

Five-Year Review

Self Study

3/19/2010

University of North Alabama

Division of Student Affairs

DIVISION OF STUDENT AFFAIRS: FIVE-YEAR REVIEW SELF STUDY SUMMARY REPORT

As the first step in the Division of Student Affairs five-year review process, each department within the Division prepared a self-study, using the Council for the Advancement of Standards (CAS) Self-Assessment Guide (SAG). In departments for which CAS guidelines do not exist, affiliated professional organizations and/or Key Performance Indicators (KPI) such as learning, process, developmental, and/or program outcomes were used.

“CAS Standards represent best practices as formulated by representatives of multiple professional associations concerned with student learning and development in higher education” (*CAS Book of Professional Standards for Higher Education, 2008*). With the exception of University Police, each functional area within Student Affairs departments has CAS standards.

Directors of each Student Affairs department compiled information related to functions within the department using the Student Affairs Department Review Guidelines (See Appendix A). Each program, service, or functional area within departments was then rated using the CAS Criterion Measure Rating Scale for the following seven components within CAS Standards.

1. Unit Mission & Goals
2. Core Programs and Services
3. Leadership & Staffing
4. Financial Resources/Budget
5. Facilities, Equipment, and Technology
6. Ethical and Legal Responsibilities
7. Assessment and Evaluation
8. Summary

Numerical ratings in the CAS Criterion Measure Rating Scale are given according to the following standards:

- 1 – Criterion measure not met
- 2 – Criterion measure met to minimal standard
- 3 – Criterion measure met to a standard of “well”
- 4 – Criterion measure is fully met

A rating of Not Done (ND) is assigned when a particular criterion measure is not recognized by the unit as being not applicable for its particular program. A Not Rated (NR) is recorded when necessary supporting documentation or data does not allow a numerical rating to be assigned.

The report herein presents an overview of the Self Study for the Student Affairs Division as a whole, based on evaluation of individual departmental self-studies. Summarized rankings by department for each of the seven CAS components designated above are also included, along with a brief summary of the evaluation with noted deficiencies for each. Complete CAS Criterion Measure Rating Scales as submitted by each director are also included (See associated web links).

Departments within the Division of Student Affairs include:

- Career Planning and Development
- Health Services
- Department of Housing
- Judicial Affairs and Student Affairs Assessment
- University Police

- Recreational Sports and Fitness Program
- Residence Life
- Student Engagement
- University Events
- Vice President for Student Affairs

Self Study Summary – Division of Student Affairs

(Here is where we would include a general summary for the Division as a whole)

SELF-STUDY SUMMARY

HEALTH AND WELLNESS SERVICES

1. Unit Mission, Goals, and Outcomes

The unit has a mission and overarching goals/outcomes statements which are consistent with and which support the University and Division mission statements and goals.

ND	1	2	3	4	NR
				X	

Mission Statement: The Department of University Health and Wellness Services is dedicated to promoting optimum wellness by providing targeted medical, counseling and disability support services to aid and equip UNA students to successfully reduce the individual roadblocks to their personal and academic success.

These support the primary missions of Student Affairs and the University to include:

- offer high quality programs,
- to build and maintain a student-centered university,
- to promote and celebrate diversity and,
- to foster a strong university community.

As part of the Division of Student Affairs, there are strong partnerships with Student Engagement, Housing and Residence Life, University Police, Judicial Affairs, Student Recreation Center, and Career Services to ensure we look at the “whole” person concept in building those “targeted” services. We utilize the data from the American College Health Association that suggest the top 10 roadblocks or impediments to academic success fall within the Health and Wellness arenas. These include, stress, cold/flu/sore throat, infections, sleep disturbances, relationship issues, depression or anxiety, and concern for a friend or a family member. Simply put our job and focus in health services is to keep the student in the classroom! This is done through three arenas that foster students’ personal growth and development to achieve academic success and develop healthy life skills.

At present, we are strongest in goals and learning outcomes centered in the one on one “teachable moments” with students and these occur daily. In these “moments” we foster growth in independence, critical thinking, healthy behaviors, meaningful relationships, social responsibility, appreciating diversity, satisfying and productive lifestyles and enhanced self esteem.

There are also many opportunities for education and information sharing through presentations in a variety of venues. A few include, orientation and health screening with international students, summer orientation and registration programs, online screenings, national awareness campaigns, residence life programming, freshman learning communities, special events, and any other venue we are invited to attend.

The main deficiency is in the documentation of these presentations to include a measurement of the learning. There is a need to conduct more pre and post survey or testing to measure effectiveness of programming.

While there has been 100% documented growth in numbers of student contacts in the past five years, there is still much to be accomplished with specific programs.

2. Programs and Services

The unit provides a set of core programs/services that are central to and consistent with the unit's mission and goals. These programs/services are responsive to the needs of the unit's constituents, are cost-effective and, when appropriate, are supported by other units or agencies both within and outside the University.

ND	1	2	3	4	NR
			X		

All programs offered through Health and Wellness services are compliant with pertinent statutes, regulations, and professional standards. Programs selected are data driven along with specific request from students, faculty, and staff. Programs are theory-based and relevant to the audience level of learning and development.

Deficiencies

There is a need for more specific measurement of the actual learning outcomes and evidence of impact or effectiveness of the programs.

- Increased focus on building and classroom access for students with disabilities
- More broad understanding of accommodations for students with disabilities and available technology
- Increased feedback mechanisms
- More written policies
- Increased emphasis on group interventions
- More programming for specific populations

3. Leadership and Staffing

The unit has a sufficient number of well-qualified employees (professional, support, student) to effectively provide the core programs/services offered by the unit. Employees have clear and current job responsibilities. Employees are oriented to their roles, receive appropriate leadership and supervision, are provided with ongoing professional development opportunities, and are regularly evaluated.

ND	1	2	3	4	NR
			X		

The medical, counseling and disability support services are lead by highly qualified, licensed or credentialed, experienced, leaders. These include the Executive Director, Health and Wellness Services; Associate Director, Health and Wellness Services, Student Counseling and Disability Support Services; and a Disability Support Specialists. Fiscal and human resources as a whole are maximized for efficiency and level of services. Each is accountable based on established job descriptions and performance standards.

The combined leadership under the Vice President for Student Affairs has a shared vision to provide high quality services and programs that prepare our students to serve as leaders, problem solvers, and change agents in a global, multicultural world. Regular Division, departmental, staff and individual meetings foster an understanding and support of the pursuit of this vision in daily practice. Annual individual performance evaluations, strategic planning sessions, and annual departmental reports document the progress and continual improvement toward strategic goals and objectives.

The primary deficiency in this area is inadequate staffing to manage all the documentation and programming needed to achieve this vision.

All areas encompassed under Health Services are staffed with highly qualified professionals. Job descriptions provide specific qualifications, credential/licensing requirements or education for each position and performance is evaluated annually referencing performance standards. Contract personnel meet the same requirements. There is opportunity for professional growth and development through university, division, and departmental programs. The professional staff is also afforded the opportunity to attend professional organization meetings and other offerings.

Under the current strategic plan, there is an evaluation of the student health fee to support the level of services needed. Changes were made two years ago to achieve current staffing levels and it was agreed to be reevaluated after two years to determine the impact of the fee. While several new positions have been established, the growth of the student population, use of services, and demand for variety of services continues to increase. It is clear that the current health fee will not support this rate of growth. Patient visits have more than doubled in five years, including an almost 20% increase this past year.

The area of counseling services has the greatest deficiency and is supplemented by contract personnel. The goal is to bring the counselor:student ratio within IACS guidelines of 1:1500. Plans are to hire a second full time counselor in the next fiscal year. There is also a need for a second professional and/or administrative staff member associated with Disability Support services. This may be a shared position.

The medical staffing is at bare minimums to support the current daily patient load for care. However, this does not allow for the desired and needed educational and health promotion programs. The strategic plan envisions the addition of another nurse and nurse practitioner to keep up with patient demands and allow for a part time health educator position. The administrative staff will need the addition of at least a part time employee to meet the increased workload as well.

In some areas staff compensation is not commensurate with the level of experience and range of responsibilities as compared to other comparable institutions.

4. Financial Resources and Budget

The unit has a well-defined and participatory budget planning process. This process results in sufficient resources to meet the unit's core programs/services, staffing, facility, equipment, and technology needs.

ND	1	2	3	4	NR
		X			

As mentioned previously, the student health fee is under reevaluation. It is the primary source of funding for medical and counseling services with some support from the general fund. The Disability Support Services is primarily a general fund account based on numbers of students needing services and the types of services needed. It can be adjusted with coordination through the Vice President Student Affairs and the Executive Council.

Remaining within fiscal constraints is the responsibility of the Executive Director, Health and Wellness services and is evaluated by the Vice President Student Affairs. This is a computerized system that will not allow a deficit balance without approval from the Vice President Financial Affairs. Funding is adequate for the minimums.

5. Facilities, Equipment and Technology

The unit has safe, accessible, and current physical facilities, equipment, and technological resources to support its core programs/services and personnel.

ND	1	2	3	4	NR
		X			

A short and long term plan was established for building renovations three years ago. While some progress has been made, to include a handicap accessible restroom in the lobby of the Health Center, current funding is inadequate to support the continued building renovations needed. The long term plan includes a new building that encompasses all three areas under one roof. At present the Disability Support Services office is located a significant distance from the Health Center building which houses medical and counseling services. This vision is included in the Master Plan for the university.

There is compliance with basic relevant legal and institutional requirements that ensure access, health, safety and security of students and other users as evaluated by the Director of Facilities.

However, there is not adequate building space to meet the growing needs and population for services. This is especially true considering the need for confidentiality.

6. Ethical and Legal Responsibilities

The unit is aware of and compliant with statutory and professional ethical and legal standards which apply to the unit's core programs/services, personnel, facilities, equipment and technology.

ND	1	2	3	4	NR
			X		

All services encompassed within the Health Services arena are available to **all** students who have paid the health fee. The health center does not file on any type of insurance therefore all services are equitable and with the same fees. Information about services is available on the website. Additional information sessions and educational briefings are conducted throughout the year in person, group meetings, online and through email. Distance learners do not pay the health fee and normally do not access the medical and counseling services, but they do have access to internet information and websites, and may speak with personnel by phone. All students may access the disability support services either online or in person. Referrals are made for specific care and services when indicated to a variety of community resources.

Confidentiality laws and guidelines are followed in all areas in accordance with HIPAA and FERPA.

Other legal guidelines are followed based on professional credentialing requirements. Specific informed consents and release of information documents are maintained by all areas.

Examples of these include: Informed Consent for Treatment, Duty to Warn, Written Consent for Release of confidential Information, confidential handling of verbal and written student treatment information

Counseling has a regular requirement for continuing education in areas of law and ethics, case discussion, coordination and consultation through supervision duties.

Some International Students have significant language barriers which present a challenge in meeting their health care needs. There are limited resources available and every effort is made to communicate through support from our Center for International Programs.

Relationships have been established with many local agencies and other departments to support our students. These include: local emergency rooms, community mental health center, Rape Response,

Safeplace, campus and city police, UNA's CARE Team, Disability Support Service office, AIDB, and others.

There is a need for more specific guidance in written policies.

7. Assessment and Evaluation

The unit has clearly defined and measurable core program/service and student learning outcomes which are consistent with the unit's mission and goal statements. These program/service and student learning outcomes are regularly assessed through both direct and indirect measures, and the results of assessment are shared among constituents and are used for decision-making and planning.

ND	1	2	3	4	NR
		X			

Health services areas participate with the Division of Student Affairs in ongoing strategic planning which includes assessment of need and evaluation of services. The mission, goals, objectives, and long term plan are in line with and support the University and Division Strategic Plans. Feedback from formal and informal sources suggest overall satisfaction with the quality and quantity of services. However, the majority of data at present has been quantitative. The adjustment of the health fee, increased staffing, and increased communication through a variety of venues is a result of this data. Additional staffing will be necessary as the campus community continues to grow and services are maximized.

While numbers and categories will continue to be important, there is a shift in focus to more qualitative data. One survey has been conducted that addressed overall understanding of available services, quality of services and recommended changes based on student perceptions. There will continue to be more educational offerings and the opportunity to measure learning outcomes. A part time health educator is projected for this year.

Student Counseling Services has focused on establishing the programming with limited staff over the past two years. Yearly goals are established and annual assessments of the goals have been carried out. Patterns of needs based on student feedback must be established.

To date, only demographic data with minimal student feedback has been utilized.

Measurement of learning outcomes for individual therapy has been subjective to date. Issue-specific programming has utilized audience feedback along with pre- and post- presentation testing

Disability Support Services has been completely reassessed, reevaluated and reorganized under health services in the past two years. The ADA Panel and Task Force, a group that includes academic and student affairs personnel, participated in this evaluation. A new Disability Support Specialist was hired as a result of this evaluation, along with feedback from an outside consultant. Feedback from students and the ADA Panel have been extremely positive in the past year and continue to move in the right direction.

There is more to be done to incorporate student learning outcomes and the impact of services. Evaluation of annual goals and objectives will continue with increased focus on qualitative data. Health Services meets the spirit of assessment and evaluation criterion overall but is lacking in the area of learning outcomes.