

# Health Services

## 2019 Program Review

### MJC Program Review 2019

Modesto Junior College's Program Review process is divided into 3 sections:

- Program Analysis (SWOT Analysis)
- Goal Setting and Activities
- Resource Request

### Program Analysis

#### Internal Strengths

##### 1. What strengths does the analysis of student data reveal?

**Mental Health Services:** Mental health therapy utilization rates have increased over the last two academic years. Majority of mental health therapy appointments are from students self-referring.

More students showed for their appointments and kept their appointments in 2018/2019 versus previous years. Student feedback from Session Rating Scale showed that 90% (445 respondents) of students are satisfied with the mental health care received. 100% of students surveyed (19 respondents) stated that MJC mental health services have a positive impact in helping them work toward academic goals. 84% of students (19 respondents) responded that mental health therapy services or therapy referrals assisted them in staying in school.

**Nursing/Physician Services:** 100% of students surveyed (19 respondents) would recommend MJC mental health services to their classmates. Student feedback on the Client Satisfaction Survey (69 respondents) showed that 96% of students felt their needs were met during Doctor Clinic. Over 97% of students surveyed (69 respondents) responded that during Doctor Clinic, the office was clean, the nurses were professional and listened well. 95% of students (70 respondents) responded that they were very satisfied with the courtesy of the office staff during Doctor Clinic.

**Suicide Prevention Trainings:** Amy Yribarren and Anastasia Molina trained 45 MJC employees in Mental Health First Aid from 2017-2019. Participant surveys showed the following results from 2014-2019: Average Presentation Score: 4.91 out of 5 (4.72 is national average). Average Content Score: 4.85 out of 5 (4.66 is national average).

Healthy Living Presentations: 2017/2018: Largest attendance ever with 157 participants.

## **2. Are there specific aspects of the program that are exemplary or could serve as a model?**

Mental health screening, identification and assessment: Health Services universally screens students (during nurse visits) for depression and anxiety through a Patient Health Questionnaire, or PHQ-4. Health Services integrates physical health services, mental health services, and basic needs. Nurses are skilled in suicide risk assessment. Health Services universally screens students at doctor visits with the expanded PHQ-9. Health Services providers and support staff: During student visits, Health Services staff address health concerns, while also making calls to students primary care providers and insurance companies to execute care. During calls with insurance companies, staff assist students to determine their benefits, coverage and eligibility. Staff, nurses, and therapists have developed an efficient system of connecting students to outside care by assisting students with completing documents that are required for outside agencies. Health Services staff help students to understand the importance of utilizing their health care benefits, selecting a primary care physician, making an appointments with mental health providers. Mental health providers: Mental health providers practice trauma-informed care. Providers screen all students for trauma using the Adverse Childhood Experiences Questionnaire (ACES). Health Services licensed providers and interns provide short-term, solution-focused therapy integrating various treatment modalities from a variety of disciplines. Mental health providers collaborate weekly for clinical consultation, sharing of best practices, research, and knowledge to optimize clinical practice and student outcomes. Partnerships: MJC/CSU, Stanislaus to provide field placements for Professional Clinical Counselor students and Masters in Social Work students. MJC/United Samaritans and Second Harvest Food Bank to receive food to distribute to students through a food pantry. MJC/Valley Consortium for Medical Education Partnership to serve as a rotation site for 2nd and 3rd year medical residents. MJC/CSU, Stanislauss Health Promotion class, to serve as a field site for bachelors level students to assess a program within Health Services and provide recommendations for improvement. MJC/Stanislaus County Public Health to receive influenza vaccines to provide to MJC students free of charge.

## **3. What do others see as the program's strengths?**

The availability of mental health providers on campus for on-going therapy visits. Health outreach, awareness, education through the Healthy Living presentations. Health Services leads the planning and execution of the annual Health Fair, making students aware of local resources. Students are able to ask questions and receive information directly from agency representatives. The availability of physician visits on campus, providing students with comprehensive physical and/or mental health assessments and treatment. Free suicide prevention trainings Mental Health First Aid and Question, Persuade, Refer. Availability of free pantry and Starbucks food.

## **4. How well are students meeting program learning outcomes, skills, or competencies; and how are they relevant to careers in your discipline or industries for which you help prepare students?**

SLOs: Students were asked about knowledge of programs and services offered in Health Services. Based on the learning outcomes data, 64.71% of students were aware of the various offerings through Health Services. Health Services must continue to inform students and staff of the extensive and affordable benefits covered by student health fees.

## Internal Weaknesses

### **5. What gaps are observed by reviewing the student data?**

The demand for mental health therapy, especially mid- semester outpaces Health Services ability to schedule appointments within a 1-2 week time frame. Although there was an improvement in 2018/2019, no-show and cancellation rates remain high, close to 40% combined. Attendance in Mental Health First Aid is low. Although we advertise trainings campus-wide, we average 7 students per class.

### **6. What disproportionate gaps need to be addressed?**

Provide additional mental health services/support to address the mid-semester (October, March) demand for therapy. Despite health care needs and difficulty in accessing care in the community, MJC Doctor Clinic utilization rates remain stagnant. A Stanislaus County Health Services Agency report (2019) shows that all sexually transmitted infections (STIs) increased in 2018 except congenital syphilis.

### **7. What are areas in which the program could improve? (curriculum, scheduling, modality, other?)**

Mental health services: Augmenting or adding services to meet mental health therapy demand; more outreach and focus on prevention, more therapy/counseling. Upon completion of the PCC and MSWs clinical hours, there is a transition period where there is limited therapy available. Health Services must provide other avenues of support during this period like Stanislaus County Warm Line and Timely MD/Pirate Care tele-mental health. Increase Doctor Clinic utilization; increase advertising and outreach efforts highlighting Clinic benefits and low cost Strengthen sexual health education and information; reach students on a broader scale; provide information during Health Fair and throughout semesters via Wellness on Wheels cart and other outreach opportunities.

### **8. Where are there gaps in the program on how students are meeting learning outcomes, skills, or competencies?**

N/A

## External Opportunities

### **9. Where are potential opportunities for expansion, improvement, or new program development?**

Ongoing tabling on campus to provide information on topics like sexual health and stress prevention. Strengthening relationships with instructional faculty to facilitate classroom presentations and student connection. Adding MOUs with outside agencies to more

seamlessly provide mental health support to MJC students (provided students can receive timely access to care). Increasing health fee to current ceiling of \$21 for fall/spring and \$18 for summer. Consider working to update YCCD board policy to include an automatic health fee increase when allowed by state.

#### **10. What are some industry or disciplinary trends that could enhance the program?**

More students have medical insurance facilitating more efficient emergency and urgent care with physical and mental health concerns. State Chancellors Office provided one-time funding to help address food insecurity and mental health.

### **External Threats**

#### **11. How are changing resources, technology, employer, or transfer requirements affecting the program's ability to serve students?**

The unpredictability of mental health intern and trainee availability and their selection of MJC as a placement for fieldwork. MJC relies on interns and trainees to provide clinical mental health services each semester. The cost of mental health intern and trainee clinical oversight. Space in Health Services is limited to be able to add staff. The layout of east Health Services is limited for confidential visits. MJC Health Services, often a safety net provider for students with limited access to care, is not equipped to act as a primary care clinic. This can hinder our ability to adequately treat the needs of our students.

#### **12. What are some current industry or disciplinary trends that could have a negative impact on the program?**

Registered nursing salaries in Modesto area are significantly higher than MJC registered nursing salaries, making it challenging to recruit and hire qualified candidates. The ever-changing nature and uncertainty of health insurance access and provider access. Uncertainty and changing nature of reproductive care access and treatment. Increase in sexually transmitted infection (STI) rates in Stanislaus County. A Stanislaus County Health Services Agency report (2019) shows that all STIs increased in 2018 except congenital syphilis: Chlamydia, up 16% Gonorrhea, up 8% HIV/AIDS, up 13% Non-Congenital Syphilis, up 27% The decrease in Stanislaus County Public Health services limits our capacity to refer students for Tuberculosis follow-up, travel and transfer immunizations as well as other services. Limited community services often impact the student financially and can cause delays in fulfilling their transfer or employer requirements or being able to begin their clinical assignments in MJC health programs. The cost of medication, immunizations, labs, and Tuberculin may create future budget constraints. The current national Tuberculin shortage may affect student clearances for various employments and service learning opportunities. Vaccine hesitancy has led to a nationwide increase in communicable diseases like measles and pertussis. Community mental health providers often have long wait times for appointments. Less providers are accepting Medi-Cal, making it difficult to refer students to care in a timely manner. Undocumented students or those seeking to change their legal status may be reluctant to apply for Medi-Cal or other social services due to the enactment of the new public charge policy.

### 13. What other obstacles does the program face?

Limited ability to adequately address the growing rates of sexually-transmitted infections in Stanislaus County. In the past, Health Services contracted with Stanislaus County Health Services Agency to provide Family Planning Access Care Treatment services on campus. This contract was discontinued due to limited county resources. One-time funding to support mental health programs and activities from State Chancellors Office expires June 2020. One-time funding for Hunger-Free Campus initiatives (food pantry) from State Chancellors Office expires in June 2020.

## Goal Setting and Activities

### Goals

Program Goal	Mission Alignment	Area of Focus
Increase utilization of Doctor Clinic by 10%.	Values	Student Support
Decrease no-show and cancellation rates for mental health therapy by 10%;	Values	Student Support
Improve scheduling timeframe to within 1-2 weeks from referral date.	Values	Student Support
Increase the number of students requesting sexual health-related services by 20%	Values	Student Support

### Activities

Activities	In Support of Goal #	Outcome or Deliverable
Promote Doctor Clinic services during most walk-in nurse visits and mental health therapy visits.	Goal #1	Increased Doctor Clinic utilization
Encourage all students to receive text-message reminders for appointments.	Goal #2	Improved no-show and cancellation rates;
Increase number of providers offering direct therapy; Offer and promote alternate therapy options consider ongoing contract with Pirate Care/Timely MD	Goal #2	Improved no-show and cancellation rates; Improved time frame of appointments
Schedule nurses to provide sexual health education and resources out on campus during high traffic events like FLOW.	Goal #4	Increase in the # of students requesting sexual health education and testing
Purchase sexual health resources and education tools for teaching and engaging students.	Goal #4	Increase in the # of students requesting sexual health education and testing

## Resource Requests

Category	Request	Activity #	Estimated Cost
Prof. Devel.	Provide time and funds for ongoing nursing skill development, including continuing education for nursing license compliance.	4	10000
Technology	Continued support for tele-mental health service beyond June 2020	3	NA
Personnel	One part-time Registered Nurse	NA	50000
Personnel	One full-time mental health coordinator/director that oversees interns, provides direct services, coordinates outreach, develops/maintains community partnerships	3	98508
Facilities	A larger space at east campus so nurses, physicians, and mental health providers work in close proximity to each other to optimize care, confidentiality, and provide better safety for providers and students.	NA	NA
Other	Raise health fee to \$21 for fall/spring, \$18 for summer.	3	NA
Other	Institute automatic health fee increase through YCCD Board Policy update.	3	NA