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Student Services and Administrative Operational Annual Program Review and Planning Update Form Fall 2024

## BACKGROUND:

**Program review is an integral part of the campus planning process. As programs and areas monitor their progress on the current comprehensive four-year program review, changes in need and scope can be expected. This Annual PR Update form is designed to outline and request modifications to the current program review that occur between comprehensive four-year review cycles, as needed.**

**Examples of a requested change include new information such as action plans, outcomes modifications, personnel changes, technology needs, and capital expenditures requirements. As programs and areas monitor their progress on the previous comprehensive four-year program review, the form provides the basis to suggest a change in plans and processes to improve student success and institutional effectiveness.**

## SUBMISSION:

**Program:**

Student Health Services

**Principal Author(s):**

Theresa Ullrich

**Manager:**

Naomi Abesamis

**Submission Date:**

11/27/2024 8:23:14 AM

**Author Signature:**

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| Electronically signed by Theresa Ullrich on 11/26/2024 4:09:32 PM |

**Manager Signature:**

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| Electronically signed by Naomi Abesamis on 11/27/2024 8:23:14 AM |

# Part 1: Review of Data

1. **List the outcomes from your Fall 2022 self-study. Which outcomes has your program assessed in the last year and/or which do you plan to assess in the coming year?**

Outcome 4: Review EMR for further training or replacement. Due to budget constraints, we were unable to do wither regarding our EMR. Training is costly as is transitioning to a newly purchased EMR.

5. Reinstitute campus wide programs to improve health education and health outcomes. It is hard to measure the effectiveness of programming, but we can say that our health education outreach was robust in 23-24. We reintroduced the Spring Health fair. We participated to support multiple campus events- such as the Halloween on the quad, Dia de Los Muertos, Mellow into Midterms, Winter Fest and many more. We also sponsored World AIDS day activities including the display of the AIDS quilt and HIV testing on the quad. We also hosted 2 campus wide Narcan trainings and gave our over 200 boxes of Narcan to students and staff. Another training was held for about 30 custodial staff that work evenings.

6. Reduce student illness by improving access to vaccines. We instituted the very first large-scale flu vaccine clinic on the quad and gave all 100 vaccines we were allotted by the county. These were provided free to students, faculty, and staff.

1. **What changes, if any, have been made to your program or outcomes as a result of outcomes assessment?**

We have opted to continue the vaccine clinic through the county as it was very successful.

We will continue Narcan training as it is very well received. We also added Narcan to all AED boxes around campus.

We will continue to participate in campus wide activities to promote both physical and mental health as well as SHS services. While it is difficult to measure the success of such participation it is important to be visible to the student body.

1. **How is your area collecting or working to collect disaggregated, student-level outcomes assessment data?**

We utilize our electronic medical record to collect and assess data. We are in the process of creating an improved exit survey to measure patient satisfaction with both medical and mental health services.

We collect data as to the number of folks we reach at tabling and classroom presentations as well as numbers that attend our weekly groups- RAD and the neurodiverse hive.

# Part 2: Additional Resource Request Reasoning and Support

[ ] **We have reviewed our most recent self-study and have not identified any significant changes that necessitate resource requests for the upcoming academic year.**

[x] **We have reviewed our most recent self-study and have identified significant changes that necessitate additional resource requests.**

**For programs that have identified significant changes that necessitate additional resource requests, answer the following questions for each separate resource request:**

1. **Briefly describe your resource request.**

Our usual operating budget was/has been about $130,000. This is to pay for lab work, STI testing, Over the counter and prescription medications as well on site testing- such as strep or flu. We also need the funds to buy routine clinic supplies such as syringes, wound care products, and splints. Those funds are also used to participate in and host all campus events and education. The funds are used for purchasing online education to keep our practitioners up to date and also the licensing fees for the EMR. It also includes office supplies, copy machine and printer upkeep.

We were sent a memo that we would be allotted this amount- $131,546.00- to be exact but our account was populated with $60,000 only. This leaves us unable to provide the same level of service.

It is very concerning that we have been unable to determine what happened and I believe our finance area is working on it.

We are requesting $70,000 to make up for the short fall in our operating budget.

1. **Is this request related to an essential safety need?**

Yes

**Please explain how this resource will help your program meet an essential safety need.**

Attending to students' medical needs is our mission. We need the proper funding to meet the needs as they present themselves. We need to fund our supplies in order to meet students' medical needs. We often function like an urgent care clinic and care for students who walk in with various ailments and injuries. As our supplies are used- we must replenish them to provide them to students as needed.

As we prepare to move into the new SHS in the Chapman-Newell building- we will need to have the means to provide safe medical care. If we have a beautiful new building without the necessary inventory- we will not be serving our community or keeping them safe.

**For each separate resource request, complete this chart with the itemized requested dollar amount:**

|  |  |
| --- | --- |
| **Type of Resource** |  |
| Personnel |  |
| Facilities |  |
| Supplies | $49,200- supplies as noted above. |
| Computer Hardware |  |
| Computer Software | 14,400 for licensing fee for EMR. |
| Training | $4400- online educational tools for providers, access to American College Health Assoc, Peer Health educator training through NASPA, medical texts. Send someone to ACHA other appropriate conference. |
| Other | $2000- Healthy Minds or Acha/Natcha survey |
| **Total Requested Amount:** |  |

|  |
| --- |
| **Is the funding requested ongoing or one-time funding?**One-time funding |
| **Is the funding requested for**[**enrollment and reengagement activities?**](https://ie.fullcoll.edu/wp-content/uploads/sites/27/2024/05/ER-2.0-Program-Review-Guide.pdf)No |