



Program Review

Health Center

Fall 2009

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Program Review Team Members and Approvals

Program Review Team Chair:

Lesli Sachs

Approvals:

Vice President, Student Services

Date

SECTION I: EXECUTIVE SUMMARY

It is the mission of Canada College Health Services to maximize each student's potential for success in college by facilitating the physical, mental, emotional and social well-being of its student population. This is accomplished by providing a plethora of clinical services including prevention, testing, treatment, counseling and referral for a wide range of health issues. We also provide immunizations to meet the needs of the allied health students and others, and emergency contraception, so that pregnancy does not curtail a student's academic life unintentionally. With a network of community services, students can be referred for services not available in the Health Center.

The Health Center places emphasis on health education. It can be one-on-one or in larger programs for many classes at a time. We emphasize prevention, and "lifelong wellness" in all the programs we offer.

With increased staffing as described in this document, the Health Center could be a hub for health education, health care and health prevention, providing each student who uses its services with an in-depth awareness of their own bodies health needs and a roadmap for lifelong wellness.

SECTION II: The Unit Overview

A. Mission statement: It is the mission of Canada College Health Services to maximize each student's potential for success in college by facilitating the physical, mental, emotional and social well-being of its students. The Health Center is committed to meeting the health-related needs of all students in a non-judgmental, caring, culturally competent and confidential manner.

The Health Services mission links to the college's mission by promoting and maintaining the physical and emotional well-being of students so that they can most effectively attain their academic goals, and by contributing to the student's personal growth. Simply stated, an unhealthy student, a depressed student, a student with an unintended pregnancy, etc. is a student with problems that impede their ability to bring the necessary focus to their academic pursuits.

B. Historical Background: In 1986, Title V legislation, section 54702 was passed allowing community colleges to charge a health fee to support the student health services provided by the college. Sometime thereafter, Student Health Centers were established by the three colleges in the San Mateo Community College District. At that time, Cañada had a fulltime Nurse Coordinator, a part time Nurse in the evenings a fulltime Office Assistant, and a fulltime Psychologist. Since that time, due to budget constraints and other concerns, student Health Center personnel has been reduced to a full-time Nurse Coordinator/College Nurse, a part time evening Nurse serving fewer hours, and a part time Psychologist at 12 hours per week. The Office Assistant has been eliminated, replaced only by work study students when available.

The unique characteristics of the Student Health Center are essential to the wellbeing of the students. We are the only service on campus providing a plethora of health services to students ranging from basic first aid, to preventive care. What makes this particular Health Center distinctive is the range of services that are provided

by one Nurse, with no physician back up and no office assistant. Therefore, the format relies heavily on health education and prevention, with limited clinical services. The Nurse is also the first responder for medical emergencies on campus.

C. Progress since last program review- Not applicable

D. Current strengths, Opportunities and Challenges-

Strengths: Each student who visits the Health Center has a unique problem. The Nurse has the opportunity to spend a good deal of time with each student, as needed. She has the option to spend time with the student exploring the factors that lead to the problem and means of prevention in the future. The Nurse can also delve more deeply into psycho-social issues that are related to the presenting problem, though may not have been the initial reason for the visit. For example, a student may come to the Health Center for a pregnancy test. Though the test results may be negative, the Nurse can initiate a conversation about the use of birth control, about the students' relationship with her partner, about her sexual behavior- and do some in-depth health counseling. Although the Nurse cannot legally practice beyond general nursing, she is, in fact, a certificated Nurse Practitioner, bringing knowledge and skills to the position which informs her interaction with her students.

In today's depressed economic climate, most of the students who come to the Health Center do not have health insurance or the financial means to go to a doctor or clinic; they rely on the Health Center for their primary care. While primary care is not possible, the Nurse can assess the student's health need, and refer him/her to a community low cost or free clinic. The Nurse has established relationships with providers in the area and can frequently bi-pass the bureaucracy and get appointments for the students with the greatest or most immediate need.

Opportunities: If the Health Center was able to employ a Physician on contract, (4 hrs/month), the Nurse could practice as a Nurse practitioner, doubling or tripling the amount of service she could deliver. For example, she would be able to diagnose and prescribe for ailments such as strep throat, rather than having to refer students to outside resources. She would also be able to perform family planning and reproductive health services which are vital to this age group. Many of our students have no health insurance, and what little money they have is not earmarked for health related matters. These students rely on the Health Center to provide the necessary diagnoses, medications, etc. that they cannot receive in any other way. The afore mentioned Physician could be contracted for approximately \$100 per hour, which would be about \$4000 a year. Unfortunately, there has not been a time when there is sufficient money in the Health Center budget to cover this additional expense.

The Health Center, Psychological Services and Disabled Student Services will be combined into one large remodeled facility. The rooms which are currently DSPS and Psychological Services, and the "Cantina" are scheduled for a major remodel with offices and additional spaces for the programs mentioned and will be called the Wellness Center. This presents a great opportunity to share resources and to be a "one stop shop" for students who have multiple needs which is often the case. Additionally, we will share a full time Office Assistant who will meet the needs of each of the programs in the Center.

Challenges:

There is a significant need for a professional Office Assistant performing the duties of a receptionist to be responsible for entering data into the county immunization registry, maintaining inventory and stocking, triaging when the Nurse is out of the office, assisting the Nurse with related office issues and assisting with the coordination of educational events. When there are multiple occurrences, the Office Assistant can serve as a “back-up” for the Nurse in many ways. Furthermore, the Office Assistant would be at the front desk as a receptionist during the hours when a Nurse is not scheduled to be on campus, to provide information, and to allow access to the “Self-Help” station (a locked cabinet in which there is an array of over-the-counter medications). Students can pick the medication they feel they need (i.e. aspirin, Sudafed, etc), read a short patient information sheet informing them about the medication, and sign the informed consent. This method is completely legal and used by other Health Centers throughout California.

The location of the Health Center presents a challenge. It would be better for the students to have the Health Center centrally located, in an area where students tend to “hang out”, or where students are likely to pass by.

To mitigate this problem, the Nurse does numerous classroom presentations to market the services and location of the Health Center, and circulates eye catching brochures and posters around campus.

Section III: Review Report

Programs and Services

Primary Service offerings: The service offerings of the Health Center can be divided into two distinct categories- clinical services and health information, counseling and referral;

Clinical:

- Anemia screening
- Blood Pressure screening and monitoring
- Breast exams
- Care for Minor Illness
- Glucose screening
- Emergency First aid
- Emergency Contraception
- Free Condoms
- HIV testing and counseling
- Immunizations and Influenza vaccinations
- Pregnancy testing and counseling
- Over the counter medications
- Referral to low cost clinics
- TB testing

- quiet rest area
- Wound care

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Health Information, Counseling and Referrals:

- Birth Control Counseling
- Community Resources
- Nutrition Counseling
- Smoking Cessation
- Relationship violence counseling and referral
- Reproductive health Care
- Substance Abuse
- Stress
- STD counseling
- General counseling related to sexual matters

Health Education programs:

- Substance Abuse
- Relationship Violence Awareness
- Breast Cancer
- Climate Project
- HIV/AIDS
- Blood Drive
- Lifelong Wellness- Annual Health Fair
- Depression, Bipolar and other Mental Health issues

Recognizing that the Health Center serves a diverse community, we have posters and brochures available that encompass the specific health problems unique to different ethnic, racial, gender, and physically challenged groups. But stickers and brochures are only a part of cultural competency; The Nurse demonstrates an attitude of welcoming, without being condescending or over-bearing; she has personal comfort while listening to the problems of any student who visits the Health Center without bias or prejudice, and responds to his/her particular need in the same manner. A college nurse can be challenged by differences in ethnicity, etc., and by the subtle and not so subtle change in climate created by differences in age. No matter the reason, it is essential that the Nurse respond in the manner discussed, so that all students can feel safe and respected regardless of the reason they are visiting the Health Center.

Student Learning Outcomes

One SLO was completed last year in 2008

- After visiting the Health Center, students will have learned about ways they can prevent their health concern
- After visiting the Health Center, students will use preventive measures

Assessment Method: Point of contact survey

Results:

- 92.5% of the students who took the survey reported that they learned ways to prevent their health concern
- 8.5% of the students who took the survey felt that they had not learned ways to prevent their health concern
- 61% of the students were female; 39% were male

SLO October, 2008:

Students who have been in a class where the Nurse presents an overview of the Health Center, who state that they had not previously known there was a Health Center on campus will now state that they know about the Health Center, its location and how and when to access its services.

Assessment Method: Point of Contact Survey

Results:

- 37.5% of students questioned state that they had previously not known there was a Health Center on campus and that they now are aware of the Health Center
- 96 % of those students state that they will use the services of the Health Center when necessary

This is valuable information for the College Nurse, because it validates the efficacy of making the numerous classroom visits, and gives her data to present when encouraging faculty to allow classroom visits.

SLO April, 2009:

Students who have an elevated blood pressure (140/90 or higher) and receive health counseling will be able to identify three ways to lower their blood pressure.

Assessment Method: Follow-up appointment at the Health Center

Individual interview:

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Results: As of this date (05/14/09), only two of the 6 students identified and scheduled for a follow up appointment have kept their appointment. Of those two, one could identify three methods used to lower her blood pressure (and was, in fact, using these methods.) The other could only identify 2 methods.

Plan:

- We are attempting to reach these students by phone and give them a follow up appointment; while any data is useful, this type of SLO has proven to be inefficient.
- 4.5% of 75 students while not an alarming statistic is nevertheless significant. Therefore the nurses will offer a blood pressure check to all students who visit the health center. For those with blood pressure of 140/90 or higher a health record will be initiated, preventive measures will be discussed, and weekly visits for blood pressure checks will be encouraged.

Has SLOAC improved the Programs and Services

Each of the SLOs pointed to one area of service, but *only one*. The SLO methodology is cumbersome for a program such as Health Services, and significant meaningful information to assess and improve service is better garnered through evaluations such as “survey monkey” or similar approaches. The Nurse has developed such a survey which will be implemented next year to gather meaningful information. Small but meaningful changes to accommodate the needs of the students will be made based on the survey results.

That said, the Nurse will consult with the researcher or the SLOAC Coordinator to get assistance in developing and implementing more survey questions using the SLO format, from which the Nurse can gain useful information.

Coordination and interaction with other programs/departments in SS and Instruction:

The Nurse often uses the phrase “you are my voice to the students” Students are unaware of the existence of the Health Center unless there are opportunities to do a small presentation in the classroom (note: SLO 2). Every semester the Health Center sends an email to all faculty requesting 5-10 minutes to speak to their students and “introduce” the Health Center. Accompanied by a simple brochure, the Nurse explains all the services of the Health Center, some obvious, and some less obvious. Following these presentations, the visits to the Health Center increase greatly, and that increase remains steady until late in the semester, or finals week. Not all faculty welcome these visits. The ASCC offer a few events where various programs can be showcased. The Nurse always participates in these events, as another way to promote the services of the Health Center.

Staff of the Health Center has designed a beautiful, eye-catching poster which is hung in various key places around the campus, with the cooperation of the staff responsible for that area. Three such areas are the library, the learning center and the Wellness Board in the cafeteria.

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As mentioned above, the Health Center does a number of Health Education Programs. In each of these programs, the Nurse collaborates with a student club; PTK, the MESA sponsored Pre-med club, the ASCC, etc. Again, I rely on the faculty to announce these programs to their students, to give extra credit when appropriate, and sometimes, to bring their classes.

Recommendations to make the Health Center more effective

Without the data from the proposed survey, few recommendations can be made at this time, especially in the time of budget concerns. The overarching recommendation is to become more accessible to students, and to create programs which specifically respond to their stated needs and concerns. Data indicate that the Health Center is under underutilized; we would like to understand why. That will be the first step in making our program more effective.

Staffing and Organizational structure

The fulltime Nurse is the Coordinator of Student Health services. She is responsible the clinical aspect of the program, which also includes immunizing students who are in allied health programs, and testing staff and students for TB. As a Health Educator, she informs students regarding health issues and problems by presenting campus wide health programs. These programs can be seen in the appendices of this document. She is first responder in the event of any accident or medical emergency on campus.

She works closely with the County Health Department who provide us with vaccines, HIV tests, condoms, literature, posters and brochures, on site testing for sexually transmitted diseases, etc. The College Nurse reports directly to the Vice President of Student Services. (VPSS)

There is also a part time evening Nurse who informally reports to the daytime College Nurse, and has a formal reporting relationship with the VPSS.

There ***is no support staff in the Health Center***. Each semester the Nurse requests a work study student and sometimes this works for the benefit of the program and sometimes not. This arrangement is inconsistent, and the support given by a work study student is very limited, considering the support tasks that are necessary. When the budget was a little better, the Health Center was able to hire a Student Assistant who was not bound by the rules and selection of the work study program. The Student Assistant provides consistency, and a wider range service. Most importantly, the Nurse can select the Student Assistant from students with whom she has become familiar.

Leadership and Governance: Not applicable

Facilities, Technical infrastructure and Resources:

There are plans to remodel the area that is presently the DSPS, and the staff lounge, and convert it into a “Wellness Center” including Health Services, Psychological Services and Disabled Student Services.

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The architectural plans have been drawn with input from the professional staff of each program, and at each step of the process. However, the remodeling process is on hold because of current budget constraints.

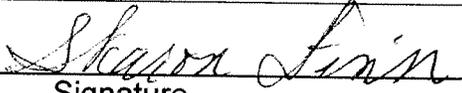
When the Wellness Center is up and running as planned, I believe that the facilities, infrastructure and resources will accommodate the three programs because the planning included the three program Directors and the plans were very thoughtfully and carefully drawn.

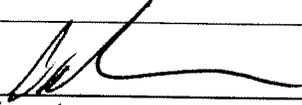
CAÑADA COLLEGE
PROGRAM REVIEW
INSTITUTIONAL RESPONSE SHEET

Program Name: **Health Center**

Thank you for your time and effort in preparing this Program Review. Your Executive Summary, with recommendations, has been sent to the Planning/Budget Committee and the Board of Trustees.

#1. Division Dean	_____ Signature
Comments:	

#2. Curriculum Committee Chair Sharon Finn	 _____ Signature
Comments:	

#3. College Vice President Peter Barbatis	 _____ Signature
Comments:	