California State University, Chico

Division of Student Affairs

STUDENT HEALTH SERVICES
ANNUAL REPORT
2014-2015
Student Health Center, CADEC, Counseling and Wellness Center
I. Student Health Services Mission Statement

*The mission of Student Health Service is to assist each student with his or her diverse healthcare needs in order to facilitate maximum academic and personal growth.*

In carrying out the Mission and Goals of Student Health Services, we align our values with those of the Office of the Vice President for Student Affairs as follows:

1. **Diversity**: Student Health Services believes that each person is unique and values the individual differences within the campus community.

2. **Excellence**: Student Health Services commits to continually provide quality and cost effective healthcare to students.

3. **Growth**: Student Health Services promotes continuous advancement and improvement to its professional staff, healthcare services and health facility, within the guidelines of the university system, to meet the changing needs of the students.

4. **Integrity**: Student Health Services maintains its accountability to the university and the students through civility, respect, and honesty.

5. **Leadership**: Student Health Services encourages leadership and peer education opportunities to students through mentoring and nurturing.

6. **Service**: Student Health Services provides quality healthcare that is respectful, responsive, and accessible.

II. Accomplishment Highlights

1. **Reaccredited by Accreditation Association for Ambulatory Health Care (AAAHC)**

   - In October 2014 we had a two day accreditation survey with Dr. Dennis Schultz from AAAHC. The entire Student Health Center was surveyed looking at our patient care, policies and procedures, QMI studies, health education, pharmacy, laboratory, x-ray, infection prevention and safety, health information management and governance. The Student Health Center was not only awarded a 3 year reaccreditation but we achieved a perfect score.
2. **Medical Director**
   - Presented at the 2015 American College Health Association, on *Trauma Informed Campus*.
   - Presented “The Mind Body Connection: Treating Depression with Physical Activity-The Wellcat Fit Experience” at the UC Irvine Student Wellness Conference on Building Health Communities.
   - By invitation of Dr. Timothy White, represented CSU on the statewide CalMHSA Strategic Planning Steering Committee.

3. **Training**
   - One employee completed the Diversity Certificate program in the spring of 2015.
   - In May 2015, Stonewall Alliance provided Transgender Sensitivity training to the entire SHC staff.
   - Two SHC nurses attended the “Working with Transgender Clients” during transgender week in March 2015.
   - One CLS completed the Advanced User training from Orchard Harvest in April.
   - Pharmacist in Charge obtained certification in travel health and immunization in accordance with the new law SB-493.

### III. Changes in Policy and Procedure

In accordance with AAAHC guidelines SHC reviews any urgent policy changes and 1/3 of all policies annually. Highlights of some of the updates include:

- Denial of Care: change of title.
- Clinician Orientation Checklist: updated wording for entire checklist including a new section for Infection Prevention and Safety.
- Power Outage: updated to reflect current safety practice.
- Health Education: updated list of educational opportunities.
- Partner Treatment STI: updated to match current practice.
- Plan B: provide Ella instead of Plan B for women over 165 pounds.

### IV. Resources Summary

**Budget Summary**

- For the 2014-2015 fiscal year our revenue was $10,186,820.15 and our expenses were $5,414,916.61 for an ending balance of $4,771,903.54. Family Pact reimbursement provided coverage for $1,250,239.33 worth of expenses. The Student Health Center uses a prudent fiscal approach that coupled with multiple unfilled job positions allowed us to end the year with a healthy balance. The uncertain nature of Family Pact combined with increasing pharmaceutical and medical costs mandates that SHS
continue to pursue a student fee increase in the near future to assure our continued financial sustainability.

**Human Resources Summary**

The following staff recruitments occurred during the 2014-2015 fiscal year:
- Kathy Vargas: Office Coordinator (7/14)
- Margo Schneringer: Lab (6/16)
- Jessica Zapata: Medical Assistant (1/15)
- Carrie Goodeill: Emergency hire Clinical Assistant (5/15)
- Crystal Williams: Emergency hire ASA I (5/15)
- Cheryl George: Family Nurse Practitioner (11/14)
- Amy Harris: relief pharmacist (10/14)

The following staff recruitments are open: (2) RN II, HIM Coordinator, MA, Psychiatric FNP, (2) Clinical Assistant.

**Facilities/Equipment**

- 35 replacement printers were purchased and installed within SHC
- 6 additional white noise machines were placed around SHC to help ensure patient confidentiality and adherence to HIPAA regulations.

**V. Program Evaluation for Past Year**

The following areas were outlined in the 2013-2014 annual report as program goals.

- **Student Health Center.**
  The need for a student fee increase was shelved for the 2014-2015 academic year per the Chancellor’s directive. The Student Health Center continues to operate in a fiscally prudent fashion however our operating budget is based on student fees that were assessed over a decade ago. The need for a student fee increase is genuine and timely as our operating budget continues to grow with inflation and an increasing CSU Chico student population. To best meet student needs we will need a student fee increase in the short term.

- **Continue to grow and strengthen our RN triage team.**
  This past year we had a trial run for our RN triage system and saw great success. Our RNs were able to see students presenting with sore throats, warts, acute injuries and uncomplicated respiratory symptoms. This allowed our mid-level providers and physicians to see the more seriously ill patients. This coming year we plan on integrating the RN triage system fully with every walk-in patient seeing an RN.

- **Implement an IT Security and Staffing Plan.**
  The CSU Chico, Student Health Center (SHS) participated in a campus IT security self-assessment in 2012/13 and was included in the CSU CO IT risk
assessment in 2014/15. The CO IT risk assessment reviewed many areas including the security of our applications and encryption of our data including patient health records.

Working with Student Affairs and Information Resources, SHS worked to resolve more than eleven areas of risk including desktop encryption, encryption of data in transit, and data-at-rest or data storage. We expect all of the SHS applications to be fully encrypted prior to end of calendar year 2015.

There are two remaining areas to be resolved focused on security access profiles for SHS vendors and password strength utilized for all of SHS’s local applications (medical records, x-ray, lab, etc.). SHS will be required to sign in August exception letters for these two items to meet the CO IT risk assessment findings. To further strengthen SHS’s IT risk controls, SHS has contracted with Information Resources for the support of SHS’s servers, applications, encryption, and desktops.

- **Develop Student Learning Outcomes**
  During the 2014-2015 year our administration team and QMI leader worked with several students to write new student learning outcomes. Our goal was to demonstrate the effectiveness and worth of CSU Chico’s SHC as a vital contributor to the overall learning process.
VI. Ongoing Assessment Efforts

Usage Reporting

- During the 2014-2015 academic year, the SHC saw a slight increase in patient visits, up 407 visits for a total of 32,497.

- The staff at SHC provide a variety of services for students attending CSU, Chico. These services include but aren’t limited to: psychiatry, women’s health, dermatology, radiology, urgent care/walk-in, orthopedics, nutrition counseling, pharmacy, travel medicine and laboratory. The following chart illustrates the top five reasons students visited SHC this year.
TOP 5 VISIT REASONS

- Reproductive Health: 37%
- Upper Respiratory: 31%
- Immunizations: 15%
- Mental Health: 9%
- STI Screenings: 8%

Top Laboratory Orders

- CBC: 1093
- Pregnancy Test: 1169
- Urinalysis: 1248
- Direct Strep: 1849
- Chlamydia: 3254
VII. Analysis

- **Funding**
  SHC hasn’t had a student fee increase in over 11 years and as medical care and pharmaceutical costs continue to rise the need for a fee increase only becomes more urgent. SHC has had the fortune of retaining retired annuitants who work at a cheaper salary than regular staff but as those staff permanently retire, the cost of their replacements will be an added expenditure for our annual budget.

- **Services**
  We continue to look at ways to improve our service model, cut down on wait times, improve follow-up care and make sure all levels of staff are working at maximum capacity. Our triage model will come to full fruition in the fall of 2015 and we anticipate shorter wait times, less internal patient movement and ultimately increased patient satisfaction.
**SHS Student Learning Outcomes**

Students using the Student Health Service should become a more sophisticated and effective consumer of health care services, with the intended outcome of improved health and academic performance. As measures of this progress, students should:

a. Become aware of their patient rights and responsibilities as a health care consumer as articulated in the CSU Chico Patient Rights and Responsibilities

b. Be able to demonstrate their engagement in their health care by being able to state their level of understanding of the diagnosis and treatment approach recommended by the clinician at their most recent visit

**Assessment Methodology:**

Assessment methodology will be finalized by the QMI committee in conjunction with SHAC. Assessment will likely consist of survey type questions, both Likert and open-ended, corresponding to the above learning outcomes. Demographics will be collected, and IRB approval will be sought. The students will be surveyed once a semester, and the Campus Labs platform will be used to collect, store, and analyze data.

Initial implementation of the survey will be expected Spring 2016, after IRB approval is granted and survey methodology is finalized.
I. Department Mission Statement

The Counseling Center holds the fundamental belief that a student’s intellectual and personal development is inseparable, and that the University’s primary academic mission is most fully served through the development of the whole person. The Center strives to achieve this through the delivery of a variety of services intended to enhance personal and academic effectiveness, interpersonal growth, emotional support in crisis conditions, and promote a healthy campus environment.

The CWC and VPSA share common goals on multiple levels:

*Diversity:* The CWC staff and faculty believe that systemic social inequalities negatively impact the intellectual and psychological development of all our students. We believe that in addition to helping individual students navigate an imperfect system, our staff must also work on their behalf to eliminate forms of oppression throughout campus.

*Excellence:* CWC is committed to providing state-of-the-art clinical and training programs. This includes ensuring that our clinicians have ample opportunity to participate in professional development so they are able to deliver services that reflect the most recent advances in our field.

*Growth:* CWC is consistently meeting the demands of a growing student body with diverse needs. We will continue to assess students’ needs in order to adapt and grow with the population.
Integrity: CWC takes very seriously our commitment to students’ rights to confidentiality and balancing this with our accountability to the university’s policies on privacy and security.

Leadership: CWC encourages leadership and campus-wide mental health advocacy through its peer education and internship programs.

Service: CWC staff and faculty are committed to creating a welcoming environment to students, staff, and faculty that is safe, free of judgment, and readily available.

II. Departmental Accomplishments

Top 3 accomplishments during 2014-2015

• Reaccredited by the International Association of Counseling Services (IACS)
  In the Fall, 2014, materials were submitted to IACS for a “paper review” of CWC’s services. The center will undergo a field visit in four years (2018-2019).

• Significant expansion of the UMatter outreach and peer education programs
  The campus response to the UMatter outreach program has been tremendous. Since the program started in 2012, we have reached thousands of staff, faculty and students through our PR campaigns, events, and trainings. When the CalMHSA Student Health Initiative grant ended in June, 2014, it was clear that this program was effective in reducing the stigma associated with mental illness, and the campus was open to more programming. With new support from the VPSA, we were able to hire part-time three graduate students to develop programs, plan events, and build a social media presence. In the fall of 2014, the program recruited its first crop of UMatter interns who took the message of positive mental health “to the streets.”

  UMatter is now housed in Brice House, and 10 interns are on deck to provide suicide awareness training and positive mental health education to the Chico State campus.

• Assisted in the rollout of the CSU Red Folder and developed outreach programming for staff and faculty
  One of Chancellor Tim White’s first directives was for CSU mental health professionals to develop a resource for staff and faculty that would assist them in identifying students in distress and giving them a distinct protocol for referring students to appropriate resources. A CWC counselor participated in the conversations to help develop this resource.

  The Red Folder, modeled after a similar resource available to UC staff and faculty, was distributed to all Chico State staff and faculty in the fall of 2014. CWC staff developed a companion in-person training, “Helping Distressed Students” that was presented to multiple departments on campus. In the spring of 2015, an electronic copy of the Red Folder was pushed to all campus PC-based computers. In-person training will continue to
be offered by CWC in the hopes of identifying more students who may not have the strength to refer themselves to counseling.

Other significant accomplishments during 2014-15

• Completed two-year CalMHSA Student Mental Health Initiative grant
• Invited to participate in the national Jed & Clinton Mental Health Matters Campus Program
• Successfully completed Retention, Tenure and Promotion (RTP) evaluations of four temporary faculty
• Successfully recruited two new counselor faculty (one of whom is a member of an underrepresented community) to begin work in Fall, 2015
• One counselor faculty completed the Diversity Certificate program in Spring, 2015
• One staff member currently enrolled in the Diversity Academy program

III. Changes in Policies and Procedures

• Developed a system for managing a significant increase in walk-in traffic that includes identifying a backup triage counselor for high-traffic periods.
• Moved to texting to confirm student appointments, thereby significantly reducing the number of students who did not keep their appointments.
• Clarified and improved the hospitalization process for students are at risk of harming themselves or others. It is now standard procedure for CWC to prepare a treatment summary that is delivered directly to hospital or other emergency care staff when a student is transported.
• Clarified CWC’s policy on providing Letters of Support for Withdrawal, and how this policy is communicated to students. Rather than giving all students blanket notice (via signage and a handout) that the CWC “does not provide such letters,” the autonomy to make these decisions has been returned to the counselors. That is, students are not told “up front” that we do not provide Letters of Support. Rather, individual counselors will continue to explain their clinical rationale for honoring or denying the student’s request.

IV. Resources Summary

Budget summary

• As of fall 2014, the CWC budget now includes expenses to run the UMatter program. This includes salary for one part-time CWC counselor and three part-time graduate student staff members. The estimated UMatter budget for 2014-2015 was roughly $80,000.

Staffing
Fall, 2014
- Dr. Brian Reinhardt out on Family Medical Leave (mid-semester)
- Dr. Georgina Maltby hired part-time
- Dr. Mimi Bommersbach returned from (FERP) (mid-semester)
- Dr. Stephanie Chervinko succeeded Dr. Lisa Quinn as Training Director

Spring, 2015
- Dr. Georgina Maltby gave notice that she was leaving Chico State for new employment
- Tara Donnell, LMFT hired part-time (for one semester only)
- Chris Sims, LCSW and Jessica Magallanes, PsyD were hired in June, 2015 and will join the staff in Fall, 2015

Facilities/Equipment
- Recording equipment in all trainee offices was upgraded from video cameras to web cameras. The process of recording and reviewing sessions is now more efficient for both trainees and supervisors. Web cameras are the “gold standard” for most training programs in the country, so this was a significant step toward making the CWC Training Program nationally competitive.

V. Program Evaluation for Past Year

GOAL: Successfully complete IACS Paper Review
(Met)
- CWC was reaccredited by IACS in Fall, 2014

GOAL: Successfully recruit at least two master’s-level interns for the Training Program
(Exceeded)
- 3 MFT interns successfully completed the CWC Training Program (this is our maximum capacity for trainees).
- 1 MSW advanced intern also participated in the formal Training Program.

GOAL: Successfully recruit and hire two full-time temporary counselor faculty members, attending to CWC and CSUC diversity goals
(Met)
- 2 temporary counselor faculty were hired in June, 2015
- One of these new hires identifies as a member of the LGBTQ community and is of Latino heritage.

GOAL: Increase awareness of and accessibility to CWC services
(Exceeded)
- Our outreach efforts in 2014-2015 certainly had an impact on CWC’s usage. While we were able to accommodate nearly all students’ requests to see a counselor within a two-week window, many of these students accessed services through our Urgent Walk-In
(UWI) system. These appointments are brief (20-30 minutes), and they are designed primarily to assess for suicidal or homicidal ideation. With limited appointments available, (UWI) became a de facto point of entry for many students. Not only did this have an impact on the counselors’ workload, it also raised questions about the effectiveness of our services. That is, if students are only able to see a counselor for one or two brief sessions, the therapeutic effect of these sessions may be minimal (thereby increasing the likelihood that students will fall into crisis later).

This is a nationwide problem, and CWC will continue to participate in the conversation about how to best accommodate student mental health needs with limited staffing resources.

**GOAL: Identify Student Life & Leadership Diversity Goals for SHS, CWC, and CADEC**

*(Unfinished)*

- We will continue to work with the Student Health Service and CADEC to identify diversity goals for our merged units

**VI. Ongoing Assessment Efforts**

**Program Usage**

**5,904** students utilized counseling services during the 2014-2015 academic year. This is compared to 5,432 students who utilized services in 2013-2014, or about a **9% increase**.

The three most common presenting concerns of students (as identified by the counselor) were anxiety, stress and depression. Of particular note, counselors identified a history or thoughts of suicide as a presenting concern for approximately 8% of students in their initial interview.

Appointments by type:

- 1,362 Urgent Walk-In
- 2,968 Individual Therapy
- 16 Couples Therapy
- 633 Intake (New Client) Appointments
- 790 Group Appointments (119 clients)
- 104 Consultations for Group
- 20 In-person or Phone Consultations
- 11 Telephone Sessions

**1,635** (approximately) staff, faculty and students were reached through UMatter events, trainings, and other presentations by CWC staff. This does not include “passive” outreach efforts through the UMatter Facebook page and other social media. Examples of presentations and trainings included:

- “Helping Distressed and Distressing Students” for Chico State staff and faculty
- “Oh, No, You Didn’t! The Interpersonal Risks and Rewards of Challenging Intolerance” for Conversations on Diversity & Inclusion
• “The Power of Resilience” for the 2015 PAUSE Retreat
• “Zen and the Art of College” for the Student Learning Center
• “Achieving Your Healthy Balance” for EOP Summer Bridge
• “Healthy Transitions” for Parent Orientation
• “Stress Management” for the Student Learning Center
• Expert panel participation for Suicide Prevention Week, Take Back the Night and Love Every Body Week

CWC Groups continue to be a popular counseling modality for Chico State students.

Psychoeducational Groups:
• Coping with Panic
• Just Breathe (4 sessions, relaxation and meditation skills)
• Peace of Mind (3 sessions, anxiety reduction skills)
• Self-Esteem & Assertiveness

Process-Oriented Groups:
• Bipolar Support Group
• Coping and Regulating Emotions (a Dialectical Behavioral Therapy group)
• Family Issues
• Not Facebook (for students struggling with social anxiety)
• Prisms (for survivors of sexual assault)
• Self-Compassion (self-awareness and relationship group)

VII. Analysis: What actions need to occur to move the program to the “next level”? 

The CWC staff continues to define its role on the Chico State campus and its place as a major training site for mental health clinicians in Northern California. We are proud of the work we do to help individual students break cycles of intra- and interpersonal violence. For us, the “next level” means utilizing the principles of counseling psychology to affect the campus culture on a more global level.

The “next level” includes,

• Creating a collaborative, interdepartmental mental health task force.
• Attending and presenting at conferences on college mental health.
• Securing grant funding to innovate new programs for students.
• Continuing to recruit and hire mental health clinicians who represent the diversity of our students.

VIII. Goals: Present goals for the next academic year

GOAL: Hold a CWC staff retreat in order to 1) integrate new staff into the CWC culture, and 2) renew the current staff’s commitment to serving the Chico State community
GOAL: Create a campus Mental Health Task Force to comply with JedCampus recommendations

GOAL: Implement an online mental health screening program to comply with JedCampus recommendations

GOAL: Develop a position description for a UMatter Coordinator and complete the recruitment and hiring process

GOAL: Implement ProtoCall, an afterhours crisis counseling resource

GOAL: Expand the “Comfort Zone” to include more self-help mental health resources that students may access without an appointment

GOAL: Update the CWC website and include more resources for parents

GOAL: Identify Student Life & Leadership Diversity Goals for SHS, CWC, and CADEC
I. UPDATED: Departmental Mission Statement

The Campus Alcohol & Drug Education Center is committed to providing evidence-based educational programs and services that raise campus awareness about alcohol and drug abuse. CADEC strives to encourage, enable and empower students to make responsible and healthy choices, especially in areas where substance abuse is a concern. (Also See NCHIP AIM Statement Attached)

CADEC’s mission is aligned with CSU Chico’s institutional mission in many important ways:

- A Commitment to Excellence in our prevention and education programming
- Dedication to Research based practice
• Commitment to **Innovation**
• Constant striving to **Serve** the local, regional and global communities
• A **Collaborative** spirit
• We embrace, engage and celebrate our **Diverse** community

**II. Departmental Accomplishments –**

• Awarded $10,000 seed money grant by the Stacie Matthewson Foundation – Transforming Youth Recovery to establish a Collegiate Recovery Center at CSU Chico
• Eighteen completed NCHIP Task Force Studies involving at least seven different campus departments and one community under the NCHIP Improvement Model for Change (PDSA – Plan-Do-Study-Act)
• At least eight more NCHIP Studies are actively being conducted involving at least nine different campus departments
• Creation and implementation of “Students Seeking Recovery” weekly support group for students wanting a confidential, non-judgmental setting in which to explore substance misuse and recovery options. Weekly group co-facilitated throughout the 2014-2015 academic year by Program Director – a Licensed Advanced Drug/Alcohol Counselor and two peer educators employed and trained by CADEC who are living in recovery
• Following presentation at First Friday by NCHIP Task Force five new departments became actively engaged members of the CSU Chico NCHIP Task Force – newest partners include: Student Judicial Affairs, Academic Advising, AS Productions, Accessibility Resource Center, Fraternity and Sorority Affairs
• Development and Implementation of Parent Education Workshop for Summer Orientation: “College Drinking: Science, Myths & Realities” 234 Parents/Caregivers attended 27 separate workshops – Outcomes Data included as an Appendix

**Other Accomplishments:**

• Implemented a training on-campus on the evidence based model, Screening, Brief Intervention and Referral to Treatment (SBIRT) in collaboration with the UCLA’s Integrated Substance Abuse Programs; Facilitated by Dr. Jim Peck of UCLA
• Completed execution of Memorandum of Understanding with Skyway House Drug and Alcohol Treatment Center (a subsidiary of Acadia) for implementation of the SBIRT Model at CSU Chico. Skyway House is currently hiring a Certified Drug and Alcohol Counselor who will be based at the CSU Chico Student Health Center providing SBIRT three days per week and at CADEC two days per week providing BASICS sessions

**III. Changes in Policies and Procedures**
• **Peer Staffing Update:** In order to provide student staff with more meaningful and intentional learning experiences we implemented a change in our student staffing structure and also added student staff positions to more effectively serve students and the campus community. Since CADEC currently has no professional administrative staff, student staff play a vital role in the day-to-day operations of CADEC, office management and the creation of a welcoming, non-judgmental environment which students feel safe entering and asking for help with challenging personal concerns. CADEC Peer Educators also play a critical role in CADEC’s outreach, prevention and education efforts. Student staff are now able to choose between two different opportunities in providing service at CADEC: Student Office Assistant or Peer Educator. Delineating these two vital student roles has allowed for much better functioning of our team, improved our operations and allowed us to provide more effective service. We also created the student staff position of “Lead Office Assistant” and “Lead Peer Educator” providing new, unique opportunities to take on leadership roles. Lastly, we have created the new student staff position of “Recovery Peer Mentor/Collegiate Recovery Assistant.” This is a Graduate student position and directly serves our newly formed “Wildcats Seeking Recovery” program.

IV. Resources Summary

- **Budget Summary – CADEC Operational and Programming Expenditures NOT including Travel and Salaries Totaled:** $28,607.43

- **Staffing –**
  - Trisha Seastrom – 1.0 FTE, Program Director, Licensed Advanced Drug & Alcohol Counselor
  - *Currently offering position & negotiating salary for top candidate -*
    - 1.0 FTE - Prevention Coordinator
  - Sadie LaBriere – 0.5 FTE – BASICS Facilitator

- **Facilities/Equipment – CADEC maintains significant needs for new space within the Student “Success” Center, also known as the Student Services Center – CURRENT SPACE ISSUES:**

- **No confidential waiting area for students, parents**
• Serious confidentiality concerns with current individual offices (2) – voices can still be heard even with sound machines in use
• Individual “offices” (2) were not designed for clinical use with more than one person in the room
• No individual office space available for new hire, CADEC Prevention Coordinator
• No private area for quiet, confidential computer testing of students sanctioned by university to complete: Marijuana 101
• No space for Peer Educators to meet privately with a student to provide peer counseling
• Team of 15 CADEC Peer Educators, Fall 2015 – more than ever before, to meet the increasing demand for collaboration requests with CADEC and also fulfill the Red Watch Band program = No space for this large number of Peer Educators to work, meet and collaborate
• No space for Collegiate Recovery Center
• No space for Recovery Support Meetings for Students Seeking Recovery Options, for 12-step meetings – AA, NA, SMART Recovery – Student AA Meeting has decided to take meeting off-campus due to CADEC office space situation changing as a result of campus closure not allowing them a 7:00 PM meeting year-round – this is a tremendous loss to our students seeking recovery options

V. Program Evaluation for Past Year –
Program Goals

• The NCHIP CSU Chico Aim Statement will serve as the driving force behind any and all CADEC Department goals (see attached) – (Met and continuing)
• Complete application for National Institutes of Health/National Association on Alcohol Abuse and Alcoholism (NIH/NIAAA) R01 Grant for Screening, Brief Intervention & Referral to Treatment (SBIRT) and Brief Alcohol Screening & Intervention for College Students (BASICS) for CADEC and Student Health Center and Skyway House collaborative system of care program to serve our students. (Unmet due to staffing loss: Continuing to develop and seek appropriate future funding as staffing expands)
• Complete project to take electronic (on-line) Part One and provide students with Personalized Feedback for of Brief Alcohol Screening and Intervention for College Students to accomplish three goals:
  • Provide better use-interface for students; increase satisfaction
  • Provide more effective personalized social norms feedback to students
  • To increase student capacity for BASICS Program
  • (Met)
• Work with campus partners such as UHFS, FSA, Athletics and CWC to expand the utilization of BASICS beyond just the mandated student population to targeted student populations (On-going)
• Collaborate with Peer Educators and other students in recovery to facilitate a weekly Recovery Support Meeting with CADEC Program Director on campus throughout this coming academic year with the objective of providing a safe space and open forum for any student seeking exploration of or options in regard
to reducing or stopping their substance use. Any path to recovery will be a welcome topic in this setting. (Met)

- Develop an established fee structure for the CSU Chico BASICS Program (Met)
- Develop an established fixed budget for the CADEC Department (Met)
- Continue to enhance collaborative programming with the Student Health Center, the Counseling and Wellness Center and U Matter through a regular collaboration forum with program leadership as well as regular forums for collaboration and team building between these programs’ teams and students (On-going)

VI. Ongoing Assessment Efforts

- DATA ON PROGRAM UTILIZATION:

Clinical Services –

- Individual Clinical Assessments (Provided by Program Director - Licensed Advanced Alcohol & Drug Counselor) –
  - 120 individual clinical assessments were conducted.
  - 43 students received on-going stabilization and pre-treatment services including additional Individual Counseling Sessions and Referrals to formal treatment
  - 26 family consultations were provided
  - 67 Individual Assessment Referrals received from Student Judicial Affairs (41 complete; 26 pending)

- BASICS Program – Brief Alcohol Screening & Intervention for College Students (Provided by BASICS Facilitator)
  - 268 Referrals Received from Student Judicial Affairs (236 completed; 32 pending)

- R.A.D.A.R. Class – Raising Awareness of Alcohol & Drug Responsibilities – Three hour Peer Taught Class for students referred by judicial affairs who have violated campus alcohol & drug policy – Provided this academic year only for a limited number of students who were severely delinquent in completing the B.A.S.I.C.S. program they were originally assigned to
  - 12 students participated in R.A.D.A.R. this academic year.

Other Evidence-Based Training Programs

Wildcat ROAR! Alcohol Overdose Prevention/Bystander Intervention

- 37 individual workshops conducted
- 622 Students Certified in 2014 – 15 Academic Year
- Program fully evaluated through Stony Brook University and CSU Chico (see section on Learning Indicators)
• **Mental Health First Aid Certification Training**
  • Four Trainings conducted
  • 90 Students, Faculty, Staff Certified
  • Program evaluated through National Council on Behavioral Health

• **Mindfulness Based Stress Reduction Class**
  • Two courses offered (Fall & Spring)
  • 50 students/faculty/staff trained
  • Program evaluated through University of Massachusetts at Amherst

• CADEC served more than 1,200 other students through additional specialized Alcohol & Drug Prevention Trainings created for student organizations and campus departments upon their special request during the 2014 - 2015 academic year. *An exhaustive list of these specialized trainings is available if desired*

**Newest CADEC Outreach and Collaboration:**

**Wildcat Welcome Week** – CADEC served 923 students


**Labor Day/Wildcat Way Weekend** – CADEC served more than 1,020 students (Included newly developed Midnight Pancake Breakfast format)


**National Collegiate Alcohol Awareness Week** – CADEC reached more than 1,433 students with vital alcohol prevention and safety information

**Partners:** U.H.F.S. Programming, A.S., UMatter, WREC Center, Skyway House

**Prescription Drug Awareness Week** – CADEC reached more than 3,000 students, faculty and staff with prevention messages about prescription drug abuse

**Partners:** Skyway House, Enloe Medical Center, Butte County, UMatter, U.H.F.S. Programming, A.S.
On-Going Outreach and Collaborations:

Halloween – 2,000 water bottles were distributed and nearly 600 students attended Midnight Pancake Breakfast. Four student organizations came together to volunteer and a total of 300 individual students.

Partners: Inter-Varsity Christian Fellowship, Campus Cru, Fraternity and Sorority Affairs – five FSA chapters, A.S.

The Giving Tree – two local non-profits partner with CADEC and a myriad of students, faculty and staff to make this special program happen. This year a record over 500 individual gifts were purchased for local needy children.


Sexual Responsibility Week – CADEC Peer Educators reached 450 students with free packages of condoms and safety information regarding alcohol and sex.

Safe Spring Break – CADEC Peer Educators reached 500 students with prevention messages– a re-useable plastic cup stating, “Lead the Break” with alcohol safety tips on the other side

• MOST CRITICAL PERFORMANCE INDICATORS/ LEARNING OUTCOMES:

• Wildcat ROAR! Post Test Result 2014 - 2015
Did you know CSU Chico has been perceived as a "party school" prior to workshop?

- Yes: 68%
- No: 32%

Has your perception of CSU Chico's social environment changed or have your concerns changed since participating in the Wildcat ROAR workshop?

- Yes: 68%
- No: 32%
As a result of Wildcat ROAR! training, I am more willing to intervene as a bystander in an emergency?

- Strongly Disagree: 0%
- Disagree: 1%
- Neutral: 14%
- Agree: 83%
- Strongly Agree: 0%

I would recommend Wildcat ROAR! Workshop to a peer

- Strongly Disagree: 0%
- Disagree: 0%
- Neutral: 3%
- Agree: 94%
- Strongly Agree: 0%
V. Analysis: What actions need to occur to move the program to the “next level”?

- Continued expansion of and campus-wide support of NCHIP Task Force and its effort will continue to move forward our most critical goals for CSU Chico alcohol and drug safety
- Further establishment and formalization of CSU Chico Collegiate Recovery Center, including identification of dedicated space and recognized student organization, will further work to modify institution reputation as one that supports students in recovery as opposed to a party school image
- Fill the Prevention Coordinator Position to free up time for Program Director
- Find adequate and appropriate space for CADEC within the Student Services Center in order for CADEC to fulfill its mission and the serve the needs of the students and families of this campus
- Grant funding will provide resources for additional staff and resources needed to implement evidence-based programming recommended by today’s best practice standards

VIII. Goals: Present goals for the next academic year.

- The NCHIP CSU Chico Aim Statements will serve as the driving force behind any and all CADEC Department goals (see attached).

Some specific CADEC Goals will include but are not limited to:

- Complete two-year CSU Chico High-Risk Drinking Survey and share data (NCHIP)
- Establish Screening, Brief Intervention and Referral to Treatment (SBIRT) Services at the Student Health Center through finalized MOU with Skyway House Treatment Centers; Evaluation these services
- Formalize new partnership with Counseling and Wellness Center (also an NCHIP Study) with CADEC providing Brief Alcohol Screening and Intervention for College Students (BASICS) service to students referred by CWC; Evaluation of these services
- Implement first semester of new CADEC semester-long Peer Health Educator Certification Class utilizing funding awarded through Student Learning Fees; Evaluation of this class
- Continue to work with campus partners such as UHFS, FSA and Athletics to expand the utilization of BASICS beyond the mandated student population to targeted student populations
- Continue to enhance collaborative programming with the Student Health Center, the Counseling and Wellness Center and UMatter through a regular collaboration forum with program leadership as well as regular forums for collaboration and team building between these programs’ teams and students
CSU Chico Health Improvement Program – Aim Statement

National College Health Improvement Program

Established by NCHIP CSU Chico Task Force, 4-22-14

California State University, Chico students, faculty and staff will work collaboratively to develop a comprehensive, evidence-based approach to reducing the harm associated with high-risk alcohol consumption. This approach will include both prevention and intervention on the environmental, individual and systems levels. ALL students will experience campus strategies to prevent harm associated with alcohol abuse. Students who have engaged in high-risk alcohol consumption will participate in programs appropriate to their individual needs. This effort will aid students in achieving their academic and personal potential, preparing each for a lifetime of learning and responsible citizenship and leadership.

Our specific goals will include but not be limited to:

- Expand screening activities utilizing evidence-based clinical and preventive practices including Screening, Brief Intervention and Referral to Treatment (SBIRT) and the Brief Negotiated Interview (BNI) at our Student Health Center.
- Ensure that 100% of students who experience a serious alcohol incident, on or off campus, complete a motivational enhancement intervention such as Brief Alcohol Screening and Intervention for College Students currently being offered at CADEC.
- Invigorate and sustain a culture of healthy choices around substances through correcting social norms with a comprehensive and on-going social norms campaign utilizing data collected from NCHIP surveys, AlcoholEdu, Healthy Minds Study and other campus studies.
- Establish and maintain the investment of multiple stakeholders within and around the campus community to sustain the “Keep It Local, Keep It Chico” and “Respect Chico” culture of community collaboration as well as the “Wildcat Way” messaging particularly on major holiday weekends: Labor Day, Halloween, Cesar Chavez Day, and Graduation.
- Engage students in reducing high-risk drinking through bystander intervention frameworks such as the Red Watch Band program utilizing a spectrum of "readiness to change" and "engagement" profiles.
- Further develop and increase the utilization of peer to peer models of education, prevention and mentoring on campus with the goal of reduced alcohol abuse and related harms and increased student satisfaction and success.
- Engage faculty, staff and students in this on-going effort to continually, with data, change the reputation of the institution from one of a “party school” to an institution of academic rigor, health and wellness.