

**UNAPPROVED HSACCC SOUTHERN SECTION
GENERAL MEETING MINUTES**

Crafton Hills College
Friday, October 3, 2003

1. Meeting called to order by Southern Section President Lori Brault at 8:40 am.

The following were present:

| | |
|--------------------|----------------------------|
| Elaine Tennen | Ventura College |
| Mary Mirch | Glendale College |
| Susan Broderick | Santa Barbara City College |
| Sandra Phoenix | Cuyamaca College |
| Beth Hoffman | Santiago Canyon College |
| Chris Hogstedt | Irvine Valley College |
| Judy Giacona | Crafton Hills College |
| Sue Tarcon | Crafton Hills College |
| Sandy Samples | Mt. San Antonio College |
| Sharon Manakas | Moorpark College |
| Patti Smith | Riverside College |
| Jo Buczko | Pasadena City College |
| Anza Smith | Rio Hondo College |
| Adriana Glenn | Citrus College |
| Gloria Lopez | Santa Monica College |
| Mary Lou Giska | Cypress College |
| Nancy Bromma | San Diego Mesa College |
| Susan Quinn | Santa Rosa Jr. College |
| Kate Hartzell | Cabrillo College |
| Beverly Kemmerling | College of the Canyons |
| Lori Brault | Fullerton College |
| Debra Strong | Bakersfield College |
| Elizabeth Benne | L.A. Pierce College |

Welcomed two new members, Adriana Glenn from Citrus College and Nancy Bromma from San Diego Mesa College. Changes to agenda were announced, added were treasurer's report, membership report, and directory report.

Motion to approve minutes from Southern Section General meeting of March 6, 2003 due to lack of a quorum at last section meeting; **MSC (C. Hogstedt/G. Lopez), all ayes.**

Welcome greetings from Crafton Hills President, Gloria Harrison.

Welcome greetings from Crafton Hills VP of Student Services, Alex Contreras.

Continuation of approval of minutes from Southern Section General meeting on April 25, 2003. **MSC (C. Hogstedt/A. Smith) to approve minutes with correction by Bev Kemmerling in #9 regarding her new position as treasurer and not the treasury department. All ayes.**

2. Treasurer's Report: Please see handout. The additional \$5000.00 CD that Anza was directed to open at our last meeting was not opened and cannot be opened until we get our letter of tax exemption. **MSC (M. Mirch/S. Phoenix) to accept the treasurer's report. All ayes.** Discussion followed as to whether the CD due October 7, 2003 should be rolled over to a 3 or 6 month CD. **MSC (S. Phoenix/M. Giska) to have the treasurer roll over the CD that matures on October 7, 2003 to whatever period of time that offers the best interest rate, 3 or 6 months. All ayes.**

As of August 31, 2003, our ending balances were as follows:

| | | |
|------------------|----|-----------|
| Savings Account: | \$ | 506.66 |
| Checking: | \$ | 10,595.86 |
| CD: | \$ | 10,642.10 |

Total Assets: \$ 21,744.62

3. Membership Report: Sandy Phoenix reported that we have only 20 paid members in the Southern Section thus far. We had 36 by the end of last year. Sandy reminded us that beginning this year, there would be a \$25 late fee charged if membership has not been received by November 1st. Region representatives were encouraged to call the colleges in their region that had not yet paid. After looking at the current membership list supplied by Sandy, Chris Hogstedt verified that we have a quorum.
4. Directory Report: Susan Broderick publicly thanked Ruth Foy for doing such an amazing job on the directory for so many years. What will occur with the current directory is that Susan will continue her efforts to update names and addresses. Current names and addresses will be printed out as a word document. The other items in the directory can be found on the HSACCC web site. Susan passed around the current directory and asked all present to check and correct the information that pertains to them. Remember that the directory does not necessarily reflect the membership. Susan does not receive the membership applications, the information she has been updating came from the directory update form.
5. State President's Report: Kate Hartzell based her points on the goals developed at the Executive Retreat last summer (see attached goals). Discussed funding stabilization for health centers. There is a budget item of a backfill for health fee waivers for low-income students of 14 million dollars. This was presented by the League and has the support of the Consultation Committee, Budget Taskforce, CSSOs and ACCCA. Mary Mirch gave a brief history of how this came about. Kate and Lori addressed the Board of Governors this summer and you can find

their statements attached to these minutes. The budget backfill was not proposed by the HSACCC, which indicates the growing support for health services. Though it may be foolhardy to believe that there will be more money for anything in the upcoming year, we must as an organization form a “Call to Action” to promote support of the backfill at all levels. We can start with our faculty senate, students, CSSOs, and go as far as the Consultation Committee and the Board of Governors. Consultation and Board members can be found on their respective websites: www.cccco.edu/executive/consultation/members.htm and www.cccco.edu/executive/bog/bog.htm

Kate also addressed the need for usable data, which is used as an essential part of our arguments in Sacramento. We also need to renew our contract with Micah Lieberman, our Webmaster, to maintain the website. **MSC (M. Mirch/S. Broderick) for Southern Section to approve paying for half of Micah Lieberman’s \$2500.00 salary. Contract is for \$50 per hour, not to exceed \$2500. All ayes.**

Kate updated us on the Conference this March 10 – 12, 2004 at Asilomar. There is a different set up at Asilomar than at past conferences. Room rates include meals from lunch on Wednesday through lunch on Friday. Vendors will be used to help subsidize other expenses. The North had to guarantee a certain number of rooms and they feel there will be fewer attendees than last year. Registration forms should be coming soon. Make sure you respond to Alice’s inquiry as to whether you plan to attend. Kate suggests that if you are interested in spending the weekend at Asilomar after the conference, to book it with your registration.

Budget: Kate is projecting a money-losing year this year. Her proposed state budget is not balanced and she cautions us that we may have to dip into our reserves. Added expenses will probably arise from professional services like auditors and the Webmaster, and increased travel expenses to assure HSACCC representation in Sacramento.

Student Services Council. Two years ago Mary Mirch and Lori Brault attended a meeting of different Student Service representatives in San Diego. An Advocacy Agenda was derived from that meeting. It was recently decided to formalize the organization that is now known as the Student Services Council. The HSACCC has been invited to join and we’ve been given two places on the council. **MSC (M. Mirch/J. Buczko) to appoint the state president and the state president-elect to attend the meetings of the Student Services Council. All ayes.**

6. By-Laws: Chris Hogstedt clarified the status of the proposed Article III changes in the by-laws. The changes as stated below will be read today as a first reading for the southern section. They will be read as a first reading in the north during their fall section meeting on October 23rd and 24th. 30 days after the reading in

the north we will be able to vote electronically. We will need a 2/3rd approval by the current paid members to pass the changes. If anyone objects to the wording of the proposed changes their objections need to be voiced within the 30 days. With e-mail voting, you'll be required to send the receipt back or your vote will not count. The current by-law will be stated first. The proposed changes will follow and be italicized.

Article III (Current)

Membership

Section 1. Classifications

- A. Regular Member (Institutional/Individual) – Dues as set by Article IV. Open to health care professionals who direct student health services in a California Community College.**
 - 1. Shall be entitled to one vote, no institution may cast more than one vote.**
- B. Associate Member (non-voting) – Dues as set by Article IV. Once the institution is represented, additional health care professional working in the health services setting may join the organization as associate members.**
- C. Emeritus (non-voting) – no dues. Granted by the organization upon individual member's retirement.**
- D. Honorary (non-voting) – no dues. For distinguished contribution to the aims of the organization. Requires appointment by Executive Committee and approval of the membership.**

Article III (Proposed)

Membership

Section 1. Classifications

- A. Regular Member (Institutional/ Individual) – Dues as set by Article IV. Open to health care professionals who *are responsible for* student health services in a California Community College.**
 - 1. Shall be entitled to one vote, no institution may cast more than one vote.**
 - 2. *Regular members from each institution shall determine the voting delegate prior to each meeting vote.***
- B. Associate Member (non-voting) – Dues as set by Article IV. Once the institution is represented, *any* additional health care professional working in the health service setting may join the organization *as an* associate member.**
- C. Emeritus (non-voting) – NO CHANGE**
- D. Honorary (non-voting) – NO CHANGE**

The by-laws on the web are out of date. We need to update the web. Sandy Phoenix noted that the definition of “Associate Member” in the by-laws is not aligned with the membership application. She will make the appropriate changes. By-laws will be revisited later in the year.

7. Old Business: Lori Brault

a. Funding Stabilization:

1. Lori spoke of presentations that she and Kate made to the Board of Governors. Kate spoke of backfill and Lori addressed equity and access. The CSUs and UCs were at the meeting where Lori spoke. The ACCA (Administrators) voiced support of the CCs in a three-tiered approach that put us on the third tier. They clarified that because we were on the third tier didn't mean we were less of a priority; it was just how they wrote it. There was no report from the FACCC. (See Lori and Kate's comments in the attachments)

2. Students: Mary Mirch reminded us that we need to make our identity known on our campuses. We need to keep track of articulate students who could be used to testify to the Board of Trustees in our districts. A key time will be in January when the Governor's budget comes out.

3. Call to Action: Lori feels we need to contact anybody and everybody of influence and ask that they support the backfill. Lori passed out a copy of a memo she sent out to her administrators. Lori requests any and all ideas on how to get the word out. Since access and equity are key words we need to focus on how we help student access, how we have equity between all socioeconomic groups and the equity we share with higher education. Remember we have Robert Turnage, Linda Michaelowski and Mary Gill working with us in Sacramento. This is the first time the system is backing us, not us begging the system to help. Kate reminded us that while the backfill is significant, it would not replace reimbursement. 35% of our community colleges received reimbursement. When the fee increase was put in, a cookie was added that increased funds for financial aid outreach. What that means is a greater number of students will be informed of financial aid and will apply thereby increasing the number of students receiving financial aid and NOT paying the health fee. Two tables determined the amount of the backfill that Mary Gill developed. It listed all the community colleges, their enrollment, number of financial aid recipients, health fees collected and the backfill needed to replace the fees lost by students on financial aid. Totaled up it was equivalent to 14 million.

Advocacy Thoughts by Susan Quinn: Susan feels we should not only focus on access to education, but on access to health care. With the recent release of information on the growing numbers of uninsured people in the country this is a great time to focus on access to health care. Susan discussed the Governors Prevention Advisory Council that she and Ed Connelly were asked to join. The District Attorney's office is represented, as are the CSUs and UCs. Access to health care is the main line of interest for this group with a focus on drug and alcohol prevention. There is 12 million dollars over 3 years for the state of California. RFPs that propose

collaboration with the CC system will be given higher preference. Susan's group has a strategic first point of binge drinking in people under 25 years of age. Susan recommends you contact your county drug prevention agency and see if you can get involved.

- b. Data Collection 2003-2004: Mary Mirch has passed out a spreadsheet identifying those colleges who have responded or not responded to the spring 2003 survey. If you haven't responded please do so asap. The survey was built after the May teleconference where the chancellors office wanted to know what the basic health services were. The survey was based on Title V. Kate reminded everyone that the annual data collection survey was sent out 10 days ago over the list serve. It will be sent out again and Becky Perilli will be collecting the data. We need the data from last fall. If you don't have the particular information requested, skip it and give us the info you have. The first question that deals with hours of operation will be simplified. It will ask if you are open in the daytime, evening (after 5 pm) and on the weekend. It is different from the 03 survey in that we are asking specifically how many students go through your health center. These stats will be reported to the Chancellors office and/or Board of Governors.
 - c. Conference Update: See earlier minutes for specifics of Asilomar. Only issue not discussed is the CEUs. We now have our own provider number. There is a \$250.00 fee and application process that is done every two years. Mary Mirch will be responsible for the first two years but will not do it after that. As long as her license number is on the BRN registration CEUs will be done in a way that she is comfortable with. Mary distributed forms that must be completed by anyone planning to present a topic that will earn CEUs. She needs the forms completed as soon as the presentation is set up. Technically she should possess these forms before the CEUs are advertised. For presentation purposes 50 minutes is considered an hour.
 - d. Health Fee Elimination Mandated Fee Audits Status: Lori feels that the bottom line is everyone who received MOE funds will probably be audited. Kate advised continuing to file for claims because the MOEs were not eliminated. Lori cautions accuracy in filling out the forms. Use rulers to assure you are writing on the correct line. Anza said she had to send out blacked out student records to prove that tasks were preformed. All you are required to produce is the past three years, don't provide more than that.
8. New Business:
- a. Reorganization of HSACCC: A sub committee was formed at the executive retreat last summer to address the issue of a statewide model for the HSACCC. Kate, Lori and Susan presented their proposal at the executive board meeting yesterday. The ensuing discussion expanded the format that the sub-committee had presented. A number of specific duties,

like notifying other constituencies of a change in leadership, liaison with the Webmaster, etc. could be assigned to a new position of corresponding secretary. The current by-laws describe the executive committee as almost everyone in the room. When an executive committee consists of 30 members, it is difficult to get them together for meetings. We do it once a year at the state meeting but it is felt that the executive committee needs to meet more frequently. The proposed reorganization creates a Board of Directors that meets more frequently and makes decisions brought to the state meeting for discussion and voting when necessary. (See attached flow chart) Another reason to change the structure is that we have no statewide election. For instance, the south did not get to vote Kate into the statewide presidency; she just inherited it because the north voted her in during a year where she would inherit the state the following year. A lengthy discussion followed that included changing the structure of the current 10 regions. A straw vote of members present indicated unanimous support of structure changes. The task force was enlarged to include Sharon Manakas, Becky Perilli, Mary Mirch (past state president) and Chris Hogstedt was appointed the by-laws committee chair by Lori and Kate.

- b. Webmaster Liaison: Kate discussed a pressing need for a liaison person who would review data that would be put on the website before it goes to the Webmaster. Naomi has been that person but she is no longer able to do this. Sandy Samples suggested that the north and south president-elects could fulfill this job until an official liaison is named. Kate also needs a person to handle the virtual health center. Alice has done it but as chair of the state conference she needs help. It is a task-oriented job with most of the topics managed by different people. For instance, Kate is in charge of the nutrition sites. However, when updates are needed, they need to be forwarded to a person who would review then forward them to the Webmaster. This way Micah is only dealing with one person. Get in touch with Kate if you are interested. Mary Mirch reminded us that this could be delayed while we address critical issues like the backfill. There is a link on the web site that connects you with the Webmaster. Lori will talk to her health educator to see if she is interested in the job.

9. Region Reports: None, none of the regions have met yet.

10. Adjournment: Meeting adjourned at 1:18 pm (MSC: **B. Hoffman/C. Hogstedt**)
To adjourn meeting, all ayes.

Respectfully submitted,
Elizabeth Benne
Secretary, Southern Section

Executive Retreat Goals
June 12, 2003

1. Continue to address long-term funding issues for health services.
Strategies:
 - a. Continued participation in the Consultation Process
 - b. Continue to develop working relationship with the Chancellor's Office.
 - c. Develop connections with the Legislative bodies
 - d. Development of alternative funding sources for Health Services
 - e. Collaborate with other stake holders to promote health services in CCCs (eg. CSSOs, Financial Aid, CALSAC, Psychological Consortium)

2. Present accurate usable data about health services in California Community Colleges.
Strategies:
 - a. Completion of basic annual survey by October 1, 2003
 - b. Complete data collection project related to Title V services by July 1, 2003.

3. Assure adequate information resources for the membership.
Strategies:
 - a. Establish ongoing web page administration and maintenance
 - b. Formalize communication chains through electronic communication.

4. Conduct an educational conference in Spring 2004 specific to the needs of those responsible for health services in CCCs.
Strategies:
 - a. Involve community college decision makers effecting provision of health services.
 - b. Focus on administrative issues specific to community college health services.
 - c. Actively seek additional financial sponsorships.

5. Maximize organizational effectiveness through evaluation process of current structure.
Strategies:
 - a. Evaluate current organization structure and its challenges
 - b. Identify potential solutions
 - c. Education and dissemination to membership of proposed changes.
 - d. Implementation of revised organizational structure by June, 2004.

6. Develop ongoing budgeting process for the organization.
Strategies:
 - a. Establish working budget for 2003-2004 to be accepted by the membership at Fall 2003 section meetings.
 - b. Investigate the impact of changes in current tax laws.

Presentation to the CCC Board of Governors
Tuesday September 9, 2003

ACCESS, EQUITY& THE TWO EDGED SWORD

Good Morning, Ladies and Gentlemen... My name is Lori Brault. I am the Director of Fullerton College Health Services in North Orange County California. I am here representing Health Services Association of California Community Colleges as its President Elect. Yesterday we thanked the Budget Task Force and Consultation Committee for endorsing a proposal for Health Fee backfill funding. Today I would like to thank Kate Clark for bringing up the issue of funding access to health care in her powerful panel representation.

Without that future funding stream (Backfill of health fee waiver for low income students), the Community College Health Centers will not be able to continue providing health care access to our 1.5 million students. There is already an issue of equity or lack of equity with the health service access of CSU and UC systems' students. With the student health fees collected in community colleges 6-10 times below the level of UC and CSU health fees, CCs have still provided access to health education and health care to our students whether or not the health fee was paid.

Today in 2003-2004 CC Health Services are facing a severe funding crisis which will impair student access and Health Center survival. That crisis is a TWO-EDGED SWORD of the new funding for student financial aid. On the one hand the funding provides opportunities for more students to apply for and receive financial aid which is very desirable. However, the other side of the sword is that each new student enrolled in financial aid on CC campuses no longer pays health fees and Health Services funding will be decimated. Our HSACCC organization has prepared a document that looks at all the services provided by CC Health Centers which are threatened by funding losses. I have copies to share with the audience today.

Student access to these health services is in jeopardy and that means that 50-65% of CC students who report that they have no other access to health care (and no health insurance) will be denied a [health] service that is considered the most basic service on CSU/UC campuses. In fact the UC system is so concerned with health care costs that in addition to providing very extensive Health Services on their campuses they are requiring additional health insurance to cover catastrophic illness for all students. That occurred as a result of a 2000 finding that 25% of UC college drop outs did so for health reasons. Community College students, of all college students, can least afford to pay the cost of health care in the community if CC Health Centers can no longer provide services.

If the 50-65% of students who use CC Health Services as their only health resource are the students who do not pay health fees, it is critical that a consistent health service funding mechanism be approved. Our CC students who

have the greatest health access needs with no other resources should be able to continue to have access to CC campus Health Services.

In support of funding for student access to CC Health Services, I would like to leave with a quote from Earnest Boyer from Campus Life: In Search of Community:

“Wellness must be a prerequisite to all else. Students cannot be proficient if they are physically and psychologically unwell”.

PRESENTATION TO BOARD OF GOVERNORS MEETING 9-8-03

In SUPPORT OF Backfill of Health Fee Waivers

u

Good morning, ladies and gentlemen, my name is Kate Hartzell, and I am the Director of Health Services at Cabrillo College in Aptos, and am here representing the Health Services Association of CCC as its President.

First of all I would like to thank our colleagues on the Budget Task Force and Consultation Council for recognizing the importance of access to basic health services for our students at the college. The unanimous agreement by these bodies to endorse health fee backfill as part of the 2004-2005 budget proposal underlines their understanding of the impending crisis in health services on our campuses, and their discernment of the importance of our services to the core mission of community colleges.

As you know, our Health Centers depend on health fees for the bulk of our funding. The recent commitment to increasing Financial Aid outreach has been a real boon to our students, providing opportunity and ensuring access to higher education for our most needy populations. Unfortunately, as more and more students avail themselves of the financial aid help, their health fees disappear from our funding stream as well. This Catch 22 may well be the undoing of the Health Service System on many of our campuses, as it compounds an already crisis level situation for many of our budgets.

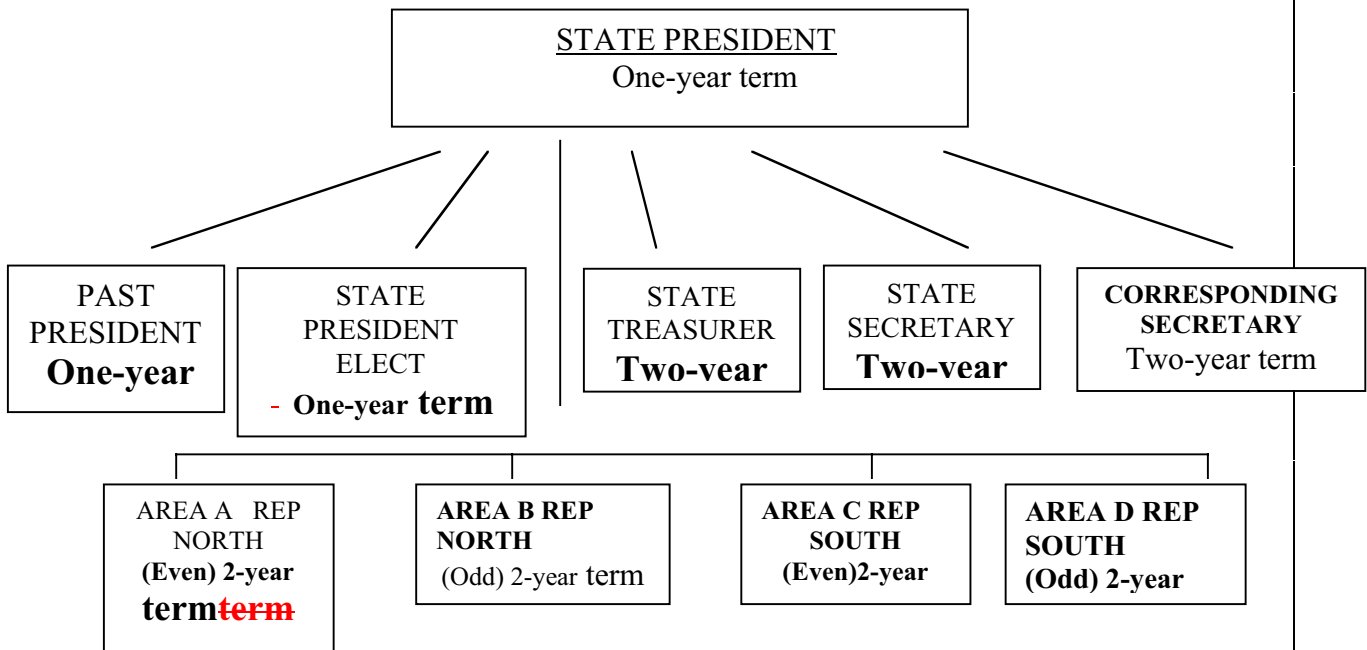
The basic services we provide are integral to ensuring that our students remain engaged, effective students. A study done by the University of California in 2000 showed that of their students who drop out of school, 25% do so for health reasons. The University chose to make health insurance mandatory for their students on the basis of that report, recognizing that without access to care, they were in jeopardy of losing more future wage earners for our state. Our student population is even more in jeopardy of suffering for lack of access. Our students are poorer in general, have fewer resources in the community, and are often dealing with substantial issues of social disruption. Imagine sitting in this meeting today with an earache, a toothache, or a migraine, and having no access to health care to get it taken care of. How well could you concentrate, and how effective could you be in pursuing your agenda for the day?

Because we are serve the wonderful diverse community that is California in our Community colleges, our students bring with them all of society’s problems as well. In California, it is estimated that about 40% of adults have no access to health care; this is not the same in community colleges. Of those students utilizing health services at my

college last year, over 65% had no other place to go for the kind of basic services we were able to offer them. Without our health center, many of these students would not have gotten care, received delayed care when they were sicker, or been unable to access care anywhere other than the local emergency department. This inappropriate use not only costs our communities, but often is the overwhelming bill that causes our students to have to give up school.

In the best of economic times, Health Services has come to the Board for economic stability. We applied for a BCP in the year 2000, citing lack of basic services on many of our campuses, and the risk of losing services on those campuses that were able to provide some minimal health care. This proposal was endorsed on every level up to the Governor's office. Unfortunately, in bad economic times, our situation has gotten worse. With increases in very appropriate and much needed BOG waivers, we threaten our low income students most in need of our services. With the loss of Mandated Cost reimbursement this year, many of our centers are threatened with closure. EOPS, matriculation and DSPS all managed to squeak through this year with minimal cuts in recognition of the essential work they do in keeping our students on the path of higher education and economic productivity. Please consider the unanimous endorsement of this funding for waiver replacement that the Budget committee has sent on to you as an endorsement of the need to maintain our health centers for the students of the community college system.

HSACCC REORGANIZATION PROPOSAL
EXECUTIVE BOARD STRUCTURE



CONFERENCE CHAIR

COMMITTEES

Nominating
By-Laws
Legislative
Communications (Web, listserv, Stethoscope,
Directory)
Membership

PRESIDENT WILL CONTINUE ROTATING BETWEEN THE NORTH AND SOUTH

NORTH AND SOUTH WILL CONTINUE TO HAVE DRIVE – IN MEETINGS IN THE FALL, WHERE NOMINATIONS OF OFFICERS OCCUR FOR SPRING ANNUAL CONFERENCE VOTE. (PRESIDENT ELECT SECRETARIES etc....)
DRIVE IN MEETINGS WILL BE PRESIDED OVER BY STATE OFFICERS

PRESIDENT AND PRESIDENT ELECT and PAST PRESIDENT ONE YEAR TERMS

TREASURER AND SECRETARIES MAY BE ELECTED TWICE (total 4 year)

TREASURER AND 2 SECRETARY POSITIONS ROTATE YEARS OF ELECTION

POSITIONS VOTED UPON AT ANNUAL CONFERENCE:

STATE PRESIDENT ELECT yearly north and south rotate

STATE TREASURER even year

Recording SECRETARY odd year

CORRESPONDING SECRETARY even year

2 Area reps each year(even/odd) (2 year term may be reelected for a total of 4 years