

**Health Services Association
of
California Community College
Northern Section Meeting @ Canada College
Friday April 4, 2003**

UNAPPROVED MINUTES

I need your INPUT prior to September 16th

Please note. Once we changed rooms, the recorder was not picking up the voices adequately, and my notes I was taking did not save on to the laptop. So, if you have something to add to these minutes please RSVP by September 16, 2003. I am very sorry.

Attended by:

Name	College
Karen Bougae	Merritt
Rosalyn Chan	Mission
Sunny Clark	San Francisco City
Donna Ellise/Elliot	Skyline
Carole Erickson	Monterey Peninsula
Melanie Harris	De Anza
Kate Hartzell	Cabrillo
Naomi Kitajima	Foothill
Janet Olson	American River
Becky Perelli	West Valley
Marti Peterson	American River
Susan Quinn	Santa Rosa
Leslie Sachs	Canada
Hilda Sielicki	Modesto
Barbara Wylie	Skyline

President Kate Hartzell called meeting to order at 9:00 a.m. We began with introductions and an invitation from President Kate Hartzell to review and add to the agenda. The body agreed to include Severe Acute Respiratory Syndrome (SARS) and an update on the Health Insurance League.

Denise Swett, Vice President of Student Services, Canada College offered a warm welcome to the Northern Section of Health Services Association.

Approval of Minutes

It was recommended that the minutes from October 25, 2002 reflect the change in how we will account for the treasury. Our fiscal year will end June 30 and start up on July 1. Also that a task force would be assigned on the rates for the membership Janet Olson moved that the minutes be approved, Susan Quinn, SM/C.

Legislative Report:

There is much new legislation that is coming forward at this time. The Chief Student Service Officers (CSSOs) are the lead group and the decisions will be forth coming from this group. They have endorsed as of last Friday the removal of BOG (Board of Governors) Waivers B & C. A Financial Aid person, Toni from Region 10 in San Diego is strongly opposed to having any BOG Waivers being removed. We must all contact our Financial Aid Directors in effort to do a more grass roots effort to educate them as to what we do. The collection of the Health Fee is the most appropriate method to fund Health Services. We must be alert to any possibilities of the Health Fee becoming attached to any legislation that promotes increasing fees. The indications are clear that this type of legislation will most likely not pass. The two groups that are lobbying are the ACCA and the CSSOs. These groups are trying to find a legislator to carry this forward. The other group is Faculty Association of Community Colleges (FACC). They are not in favor of any fee raising. Again a grass roots movement by talking to the Faculty Association Members on our campus about the importance of Health Services. Fee waivers could become much more unique and on a case-by-case basis. Many of the Financial Aid Directors feel it would create too much work to keep records on all the possibilities of the different waivers especially at this time due to many cuts in personnel Financial Aid has also recently experienced.

Susan Quinn stated: "this dialogue has been going on with the different program on campus. The problem has involved the students, we should approach the body that represents our students at the State: California Student Affairs Association of Community Colleges (CALSAACC). These are the student representatives at the State Meetings. Do you know who that is on your campus?"

Kate Hartzell recently had a conversation with her local Welfare Program Agent, she was told that the Welfare Department would pick up the expense of the Health Fee, since they share some of the same clients and appreciate the important role Health Services plays in the life of the students. Roz brought up Title V Regulations; "if the current fees are not sufficient to run Health Services, the local district is responsible for paying the difference". Will the district kick in any money now that we have a budget crisis? This most likely would not happen; since we were to be covered by Maintenance of Effort Funds (MOE) provided we were charging the full health fee. As a group we must be careful how we assert ourselves, we do have legislation to protect our services, but it is

still up to each district if they will have a Health Services on their campuses. There will be a Tele-Conference with the Consultation Group on Wednesday, April 23 @ 1-4 pm. Kate Hartzell cannot attend so Susan Quinn and Janet Olson volunteered to attend the meeting with possibly Mary Mirch, State President. This meeting will be with the CSSO's Consultation Group.

Individual College Updates

Kate Hartzell started by reading some of the e-mails that were sent to her by members who could not attend the meeting.

Noel Robinson of Solano, her substance abuse counselor has been cut to 18 hours.

Debbie Goodman of Shasta 11,000 enrollment, they were receiving MOE Funds and at a 45% BOG Fee Waiver. The Health Fee will be their sole source of funding. It sounded as if they were also getting funds from the General Fund. The staff includes her position, one support staff person, a physician for 12 hours/week and a Psychological Counselor. The MD will be eliminated. She will be subsidized for one year, within that year she must make sure her services balance with whatever income the Health Fee provides. Her advice was to check seniority status as soon as possible and beef up your Faculty Service Areas (FSA) or however you're Human Resources determines the variety of assignments you are qualified to assume. Do this sooner rather than later.

Beth of Pierce Los Angeles (L.A.) is the only Community College Health Services in L.A that is outsourced/contracted out. They were cut 12% due to a projected increase of the BOG Grants. In the past, they have not received MOE Funds. She will cut her Nurse Practitioner hours depending on how the increase of fees affect the amount of Health Fee collected. She has been told she could use the reserve account but not until after the fiscal year begins.

Janet Needham of Evergreen has been asked by her Vice President to submit three budget scenarios reflecting a cut of 10% 20% and 30%.

Kate Hartzell of Cabrillo 35% of her budget came from MOE Funds. There is no chance of receiving any of these funds. The state owes Cabrillo Health Services \$400,000,000.00 (four hundred million dollars) for the past 2 _ years in MOE Funds. She is losing 1/4 of an FTE (Full Time Equivalent) in Clinical Services and _ FTE Psychological Services. Cabrillo has \$35,000 in reserve to subsidize next years budget. There will possibly be a cut in operational hours from 55 to 44 hours in the central office and the satellite offices will be cut in half.

Rosalyn (Roz) Chan of Mission operates with a 45% BOG Waiver. Basically has 4 permanent positions; two of these positions will be eliminated. They will be cutting two hourly people and will no longer offer services on Saturdays. The

Minimal Psychological Services offered will be maintained at _ time and they will start charging for clinical services and incidentals such as; labs, immunizations, ace bandages and if they can capture it, any dressing changes. Mission College Health Services is preserving the physician hours at 4 hours/week. Roz is proposing in shifting hours but not until all the governing boards, and deans have been adequately informed of the coming changes. Roz also had to give as much notice to the Union and involved them as soon as possible.

This is very drastic for our college. We will be coming in later and staying late on some days and cutting back to a half day on Friday. Roz has been requesting at least one thousand dollars (\$1,000) for non-student use of Health Services.

Becky Perelli of West Valley they are at a 15% BOG Waiver. The district has had to cut 1/3 out of the budget mainly because the MOE Funds are gone. Like Cabrillo College, West Valley College has been very up front with Health Services Funds. We have three hundred eighty five thousand dollars (\$385,00) in reserve, which was going to be applied towards the re-construction of our building, which, of course, probably is not going to happen. The reserve may have to be utilized to subsidize our program the coming year. We may have to cut 25%-30% of two positions, a nurse and a support staff. Based on the Health Fee alone, it is not adequate to cover salary. West Valley Community College is also planning to cut back on their hours.

Susan Quinn of Santa Rosa stated that voluntary and mandated reduction of workload is at work. The Classified Union is presently working on different options that will be implemented. Kate Hartzell stated she was aware that some colleges were delivering pink slips to all employees in categorical funded programs, including Health Services, which is not categorically funded but would give the district the opportunity to change the contract.

Sunny Clark of San Francisco City College (SFCC) has received money from the district to help support Health Services. The classified staff has been cut back at approximately 25% in an effort to reduce the possibility of any lay offs. The clinical staff in Health Services has been cut back approximately 10%. The pattern of the utilization of nurses is at 75%-85% of direct student services. The data collected did not include any of the following; phone calls, follow up or classroom presentations. The utilization pattern of Psychological Services reflected approximately 20%-42% at best. The data was collected by a software program documenting the utilization of nurses in segments at 15 minutes and psychological services in segments of 50 minutes. The numbers were computed to match minute to minute in direct services which is a very accurate method than trying to do an actual head count. Psychological Services refuted these numbers saying that many phone calls and follow up services were not reflected in their minutes. Due to these numbers, San Francisco City College will most likely close down Psychiatric Services for students.

On top of all this, Health Services helps to sustain itself by bringing in money from the MAA (a program from the state for reimbursement of services) as well as Family Pact. We have 8 other campuses where we have one nurse that travels to each of these campuses to administer T.B. Skin Test and immunizations.

SFCC has an enrollment of thirty nine thousand (39,000) with 25-30% of the students on Financial Aid. If every penny must come from the student's pocket to pay for the increase of fees, we may have to shrink down our services. This would cause a political uproar since Health Services is a very respected and popular service on campus. However, with the decrease of Health Fee collected due to an increase of BOG Waivers we anticipate a slight possibility of having to scale down services. Susan Quinn and Becky Perrelli, and several others applauded Sunny on the fine job she was doing.

Susan Quinn of Santa Rosa Junior College (SRJC) has twenty nine thousand – thirty nine thousand (29,000-30,000) credit enrolled student with a second campus. Waivers have gone from 15% last year to a 25% this year. SRJC is very much Health Fee dependent and have always been so. SRJC has never used MOE Funds or received any funding from the district. SRJC has close to two hundred thousand dollars (\$200,000) in reserve. Since we have been running at about thirty-five to forty five thousand (\$35,000-\$45,000) deficit, our reserve could sustain us for approximately the next three years if we include a 15% cut. SRJC is in the process of applying for the MAA Program for reimbursement of services. The regional worker working with Susan is from the State who was also in charge of the LEA Program. He is suggesting applying to both of these programs. He was looking at ways on how to link up with K –12. An employee reimbursement plan is in place and the district for athletic physicals exams, which are clearly not covered with the health fee, so it has been cut, had also reimbursed Health Service. In response to this, the Athletic Department is proposing to pass the expense on to the student by attaching a \$10 - \$15 dollar fee to their course that requires the physical exam. That funding would get transferred to Health Services in order to continue doing the screening/sports physicals. This fee is comparable to a material fee and has not yet been approved by the board.

Our Student Accident Insurance has been working through our Business Office. I don't have anything in writing yet, but I believe we have been capped at the same amount as last year. With premiums going way up, this is clearly a plus for Health Services. Should the insurance expenses go higher than last year, the district would pick up the increase in premiums.

We are on the low end of charging any additional fees so we are looking at possibly changing that plus we maintain a very narrow scope in services. Mental Health is contracted out, however, after 13 years, our person who has been providing this service is resigning at the end of this year. So we are rolling

over the contract into a Request for Proposal (RFP) process, which will be accomplished by a selected committee. Much of the groundwork has been accomplished by identifying needs with an extensive Program Review two years ago plus a survey. One of the stipulations for the new contract for our campus was to maintain the program that trains psychologist, California Psychology ___? ___? (CPEC?). We had to maintain our site as a learning lab that consists of a psychologist and six interns. The contract is going out at a range of seventy thousand to eleven thousand dollars (\$70,000-\$11,000). The pay is low for a psychologist, but an attractive option if they like to teach. Having a psychologist plus the interns assures our program a high level of service standards and an incredible number of students served. It is estimated to be at 80-100 hours of direct mental health services.

The cost for Mental Health Services is proportionate to our total budget, which has been 10%. This program is highly visible, popular, well received, cost efficient and the contract will be sustained at the same rate but anticipate changes depending on our budget, how many interns there will be to supervise, and how many hours will all be specified by the contract. The local mental health resources are drying up so there are many people applying.

Clinically we have a physician 4 hours a week and currently have 1.6 full time (FT) mid level nurse practitioner not including the nurse director. We also have some hourly and part timers that equates almost to a full time position to cover the evenings. We have a community clinic that comes in 8-10 hours per week to do reproductive health. They maintain their own charts and billing. The types of services we offer are acute, episodic lots of orthopedic, dermatology, bronchitis and other respiratory illnesses. We refer out into the community and do not perform blood draws or x-rays any longer.

Our two physicians are family practice and on an annual contract. Each physician runs a clinic for 1_ -2 hour per week. Built into the MD contract is monthly consultation either in person or by phone and the signing of protocols yearly.

Carole Erickson of Monterey Peninsula Community College (MPCC) has only a nurse in Health Services. Carole has been there since 1986 so an excellent benchmark for MOE. In the 16 years she has been there MPCC has always had only one nurse. Carole has added an evening nurse but the campus is unique in that 85% of student enrollment is in non-credit courses. We have approximately 14,000-credit/non credit student enrollments. The health fee is charged to both credit and non-credit students and has not been question about the collection of the health fee. The campus seems to cater to a certain segment of the community. It is not that great for a student who is trying to earn a degree. The average age of those attending is 38. MPCC Health Services functions on the

Health Fee. For the first couple of years I applied for MOE Funds but was told not to try that again since MPCC is never enough in the hole to qualify for it. Fiscally I am never sure where the funds are placed. Money seems to be passed around and descriptions of where it went are very shaky. My cost shows up about 3 times a year long after things are gone. MPCC just past a huge bond for capital expenses which should provide us with a larger center. All we have are two very small offices. We do no lab services or physician services. We do provide Mental Health Services through a Marriage Family Therapist (MFT) this person is outstanding and willing to work for \$250.00/week. She pays for her own insurance and supervises 4-5 interns, which provides 35-40 hours a week of therapy. She applied for her supervisor credential just so that we could have interns. Our MFT started just last fall to pay the interns a \$10.00 stipend for their student contacts. She is given the money from the Health Services Budget and out of her personal account has agreed to pay the interns.

MPCC have no reserves and we did have a healthy reserve for a few years, but it quickly dissolved when the district withdrew their financial support as long as we had any money in the reserve. At this time the district pays for the T.B Screenings for employees and contributes 10%-11% to the Health Services Budget. The district would prefer not to fund any of our budgets, but fortunately we have a very supportive Vice President (V.P.). So to adjust to the short fall I was directed by my V.P. to cut back wherever I could. So I cut back on the evening hours since the traffic during the evening is very low. I do my administrative work in the evening and bank my over time since I will never get paid for those hours and take a leave.

Melanie Harris of De Anza Community College has an enrollment of 25,000 with a low BOG Waiver at 12%, which is moving up. Health Services has _ million in reserve. Health Services is supported by the Health Fee which brings in seven hundred thousand dollars \$700,000/year. Fortunately we are going to dip into the reserve because we have added a nurse practitioner 3 days a week to do our Well Woman Clinic. For the first time ever, we also have added a physician 3-4 hours per week to provide acute care plus the oversight of the clinic.

De Anza has no formal psychological services. We utilize our counseling division to meet the demands for mental health. 10% of each of their salaries comes out of the Health Services Budget. It is a 70/20/10 split, 70% comes from counseling, 20% comes out of instruction and 10% comes from the Health Services Budget.

Melanie is faculty and an 11-month employee at 30 hours/week. The rest of the staff is classified. There is a full time Health Educator, one full time Nurse and 1 _ Full Time Equivalent (FTE) clerical. The evening is staffed with part time nurses.

Naomi Kitajima of Foothill Community College is in the same district as DeAnza. Foothill has a four hundred and fifty thousand budget (\$450,000) that comes from the Health Fee. 60% two hundred and seventy thousand dollars (\$270,000) of

this budget funds 21 academic counselors. This started in 1986 with the MOE Funds. The academic counselors became personal counselors and partially funded by Health Services. Prior to MOE, counselors refused to do any counseling for our students. 11% of the Health Services Budget goes to a part time psychological services person, which provides 38% of that salary.

We will lose all grants at both campuses because of the FDI rules. So we are cutting Micah Liberman our Web Master and our Smoking Cessation Grant. Any person in a grant that goes over two years must either be eliminated or hired on permanently by June. We were funded for three years so we stand to lose one hundred and fifteen thousand dollars (\$115,000) although Naomi has asked for an extension for this summer and she will administer the grant herself during the summer for the University of Pittsburgh. So if you want to take advantage of this program during this summer and become a smoking cessation counselor please contact Naomi.

Foothill will be cutting back to 4 days a week and will not respond to emergencies. Health Services will no longer conduct Health Fairs or do Super CPR Saturday which we have certified 500 people in one day. We are cutting our 2 nutritionist and no longer honor staff request for health care unless they pay directly for services. We will not provide for any physical exams and will cut back our evening hours. We will no longer be doing workers comp or T.B. Testing for employees. The district is looking at paying us for workers comp since we run a mid level clinic. In the past we have been able to save the district lots of money. The same is true for T.B. Screenings, we can charge quite a bit for each skin test since the rate is \$25.00/skin test in our community. The International Student Program is interested in paying for our services and has done so in the past since they feel we give extra special services to them. This program assesses the student a fee of \$22.50 quarterly for Health Administration cost. You may want to research this at you college and see if that fee is collected. We are also moving forward to billing with MAA for reimbursement of services.

During the past two weeks a team of 4 people has audited Foothill. They are auditing colleges who have collected MOE Funds. A huge amount of MOE Funds went directly to the district. I have found the process unnerving since two of the auditors have been in my presence asking me questions over and over again. They ask the questions then write down everything I say and request the documentation to prove it. They want proof of anything spent over \$2.00. They have requested job descriptions and continually interrupt the clinic with constant request for more documentation. They requested documentation for any expenses against any fee during the years 1986-1987 and 1999-2002. They wanted proof, documentation and statistics for all our expenditures. The inform me and tell me; "you should have that". I was not aware that my salary was claimed at 100%. They wanted to know if it was possible for my salary to be claimable at 100% from the MOE Funds. They also said I had assigned 67% of the budget for the counselors salary. I told them I did not know that. I told them

all I had ever seen on MOE Funds was a piece of paper relating to MOE. This form only asked to check off services that were rendered during that year. They asked me for the job description of the counselors several times. They wanted to know what they did. I told them I did not have their job description nor could I tell them what they did. What I did know was that they were academic counselors prior to 1986. They told me I had no right to put unlicensed people with no documentation on the health fee. I kept on telling them I did not know they were there. All they said was yes you did know. Finally they turned to each other and spoke to one another in front of me and said basically; "you know I think I believe her". I found out later after they were gone that my name was designated on the claims stating as per direction of Naomi Kitajima. They are coming back next week to cover collective bargaining and to try to get some information from our counseling staff. I am sure they will ask for their charts like they did for mine and request numbers and to look through all books. One place I did not keep good records was on the administration of Hepatitis B although it is a small amount approximately at \$600.00/year. My caution to you is with any money you spend make sure it is well documented so that you can extract that information readily. Do not compromise your position in any way and deal only with the truth. Unfortunately, if our district is charged a fine, it will most likely come out entirely from the Health Services Budget.

Also, any of you that received consultation services from Arthur Anderson, please be advised, they did a very poor job and our district was left in a terrible situation because of their poor direction. They
Asked for a reimbursement for 14% then moved that up to 36%.

Kate Hartzell suggested we look carefully at our job descriptions and if it says you are over seeing the budget for your department then you better make sure you are checking every document that relates to the health fee. In the end, you will be accountable for all transactions whether if you see all the transactions or not. Ideally anything that reflects any activity in your budget you should request to see it and sign for it.

Community League of California Community College (CLCC)
(Function and who participates in this group is given in the October 25, 2002 minutes)

Susan Quinn is representing Health Service Association (HSA) at the negotiating table, which will elect an insurance carrier that will offer Voluntary Health Insurance Plan to any community college student in the state. Instead of offering many different plans to our students, it is our hope that we could use the two hundred million students enrolled in community colleges in the state to help bargain for a better rate. Susan asked us to share with her our concerns. The group will be deciding on a carrier by May 9 or 11, 2003. Susan requested our evaluation of the different insurance carriers. Janet Olson stated her concern that colleges have different cycles as to when a student enrolls for course work yet the insurance carriers are very fixed on certain enrollment dates. Janet

suggested a student should have more options to begin enrollment later in the school year so that it is cost effective for the student. Susan stated that the pool of underwriters willing to cover college students is dwindling down. Options for our students don't seem to exist at this time.

Incoming President

Susan Quinn was formerly acknowledged and given a warm welcome as our new incoming president.

Annual Conference

Next year's Conference Chairs are Alice Dufresne-Reyes, Roz Chan & Kate Hartzell. The conference is unofficially set for March 10-12 at Asimolar. During our annual conference last month we discussed the possibility of not having a conference due to present budget circumstances and since many of us our faced with no travel expenses. Those that were present at the meeting felt we should go through with our plans of hosting the conference in March 2004 at Asimolar. It was also discussed that by hosting the conference in Asimolar and not at MPCC because it is much more cost efficient. The rooms and the meals actually come free once the conference site is paid for, plus those attending would not require transportation to the conference site.

Assignments for the conference must yet be finalized.

Chairs: Alice, Roz & Kate are conference chairs.

Vendors: Merrilyn Maurer is coordinating the vendors.

Hospitality: Region 5 is coordinating hospitality.

Book: Has anyone volunteered to get the program together? Has anyone asked Wende Rehwald if she would take the assignment of assembling the book?

Registration: much of these duties must be handled earlier than the actual date of the conference. Lori Brault of Fullerton at yesterday's executive meeting suggested we create an early registration deadline in order to create early cash flow. This job should be assigned to someone who is physically close to the site. Roz stated that Alice had suggested in collecting in additional \$5.00-\$10.00 from all of us to pay the staff at Asimolar to do the actual registration on site. Janet Olson stated she has done registration in the past, and there is usually money handling and distribution of bags/goodies. It could be specified no late registration. Kate Hartzell suggested registration to be handled by the region closest to Monterey and could work on many of these ideas during their meeting.

CEUs: Where is the association in the process of applying for a Board of Registered Nursing Number (BRN) so that we have the capacity for approval of continuing education units (CEUs)? Janet Olson is aware that Mary Mirch has already started the application process and waiting for a response. However, we need a volunteer to assure that objectives are listed, evaluations, post quiz, retention of files and any other BRN specifications in handling CEUs. Becki Perrelli volunteered to get the information from the speakers on what they are presenting and get a question review into the conference booklet. Kate

suggested getting together with Wende to see first if she would accept this assignment. If she can, she would work with Becki to pull the book together.

Financial Update

First Quarter March 2003 Balance = \$8,276.79

Expenses came from reimbursement of travel for our President, Web Master and for work on the directory.

By-Law Changes

Janet Olson reported that the group has discussed more options since the last Fall Meeting. Janet and Linda Albright represented the Northern Section and Sandra Sample and Mary Mirch represented the Southern Section. The background is that the By-Laws changes accomplished last fall regarding dues and membership could make some members feel disenfranchised. So the group went back to the drawing board. Dues can be called individual or institutional membership if the college is paying for it, but there is still only one vote accepted per each college. The committee will propose the changes and post them on the web for 30 days to allow the membership to vote on them.

Election of Officers

Kate Hartzell - State President

Susan Quinn - Northern Section President

Becki Perelli – President Elect

Hilda Sielicki - Secretary

Treasure – Becki Perelli will stay as treasure until the association decides if there are will be any changes to this office.

Kate Hartzell discussed the many issues that the association needs to look at regarding how we presently handle the treasury and the chance of having this office shared with the southern section. The question is would our association be looked upon as two or one. According to our by-laws we are one association so are we out of compliance by having two presidents and two treasuries? If we are one association, our treasury combined would place us on a different tax level. In the event of coordinating the conference, it is critical to have the treasurer in the same section. Kate Hartzell stated: "I strongly propose that we become one organization. I think we would be politically stronger and we would be forced to have better communication. Roz added that now with our capabilities to conduct business over the Internet, it could be easier to be one organization.

Janet Olson/Leslie Sachs m/s/c/ that the officers listed above be approved for the elected officer. The vote was a unanimous yes.

Executive Retreat

Traditionally all the officers and regional representatives are invited to participate. It is for June 11-12 in Cayucos, California. It is located near Moro Bay.

Severe Acute Respiratory Syndrome (SARS)

Many of us have been receiving many questions regarding international students and travel. Janet Olson said she had a faculty person who was determined to go China during the summer. Many of his colleagues are worried about working with someone who may have been exposed to SARS during the summer. Janet told them all she could do was talk to this person, but he already had made his mind up and is going.

Sincerely,

Hilda Sielicki

sielickih@yosemite.cc.ca.us

(209) 575-6037

(209) 575-6000 ext 6037 (voice mail)