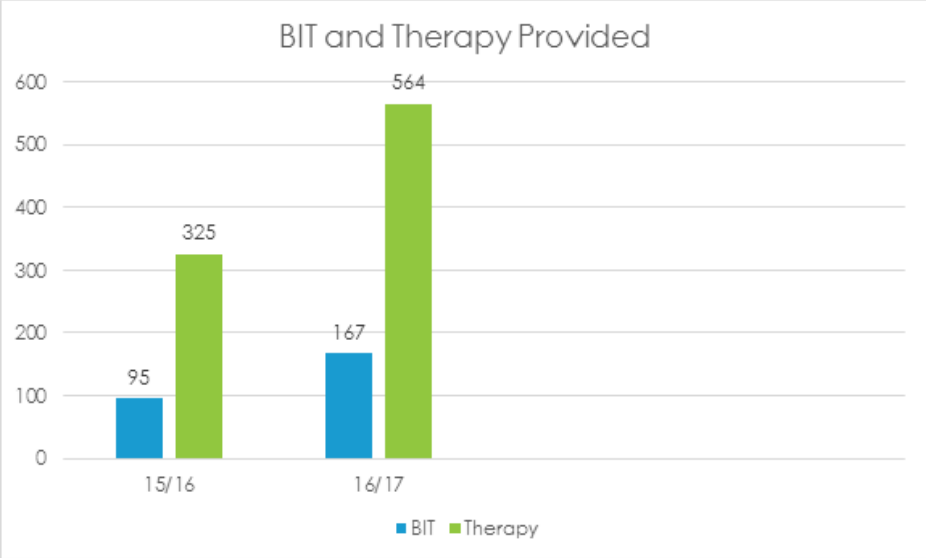
- Health Services Association of California Community Colleges (HSACCC)
- Mental Health and Wellness Association (MHWA)
- National Behavioral Intervention Team Association (NaBITA)
- American College Health Association (ACHA) membership was reinstated for the 2017 calendar year. ACHA links college health professionals throughout the nation, forming a networking base for learning and advancement of college health. All MJCHS staff now have access to all ACHA publications and journals.

Behavioral Intervention Team:

Lonita Cordova, Director of Mental Health, heads the Modesto Junior College Behavioral Intervention Team (BIT). The purpose of the BIT is to evaluate and address student behavior that may be inappropriate or concerning, and to coordinate the resources of the College to intervene and provide necessary supports. Many of the BIT reports generated end up being referred to Health Services where a mental health appointment is initiated.

The BIT consists of a multi-disciplinary group of MJC administrators and faculty whose mission is to:

- Provide a structured positive method for addressing student behaviors that impact the campus community and may involve mental health and/or safety issues
- Meet regularly to support students by identifying patterns, trends and disturbances in the behavior of an individual or group
- Evaluate the nature of reported behaviors or incidents that are disruptive to the mission of MJC, and to determine the level of risk using the NaBITA Threat Assessment Tool.
- Determine an appropriate course of action to respond to a behavioral concern and initiate an intervention to prevent a situation from escalating further
- Coordinate resources and follow-up to ensure comprehensive response and care
- Balance the individual needs and rights of the student and those of the greater campus community
- Support the Crisis Counselor team through training and staff development
- Encourage a culture of reporting
- Reach out across the campus to provide departmental trainings to educate the faculty, staff and administration about the Behavioral Intervention Form and how/when to file a report
- Collaborate with the Professional Development Coordinating Committee to train staff, faculty and administration about using the BIT process effectively and the importance of interventions for student success



Student Achievement and Completion

College Goal for Student Achievement
Increase Scorecard Completion Rate for Degree and Transfer

The College has a primary aspirational goal of increasing the Completion rate from 43% to 53% on the **CCCCO Scorecard Completion Rate for Degree and Transfer [view] by 2022.** The completion rates in the Scorecard refers to the percentage of degree, certificate and/or transfer-seeking students tracked for six years who completed a **degree, certificate, or transfer-related outcomes (60 transfer units).**

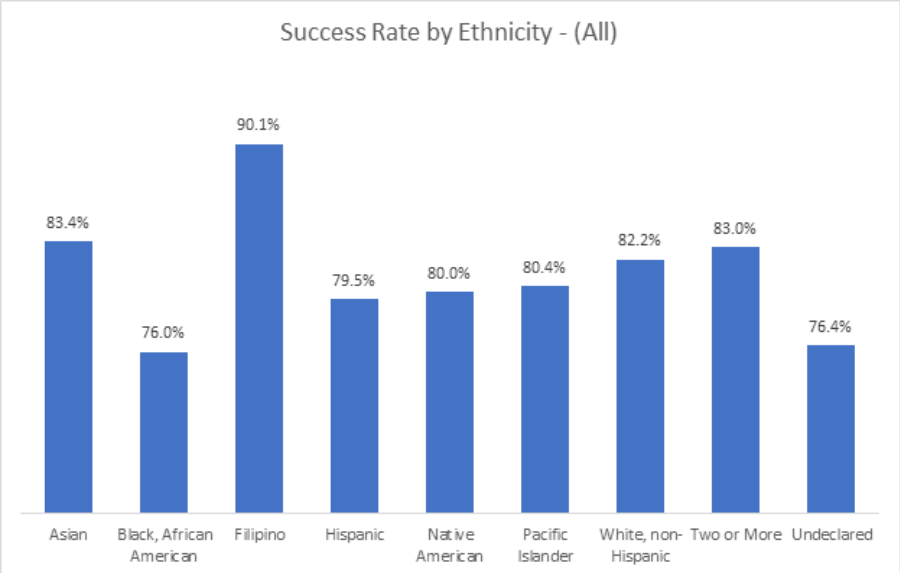
As you answer the questions below, please consider how your program is helping the college complete this aspirational goal of increasing the MJC Degree, Certificate, and Transfer Completion rate by 10% on the CCCCO Scorecard by 2022.

Success

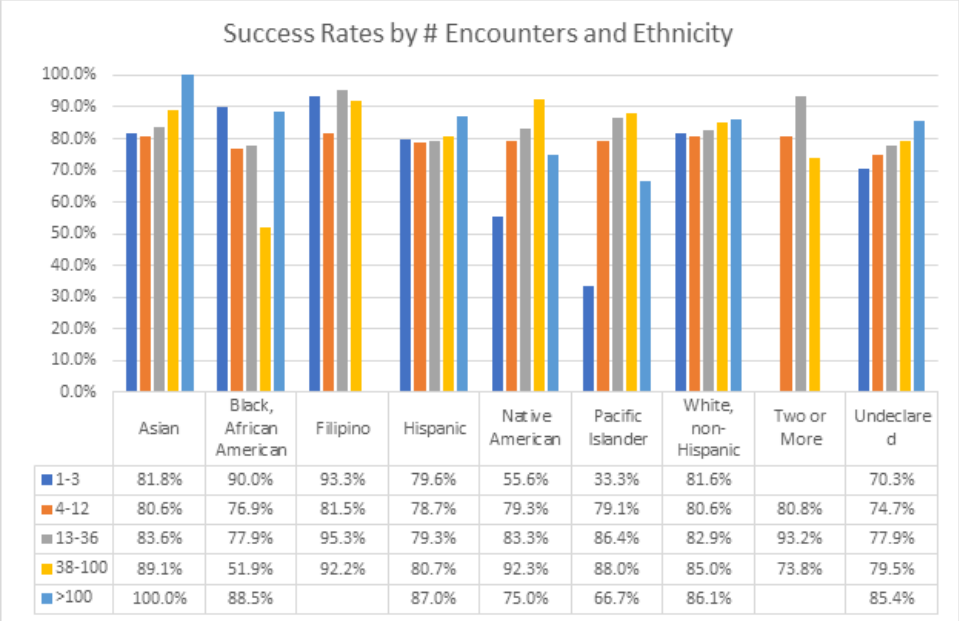
The following questions refer to data from the **Success Rate Data Dashboard** or data regarding student achievement from the Office of Institutional Effectiveness. If using the data dashboard, use the filters to examine both departmental and course level data. Charts will be included for the record by Research and Planning once the review is submitted.

First, define the achievement data you are using for program review. What groups are you measuring? What indicators are you measuring? For how long (two-year trends are recommended)? Is there a comparison group—for example, against the college average or students who do not participate in your activity?

Graph #1: Course Success Rates of all students who have had contact with Health Services, by ethnicity:



Graph #2: Success rates by ethnicity, based on the number of contacts with Health Services.



Graph #3: Representation of students served by Health Services compared to the representation of the entire student body, by ethnicity.

Ethnicity	# Students	% of Pop	Focus	% of Focus
Asian	1560	4.9%	103	5.5%
Black, A.A.	1257	3.9%	69	3.7%
Filipino	377	1.2%	33	1.8%
Hispanic	15388	47.9%	890	47.2%
Native American	196	0.6%	13	0.7%
Pacific Islander	343	1.1%	23	1.2%
White, nH	12224	38.1%	684	36.3%
Two or More	284	0.9%	19	1.0%
Undeclared	473	1.5%	51	2.7%
Totals	32102		1885	

Consider your data. Are these rates what you expected? Are there any large gaps? Is there anything surprising about the data? What do you see in the data? Write a brief analysis.

Overall, there were no pre-determined expectations for success rates among ethnic groups.

Graph #1: This graph shows, across all ethnic groups listed, that students who have contact with Health Services have higher Course Success Rates than the general MJC student population. The greatest impact is for Asian students – those who contacted Health Services were 40% more successful than those students who did not have contact.

Graph #2: For most groups, especially Undeclared, Asians, Hispanics, and Whites, there is an upward trend showing that the more contact with Health Services, the higher the Course Success Rates. The exception is for African American students. Reasons for the downward trend for African American students is unknown, and needs further analysis. Because the majority of our nurse visits with continued contact consist of Health Clearances, the upward trends are not surprising. The completion of a Health Clearance allows the students to begin and complete field study projects, volunteer work, observations in a classroom, and clinical duties for Workforce Development and Allied Health programs.

Graph #3: The ethnic groups served in Health Services closely represent the ethnic groups represented by the entire student body. No specific groups were disproportionately impacted.

Given the data, what is your set goal for success? Do your department and individual course rates meet this goal? If your rates for success are lower than your goals, what are your plans to improve them?

Goal: To continue improving our knowledge of health and wellness issues that impact MJC students (through student surveys and data collection), and embedding this education within Health Services, ultimately impacting what outreach and trainings we offer, what types of therapy to provide, and how nurses and physicians can better serve students.

Consider your department equity rates on the **Success Rate Data Dashboard** (by pressing on the equity tab) or through the data provided by the Office of Institutional Effectiveness. Examine your disaggregated data over the last two years. Consider any student equity gaps—the differences across student populations, especially in relation to the highest performing group. How do you plan on addressing issues of equity in your area? In other words, how do you plan on closing achievement gaps across student populations?

Plan: Continue to analyze our impact on Course Success Rates among all ethnic groups and augment our services as needed to improve success and equity. Overall, we are pleased to see that students who contact Health Services show an average Course Success Rate of 81.2% vs MJC in general at 68%. We are proud to serve a cross-section of students that represent the diverse student ethnic groups attending MJC.

We can further analyze the disproportionate impact among African American students (76%) that contact Health Services; however, their success rate is 22% higher than the general MJC student population.

Student Learning Outcomes

Student Learning and Outcomes Assessment

Please review your Student Learning Outcomes data located on the **MJC Student Learning Outcomes Assessment** website or through the specific data set prepared for your area. For each SAO that your SSLOs inform, you will find your overall rate. You will also see that overall rate disaggregated across student populations; you can use this information to understand how different student populations are learning in your support services areas.

After you have examined your rates and disaggregated data, reflect on the data you encountered. Please address the service area outcomes (SAOs), and institutional outcomes (ILOs) in your analysis.

Service Area Outcomes (SAO)
What is your set goal for SAO success? Do your overall rates meet this goal?

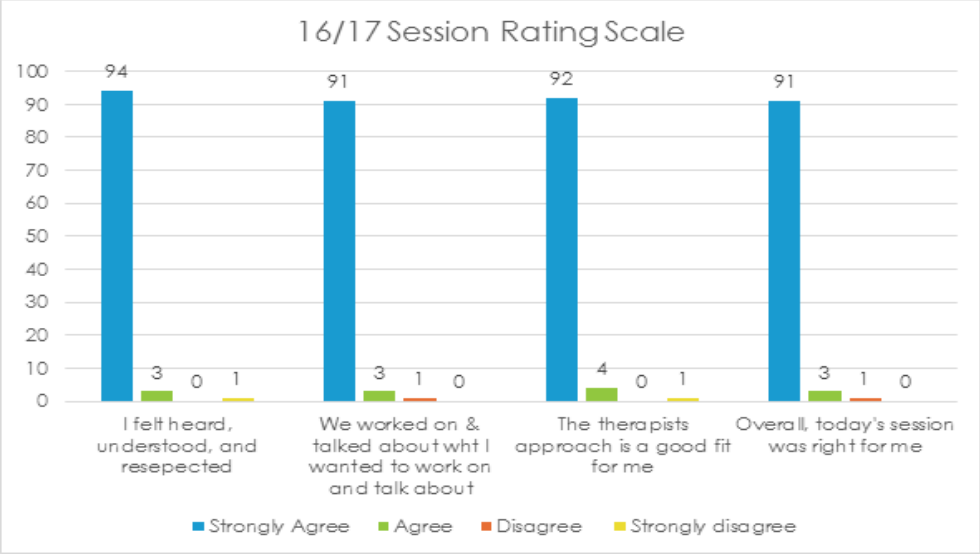
SAO: Students will learn about resources to improve wellness.

Goal: At least 80% of surveyed students will have learned about resources that contribute to their overall wellness. Our SAO goal for 2016-2017 was not met.

Students were asked about their knowledge of Health Services during the Health and Wellness Fair in October, 2016, with the question, "Apart from the Health Fair, Health Services offers what services?" With 59 responses, 61% of surveyed students were able to identify a service or resource offered through Health Services. Several students identified services that we often refer out for, like STI screenings and dental care; however, these direct services are not offered through Health Services.

SSLO #1: Students will understand the benefits of mental health services.

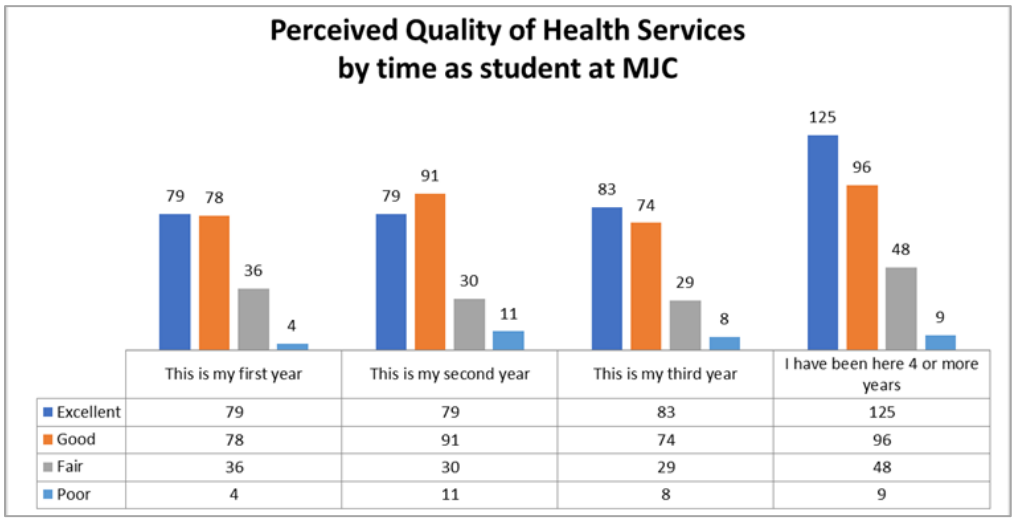
In the Spring of 2017, 271 students who were seen by the trainees and clinicians, were given a Session Rating Scale to measure the perception of the effectiveness of their therapy.



SSLO#2: Students using Health Services will be satisfied with the services received.

In Spring 2017, 1676 students were asked to complete a Student Experience Survey. 871 responded to the following prompt:

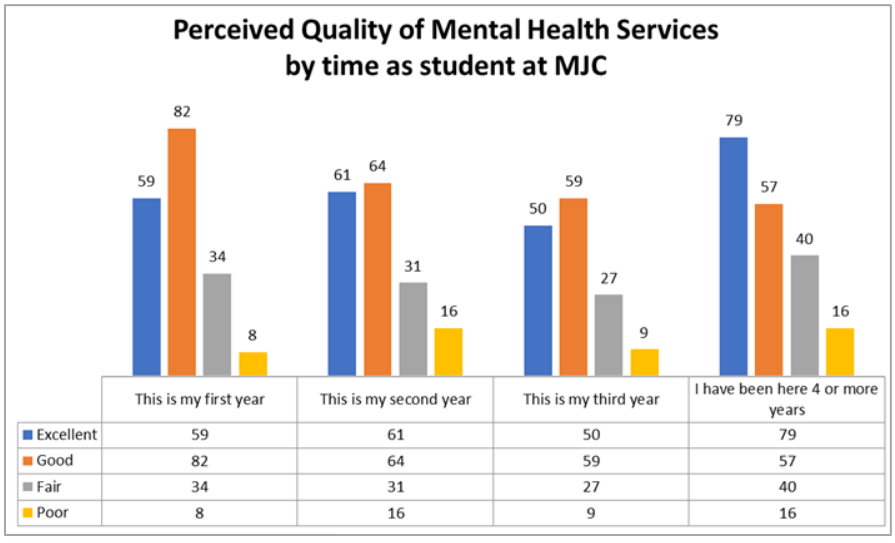
1. Please rate Health Services based on your experience using them or their overall importance to your educational success at MJC:



	This is my first year	This is my second year	This is my third year	I have been here 4 or more years
Excellent	79	79	83	125
Good	78	91	74	96
Fair	36	30	29	48
Poor	4	11	8	9

685 student's responses to the prompt:

2. Please rate Mental Health Services based on your experience using them or their overall importance to your educational success at MJC:



	This is my first year	This is my second year	This is my third year	I have been here 4 or more years
Excellent	59	61	50	79
Good	82	64	59	57
Fair	34	31	27	40
Poor	8	16	9	16

Of the students who have utilized Health Services, we are pleased that our services have proven valuable. However, of the 1676 students that received the survey, only 871 and 685 students responded to the health services and mental health services question respectively, leading us to believe that:

1. Students may not know about Health Services.
2. Students may not need Health Services, and are getting health needs met elsewhere.
3. Stigma prevents students from seeking services.
4. It is known that help-seeking behavior among students in the higher education setting nationwide is low, especially for students with mental health concerns and disorders.

Health Services is committed to providing quality services that enhance a students' educational experience at MJC. **Our students' belief in the value of our health/mental health services and their satisfaction with therapy, paired with their knowledge of our wellness resources strengthens our role in making a positive difference for our students.**

Institutional Learning Outcomes (ILO)

What is your set goal for ILO success? Do your overall rates meet this goal?

Health Services met its goal of SAO and SSLO alignment to the ILP - Personal and Professional Development. As students learn about wellness and its impact on their success at MJC, they develop skills for lifelong personal growth and success.

The Session Rating Scales and Student Experience Survey show that students believe that health and mental health services were high-quality and effective, which aligns with the department and institutional goals of promoting wellness campus wide.

Continuous Quality Improvement

If your rates for success for any SAOs or ILOs are lower than your goals, what are your plans to improve them?

Plan: Our SAO was not met. For future Fairs, we would like to increase the number of students that complete the survey. In our planning, we will consider placing surveys in various locations throughout the fair. We will also create attractive signage to draw attention to our raffle prizes, which serve as incentives for participation and completion of the surveys. We can provide information at the Fair that showcases Health Services and will consider having a separate table for students to visit.

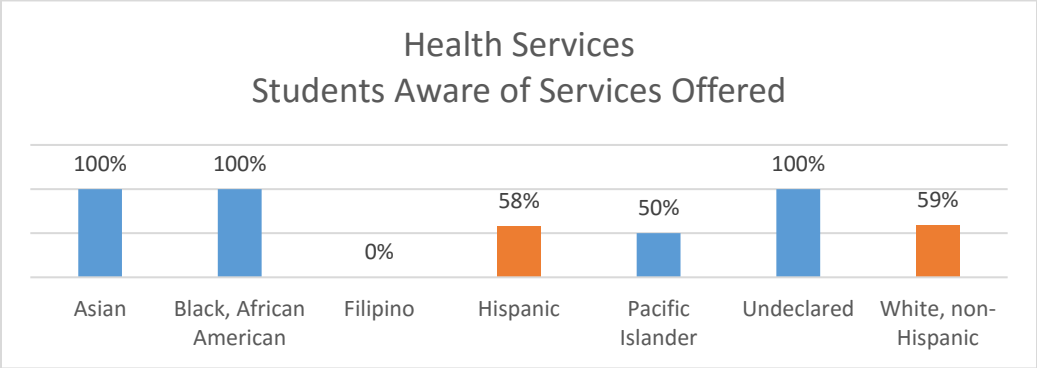
Overall, our charge must be to create and execute on-going campus-wide outreach activities that highlight health and wellness resources through:

- Utilization of Wellness on Wheels
- Continued participating in presentations/tables during campus events
- Providing resources at tables during first week of school
- Encourage Faculty/Staff to promote Health Services to students through: On-Boarding, Institute Day/Week
- Consideration of social media to connect with students on a large scale.

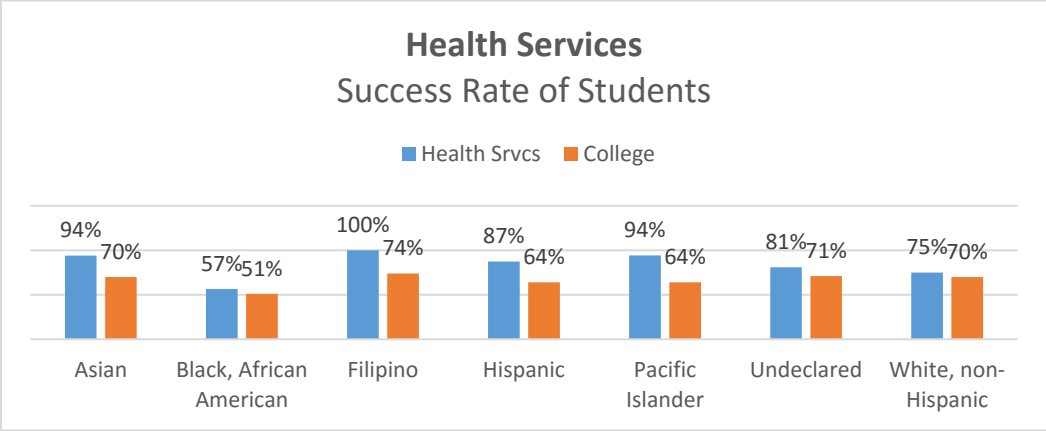
Equity and Success

Do your rates for your SAOs and ILOs vary across student populations? How you do you plan on addressing issues of equity? In other words, how do you plan on closing the learning gaps across student populations?

With such a small number of students surveyed (59), orange bars representing only 1-2 students, it is difficult to take away any meaningful information from this regarding equity.



Of the 59 students surveyed, below are the Course Success Rates by ethnicity:



Additional Support Service Area Program Data

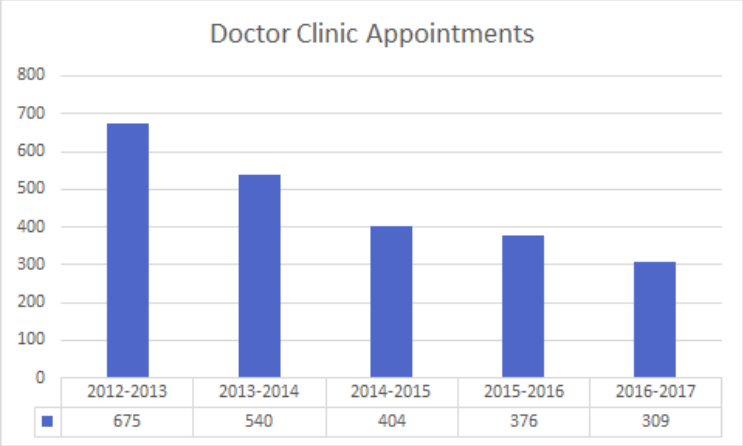
Additional Program Data

You may be asked to include additional data—or want to include additional data—regarding your service area. Please include your data below or attach it to your program review, set a goal regarding your data that would indicate success, and develop a plan for any improvements.

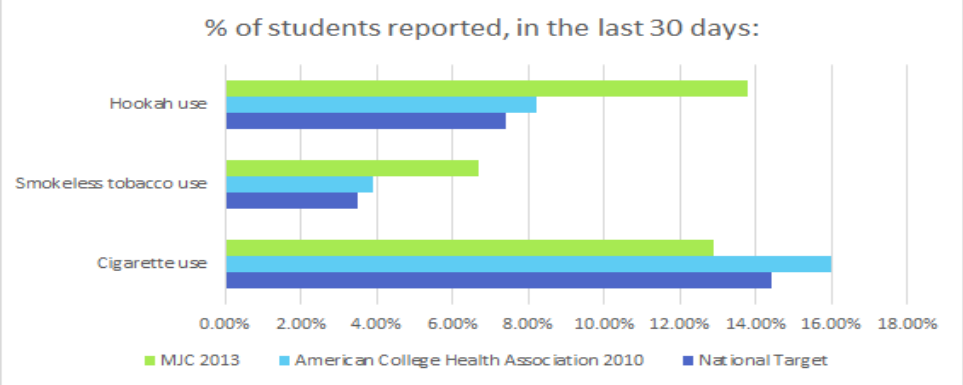
Additional Program Data

Please include your data in the box below or via an attachment. Write a brief description of the data, why it is important, and what it shows about your program. If you have different data sets, please identify and write about them separately.

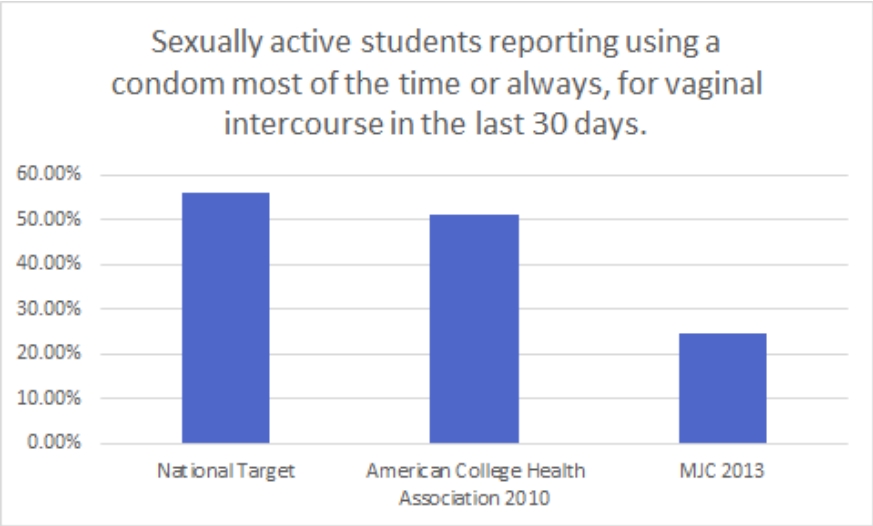
1. Medical residents from Valley Consortium for Medical Education partner with MJCHS for learning and training opportunities. With declining appointment numbers for Doctor Clinic, we risk having to minimize or close this service.



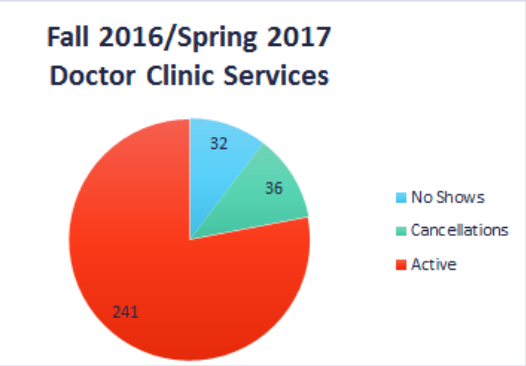
2. MJC tobacco-use behaviors (from 2013 survey of 853 students) indicate a higher use rate (hookah and smokeless tobacco) amongst MJC students vs. college students across the U.S. Large gaps also exist between national targets (Health Campus 2020) and MJC.

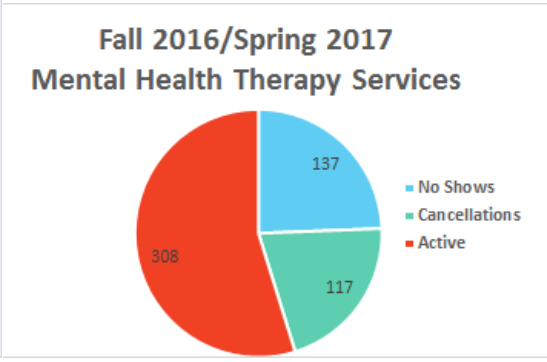


3. Low rates of condom use (from 2013 survey of 853 students) amongst MJC students vs. college students nationwide. Large gaps also exist between national targets (Health Campus 2020) and MJC.



4. Health Services experiences high no-show and cancellation rates for Doctor Clinic and mental health therapy services.





Analysis

Given the data you have provided, provide a set goal for success regarding the data, review your data, and provide a plan for improvement if needed. Also examine whether or not your data and rates vary across student populations. Discuss how you plan to address issues of success and equity.

1. Health Services staff must consider creative ways to improve campus outreach and advertisement of Doctor Clinic services, especially to our uninsured students. Goal: To increase Doctor Clinic appointments by 10% in 2017-2018.

2. Need to increase education on the harmful effects of hookah use and smokeless tobacco. Goal: Re-survey students in 2018-2019, reduce hookah and smokeless tobacco use by 10%.
3. Low rates of condom use necessitate conversations with students around pregnancy and STI prevention during nurse visits and within outreach efforts. Goal: Re-survey students in 2018-2019, improve condom use rate by 10%.
4. We anticipate a reduction of no-shows and cancellations with the addition of text-message reminders/confirmations, which will be implemented in Fall 2017. Goal: Rates will reduce by 20% in 2017-2018.

Program Analysis

Program Personnel

Please refer to the **Department Faculty and Sections Dashboard** to supply the names of faculty and adjuncts for the periods requested, and also supply the names of classified professionals and administrators in your area. Additional comments or narrative can be added below.

Classified Professional Name	Position Title: Full-Time or Part-Time	Hire Date (optional)
Araceli Baliel	Full-Time	09/30/2002 / 01/16/2007
Lidia Gaines	Part-Time	2/17/2015*
Chandni Gulati	Full-Time	11/16/2016
Annastasia Molina	Full-Time	10/14/2010
Noel Moreno	Full-Time	06/09/16
Valerie Parker	Full-Time	06/05/06
Derek Waring	Part-Time	07/01/2010

Administrator Name	Position Title: Full-Time or Part-Time	Hire Date (optional)
Amy Yribarren	Full-Time	
Lonita Cordova	Part-Time (50%)	09/15/2016

Additional Notes regarding personnel

*8 month, 49.5% employee

Long Term Planning and Resource Needs

Long Term Planning

Provide any additional information that hasn't been addressed elsewhere in this program review, such as environmental scans for opportunities or threats to your program, or an analysis of important subgroups of the college population you serve.

View the **Program Review Instructions** page for reference and inspiration.

Taking into account the trends within this program and the college, describe what you realistically believe your program will look like in three to five years, including such things as staffing, facilities, enrollments, breadth and locations of offerings, etc.

Health Services will continue to augment services provided to students with student success and retention as our focus. Advocating for and securing alternative revenue streams will remain a priority. If staffing and budget fluctuations stabilize, we will increase services in order to meet the growing and diverse needs of MJC students.

Opportunities:

1. If equipment requests are granted, we can implement efficient online survey questions via iPads that will help us explore the relationship between health/wellness and academic success and retention. We hope to add demographic information to our intake process, such as sexuality, gender, and ethnicity to better understand our student population. Additionally, improving our mental health data will help us understand specifically why students are seen and who is referring them.
2. PCC trainee interest continues to grow and thrive, and supports our ability to meet therapy demands in a cost-effective way. This program will remain in place with continued oversight. Additional interns may be hired if demands continue to increase.
3. Health and Wellness Center will be open for students as a sanctuary for wellness information and connection to vital social services.

Threats:

1. Budget: Long-range plans depend heavily on our ability to stabilize the MJCHS budget. We currently lack the capacity to expand services with our current staffing and revenue. The MJCHS reserve fund is diminishing annually. Efforts are underway to increase the health fee as well as find alternative sources of funding.

2. Staffing: Without an additional nurse, Health Services risks clinic closures, and possibly having to operate from one campus in order to serve students adequately and safely.

3. Health and Wellness Center support: Several community agencies have expressed interest in offering services to students within the Health and Wellness Center, however, without

adequate administrative support, it will be challenging to consistently maintain and manage outside service providers.

4. Doctor Clinic: Numbers are on the decline. Strategies for increasing numbers must be implemented.

Resource Request and Action Plan Planning and Resource Needs

Resource Request and Action Plan

Resource Requests:

Priority	Name	Resource Type	Budget Object Code	Estimated Cost	Objective
1	Senior Nurse FT, 12 month	Personnel, Step I	Classified Staff	$110,000	To minimize clinic closures during absences; To avoid nurses having to cover clinic alone; To minimize wait periods for services; To expand services, specifically outreach and campus engagement
2	Administrative Assistant FT, 12 mo	Personnel	Classified Staff	$67,000	To provide full-time support in Health and Wellness Center for activities and services providers.
3	Furniture and Equipment (chairs, tables, monitor, shelves, displays)	Equipment	Equipment <$5,000 or Equipment >$10,000	$30,000	To furnish Wellness Center. As is, it is an empty space.
4	Adjunct Counselor PT, 12 mo	Personnel	Non-Instruct-Reg	$30,000	To provide therapy and case management
5	Pyramed Software	Equipment	Equipment <$5,000		Self-Check-in software
6	iPads	Equipment	Equipment <$5,000	$2,000	To enhance data collection; To improve efficiency and speed at check-in.

Appendix

Optional Questions

Please consider providing answers to the following questions. While these are optional, they provide crucial information about your equity efforts, training, classified professional support, and recruitment.

Is there a need for more classified professional support in your area, please describe this need. Indicate how it would support the college mission and college goals for success, and completion.

> Yes, there is a need for professional development for Classified Professionals within Health Services.
>
> For registered nurses who need to maintain Continuing Education Units (CEU) as a requirement of licensure, time and funding for those activities could be granted. Several opportunities for CEUs exist in the realm of college health, which would advance and reinforce the skills of our nurses in our unique setting. With nursing practice constantly changing, learning and skill development based on current research is a necessary component of quality and safe nursing practice. Administrative support staff could benefit from cross training from other seasoned Classified Professionals. On-going skill development (especially for new staff) is needed around budget, travel requests, P.O. process, Datatel and other software platforms, developing Power Point presentations, data collection, etc.
>
> Being chronically short-staffed within Health Services makes time allocation for professional development challenging.

What factors serve as barriers to recruiting active faculty/staff to your program(s)?

> It has been challenging to fill registered nurse positions for Health Services. With average RN salaries in the Modesto area being approximately $100,000/year, it is difficult to compete.
>
> Source: Glassdoor.com
> https://www.glassdoor.com/Salaries/modesto-registered-nurse-salary-SRCH_IL.0,7_IM573_KO8,24.htm

Executive Summary

Summary

Provide an executive summary of the findings of this program review. Your audience will be your Division Program Review Group, the MJC Program Review Workgroup, and the various councils of MJC.

MJC Health Services has made substantial growth over the last year, using significant time and resources ensuring that students are connected to services, especially mental health therapy. The data in this program review supports the increased need of mental and physical health within the MJC community and exposes the need for more resources to be targeted within MJCHS.