



Council for the  
Advancement of  
Standards in Higher Education

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Higher Education

## **Clinical Health Services**

### **Final Report**

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**CAS Program Review and Self-Assessment  
Final Report**

## **Executive Summary of Review Process**

On November 5, 2020 the Self-Assessment process developed by the Council for the Advancement of Standards in Higher Education (CAS) organization was introduced to the Student Services Planning and Budget Team (SSPBT). Subsequent to the November 5<sup>th</sup> meeting, SSPBT approved the CAS standards for use as a replacement of the previous comprehensive program review. The CAS self-assessment guides (SAG) were chosen by each team leader as the appropriate tool to assess the programs /function within each department. The SAG consists of standards and guidelines used to evaluate the strengths and deficiencies of each Program and to plan for improvement opportunities within the De Anza College Student Services Division.

The CAS Standards and Guidelines consist of twelve Parts used for the review of each program/service area:

- Part 1: Mission
- Part 2: Program and Services
- Part 3: Student Learning, Development, and Success
- Part 4: Assessment
- Part 5: Access, Equity, Diversity, and Inclusion
- Part 6: Leadership, Management, and Supervision
- Part 7: Human Resources
- Part 8: Collaboration and Communication
- Part 9: Ethics, Law and Policy
- Part 10: Financial Resources
- Part 11: Technology
- Part 12: Facilities and Infrastructure

The review team for De Anza Student Health Services consisted of the following members. Members were recommended by the Student Development office.

<b>Team Member Name</b>	<b>Team Member Title</b>
Rosafel A. Nogra, DNP, FNP-C	Clinic Director
Erika Martinez-Meraz, FNP-C	Nurse Practitioner
Tara Chan, MA	Health Services Assistant
Rosa Ann Fragoza	Admin Asst.

All CAS review team members were given training for the CAS review and provided with an Office365 Folder consisting of the following:

- A list of recommended documents to be gathered as evidence as a part of the self-assessment process.
- An electronic folder containing subfolders for storing evidence for each of the twelve parts.
- A copy of the Self-Assessment Guides (SAG) for the program/service area being assessed.
- A copy of the functional area guide which clearly outlines the components for each part of the standards.

During the team meetings, the CAS Committee team organized discussion around pre-identified rating discrepancies, open-ended questions as evidenced at the end of each section, and any other issues the Committee felt needed further discussion. Strengths, opportunities for growth, and action steps were also identified at each meeting for each section.

The following rating scale was used during the assessment.

## **CAS Raters Definitions**

- DNA - Does not apply
- IE – Insufficient Evidence/Unable to rate
- 0 – Does not meet
- 1 - Partially Met
- 2 - Meets
- 3 - Exceeds

## **Summary of Initial Findings**

### ***Conclusions:***

The De Anza Student Health Services is a coordinated system that represents a model of primary care that responds to the unique physical and mental health issues of students by offering care in an accessible, trusting environment. We serve campus wide students from various programs who are currently enrolled and paid their student health fee. The integration of physical health, wellness programs, and mental health services enabled students to seek and receive a wider variety of on-site health care services. The staff's commitment to screen and refer our students to all available services ensured that students' diverse health care needs were met. For students who might initially have come for a first-aid visit, student health services staff had the opportunity to actively engage and encourage them to return for subsequent medical, mental health, or wellness/preventive visits.

In reviewing the 2018 to 2020 program review, the student health services program has implemented significant changes in terms of medical record system, staffing, and facility needs for regulatory compliance. Major areas that positively impacted the clinic operations are the implementation of electronic medical record system, Pyramed, which played a major role in COVID-19 vaccine and testing compliance for Foothill-De Anza Colleges, and district employees; renovation of the wellness office to the new front office waiting room area; additional staffing for medical assistant position and hiring full time nurse practitioner and two TEA administrative assistant to assist with COVID-19 response team and vaccine compliance; and telehealth services. Additionally, the student health services team have taken the lead in responding to COVID-19 vaccine compliance, testing, and contact tracing cases.

### ***Meaningful limitations to completion of the program review:***

While major changes at the student health services program have been implemented at the beginning of 2020, short on staffing have impacted some areas in our program for a few years. Prior to the pandemic event, the student health services already have challenges hiring a clinic director, full-time nurse practitioner, and clinic nurse. To fill these positions, and to accommodate the demands of the needed services, the clinic relies on TEAs and contracted vendor to supplement the nurse practitioner position and supervising physician. Without consistent, permanent staffing, it is incredibly challenging to meet the student health services program review goals and mission.

With the hiring of the clinic director in April of 2019, priorities have been set to fill the needed positions at the clinic. One of the priorities is to hire a direct contracted supervising physician to oversee the regulatory license and nurse practitioner providers, followed by re-organization of the clinical staffing to accommodate the needed support and services. The staffing priorities are to hire a full-time nurse practitioner, medical assistant, and clinic nurse. At the beginning of the year 2020, we were successful in hiring the two full-time positions of clinic nurse and medical assistant. However, the student health services have lost three TEA staff (PT clinic nurse and nurse practitioners), and the full-time administrative assistant at the beginning of pandemic in year 2020. This event was followed when the student health services health education and wellness coordinator retired winter of 2022 and full-time clinic nurse resigned during the summer of 2022.

At the beginning of fall quarter 2022, a full-time nurse practitioner was finally hired, and the full-time administrative assistant was filled. Since then, the health services team have been under staff with total of 4 full time employees: clinic director who's also functioning as a nurse practitioner provider and health educator; nurse practitioner, medical assistant, and administrative assistant I.

## **Summaries**

The following pages represent the Review Committee's collective responses and serves as the initial report.

### **Overall Section Average Scores**

#### **Section 1: Mission (2)**

#### **Section 2: Program and Services (2)**

#### **Section 3: Student Learning, Development, and Success (1)**

**Section 4: Assessment (2)**

**Section 5: Access, Equity, Diversity, and Inclusion (1)**

**Section 6: Leadership, Management, and Supervision (2)**

**Section 7: Human Resources (1)**

**Section 8: Collaboration and Communication (2)**

**Section 9: Ethics, Law and Policy (2)**

**Section 10: Financial Resources (2)**

**Section 11: Technology (2)**

**Section 12: Facilities and Infrastructure (1)**

**Section 1: Mission**

**CAS Section 1 Purpose Summary**

The mission of De Anza College Student Health Services is to facilitate and enhance the educational success of our students by integrating high-quality, affordable health services including health education, disease management and community resources to the promotion of their physical, social, and emotional well-being.

**Section 1 Committee Summary – Average rating (2)**

The De Anza Student Health Services represents a model of care that responds to the unique physical and mental health issues of students by offering care in an accessible, trusting environment. We serve campus wide students from various programs who are currently enrolled and registered as a student and paid their student health fee. The integration of physical health, wellness programs, and mental health services enabled students to seek and receive a wider variety of on-site services. The staff's commitment to screen and refer students to available services ensures that the student needs are met.

To measure the quality and effectiveness of services delivered to our students including mental health and wellness programs, the student health services used the American College Health Association-National College Health Assessment II (ACHA-NCHA) surveys, The Healthy Minds Study, and the National Accreditation for Ambulatory Health Care (AAAHHC) guidelines. The data provides a means for a health facility to integrate, monitor and improve the quality of health services on our campus.

The student health services support the student learning and development by an on-going review of the SSLO which aligns with the institutional core competencies. The student health clinical services team works to meet the identified SSLOs by reviewing the current practice guidelines using evidence-based recommendations and data collection from accredited sources.

**1. How does the mission embrace student learning and development?**

The student health services' mission ensures students have equitable access to the services provided. Continued collaboration from a multidisciplinary program, such as ISP program, Campus Security, Nursing and Allied Health program, Student Government, Campus Facilities, etc. are absolute essential in student learning and academic success. A multidisciplinary approach provides opportunities to support student's physical, mental, social, and environmental needs. These include development of screening programs for mental health and chronic diseases; promote health behaviors including tobaccos cessation and substance use education; injury prevention and emergency preparedness campaigns; and building partnership within the community.

**2. In what ways does the CHS mission complement the mission of the institution?**

Health and wellness are fundamental to student success. The student health services align it's mission to the institution

mission statement and core competencies by providing health and wellness services, education, and prevention designed to ensure student success and academic progression. The student health services educate students individually as well as collectively on health promotion and wellness to enhance the success of the student and community alike.

### **3. To what extent is the mission used to guide practice?**

The student health services mission guides its practice by encouraging students to be an active participant of their own health. Patient-centered care has been found to correlate with the student's ability to undertake personal health maintenance from physical and emotional health to the ability to manage their own care and improve their decision-making ability.

## **Achievements**

- On-going participation with the American College Health Association-National College Health Assessment II (ACHA-NCHA) surveys and The Healthy Minds Study. The NCHA survey conducted in 2018 has 555 respondents; and data have identified factors that impacted the student's academic performance. The Healthy Minds Study conducted in 2019 has 743 respondents and identified key findings that measure a student's mental health status and service utilization. By analyzing the trends in these data, the student health services team were able to develop and implement wellness programs and health promotion strategies to address these barriers and were given financial opportunity from Santa Clara Behavioral Health to raise awareness regarding substance use.
- Established a full collaborative support with ISP vaccine health requirement programs, and COVID-19 screenings for students in athletic programs, and COVID-19 vaccine requirements for district employees and FH students.
- Successfully maintains clinical license certification from California Department of Public Health.
- Successfully implemented Pyramed Electronic Medical Record system to comply with HIPAA Privacy Law in 2020 remotely for both student health and mental health services, District HR, and Foothill Student Health Services.

## **Opportunities for Growth**

- Increase utilization of student health services, with focus on domestic students currently enrolled at De Anza College.
- Working closely with De Anza Student Government and other program entities with wellness and outreach events to increase students' participation.
- Mission is visible in outreach events, high traffic areas in clinic and publications offered to students.

## **Action Steps**

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## **Section 2: Program and Services**

### **CAS Section 2 Purpose Summary**

*Clinical Health Services (CHS) must be guided by a set of written goals and objectives that are directly related to the stated mission. The CHS goals must be aligned with institutional priorities and expectations of the functional area. CHS must regularly develop, review, evaluate, and revise its goals. CHS must communicate goals and progress toward achievement to appropriate constituents. CHS must advocate for inclusive and equal access to resources and services, eliminate health disparities, and achieve health equity.*

### **Section 2 Committee Summary – Average rating (2)**

The student health services offer clinical services and health promotion and wellness programs. Our program strives to provide prompt and efficient medical services and promote awareness of the basic components of good physical and emotional health. All current registered students can access the student health services regardless of medical insurance coverage and the number of credits

student takes per quarter. The goal is to lessen the disruption of student studies by illness while enhancing their emotional well-being. The student health services team strives to promote healthy behaviors and lifestyle choices through ongoing education and outreach programs.

Our license providers (i.e., supervising physician, nurse practitioners, RN, and health educators) are trained in evaluating clinical interventions by advocating for students, providing education, and supporting students in their ability to self-manage their health. They use the social determinants of health to take into consideration the external factors that affect the student's health. These external factors include elevated levels of stress related to changes in lifestyle, school workload, access to food, responsibilities, and interpersonal relationships. It is critical that our providers understand who the student is and what external factors may impact their medical care.

The student health services work very closely with different programs and disciplines on campus including student leaders. Fostering collaboration provides opportunities for student health services to promote and facilitate discussion regarding policy review and planning; counseling and advising, and shared decision making. In addition, the student health services have built a collaborative partnership and referral network from a variety of stakeholders. These include Santa Clara Department of Public Health and the office of Behavioral Health Agency, Tobacco Youth Advocacy Network on Tobacco Use, Stanford Blood Center, California Immunization Registry, and other low-cost community clinics and mental health providers for continuity of care. The key strategies to integrate a successful health promotion and wellness program is through effective communications (i.e., social marketing, and outreach); health education activities; and through system and policy change (interventions, models, and campaigns).

The Clinic Director within the De Anza College institution ensures that continued engagement and collaboration from different disciplines are done. This includes coordinating and communicating the covered scope of services, health education resources, providing information to all departments across the campus community in terms public health outbreaks; direct the development and implementation of student health services projects, strategies, policies, procedures, goals, and objectives in meeting the current and future student health needs.

The student health services mission is to ensure that accessible to affordable health care is available to all current students. This is a crucial factor for students to stay healthy and engaged. To measure that accessibility of resources available to our students, data from the American College Health Association-National College Health Assessment II (ACHA-NCHA) surveys, The Healthy Minds Study, and the National Accreditation for Ambulatory Health Care (AAAHC) guidelines serves as an essential means in identifying the health and health-related behaviors among college students. The data also allows us to integrate, monitor and improve the quality of health services we provide on our campus.

### **1. What are the goals and objectives of CHS?**

The goals and objectives of the student health services are guided by the De Anza Institutional Core Competencies, the eight core standards from Accreditation Association for Ambulatory Health Care (AAAHC); and the core values of the American College Health Association (ACHA). AAAHC Accreditation provides ambulatory health care facilities with relevant standards and education for improvement of patient care environment. ACHA focus on promoting healthy campus communities and healthy individuals as integral to student learning.

#### **Goals:**

1. To execute the culture of safety and prioritizing safety measures at the health services in meeting the core standards of AAAHC and ACHA.
2. To structure a patient care delivery model specific for student health services in compliance with state regulated license and practices.
3. To continue establishing health and wellness quality improvement initiatives and activities focusing on preventive health.

#### **Objectives:**

- Maintain the standards of clinical practice within the AAAHC guidelines for primary care services for current registered students.

- Deliver cost effective clinical services, including laboratory, pharmacy, and referral specialty clinics and mental health support.
- Provide outreach activities on health related and prevention topics, in collaboration with other campus departments.
- Deliver care in an appropriate cultural context without bias regarding race, ethnicity, nationality, sexual orientation, age, religion, or gender.
- Offer opportunities for training to appropriate students pursuing careers in health fields, and a clinical site for advance practice nurse practitioners.
- Monitor, advise, and respond to trends in local and worldwide public health issues that may affect the campus community.

## **2. To what extent does the CHS structure allow it to be effective?**

The student health services structure is supervised by the Dean of Student Development and EOPS. The Clinic Director oversees the day-to-day operations, programs of the student health service, and collaborates with the clinical decision and patient care management with the supervising license physician. The student health fee provides the full funding of the health services. The health fee established by the State is a fee to cover the costs of health supervision and services, and the operation of a student health center. All current registered students who paid the student health fee are eligible to access the student health services including programs that promote health and wellness, and mental health services.

## **3. What are the key programs, services, and resources offered by CHS?**

The key programs offered by the student health services include clinical services including primary care visits, mental health support and health promotion and wellness programs. Clinical services include but not limited to managing episodic illness, women's health services including cervical cancer screening test (Pap smear), birth control management and emergency contraception and pregnancy test; routine blood work; immunization screening and testing; physical examination clearance for transfer, allied health, and childcare center; referrals in specialty clinics. Health Promotion programs include services such as outreach events and fairs; webinars and workshops; participating in campus events- club days, college days, etc.; and collaborate with interdisciplinary partners including students, faculty, staff, administrators, community partners (outside agencies and stakeholders).

## **4. How does CHS contribute to the student experience?**

The student's physical health is vital for academic success. The health services strive to provide multifaceted professional, high quality, medical care for the treatment of student illnesses and injuries. The student health services support students by staying up to date on the most pressing public health issues (i.e., COVID-19, TB, influenza, etc.) and offer expertise in areas of health education and wellness.

## **Achievements**

- The student health services continuously provide immediate medical care on campus and respond to emergency first aid care for minor injuries or accidents.
- During pandemic, the student health services have established contract for COVID-19 PCR testing and provided antigen home test kits for current students and employees free of charge. Collaborative effort was also established with Life Plus Pharmacy to provide COVID-19 vaccine on campus.
- Implementation of telehealth appointments particularly during COVID-19 pandemic event.
- Established collaborative relationship from Santa Clara Dept of Public Health regarding communicable disease protocols (i.e., STDs, TB, Influenza and COVID-19 infections).

## **Opportunities for Growth**

- Ensure that students have access to services by securing necessary resources and funding for services.
- Prioritize health education and prevention services.

## Action Steps

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

### **Section 3: Student Learning, Development, and Success**

#### **CAS Section 3 Purpose Summary**

*Clinical Health Services (CHS) must contribute to students' formal education, which includes both curricular and co-curricular experiences. CHS must contribute to students' progression and timely completion of educational goals. CHS must help students and designated clients prepare for their careers and meaningful contributions to society. CHS must work with the institution to identify relevant and desirable student success outcomes. CHS must identify relevant and desirable student learning and development outcomes. CHS must implement strategies and tactics to achieve these outcomes.*

#### **Section 3 Committee Summary – Average rating (1.5)**

To accomplish the student health services mission, our student learning and development outcomes are closely aligning with the De Anza College Institutional Core Competencies: 1) Communication and Expression, 2) Information Literacy, 3) Physical/Mental Wellness and Personal Responsibility, 4) Global, Cultural, Social and Environmental Awareness, and 5) Critical Thinking.

The Student Health Services have identified the following SSLO statements to guide our program services for clinical and wellness programs.

1. Students will be able to express positive attitudes regarding their service encounters at the Health Services that will lead them with perceptions of positive customer service experiences.
2. Students will be able to articulate health-related services and resources (on and off campus) available to them.
3. Students will demonstrate an increased understanding of their health condition, including one's own medical diagnosis and treatment plan.
4. Students will demonstrate skills in accessing and utilizing Pyramed Student Health Portal Apps and Kiosk, including TimelyCare, and eCheckup To Go.
5. Students on ISP Holds will be able to understand the reason of their academic holds and demonstrate ways to get out of holds by complying on time with their TB and MMR vaccine health requirements.

To achieve the stated SSLO, restructuring and redesigning the health services program, including health promotion and wellness, have taken place to effectively meet the clinic's needs. Redesigning and restructuring involve making systematic changes to clinical practices to improve the quality, efficiency, and effectiveness of patient care. This includes adopting strategies for transforming clinical practice to improve quality of care, reduce costs, and better satisfy the needs of the students; incorporating preventive services and self-care management; empowering staff to suggest and help implement effective changes; and develop leadership for change and ongoing clinical quality improvement.

The student health services program review is transitioning with the CAS learning outcome model. This item is partly met since transitioning to this model is taking place at this current time. However, the program review model was utilized in the past to evaluate the status, effectiveness, and progress of student health services program and helps identify the future direction, needs, and priorities of this program.

To continuously improve the student support programs delivered by the student health services, we conducted the American College Health Association-National College Health Assessment II (ACHA-NCHA) surveys in 2018 and The Healthy Minds Study in 2018-2019. The data analysis guided the student health services in identifying factors impacting the student's academic performance.



## Survey Analysis and Evaluation

Data analysis of the 2018 ACHA-NCHA survey at De Anza College consists of 555 respondents. The data provides a comprehensive set on the health of college students by assessing their general health; disease and injury prevention; academic impacts; violence, abusive relationship, and personal safety; tobacco, alcohol, and marijuana use; sexual behavior; nutrition and exercise; mental health and sleep.

The most significant data highlighted in this survey focused on academic impacts and its subgroup factors affecting the student's academic performance.

Within the last 12 months the following 10 factors were identified as disruption in the student's course work including receiving low grade on an exam or course:

1. Stress 36.6%
2. Anxiety 27.7%
3. Depression 24%
4. Sleep difficulties 23.8%
5. Work 1.3%
6. Internet use/computer games 15.3%
7. Cold/Flu/Sore Throat 14.3%
8. Concern for a troubled friend or family member 13.9%
9. Finances 12.1%
10. Relationship difficulties 8.3%

With the Healthy Minds Study, there were 743 respondents. The key findings of this study focused on mental health measures; self-injury and suicide; diagnoses of mental health disorders; health behaviors and lifestyle; and help-seeking. Data have reported that 37% of students surveyed have mental health disorders, 44% have depression and 19% experienced anxiety disorders with 18% seriously thought about attempting suicide in the past year. The data also provided descriptive statistics of students experiencing chronic disease, such as asthma (13%) and high blood pressure (5%); and substance use and abuse including the use of marijuana (19%), cocaine and LSD (2%). Vaping (10%) and alcohol use (18%) were also measured in this study.

### 1. What is the most significant student learning, development, and success outcome of CHS?

The most significant student learning, development, and success outcomes of the student health services programs are identifying all the relevant SSLOs and aligning it to the institutional core competencies. Strategies were also identified to assess these outcomes, which include evidence-based gathering and restructuring and redesigning the clinical and wellness programs.

### 2. What is the demonstrated impact of CHS on student learning, development, and success?

The data analysis reported from 2018 ACHA-NCHA health assessment survey and The Healthy Minds Study in 2018-2019, highlighted areas that impacted the student health services learning, development, and success. The ACHA-NCHA report provided a comprehensive set on the health of college students by assessing their general health; disease and injury prevention; academic impacts; violence, abusive relationship, and personal safety; tobacco, alcohol, and marijuana use; sexual behavior; nutrition and exercise; mental health and sleep. The Health Minds Study focused on mental health measures; self-injury and suicide; diagnoses of mental health disorders; health behaviors and lifestyle; and help-seeking. By analyzing the trends in these data, the student health services team were able to develop and implement wellness programs and health promotion strategies to address these barriers and were given financial opportunity from Santa Clara Behavioral Health to raise awareness regarding substance use.

## Achievements

- Data analysis from ACHA-NCHA and Healthy Minds Survey guided the student health services program to identify risk factors impacting the student's academic performance.
- Redesigning and restructuring the student health services programs helps improve our operational procedures and workflow processes of the clinic's daily operations. Our team can set priorities and organize their involvement within their expertise and responsibilities.

## Opportunities for Growth

- Executing the stated SSLOs by selecting the priorities for assessment and developing assessment methods and metrics for each SSLO.
- While risk factors have been identified from ACHA-NCHA findings that impact the student's academic performance, delivering health education awareness to address these factors are the primary priorities for the upcoming academic year. Health education awareness includes implementing digital health promotion resources (i.e., E-Checkup to Go), programs and strategies tailored to address the needs of the students. Prioritizing the hiring of Health Educator to implement this such programs.

## Action Steps

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## Section 4: Assessment

### CAS Section 4 Purpose Summary

*Clinical Health Services (CHS) must develop assessment plans and processes that document progress toward achievement of mission, goals, outcomes, and objectives. CHS must design assessment plans that incorporate an ongoing cycle of assessment activities. CHS must have fiscal, human, professional development, and technological resources to develop and implement assessment plans.*

### Section 4 Committee Summary – Average rating (2)

The student health services have available resources to meet the stated mission, goals, and objectives. These resources include the implementation of electronic medical record system (Pyramed) as one of the technological resources for HIPAA and immunization compliance including COVID-19 vaccine and test result submission; on-going professional development training for staff in terms of patient care improvement, safety, and compliance; and mandatory student health fee funds as part of the fiscal resources.

The student health services consistently collaborate with members of the campus interdisciplinary teams. It provides opportunities for students to explore and access all the available resources and activities on campus. The student health services team works closely with different disciplines on campus to ensure that the following activities and programs are met - screening programs to promote healthy behaviors; illness and injury prevention activities; emergency preparedness and pandemic planning; wellness campaigns and outreach health events; sexual assault awareness and mental health support; and promoting self-care.

The student health services program navigates all various approaches to address the health needs of our students that is culturally responsive, inclusive, and equitable. These approaches are achieved in several ways: utilizing diverse health education materials using a wide range of names, genders, cultures, and beliefs; being inclusive during patient visit which presents us with more opportunities to allow students to share their differences and cultural consideration in managing their disease; and providing accommodations in caring those students with disabilities and difficulties.

To measure the progress and improvement of the stated goals, multiple sources were utilized. Data analysis from ACHA-NCHA survey and The Healthy Minds Survey provides relevant data about the students' health habits, behaviors and perceptions that could help enhance campuswide health promotion and prevention services.

ACHA-NCHA and The Healthy Minds survey represent the sample of De Anza College campus students. The analyses for both methods employed different national databases, covered different approaches, and utilized different statistical procedures. Both are reliable and valid, and of empirical value for representing the students.

The survey data were thoroughly reviewed by the Clinic Director, Dean of Student Development and EOPS, and V.P Student Services. The reports were used to strengthen grant application, advocates for mental health services, and health promotion and wellness programs on campus.

**1. What is the comprehensive assessment strategy for CHS?**

The comprehensive assessment strategy identified for student health services program includes method of gathering evidence to enhance campus wide health promotion and prevention services; to ensure that the student health services SSLOs aligns with institutional core competencies; restructuring the clinical services program and wellness to best suit the needs of the students which include staffing structure, education and trainings; updating the clinic protocols; compliance with regulatory state license; and seeking funding opportunities and sources.

**2. What are priorities for assessment of CHS and how are those developed?**

The priority for student health services program assessment is ensuring students have access to health and mental health care on campus. Evidence shows that students who face health access barriers and have disparate health outcomes are more likely to miss school, are more likely to be suspended or dropped, and have lower GPAs and test-score outcomes. However, providing access to health care directly on campus has been shown to mitigate some of these impacts. Building awareness, increasing visibility on campus, and helping students overcome the barriers to access care are some ways of the ways to meet this priority.

**3. How are tangible, measurable learning, development, success, and program outcomes determined to ensure achievement of mission and goals?**

The student health services program outcomes and measurable goals are specific and feasible in achieving the program mission. Goals are measured through identification of health screening risk assessment with use of health questionnaires and surveys; developing health education materials based on the student needs; outreach events for health promotion activities; collaborating with key stakeholders and the communities; and professional development and training opportunities staff in meeting and complying with state regulated requirements.

**4. How does CHS use assessment results inform improvement? What changes, adjustments, or improvements have been made as a result of assessment activities?**

Based on the previous program review year 2018 to 2020, improvements and changes have been made by the following activities: implementation of EMR Pyramed system; front office space and waiting room area to comply with the health and safety CA Code on Notice of Privacy Practices (HIPPA Privacy Rule); and meeting the following staffing needs: Clinic Director (1.0 FTE); Nurse Practitioner (1.0 FTE); Health/Medical assistant (1.0 FTE) and contracted Supervising Physician (0.4 FTE).

**5. How does CHS share assessment results with relevant constituencies?**

Results will be evaluated and shared among members of student health services personnel and Dean of Student Development and EOPS to what has been successful and what areas need to be improved.

**6. How does CHS support ongoing development of assessment competencies for personnel?**

Clinical staff competencies is critical for on-going program development. Clinical competency training management tools are utilized to support this assessment. These trainings include HIPAA and FERPA compliance, Blood borne pathogen training, Cal OSHA Respiratory Protection training, Immunization Update, Cyber Security Awareness, and Basic Life Support Certification and AED.

**Achievements**

- Implementation of EMR Pyramed system; conversion of health educator office to front office space and waiting room area to comply with the health and safety CA Code on Notice of Privacy Practices (HIPPA Privacy Rule); and filling the full-time nurse practitioner and medical assistant positions and contracted supervising physician position.
- Complying with state regulated requirements including clinical competency training for staff development.

**Opportunities for Growth**

- Develop assessment plan towards achieving Student Health Services mission and goals. The plan should include measurable goals objectives, activities, data collection methods, metrics and timelines.

## Action Steps

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

### **Section 5: Access, Equity, Diversity, and Inclusion**

#### **CAS Section 5 Purpose Summary**

*Within the context of each institution's mission and in accordance with institutional policies and applicable codes and laws, Clinical Health Services (CHS) must create and maintain educational and work environments for students, faculty, staff, administrators, designated clients, and other constituents that are welcoming, accessible, inclusive, equitable, and free from bias or harassment. CHS must not discriminate on the basis of race; color; national origin; sex; disability; age; cultural identity; ethnicity; nationality; citizenship; family educational history (e.g., first generation to attend college); political affiliation; religious affiliation; sexual orientation; gender identity and expression; marital, family, social, economic, place of residence, or veteran status; or any other basis included in codes, laws, and institutional policies.*

#### **Section 5 Committee Summary – Average rating (1.5)**

The student health services is designed to serve campus wide students from various programs who are currently enrolled and paid their student health fee. This ensures that all currently enrolled students have equal access to quality healthcare in our campus. The student health center is committed to delivering exceptional care to students by providing integrated and comprehensive support services to our ethnically diverse community. We believe fostering inclusive environments will help reduce disparities in care and improve quality care for all.

Our services have established hours of operation for delivering programs, services, and resources to our current registered students. Virtual appointments (telehealth visits) are now available as an option for delivering services to students online. TimelyCare was implemented Fall Quarter 2022 to deliver mental health services 24/7 to all registered students with additional resources for employee assistance webpage regarding counseling resources and basic needs.

Programs and training opportunities are currently being developed for team members in terms of cultural competence, awareness, and sensitivity specific to healthcare. This is critical in providing medical care to patients while demonstrating cultural awareness for their beliefs, race, and values.

#### **1. How does CHS ensure constituents experience a welcoming, accessible, and inclusive environment that is equitable and free from harassment?**

The student health services is designed to serve students from various programs who are currently enrolled and pay their student health fees. This ensures that students have equal access to quality healthcare on campus. The student health services are committed to delivering exceptional care to students by providing integrated and comprehensive support services to our ethnically diverse community. We believe fostering inclusive environments will help reduce disparities in care and improve quality care for all.

#### **2. How does CHS identify barriers to and advocate for access, equity, diversity, and inclusion?**

Barriers were identified based on the current data collected from ACHA-NCHA and The Active Minds Survey, along with factors associated in accessing the student health services. These factors were evaluated when students missed their appointments, cancelled, or had no show to their scheduled appointments. Some of the factors identified include access to transportation, conflict with their class schedule, students forgot, or they feel better.

#### **3. How does CHS address imbalances in participation among selected populations of students?**

Working collaboratively from different programs on campus will address these imbalances along with sharing effective strategies in addressing the barriers.

#### **4. How does CHS address imbalances in staffing patterns among selected populations of program personnel?**

Professional development training on cultural competency awareness in healthcare will allow more opportunities for the student health services team members to communicate effectively among these selected populations.

## 5. How does CHS ensure cultural competence of its personnel to foster inclusion in the program?

By providing workshops, online webinars and involving HR district to support training classified staff and administrators regarding cultural competence.

### Achievements

- Establish collaboration with different programs on campus such as: Pride Center (LGBTQ community); DACA; Latinx community; and student government leaders.
- On-going participation with ISP Orientation via zoom; establish vaccine health screening event for ISP students at least 3 times since Fall Quarter of 2021.
- TimelyCare was implemented for additional mental health resources and support for students; implemented Fall Quarter 2022.
- Co-sponsor with De Anza's Diversity Health Care Engagement Committee and participate coordinating the Sandra Diaz Nursing Profession Career Panel.
- Attended the State of Black Health Regional Forum in Oakland, an interactive workshop that engage attendees in constructive dialogue about the root causes of health disparities including institutional racism, economic disparities, and chronic disease.

### Opportunities for Growth

- To attend professional development trainings related to cultural diversity awareness specific to health care and trauma informed care.
- Continue cross-campus collaboration to increase access and utilization of student health services by prioritizing underserved and minoritized student populations.
- Educate diverse, underserved student populations on how to access health services to meet their needs.
- Assisting students to enroll in Medi-Cal and Family Pact program by collaborating with low cost community clinics to bring an enrollment specialist on campus.

### Action Steps

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## Section 6: Leadership, Management, and Supervision

### CAS Section 6 Purpose Summary

*Clinical Health Services (CHS) leaders must model ethical behavior and demonstrate alignment with institutional mission, goals, and ethical practices. Leaders with organizational authority for CHS must provide management and supervision as well as lead strategic planning and program advancement.*

### Section 6 Committee Summary – Average rating (2)

The Student Health services Clinic Director provides strategic leadership for a holistic, multidisciplinary, and inclusive approach to student health services program. The Clinic Director is responsible for strategic planning, interventions, policies, programs, and services that address student health and wellness. This role oversees the program budget plans, and maintenance of strong fiscal accountability. The critical key duties include developing and implementing a comprehensive program for clinical health services, including current standards of practice in medicine, nursing, and staff management, licensed lab and hazardous waste management, and insurance issues; oversee the day-to-day operations of student health services clinic and staff; and funding opportunities.

The Clinic Director has assigned duties and responsibilities to supervise and evaluate the performance of assigned staff, including interviewing, selecting employees, and recommending transfers, reassignment, termination, and disciplinary actions. Other duties include leading, managing and supervising a diverse staff in a dynamic environment that requires department and clinical staff members to adapt to changing processes, practices, and initiatives.

**Based on your responses to Part 6, please answer these questions:**

**1. To what extent are CHS leader(s) viewed as and held responsible for advancing the departmental mission?**

The Clinic Director supervises and directs all aspects of student health services operations, from staff development and budget management to technology operations and finances. Daily activities can include developing policies and goals, running meetings to keep staff updated on changes and working toward a common vision, evaluating staff performance, and setting budgets. This position ensures that students receive comprehensive, personalized, and effective care that aligns to student health services' mission and goals.

**2. What opportunities and barriers are present for CHS leader(s) as they seek to fulfill the functional area mission?**

Barriers identified include the lack of time and the challenges of recruiting highly qualified staff to fill in the vacant positions at the student health services (i.e., clinic nurse, health educator).

**3. How do CHS leaders advance the organization?**

The Clinic director possesses the skills that provide opportunities to advance in the organization. These skills include being flexible & adaptable to changing environments; remaining open to ideas & opportunities and having the willingness to take risks when necessary. Continued learning also allows the clinic director to continue to stay current with the clinical guidelines and procedural protocols. This effort broadens clinical knowledge and motivation to succeed in the organization.

**4. How do CHS leaders encourage collaboration across the institution?**

The Clinic Director encourage collaboration by cultivating openness and transparency; by establishing a creative and judgement-free workplace culture where latest ideas and discussions are consistently welcome; and adopt an open-door policy where communication between the different department is frequent and fluid.

**5. How are CHS leaders accountable for their performance?**

The Clinic Director must continuously assess the strategic goals and methods of the student health services and be prepared to adjust them as needed to capture new opportunities, stay ahead of the competition, or address sudden challenges. This position is increasingly trusted with decision-making powers for executing program adjustments. The Clinic Director formed networks inside and outside the student health services department to accomplish strategic changes for advancing the mission and vision of the program.

**6. How have CHS leaders empowered personnel and engaged stakeholders?**

A terrific way to motivate the team and engage the stakeholders is to recognize their insights and make use of that knowledge. Engaging them in planning, estimation, and risk management; and provide appropriate decision-making powers and tap into the intrinsic motivators of problem-solving, autonomy, mastery, and purpose.

### **Achievements**

- Hiring of FT Clinic Director and supervising physician to oversee the day-to-day operations of the clinic.
- Development of workflow processes in executing administrative and clinical protocols for staff and providers.
- Establish mentor training for newly hired providers and clinical support staff.

### **Opportunities for Growth**

- To update all clinical and administrative procedures and guidelines in alignment with AAAHC standards.
- To establish phlebotomy program, and funding opportunities under Medical Family Pact Program.
- To strengthen the mentor training program for clinical staff, and student interns (i.e., NP students, RN or medical assistant and phlebotomy programs).

### **Action Steps**

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## **Section 7: Human Resources**

### **CAS Section 7 Purpose Summary**

*Clinical Health Services (CHS) must identify the level of staffing necessary to achieve its mission and goals. CHS must be staffed by individuals qualified to accomplish its mission and goals. Personnel include full-time and/or part-time faculty, staff, administrators, and paraprofessionals (e.g., student employees, interns, graduate assistants, and volunteers). CHS must have access to technical and support personnel to accomplish its mission. CHS professional personnel either must hold an earned graduate or professional degree in a field relevant to their position or must possess an appropriate combination of educational credentials and related work experience. CHS must establish criteria and implement a procedure to review and verify credentials of personnel. In particular, CHS must verify that licensure is maintained for all licensed professionals.*

### **Section 7 Committee Summary – Average rating (1.5)**

The Student Health Services staffing have been reassessed and restructured to meet the current needs of the program. The current staff is composed of Supervising Physician, Clinic Director, Nurse Practitioner, Medical Assistant I, and Administrative Assistant. All are FTE status. The current staffing need include FTE Medical Assistant II to assist the providers and clinical support, and Health Educator and PT Registered Nurse to lead the Health Promotion and Wellness program.

One of the Clinic Director's administrative and strategic responsibilities is to supervise, direct, and evaluate the work performance of clinical staff (NP, RN and Medical Assistant). Performance evaluations are conducted periodically based on hiring status.

The student health services team participate annually in professional development training programs (i.e., HIPAA compliance, FERPA, Blood Borne Pathogens, Infection Control, Immunization update, EHR- Pyramed training, Microsoft training courses, etc.) to improve performance, quality of treatment, mitigate weaknesses, and establish a uniform and consistent workflow.

**Based on your responses to Part 7, please answer these questions:**

**1. In what ways are personnel qualifications examined, performance evaluated, and recognition provided for exemplary performance?**

The student health services personnel qualifications are examined, evaluated, and recognized annually as set forth by FHDA district HR. Classified Performance Evaluation have 13 performance indicators with overall summary and recommendations. This gives opportunities for the Clinic Director to identify an employee's overall strengths and weaknesses, and notable accomplishments.

**2. How are professional development efforts designed, how do they support achievement of the CHS mission, and how do they prepare and educate staff on relevant information?**

The annual professional development training completed by our team members was guided by professional practice standards. This standard is a state regulated requirement for license compliance, continuing education, AAAHC accreditation, and ACHA guideline. It supports the attainment of the student health services mission by improving our standard of practice.

**3. How has the staffing model been developed to ensure successful functional area operations?**

The staff model consists of outpatient care, and health promotion and wellness model to determine the level of care needed for individual students with broad range of conditions, and how preventive services are delivered in campus community. The Clinic Director, also practicing as a nurse practitioner, reports to the Dean of Student Development and EOPS on day-to-day operations of the clinic. A supervising physician oversees the state regulated licensing requirements and provides guidance to nurse practitioners. The clinic nurse, medical assistant and health educator reports to the Clinic Director, and administrative assistant personnel who reports to the Dean of Student Services and EOPS oversee the administrative procedures, requisition request, and scheduling system.

**4. How does CHS graduate interns and assistants, student employees, and volunteers engage?**

- The student health services support nurse practitioner graduate interns and registered nurse student's preceptorship program. The student health services serve as the practice site and the preceptor for graduate NP students and RN students.

## Achievements

- Hiring of FTE nurse practitioner Summer Quarter of 2022 and FTE medical assistant in Winter of 2019 and clinic director in Spring 2018.
- Establish collaboration from graduate institution to support nurse practitioner student's preceptorship program at the student health services.
- Maintain professional licensing practice from California Department of Public Clinical laboratory license in accordance with Chapter 3, Division 2 of the Business and Professions Code.

## Opportunities for Growth

- To fill the health educator and medical assistant II position by the end of this school year 2022-2023.
- Maintain contractual agreement with graduate institution to support nurse practitioner student's preceptorship program.
- Establish collaborative agreement with De Anza Allied Health Phlebotomy program for student interns. This will allow better access to the laboratory site in-house and an opportunity for staff training.
- With limited staffing, areas for opportunities include utilization of student workers and peer advisors to assist front office support, and health promotion and wellness program.

## Action Steps

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## Section 8: Collaboration and Communication

### CAS Section 8 Purpose Summary

*Clinical Health Services (CHS) personnel must collaborate and consult with institutional leaders, faculty, individuals, and departments essential to the success of the program. CHS must maintain good relations with students, faculty members, staff, parents, alumni, the local community, contractors, and support agencies.*

### Section 8 Committee Summary – Average rating (1.5)

Cross collaboration among department units is considered a cornerstone for the promotion of students' health. The student health clinical services, and health promotion and wellness programs, network with different disciplines on campus and outside agencies on how on provision of services and preventive care will be integrated. Working together in reviewing the goals and setting-based health education activities on campus could help establish a culture of health and well-being of our students.

The mission of health education and wellness promotion is to maintain and improve, through educational experiences, the physical, mental, emotional, spiritual, and social health of students at De Anza Community College. The health educator develops and implements strategies on campus for all outreach events. Currently, the student health services are hiring a health educator to fill in this position. The clinic director is temporarily taking the lead implementing and developing outreach event activities.

The health promotion and wellness programs provide health education and support to students to facilitate the ongoing development of their physical, and mental health and well-being. Health education materials are disseminated on campus following the current policies in place.

**Based on your responses to Part 8, please answer these questions:**

**1. With which relevant individuals, campus offices, and external agencies must CHS maintain effective relationships? Why are these relationships important, and how are they mutually beneficial?**

The student health services, and health promotion and wellness program collaborate with different members of campus teams and external agencies to implement health education strategy. This collaboration is critical in embedding health into all aspects of campus culture and providing health promotion activities for students.



## **2. How does CHS maintain effective relationships with program constituents?**

The student health services maintain an effective relationship with program constituents across campus by continuing the communication, collaboration and partnership between each program and external agencies; establishing peer student support to engage students in promoting wellness; and incorporating health education programs and outreach events on campus.

## **3. How does CHS assess the effectiveness of its relations with individuals, campus offices, and external agencies?**

To assess the effectiveness of this collaboration from various stakeholders and external agencies, comprehensive data collection and analysis are done through the ACHA-NCHA survey and The Healthy Minds Survey. This will allow our health promotion and wellness program to evaluate the program engagement and accountability.

### **Achievements and Opportunities for Growth (noted from previous Health Educator program review)**

- The year 2020-2021 task was initially to sustain and expand outreach in ways possible with the continued reduced staffing, but the arrival of the pandemic in the middle of winter quarter reduced the focus further - to rapidly create an online presence. The goal was to design methods to reach students and address ongoing/growing college health issues, and the most recent physical/emotional/mental impacts of COVID19. The year's Fall 2019 and Winter 2020 events were divided into four campus wide events (Outreach 1st weeks inform/direct, Healthy Relationships -aka Club Day, Blood Drive, Chill City), as well as two seasonal events Fall 2019 and Winter 2020 quarter (Flu Clinic, and Movies 4 Mental Health). The large events were adjusted and refined to function with volunteer or outside community partners in response to limited staffing. During outreach events, in classroom presentations, and tobacco cessation counseling, my goal was to educate students (and faculty/staff) of the services of each arm of Health Services (medical clinic, psychological services and Health, Education & Wellness) on campus, as well as applicable campus and community resources. Classroom and club outreach was expanded this year to increase student contacts, to connect with faculty - offering guest visits to educate the campus towards health topics, services, and events. The pandemic shelter in place order resulted in limited student contact (only via zoom/phone) and a rapid reconfiguration of student outreach and contact in times of remote learning. The health educator quickly developed and recorded many zoom presentations (like in-person classroom presentations) addressing services and wellness/mental health issues and emailed out to faculty/clubs to use during their meeting times. Additional zoom recordings have been developed to help student: to identify symptoms (anxiety, stress, depressions) and seek support; offer different mental health coping strategies; self-care during COVID; reorganize study space/habits and how to connect with campus student services in the new remote way.

### **Action Steps**

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## **Section 9: Ethics, Law and Policy**

### **CAS Section 9 Purpose Summary**

*Clinical Health Services (CHS) must review and adopt appropriate standards of ethical practice including those of applicable professional associations. CHS must comply with laws, regulations, policies, and procedures that relate to its respective responsibilities and that pose legal obligations, limitations, risks, and liabilities for the institution as a whole.*

### **Section 9 Committee Summary – Average rating (2)**

The student health services are license by the California Department of Public Health entity, and follows the guideline set forth by

Accreditation Association for Ambulatory Health Care (AAAHC); and the core values of the American College Health Association (ACHA). These standards include health care professional practice addressing ethical standards and medical confidentiality (HIPAA) law.

The student health services personnel follow the core principles of health care ethics, and performs their duties within their scope of practices, training, expertise, and competence as noted in their specific job descriptions and medical licensure certification. Copies of certification, training and licenses are kept at the student health services, office of clinic director.

The student health services program complies with current state regulated compliance requirements for licensing and HIPAA regulations. License provider (Nurse Practitioner and Supervising Physician) must maintain the appropriate credentials and licensing/certification requirements by state law regulations to practice as an NP and MD. The student health services also follow clinical policies and procedures guided by ACHA and AAAHC accreditation standards. Administrative procedures comply with FHDA district policies.

The student health services have policies and procedures responding to medical emergencies, 9-1-1 calls, and crisis situations, along with public health outbreaks. All team members are currently certified to provide Basic Life Support and AED, and First Aid. We maintain close relationships with Santa Clara Dept. of Public Health for any associated infection outbreak notifications, and exposure guidelines. FHDA Campus Security have emergency procedures that give an overview of the recommended emergency plan, infection control and the safeguards that should be taken. A copy of this emergency procedure is available at the student health services clinic. The student health services oversee and manage the maintenance of one of the AED machines on site.

The student health services personnel and clinicians have obligatory responsibilities to follow the Code of Ethics and Conduct for healthcare professionals. Policies, protocols, and procedural guidelines are also placed with FERPA and HIPAA practices to protect students' privacy record. Notice of Privacy Practices is available at the student health services form that provides information to students on how they use and disclose the student's protected health information.

All community health concerns such as communicable diseases outbreaks including contact tracing, screening, and testing guidelines are reported to Santa Clara County Dept. of Public Health, and De Anza College administrator's office.

Reporting of cases of communicable disease is important in the planning and evaluation of disease prevention and control programs, in the assurance of appropriate medical therapy, and in the detection of common-source outbreaks. The clinician's role is critical in determining the value of disease reporting system as a basis for directing prevention and control activities on campus.

**Based on your responses to Part 9, please answer these questions:**

**1. What is the CHS strategy for managing student and personnel confidentiality and privacy issues?**

The student health services comply with HIPAA Privacy Rules in managing student confidentiality and privacy issues. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that required the creation of national standards to protect sensitive patient health information from being disclosed without the patient's consent or knowledge. The student health services hold public health licenses, which complies with HIPAA Privacy Rules. There are extensive administrative, physical, and technical policies required to protect the privacy interests of students. Failure to meet these requirements, even in a single instance, could result in significant financial penalties against the institution. Institutions operating under HIPAA are also responsible for affirming that "business associates", including EMR vendors, insurance companies, labs, etc. are compliant with HIPAA requirements.

**2. How are ethical dilemmas and conflicts of interest identified and addressed?**

The ethical principles that guide student health services practice are reflected in standards of ethics described in American Nurses Association and AAAHC standards. Ethical standards are also included in FHDA district handbook for classified employees and administrator. When a situation becomes a violation for ethical dilemmas, this is communicated and reported to the Dean of Student Development and EOPS by Maxient reporting for review.

**3. How are ethics incorporated into the daily management and decision-making processes of CHS?**

Ethics are incorporated in the day-to-day operations and decision-making process of the student health services program through the following process:

- Defining the problem (identifying the ethical issue)
- Get the facts (learning the situation)
- Evaluate the alternative action (option best respects the rights of all who have a stake)
- Choose an Option for Action and Test It (option best addresses the situation)
- Implement Your Decision and Reflect on the Outcome (learned from this specific situation)

**4. What are the crucial legal, policy and governance issues faced by CHS, and how are they addressed?**

In examining the institutional policies and protocols governing the support and the delivery of student health services, several critical ethical issues emerge. Ethical issues identified include: (1) increased demands for services with limited staffing; (2) increase in severity of the psychological and chronic health problems in students; (3) issues related to confidentiality and record-keeping; (4) variable training levels related to serving a diverse population; and (5) technology changes and student expectation. Addressing these issues requires continued collaborations among student health services personnel, clinic director, dean, mental health services team, faculty, and other members of campus community. The institution also developed the HEART/CARE team, like campus response team in reviewing and addressing issues reported through Maxient reporting system.

**5. How are personnel instructed, advised, or assisted with legal, policy, and governance concerns?**

The student health services personnel adhere to the classified and administrator handbook concerning questions related to legal, policy and governance, and district institutional board policy and procedures are also available for resources.

**6. How are personnel informed about internal and external governance systems?**

De Anza College follows a shared governance model, in which all members of the college community – students, faculty, classified professionals and administrators – are encouraged to participate. Governance handbook is available online for student health service personnel to access.

### **Achievements**

- Student Health Services staff are given the opportunity to participate in completing the HIPAA Training annually, which is required periodically to ensure that the staff are up to date with HIPAA regulations.
- FERPA training was also completed by all staff members, which are required to be completed every two years.
- Transitioning to Pyramed EMR system, implemented Spring Quarter 2020, support compliance with HIPAA privacy rule.
- Collaborated with Santa Clara County Dept. of Public Health in notifying campus regarding communicable disease outbreak (TB and COVID-19 infection).

### **Opportunities for Growth**

- Improve communication online with Pyramed system secure messages via student health portal access.
- Update the current policies and procedure for communicable disease reporting.
- To align the student health services clinical practices with Accreditation Association for Ambulatory Health Care Standards (AAAHC).

### **Action Steps**

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## **Section 10: Financial Resources**

### **CAS Section 10 Purpose Summary**

*Clinical Health Services (CHS) must have the funding that is necessary to accomplish its mission and goals. CHS must determine with administrative leadership what funding is necessary.*

### **Section 10 Committee Summary – Average rating (2)**

California Education Code (76355) allows the mandatory \$17 Health Fee to be charged to all full time and part time students to provide limited medical services, including health education and health promotion, and mental health services. The NCHA-ACHA survey is implemented in our college campus every 3 years to assist student health services providers, health educator, mental health counselors, and administrators in collecting data about De Anza College students' habits, behaviors, and perceptions on the most prevalent health topics. The precise data collected will be used to prioritize the needs of the students, allocate resources, and apply for funding opportunities and reimbursement (i.e., Family Pact Program, LEA, stipend, etc.), design strategies for preventive measures, and identify health factors associated with students' academic performance.

The mental health grant funding opportunity was granted to De Anza and Foothill College in FY 2020-2022 to expand mental health services on campus. All procedures and guidelines were followed and consistent within the district policy. Additional funding from Santa Clara County Behavioral Health Services was granted to deliver substance abuse health education services to our campus. Future funding opportunities include the Family Pact Program and LEA which provides reimbursement for services related to reproductive health and mental health programs.

**Based on your responses to Part 10, please answer these questions:**

**1. What is the funding strategy for CHS, and why is this the most appropriate approach?**

The student health services is funded through California Education Code (76355) that allows the mandatory \$17 Health Fee to be charged to all full time and part time students. The current maximum fees allowed for fiscal year 2023-2024 for a quarter term is \$22.00. The proposal is in discussion to increase the maximum allowable student health fees for 2023-2024 when inflationary indexes in California warrant it.

**2. How does CHS ensure fiscal responsibility, responsible stewardship, and cost-effectiveness?**

Fiscal responsibility is ensured by monitoring the monthly expenses including all financial transactions, expenses, and reviewing annual operation budget plans. The Clinic Director reports to the Dean of Student Developments and EOPS, who oversees the financial aspect of the student health services program.

**3. If applicable, how does CHS go about increasing financial resources?**

Increasing financial resources for student health services program include enforcing the maximum allowable student health fee imposed by the California Community College Chancellor's office; mental health grant opportunity; applying for other grant opportunity related to health promotion and wellness programs and reimbursement Medi-Cal program (Family Pact and LEA).

**4. What structures exist to ensure compliance and responsible stewardship, management, and use of fiscal resources? How are limitations or gaps in these structures mitigated?**

The clinic director is responsible for overseeing the budget development and management of the student health services program and reports to the Dean of Student Development and EOPS. The clinic director analyzes and review budgetary and financial data; authorize expenditures in accordance with established limitations; monitor budgets based on available revenue from multiple sources; research and identify additional external revenue resources appropriate for the department.

## **Achievements**

- Funding opportunities: Mental Health Grant, Substance Abuse Health Education stipend opportunity

## **Opportunities for Growth**

- Increase the maximum allowed student health fees for the upcoming academic year 2023-2024
- Initiate the process of applying for Medi-Cal Family Pact and LEA programs.
- With the current inflation, laboratory fees, vaccine cost and medications need to be adjusted to compensate for the increase cost of medical supplies.
- Funding opportunities to include applying for grants related to mental health services, and health promotion and wellness programs; state funding such as Family Pact program provides free family planning services and reproductive health services to low-income students; and proposal to increase the student health fee.

## **Action Steps**

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## Section 11: Technology

### **CAS Section 11 Purpose Summary**

*Clinical Health Services (CHS) must have current technology to support the achievement of its mission and goals. CHS must incorporate accessibility features into technology-based programs and services. CHS must ensure that personnel and constituents have access to training and support for technology use. CHS must back up data on a cycle established in partnership with the institution's information technology department. CHS must implement a replacement plan and cycle for all technology with attention to sustainability.*

### **Section 11 Committee Summary – Average rating (2)**

The student health services have implemented the electronic medical records system (EMR)- Pyramed in Spring 2020. This transition played a key role during COVID-19 pandemic in monitoring vaccine compliance and testing, along with complying for HIPAA Privacy law involving ordering labs, sending prescription and referrals.

The EMR- Pyramed app system is a secure access for medical record reviews and submission, including COVID-19 vaccine compliance for all district employees at both colleges and registered students. Appropriate training was implemented to all student health services staff, administrators and selected Foothill and District personnel who monitors COVID-19 vaccine submissions and testing.

The student health services have a website to increase visibility and to deliver information to students and district employees. The website also helps deliver health promotion and wellness information to our current students to improve their academic performance. This is partially met as our website is currently being updated and organized to provide an all-around better user experience. The use of text messages, emails and student health portal secure messages are also utilized as modes of communication to students.

### **Based on your responses to Part 11, please answer these questions:**

#### **1. How is technology inventoried, maintained, and updated?**

- ETS assists the student health services for any technology maintenance, updates, and technical support.

#### **2. How is information security maintained?**

- District ETS and Pyramed EMR system complies with security measures to ensure that all medical records and student information are protected.

#### **3. How does CHS ensure relevant technology is available for all served by the program?**

- The student health services staff are trained and given access to utilize the Pyramed EMR system. Students and district employees could also access the Pyramed app system via Myportal for compliance with COVID-19 vaccine requirements, testing clearance, and medical record submission and to overall access their medical records.

#### **4. How does CHS use technology to enhance the delivery of programs, resources, services, and overall operations?**

- The Pyramed EMR system is a digital version of patient chart that complies with HIPAA privacy law; and overall helps providers more effectively to diagnose and treat, reduce medical errors, and provide safer care to all students.

#### **5. How does CHS utilize technology to foster its learning, development, and success outcomes?**

- The EMR Pyramed system can be tracked over an extended period by multiple healthcare providers and mental health counselors to oversee the student's health status. It can help identify those who are due for preventive checkups and screenings and monitor how each student measures up to certain health requirements like vaccinations and blood pressure readings which could improve their overall health and be successful in their academic performance.

### **Achievements**

- Implementation of EMR-Pyramed system which played critical role during COVID-19 vaccine compliance.
- Virtual visits became available for students to schedule a telehealth appointment when campus was closed during the pandemic.
- Training opportunities for staff in utilizing the EMR-Pyramed system were completed in a timely manner during COVID-19 pandemic closure. Meetings and training were provided via zoom to all staff members, including mental health services, Foothill Student Health Services and HR District COVID-19 personnel.

- Installation of the student health portal kiosk in the waiting room area and purchasing desktop computers at both exam rooms.

## **Opportunities for Growth**

- Update the workflow process and procedures for EMR utilization, contracts, and technical assistance.
- Upgrade the technology and equipment for utilizing fax machines, online payment system, and telephones.

## **Action Steps**

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

## **Section 12: Facilities and Infrastructure**

### **CAS Section 12 Purpose Summary**

*Clinical Health Services (CHS) facilities must be located in suitable spaces designed to support the functional area's mission and goals. CHS facilities must be intentionally designed to engage various constituents, promote learning, and provide accessible and safe spaces.*

### **Section 12 Committee Summary – Average rating (1.5)**

The student health services is located at the lower level of the Campus Center next to campus police. To comply with HIPAA privacy rule guided by the California Dept. of Public Health facility license, the student health services had converted the health education office to the waiting room area. Desktop computers were also added in all exam rooms to access the EMR-Pyramed system. All team members received annual training for HIPAA privacy law in protecting the students and employees' medical records and confidential information. However, health services sites are still unable to meet the high demand of appointment requests, walk-ins, immunizations, and triage visits.

The student health services team members have designated workspaces to accommodate their work and job responsibilities. However, the waiting room area and the front office area continue to be a challenge for safeguarding the privacy of their work due to the tight space allotted. To comply with the current guidelines for a medical office space concurrent with HIPAA privacy rule, and Public Health facility license, the student health services is participating as an active member of the De Anza Campus Facilities Master Plan task force. This will allow further discussion of the current needs of the student health services facility, along with the current proposal for relocating the clinic to a new site where it can accommodate the medical office space needed.

For more efficient processes to ensure that all medical equipment is operating as expected, and produce accurate results, calibration of all medical equipment and devices are performed annually and marked certified. All medical equipment purchases are reviewed with the clinic director and the dean of student development and EOPS to ensure that district purchasing policy and procedures are followed.

All office equipment, including desktop computers, laptops, scanners, and copy machines are constantly inspected and reported to ETS for any issues.

### **Based on your responses to Part 12, please answer these questions:**

#### **1. How are facilities inventoried and maintained?**

Monthly inventories of all medical and office supplies are performed regularly. All medical devices and equipment are maintained by annual calibration to ensure that devices/equipment are operating as expected.

#### **2. How does CHS integrate sustainable practices?**

Sustainable practices are integrated in the day-to-day operations of the student health services. One area to include is the waste management program in ensuring that all biohazard and non-biohazard waste materials are adequately disposed. Proper education training of all team members on blood borne pathogens and PPE are implemented annually.

### **3. How does CHS ensure that facilities, workspaces, and equipment are considered in decision-making?**

The decision-making process is based on the data collected in the general campus facility survey and the NCHA-ACHA survey. It provides overall feedback from students and employees on what could be improved and what could be added to improve the student health services and wellness program on campus.

### **4. How is CHS intentional about space allocation and usage?**

The student health services play a critical role in creating an allocated space for students to easily access healthcare on campus to stay healthy and engaged. Research confirms that having an onsite student health service is associated with better health outcomes. The demands on student health services are greater and more complex than ever. More students nowadays come to campus with significant chronic health needs, including mental health challenges. With accessible, affordable health care on site, along with health promotion and disease prevention programs, students will be more successful and healthier.

## **Opportunities for Growth**

- Proposal to relocate the student health services site to accommodate the needed space for both clinical and health education programs including triage room for ambulance transport and mental health crisis referral.
- Improve waste management disposal and on-going training for proper handling and disposal of biohazard waste.

## **Achievements**

- Conversion of health education office to waiting room area and front office in compliance with HIPAA privacy law and public health clinic laboratory license.
- Upgrades of workstation computers and laptops in alignment with EMR-Pyramed system; adding kiosk student portal for check-ins.

## **Action Steps**

A detailed description of objectives, key results, activities, responsible persons, and timelines are included in Appendix A: Objectives and Key Results Worksheet.

**\*\*WE WILL CREATE A BLANK TEMPLATE FOR RECOMMENDATIONS\*\***

### **CAS Recommendations – By Theme**

*Below is a list of recommendations from the FL2015 Fraternity and Sorority Advising Programs (FSAP) CAS Review, categorized by theme and including contemplated timeline and parties responsible for completion.*

### **Assessment Recommendations**

41. All discussion sections for each Assessment Summary should demonstrate resulting changes from assessment efforts. This will ensure that the feedback provided has been more thoroughly analyzed **(Summer 2016; Jeremy Allen)**.
42. Assessments throughout the year will be centered on specific initiatives within the fraternity/sorority community, such as involvement in recruitment, orientation, Greek Council leadership experiences, Greek U, and/or the spring AFLV leadership conference. An end-of-year summary could also provide data on student development and experiences throughout the academic year **(2016-2017 academic year; Jeremy Allen + Greek Council representatives)**.
43. Alumni affinity to fraternity/sorority organizations demonstrates significant connections that are developed as a result of fraternity/sorority life. To this end, alumni data can be reviewed and its findings discussed. End-of-year assessment instruments provided to the fraternity/sorority alumni community could provide feedback related to this criterion measure **(2016-2017 academic year; Jeremy Allen)**.

### **Collaborative Recommendations**

14. Include a calendar of events online (work with Marketing Communications to pull directly from T-Space) **(Summer 2016; Jeremy Allen, Reann Esparza (GC) & Jeanna Balreira).**
17. Develop Subject Matter Expert (SME) list of contact information for resources across campus in relation to educating students on how and when to refer those in need of additional assistance to qualified staff members **(Summer 2016; Jeremy Allen).**
32. Meet with Alumni Relations and University Communications to discuss including current events, alumni accomplishments, etc. in the Trinity Magazine and through various other official University outlets **(Summer 2016; Jeremy Allen, Jeanna Balreira, Michelle Bartonico & Sharon Jones Schweitzer).**
33. Begin reaching out to other campus USOs and RSOs to establish partnerships with Greek Council **(SGA and TDC collaborations began Spring 2016; ongoing; Rebecca Prager & Jake Spitz).**
35. Student Accessibility Services (SAS) and FSAP will work together to identify needs in the space **(ongoing; Jeremy Allen & Jamie Thompson).**
39. An annual check-in with TUPD and SAS will confirm an absence of concerns and/or presence of secure, safe, and accessible space. This will ensure that adequate facilities, technology and equipment are available **(yearly; Jeremy Allen & Jamie Thompson).**
40. The continued collaboration with SAS will ensure the space provided is listed on the campus map and accessible to those with accessibility needs **(ongoing; Jeremy Allen & Jamie Thompson).**

### **Communication Recommendations**

23. Consider embedding a "fair treatment" statement for PNMs in the Greek Council governing documents **(Fall 2016; Jeremy Allen).**
25. Publish Ethical Statement on web page **(Fall 2016; Jeremy Allen & Reann Esparza).**



27. Create systems and procedures to disseminate timely and accurate information to relevant members of the community. Develop a call tree and/or Group Me text list for emergency situations (include organizational presidents and Greek Council). Review emergency situations each semester at a Greek Council general meeting **(2016-2017 academic year; Jeremy Allen & students)**.

### Diversity-Focused Recommendations

2. Promote further diversity in the community. This may include:
  - i. The creation of a “Diversity Panel” or “Diversity Chair” within Greek Council **(Spring 2018; Jeremy Allen & Greek Council)**.
  - ii. Modifying the Standards framework to include attendance at diversity/cultural events **(Completed Spring 2016; Jeremy Allen & Sara Vivatson (GC))**.
  - iii. Collecting information to analyze the community population demographics relative to the greater Trinity student body **(2016-2017 academic year; Jeremy Allen & Reann Esparza)**.
  - iv. Planning purposeful programming, possibly through collaboration with Trinity Diversity Connection or other relevant student organizations **(began Spring 2016; ongoing; Jeremy Allen, Rebecca Prager & Jake Spitz)**.
  - v. Examining LGBT-inclusive and/or identifying an appropriate community-wide statement for inclusion **(2016-2017 academic year; Jeremy Allen & Reann Esparza)**.
28. As organizations develop strategic plans each year, include a required component for diversity, equity, and access **(2016-2017 academic year; Jeremy Allen)**.
29. Embed diversity, equity, and access into the Standards Framework to incentivize organizations to further strive to emphasize this value **(began Spring 2016; expand yearly; Jeremy Allen & Sara Vivatson)**.
30. Utilize Greek Council communications chair to build communication that promotes respect about commonalities/differences among people within their historical and cultural contexts (e.g. profiles of undergraduate students shared via social media) **(2016-2017 academic year; Jeremy Allen & Reann Esparza)**.
31. Consider specific recruitment messages to FIGUS, McNair, and international students in the fall semester each year to ensure the opportunity is reaching a variety of student populations **(Fall 2016; ongoing; Jeremy Allen, Yvette Pena & Ben Blanke)**.

### Leadership Development Recommendations

1. Develop a mission statement within the framework of the Student Involvement office. Consider developing a charge/mission statement for alumni advisors. Review Greek Council mission statement to determine if it sufficiently includes student learning opportunities **(Summer 2017; Jamie Thompson)**.
3. Enhance or build upon a program that promotes student learning and development outcomes that help prepare students for meaningful and productive lives. Specific ideas include a fraternity/sorority-specific “Game of Life” program, Lunch N’ Learn leadership development series, professional and career development programs with Career Services, and others **(Leadership n’ Lunch began Spring 2016; ongoing; Jeremy Allen & Greek Council in collaboration with other TU offices/groups)**.
4. Brainstorm more recognition opportunities for organizations and individuals. Ideas might include scholar of the month, Greek Man/Woman of the Year, a community-wide awards banquet, other awards to showcase. Further analyze graduation rates, honors received, grade trends, etc. and promote these statistics (work with Institutional Research) to highlight individual student success and persistence **(recognition banquet: Spring 2017; ongoing; Jeremy Allen & Greek Council sub-committee)**.

5. Consider the college male experience and programs that might fit naturally with programming for fraternities (i.e. The Men Project) **(The Men Project is ongoing; Jeremy Allen & Jamie Thompson)**.
6. Examine how content learned during the AFA fall conference and the AFLV spring conference might become infused back into the community. Ideas include hosting round table discussions, allowing for presentations at Greek Council meetings, attending other local/regional conferences, co-hosting a student leadership conference with area colleges, and more **(AFLV shared via Greek Council Spring 2016; expand for 2016-2017; Jeremy Allen & Greek Council)**.
7. Create more opportunities to share information that might help members understand their responsibilities to the group and to the community: interactive notes and programming related to the Greek Council and President retreats made available to all general members, organizations share all meeting minutes with Coordinator for F/S Life and/or alumni advisors, and executive members check-in with Greek Council counterparts **(minutes shared with alumni and Greek Council check-ins began Spring 2016; sharing retreat information in Fall 2016; Jeremy Allen, Greek Council & organization presidents)**.
8. Develop a Greek Council organizational flow chart that indicates partnerships/relationships with chapter positions **(Summer 2016; Jeremy Allen)**.
9. Include brief Greek Council position descriptions in brochure that goes to all FY students **(Summer 2016; Jeremy Allen)**.
10. Amend Greek Council governing document to explicitly state that it supports the autonomous governance of each organization **(2016-2017 academic year; Jeremy Allen, Greek Council & organization presidents)**.
11. Embed annual goal setting for Greek Council and presidents at training in January each year **(2016-2017 academic year; Jeremy Allen & Greek Council)**.
12. Use student feedback to design content for Leadership n' Lunch series (this can address "changing needs of students") **(2016-2017 academic year; Jeremy Allen & Greek Council with student input)**.
13. Review the AUP/event notification process in order to reflect changing campus policies regarding off-campus events, creating an environment that is proactively educating students while reflecting nationwide best practices **(Summer 2016; Jeremy Allen & Jake Spitz)**.
15. Create a contract for Greek Council student leaders to better illustrate expectations for supervision and performance, to select/train Greek Council members, and to provide a clear job description and opportunities for continuing development **(Spring 2017; Jeremy Allen & Greek Council)**.
18. Create a separate break-out session during Student Organization Training for fraternity and sorority officers to better provide specific training on institutional policies pertaining to functions/activities in which they engage (i.e., alcohol awareness training) **(2016-2017 academic year; Jeremy Allen & Greek Council sub-committee)**.

### **Student Involvement-Centric Recommendations**

16. Review staff handbook for promotion policy/statement **(Summer 2016; Jamie Thompson)**.
19. Add FERPA to New Employee training checklist to ensure staff members are handling sensitive GPA information correctly. Confirm with the Registrar appropriate record retention regarding GPA records **(Summer 2016; Jamie Thompson)**.
21. Add Ethical Statement to Greek Council Calendar Policy and modify the document to include Trinity University and Division of Student Life **(Summer 2017; Jeremy Allen)**.

24. Include Ethical Statement in SI New Employee Orientation (**Summer 2016; Jamie Thompson**).
26. Student Involvement has recently developed an internal, ad-hoc compliance team that is reviewing compliance processes and confirmation of compliance in many areas (e.g. collecting letters of compliance from departments such as ITS, FSC, the library, etc.) to ensure compliance with laws, regulations, and policies that relate to respective responsibilities (**Summer 2016; Jamie Thompson**).

### **Technological & Logistical Recommendations**

20. Ask for access list for our shared drive and request notice of compliance on an annual basis from ITS to ensure consistency with policies related to use of technology to store/access student records and institutional data (**yearly, Spring; Jeremy Allen**).
22. Add foot note on web pages with data (e.g. GPA) to indicate source (Registrar's Office) (**Summer 2016; Jeremy Allen & Reann Esparza**).
34. Review Student Activity Fee funding allocations by assessing appropriateness of expense categories and reasonableness of amounts requested. Annually review protocols to ensure policies and procedures for tracking expenditures are aligned with University and Student Involvement best practices (**yearly; Jeremy Allen & Greek Council Treasurer**).
36. The FSAP can use technology to facilitate learning and development (intended outcomes) more completely and efficiently. This can include the development of simple learning outcomes that are assessed periodically via technology. The Student Organization Training risk management quiz via T-Learn is a sufficient example of this. Additional scenarios in which this can apply will also be considered. Formal evaluation through an Assessment Summary will be conducted to inform FSAP about measures of success related to identified learning outcomes (**2017-2018 academic year; Jeremy Allen & Jamie Thompson**).
37. FERPA policies will be reviewed with the assistance of the Registrar's Office in regard to retaining GPA records (**Summer 2016; Jeremy Allen & Jamie Thompson**).
38. In an attempt to prevent and limit cyber bullying, programs (online and other) and other resources including support services will be considered. A proposed referral system (Counseling Services, Residential Life, etc.) can be developed (**Summer 2016; Jeremy Allen with collaboration**).

### **CAS Recommendations – A Timeline**

*Below represents a good-faith estimation for the implementation of recommendations from the FL2015 Fraternity and Sorority Advising Programs (FSAP) CAS Review, sorted chronologically, along with parties responsible for implementation.*

#### **Completed, or Partially Completed**

2. Promote further diversity in the community. This may include:
  - ii. Modifying the Standards framework to include attendance at diversity/cultural events **(Completed Spring 2016; Jeremy Allen & Sara Vivatson (GC))**.
  - iv. Planning purposeful programming, possibly through collaboration with Trinity Diversity Connection or other relevant student organizations **(began Spring 2016; ongoing; Jeremy Allen, Rebecca Prager & Jake Spitz)**.
3. Enhance or build upon a program that promotes student learning and development outcomes that help prepare students for meaningful and productive lives. Specific ideas include a fraternity/sorority-specific “Game of Life” program, Lunch N’ Learn leadership development series, professional and career development programs with Career Services, and others **(Leadership n’ Lunch began Spring 2016; ongoing; Jeremy Allen & Greek Council in collaboration with other TU offices/groups)**.
6. Examine how content learned during the AFA fall conference and the AFLV spring conference might become infused back into the community. Ideas include hosting round table discussions, allowing for presentations at Greek Council meetings, attending other local/regional conferences, co-hosting a student leadership conference with area colleges, and more **(AFLV shared via Greek Council Spring 2016; expand for 2016-2017; Jeremy Allen & Greek Council)**.
7. Create more opportunities to share information that might help members understand their responsibilities to the group and to the community: interactive notes and programming related to the Greek Council and President retreats made available to all general members, organizations share all meeting minutes with Coordinator for F/S Life and/or alumni advisors, and executive members check-in with Greek Council counterparts **(minutes shared with alumni and Greek Council check-ins began Spring 2016; sharing retreat information in Fall 2016; Jeremy Allen, Greek Council & organization presidents)**.
29. Embed diversity, equity, and access into the Standards Framework to incentivize organizations to further strive to emphasize this value **(began Spring 2016; expand yearly; Jeremy Allen & Sara Vivatson)**.
33. Begin reaching out to other campus USOs and RSOs to establish partnerships with Greek Council **(SGA and TDC collaborations began Spring 2016; ongoing; Rebecca Prager & Jake Spitz)**.

#### **Summer 2016**

8. Develop a Greek Council organizational flow chart that indicates partnerships/relationships with chapter positions **(Summer 2016; Jeremy Allen)**.
9. Include brief Greek Council position descriptions in brochure that goes to all FY students **(Summer 2016; Jeremy Allen)**.
13. Review the AUP/event notification process in order to reflect changing campus policies regarding off-campus events, creating an environment that is proactively educating students while reflecting nationwide best practices **(Summer 2016; Jeremy Allen & Jake Spitz)**.
14. Include a calendar of events online (work with Marketing Communications to pull directly from T-Space) **(Summer 2016; Jeremy Allen, Reann Esparza (GC) & Jeanna Balreira)**.

16. Review staff handbook for promotion policy/statement (**Summer 2016; Jamie Thompson**).
17. Develop Subject Matter Expert (SME) list of contact information for resources across campus in relation to educating students on how and when to refer those in need of additional assistance to qualified staff members (**Summer 2016; Jeremy Allen**).
19. Add FERPA to New Employee training checklist to ensure staff members are handling sensitive GPA information correctly. Confirm with the Registrar appropriate record retention regarding GPA records (**Summer 2016; Jamie Thompson**).
22. Add foot note on web pages with data (e.g. GPA) to indicate source (Registrar's Office) (**Summer 2016; Jeremy Allen & Reann Esparza**).
24. Include Ethical Statement in SI New Employee Orientation (**Summer 2016; Jamie Thompson**).
26. Student Involvement has recently developed an internal, ad-hoc compliance team that is reviewing compliance processes and confirmation of compliance in many areas (e.g. collecting letters of compliance from departments such as ITS, FSC, the library, etc.) to ensure compliance with laws, regulations, and policies that relate to respective responsibilities (**Summer 2016; Jamie Thompson**).
32. Meet with Alumni Relations and University Communications to discuss including current events, alumni accomplishments, etc. in the Trinity Magazine and through various other official University outlets (**Summer 2016; Jeremy Allen, Jeanna Balreira, Michelle Bartonico & Sharon Jones Schweitzer**).
37. FERPA policies will be reviewed with the assistance of the Registrar's Office in regards to retaining GPA records (**Summer 2016; Jeremy Allen & Jamie Thompson**).
38. In an attempt to prevent and limit cyber bullying, programs (online and other) and other resources including support services will be considered. A proposed referral system (Counseling Services, Residential Life, etc.) can be developed (**Summer 2016; Jeremy Allen with collaboration**).
41. All discussion sections for each Assessment Summary should demonstrate resulting changes from assessment efforts. This will ensure that the feedback provided has been more thoroughly analyzed (**Summer 2016; Jeremy Allen**).

### **Fall 2016**

23. Consider embedding a "fair treatment" statement for PNMs in the Greek Council governing documents (**Fall 2016; Jeremy Allen**).
25. Publish Ethical Statement on web page (**Fall 2016; Jeremy Allen & Reann Esparza**).
31. Consider specific recruitment messages to FIGUS, McNair, and international students in the fall semester each year to ensure the opportunity is reaching a variety of student populations (**Fall 2016; ongoing; Jeremy Allen, Yvette Pena & Ben Blanke**).

### **2016-2017 Academic Year**

2. Promote further diversity in the community. This may include:
  - iii. Collecting information to analyze the community population demographics relative to the greater Trinity student body (**2016-2017 academic year; Jeremy Allen & Reann Esparza**).
  - v. Examining LGBT-inclusive and/or identifying an appropriate community-wide statement for inclusion (**2016-2017 academic year; Jeremy Allen & Reann Esparza**).

4. Brainstorm more recognition opportunities for organizations and individuals. Ideas might include scholar of the month, Greek Man/Woman of the Year, a community-wide awards banquet, other awards to showcase. Further analyze graduation rates, honors received, grade trends, etc. and promote these statistics (work with Institutional Research) to highlight individual student success and persistence **(recognition banquet: Spring 2017; ongoing; Jeremy Allen & Greek Council sub-committee).**
10. Amend Greek Council governing document to explicitly state that it supports the autonomous governance of each organization **(2016-2017 academic year; Jeremy Allen, Greek Council & organization presidents).**
11. Embed annual goal setting for Greek Council and presidents at training in January each year **(2016-2017 academic year; Jeremy Allen & Greek Council).**
12. Use student feedback to design content for Leadership n' Lunch series (this can address "changing needs of students") **(2016-2017 academic year; Jeremy Allen & Greek Council with student input).**
15. Create a contract for Greek Council student leaders to better illustrate expectations for supervision and performance, to select/train Greek Council members, and to provide a clear job description and opportunities for continuing development **(Spring 2017; Jeremy Allen & Greek Council).**
18. Create a separate break-out session during Student Organization Training for fraternity and sorority officers to better provide specific training on institutional policies pertaining to functions/activities in which they engage (i.e., alcohol awareness training) **(2016-2017 academic year; Jeremy Allen & Greek Council sub-committee).**
27. Create systems and procedures to disseminate timely and accurate information to relevant members of the community. Develop a call tree and/or Group Me text list for emergency situations (include organizational presidents and Greek Council). Review emergency situations each semester at a Greek Council general meeting **(2016-2017 academic year; Jeremy Allen & students).**
28. As organizations develop strategic plans each year, include a required component for diversity, equity, and access **(2016-2017 academic year; Jeremy Allen).**
30. Utilize Greek Council communications chair to build communication that promotes respect about commonalities/differences among people within their historical and cultural contexts (e.g. profiles of undergraduate students shared via social media) **(2016-2017 academic year; Jeremy Allen & Reann Esparza).**
42. Assessments throughout the year will be centered on specific initiatives within the fraternity/sorority community, such as involvement in recruitment, orientation, Greek Council leadership experiences, Greek U, and/or the spring AFLV leadership conference. An end-of-year summary could also provide data on student development and experiences throughout the academic year **(2016-2017 academic year; Jeremy Allen & Greek Council representatives).**
43. Alumni affinity to fraternity/sorority organizations demonstrates significant connections that are developed as a result of fraternity/sorority life. To this end, alumni data can be reviewed and its findings discussed. End-of-year assessment instruments provided to the fraternity/sorority alumni community could provide feedback related to this criterion measure **(2016-2017 academic year; Jeremy Allen).**

### **Summer 2017**

1. Develop a mission statement within the framework of the Student Involvement office. Consider developing a charge/mission statement for alumni advisors. Review Greek Council mission statement to determine if it sufficiently includes student learning opportunities **(Summer 2017; Jamie Thompson).**

21. Add Ethical Statement to Greek Council Calendar Policy and modify the document to include Trinity University and Division of Student Life **(Summer 2017; Jeremy Allen)**.

### **2017-2018 Academic Year**

2. Promote further diversity in the community. This may include:
  - i. The creation of a "Diversity Panel" or "Diversity Chair" within Greek Council **(Spring 2018; Jeremy Allen & Greek Council)**.
36. The FSAP can use technology to facilitate learning and development (intended outcomes) more completely and efficiently. This can include the development of simple learning outcomes that are assessed periodically via technology. The Student Organization Training risk management quiz via T-Learn is a sufficient example of this. Additional scenarios in which this can apply will also be considered. Formal evaluation through an Assessment Summary will be conducted to inform FSAP about measures of success related to identified learning outcomes **(2017-2018 academic year; Jeremy Allen & Jamie Thompson)**.

### **Yearly/Ongoing**

5. Consider the college male experience and programs that might fit naturally with programming for fraternities (i.e. The Men Project) **(The Men Project is ongoing; Jeremy Allen & Jamie Thompson)**.
20. Ask for access list for our shared drive and request notice of compliance on an annual basis from ITS to ensure consistency with policies related to use of technology to store/access student records and institutional data **(yearly, Spring; Jeremy Allen)**.
34. Review Student Activity Fee funding allocations by assessing appropriateness of expense categories and reasonableness of amounts requested. Annually review protocols to ensure policies and procedures for tracking expenditures are aligned with University and Student Involvement best practices **(yearly; Jeremy Allen & Greek Council Treasurer)**.
35. Student Accessibility Services (SAS) and FSAP will work together to identify needs in the space **(ongoing; Jeremy Allen & Jamie Thompson)**.
39. An annual check-in with TUPD and SAS will confirm an absence of concerns and/or presence of secure, safe, and accessible space. This will ensure that adequate facilities, technology and equipment are available **(yearly; Jeremy Allen & Jamie Thompson)**.
40. The continued collaboration with SAS will ensure the space provided is listed on the campus map and accessible to those with accessibility needs **(ongoing; Jeremy Allen & Jamie Thompson)**.