Council for the Advancement of Standards in Higher Education

Counseling Services

Final Report

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**CAS Program Review and Self-Assessment
Final Report**

Executive Summary of Review Process

On November 5, 2020 the Self-Assessment process developed by the Council for the Advancement of Standards in Higher Education (CAS) organization was introduced to the Student Services Planning and Budget Team (SSPBT). Subsequent to the November 5th meeting, SSPBT approved the CAS standards for use as a replacement of the previous comprehensive program review. The CAS self-assessment guides (SAG) were chosen by each team leader as the appropriate tool to assess the programs /function within each department. The SAG consists of standards and guidelines used to evaluate the strengths and deficiencies of each Program and to plan for improvement opportunities within the De Anza College Student Services Division.

The CAS Standards and Guidelines consist of twelve Parts used for the review of each program/service area:

Part 1: Mission
Part 2: Program and Services
Part 3: Student Learning, Development, and Success
Part 4: Assessment
Part 5: Access, Equity, Diversity, and Inclusion
Part 6: Leadership, Management, and Supervision
Part 7: Human Resources
Part 8: Collaboration and Communication
Part 9: Ethics, Law and Policy
Part 10: Financial Resources
Part 11: Technology
Part 12: Facilities and Infrastructure

The review team for (Department Name) consisted of (blank) members. Members were recommended by the Student Development office.

Team Member Name	Team Member Title
Wil Firmender	Director
Kim Lee	Part-time Faculty
Suzanna Ramirez	Administrative Assistant

All CAS review team members were given training for the CAS review and provided with an Office365 Folder consisting of the following:

- A list of recommended documents to be gathered as evidence as a part of the self-assessment process.
- An electronic folder containing subfolders for storing evidence for each of the twelve parts.
- A copy of the Self-Assessment Guides (SAG) for the program/service area being assessed.
- A copy of the functional area guide which clearly outlines the components for each part of the standards.

During the team meetings, the CAS Committee team organized discussion around pre-identified rating discrepancies, open-ended questions as evidenced at the end of each section, and any other issues the Committee felt needed further discussion. Strengths, opportunities for growth, and action steps were also identified at each meeting for each section.

The following rating scale was used during the assessment.

CAS Raters Definitions
- DNA - Does not apply
- IE – Insufficient Evidence/Unable to rate
- 0 – Does not meet
- 1 - Partially Met
- 2 - Meets
- 3 - Exceeds

Summary of Initial Findings

==Conclusions==:

==Meaningful limitations to completion of the program review==:

Summaries
The following pages represent the Review Committee's collective responses and serves as the initial report.

Overall Section Average Scores

Section 1: Mission (1.5)

Section 2: Program and Services (1.75)

Section 3: Student Learning, Development, and Success (2)

Section 4: Assessment (1)

Section 5: Access, Equity, Diversity, and Inclusion (2)

Section 6: Leadership, Management, and Supervision (1.25)

Section 7: Human Resources (1.5)

Section 8: Collaboration and Communication (1.67)

Section 9: Ethics, Law and Policy (1.67)

Section 10: Financial Resources (1)

Section 11: Technology (1.75)

Section 12: Facilities and Infrastructure (1.25)

CAS Section 1 Purpose Summary

The primary mission of Counseling Services (CS) is to assist students in defining and accomplishing personal, academic, and career goals.

Section 1 Committee Summary – Average rating (3/2 = <mark>1.5</mark>)

CS has a good mission statement that clarifies how the department helps students reach their personal academic, and career goals. CS is working to improve on how frequently the mission statement is reviewed and, if needed, updated.

Achievements

CS embraces student learning and development by discussing how mental health affects academic performance. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

CS can improve on updating the CS mission statement and set a schedule for continuous review.

Action Steps

CS has not updated the mission statement or goals in 3 years. CS embraces student learning and development by touching on the following ICCs: 1.) Physical and Mental Wellness and personal responsibility and 2.) Civic Capacity for Global, Cultural, Social and Environmental Justice. It is our goal to create an updated mission statement by reviewing the statement and determining if the current mission fully encompasses the services provided. All the Psychological Services staff will attempt to achieve this key result within 6 months.

Section 2: Program and Services

CAS Section 2 Purpose Summary

Counseling Services (CS) must be guided by a set of written goals and objectives that are directly related to the stated mission. The CS goals must be aligned with institutional priorities and expectations of the functional area. CS must regularly develop, review, evaluate, and revise its goals. CS must communicate goals and progress toward achievement to appropriate constituents.

Section 2 Committee Summary – Average rating (7/4 = <mark>1.75</mark>)

CS offers a number of different services (Individual therapy, group therapy, support groups, crisis intervention, outreach, didactic presentations, workshops, limited case management) that help support departmental goals. Additionally, CS strives for being flexible in meeting the needs of De Anza students

Achievements

CS provides individual and group therapy to students experiencing mental of behavioral health difficulties, offers brief assessments to students, provides training to faculty and staff and outreach to students, including focusing

on different college subpopulations, such as international students, student athletes, LGBTQ+ students, and transferring students. CS has a variety of staff ranging from doctoral students to part-time faculty who collaborate heavily with staff from other departments, including athletics, Pride Center, Women's center, International Student Programs, Student government, transfer center, and individual academic departments. Additionally, CS strives to have staff members from diverse background to match clients with therapists who are most likely to meet their needs. CS incorporates research on effective psychotherapy practices but does not often consider theories on student learning. CS is designed to ensure access for all clients, regardless of age, ethnicity, gender, sexual orientation, or disability.

The objectives and goals of PS are to offer quality, campus-based mental health care to our culturally diverse student body; to help students in crises and to intervene in potentially life-threatening situations to ensure a safe and trusting environment for our campus community; to be proactive, respectful, and professional in responding to the needs, interests, and concerns of a diverse student community; to demonstrate leadership in the enhancement and promotion of student mental health through outreach, structured psychoeducation workshops and programs; to assist students with access to outside resources by developing professional networks with outside agencies; to establish and maintain consultative relationships with faculty and staff in order to enhance and create a conducive learning and living environment for all; to be a resource to our campus colleagues with respect to increasing the understanding of our students' mental health needs; to provide quality training in practicum and internship opportunities for graduate students in clinical psychology. To operate effectively, CS has a number of staff who can assist with crises, has the ability to respond to student demand by hiring new part-time faculty quickly, has 2 ways for students to use services, performs frequent outreach and ensures there this therapist flexibility in scheduling and hours available to meet the needs of students.

Furthermore, CS enhances the student experience by providing a safe place to discuss mental health and other sensitive topics. Providing such a resource helps students feel heard and can provide practical benefit by making sure mental health issues affect their school performance less than if there were no support. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

CS has a set of written goals that expand on the mission statement. CS does not regularly review or evaluate its goals. While CS provides outside resources to students, CS could improve in providing case management to students who need referrals for psychotropic medication. Although, CS could be clearer with its goals of improving student mental health and assisting faculty and staff as they encounter students with mental health difficulties, CS has strong outcome assessments, but it can be difficult to have each student complete both the pre and the post test. CS is clearly structured but relies on a mix of unpaid doctoral interns and part-time faculty, many of whom require supervision from a licensed provider.

Action Steps

CS has a set of written goals that expand on the mission statement. CS does not regularly review or evaluate its goals. It is our goal to create a process to annually review and evaluate appropriateness of goals by integrating feedback from the Psychological Services team, exploring outcome data relative to goals, as well as reviewing activities and collaborations to determine if they are aligned with goals, and if additional goals are needed. Kim Lee and Wil Firmender will attempt to achieve this key result within 6 months.

<u>**Section 3: Student Learning, Development, and Success**</u>

CAS Section 3 Purpose Summary

Counseling Services (CS) must contribute to students' formal education, which includes both curricular and co-curricular experiences. CS must provide counseling support to help students assess and overcome specific

deficiencies in educational preparation or skills. CS must contribute to students' progression and timely completion of educational goals. CS must help students and designated clients prepare for their careers and meaningful contributions to society. CS must work with the institution to identify relevant and desirable student success outcomes. CS must identify relevant and desirable student learning and development outcomes. CS must implement strategies and tactics to achieve these outcomes. CS must provide programming focused on the developmental needs of students to maximize their potential to benefit from the academic environment and experience.

Section 3 Committee Summary – Average rating (6/3 = 2)

CS contributes to students' progression and timely completion of educational goals by helping reduce mental distress. Such mental distress is likely to interfere with their ability to focus and concentrate. CS is working to consistently consider institutional core competencies when creating programs and offering services, as well as ensuring that all staff are aware of of the ICCs.

Achievements

By providing mental health services, CS helps students curricular and cocurricular experiences. Cocurricular experiences by providing individual and group therapy, and curricular experiences by helping them with organization or by helping improve their mental health so they're less distracted in class. It has been demonstrated that receiving mental health services improves student retention rates (Ashwood, et al; 2015). PS has created a demonstrable impact by improving student mental health, increasing critical thinking skills, and improving student communication and expression. Further, PS outcome assessment data suggests that students experience a significant decrease in symptoms presentation of depression, anxiety, academic distress, eating concerns, anger/frustration, alcohol use, suicidal thoughts, and thoughts of harming others. To address these needs, PS' mission statement and goals align with the ICC of Physical/Mental Wellness and Personal Responsibility, Communication and Expression, and Critical Thinking. Additionally, the most significant learning development and success outcomes are mental/physical wellness, critical thinking, and communication and expression. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

While we have outcomes for how much psychotherapy helps reduce client distress, we would like to add an outcome measure for students' subjective experience in both individual therapy and group therapy.

Action Steps

It is our goal to add an outcome measure for students' subjective experience in both individual and group therapy by identifying an outcome measure that encompasses the ICC of Physical/Mental Wellness and Personal Responsibility, Communication and Expression, and Critical Thinking and creating a procedure to implement staff use of the outcome measure with clients. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 1 year.

Section 4: Assessment

CAS Section 4 Purpose Summary

Counseling Services (CS) must develop assessment plans and processes that document progress toward achievement of mission, goals, outcomes, and objectives. CS must design assessment plans that incorporate an ongoing cycle of assessment activities. CS must have fiscal, human, professional development, and technological resources to develop and implement assessment plans.

Section 4 Committee Summary – Average rating (6/6 = 1)

CS uses standardized assessments to measure qualitative psychological outcomes for individual therapy. CS

will work to improve assessment procedure by analyzing outcomes more frequently, creating qualitative assessments, creating assessments for psychotherapy and support groups, and creating assessments for didactic presentations.

Achievements

CS creates a treatment plan based on the intake assessment – the CCAPS-34. Each staff is trained in conducting and distributing the outcome measure. CS has used the most recent data to track the outcomes of our clients. Recent data has shown a slight reduction in mental health difficulties for clients in the small data set collected. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

CS can improve in the following areas: streamline client intake assessment and data collection process; improve data collection for individual therapy as well as support and psychotherapy groups; improve process for reviewing outcome assessments; add qualitative outcome measure for individual therapy; improve organization of outcome assessment data; improve selection of didactic project topics.

Action Steps

CS creates a treatment plan based on the intake assessment – the CCAPS-34. Clients are then given the CCAPS-34 at session 5 and at session 10. We currently score the assessment via a secure internet platform, but CS would like to include the assessment process into the electronic health records platform. Currently, not every clinician remembers to send the follow-up assessments, and so some data is lost. It is our goal to integrate the assessment form into the electronic health records and improving data collection by reminding staff early each quarter regarding the need for additional outcome assessments, hold trainings in the middle of Winter quarter demonstrating the process of sending clients the outcome assessment, coordinating with PyraMed help desk, training the team on a new data entry method and update assessment instructions within staff manual. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 1 year.

Additionally, CS has a goal of reducing mental health difficulties of our clients, and we use the CCAPS-34 to assess this goal. When we collaborate with other departments, we do not typically have assessment measures. We could particularly use assessment measures when coordinating support or psychotherapy groups. It is our goal to create assessment measures when coordinating with other departments for support/psychotherapy groups by finding and reviewing outcome assessments other programs use for group therapy as well as selecting an existing outcome measure or creating a new outcome assessment.

CS has a formal assessment plan for measuring student mental health changes, though there is no established plan to review them throughout the year. It is our goal to create a timeline for reviewing mental health outcome data by determining how frequently data should be reviewed (e.g., quarterly, annually) and create a secured shared spreadsheet to track the outcome data. Wil Firmender and Kim Lee will attempt to achieve this key result within 6 months.

Section 5: Access, Equity, Diversity, and Inclusion

CAS Section 5 Purpose Summary

Within the context of each institution's mission and in accordance with institutional policies and applicable codes and laws, Counseling Services (CS) must create and maintain educational and work environments for students, faculty, staff, administrators, designated clients, and other constituents that are welcoming, accessible, inclusive, equitable, and free from bias or harassment.

Section 5 Committee Summary – Average rating (8/4 = 2)

CS strives to create an inviting environment for all students. CS makes clear what policies are before students begin treatment. CS accepts any registered student for treatment, including minors and international students. CS strives to create groups for underserved student subgroups, as well as establish connections with other departments to facilitate inclusion. Faculty and staff are client-centered and strengths-based, meaning they put the welfare of the client first and focus therapy not just on what difficulties are reported, but also identifying client strengths and discussing how to use those strengths to address their difficulties.

Achievements

CS is open to any registered De Anza student. CS does not discriminate on the basis of any demographic information or belief structure. We have posters displaying support for different identities, and our therapists are trained to be nonjudgmental regarding information clients share. Further, CS now offers sessions over Zoom, phone, and in person to make sessions as easy as possible for all students. CS faculty and staff are taught to be aware of their positions of power and privilege and to make sure that does not interfere with the therapeutic process. CS offers sessions outside of normal business hours to reach clients who may work or be in school during normal business hours. CS staff are on the Women's Gender, and Sexuality clinic task force. CS has a diverse group of didactic presenters who provide lessons to staff, including the head of social justice and equity. Previous topics of didactics include LGBTQ+ mental health, Asian-American mental health, working with neurodiverse students, and working with student veterans. Diversity is often discussed in supervision, as is self-reflection and counter transference.

Notably, CS conducts multiple outreach activities designed to reach diverse populations and increase knowledge and awareness of our services to underserved groups. We typically seek the input of our student organizations, other departments and a representative sample of the student body when preparing support groups and outreach activities. We are using the same procedure as we currently work on changing the name of our department to better reduce stigma and make clearer what services our department offers. We select staff and train staff with an eye on their understanding of identity and culture. As a standard practice within the department, CS staff greet students with a judgment-free attitude where everyone is welcome regardless of demographic characteristics. To better serve our clients, CS has access to demographic information that informs us of what populations are using our services and what populations may be underserved. We identify potential barriers by talking with constituents at tabling events and getting feedback from those who use our services. To address potential imbalances, CS reaches out to other departments for assistance with coordination. Some departments to whom CS has reached out include International Student Programs, Men of Color, athletics, and the LGBTQ+ Pride Center. CS is aware that having a diverse staff is essential to getting new perspectives and growth, as well as essential in making all students feel welcome. CS has a general knowledge of De Anza's demographic breakdown and strives to hire and/or recruit therapists that excel working in diverse communities and who have empathy for what the average student may be experiencing. Moreover, CS ensures that staff remain culturally competent by providing didactics relating to working in therapy with specific cultures, as well as trainings designed to help staff identify and remain aware of their implicit and explicit bias. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

CS does not presently have an established within-department protocol for bias reporting.

Action Steps

Assess whether the established campus wide bias reporting procedure is sufficient for reporting. If not, create a procedure for bias reporting by finding and reviewing procedures other programs use for bias reporting as well as selecting an existing bias reporting procedure or creating a new procedure. Wil Firmender and Kim Lee will attempt to achieve this key result within 1 year.

Section 6: Leadership, Management, and Supervision

CAS Section 6 Purpose Summary

Counseling Services (CS) leaders must model ethical behavior and demonstrate alignment with institutional mission, goals, and ethical practices. Leaders with organizational authority for CS must provide management and supervision as well as lead strategic planning and program advancement.

Section 6 Committee Summary – Average rating (5/4 = 1.25)

CS provides strong supervision to all unlicensed staff, with particular emphasis on cultural humility and the intersectionality of clients' identities. CS leaders have limited experience in leadership and management, which are growth areas for the department. However, CS leaders seek consultation when appropriate. CS leaders are working to better understand the strategic planning process and how they can fully engage with it.

Achievements

CS supervisors incorporate institutional policies and procedures in the development of strategies for recruitment, selection, professional development, supervision, performance planning, succession planning, evaluation, recognition, and reward of personnel. CS supervisors are fully responsible for advancing the departmental vision; this includes performing evaluations as well as identifying and working to resolve workplace conflict. CS supervisors also provide reports to management and place a high value on training the interns so that they feel supported when completing difficult tasks. CS engages diverse constituents from inside and outside the department when strategic planning. CS uses strategic planning processes develop, adapt, and improve programs and services in response to the needs of changing environments, populations served, and evolving institutional priorities. Additionally, PS leaders advance the department through improvements and increases in services offered, adding highly qualified and diverse staff members, advocating for needs with administrators, and coordinating events with other campus departments. PS leaders have also empowered personnel by encouraging them to coordinate with other departments, to set their own schedule, and to be responsible for their own documentation. They also develop and empower new leaders from within the department. PS has engaged stakeholders, especially students, when deciding some important issues, like a future name change.

CS leaders are aware of American Psychological Association ethics code and California laws and regulations. There are two licensed clinical psychologists who serve as supervisors. The director of CS leads strategic planning and, with the assistance of other faculty, create a vision for the area. CS leaders have created a risk management plan, in conjunction with the behavioral intervention team. In order to contribute meaningfully to the community, PS leaders reach out directly to departments that could be valuable partners and respond promptly when asked to discuss particular cases or give presentations to particular groups of students and/or faculty. PS leaders encourage staff to reach out to and coordinate events and groups with other departments based on the interests of the staff. Finally, PS leaders are held responsible by bi-weekly meetings with the Dean of Student Services, as well as with review of budgets and student learning outcomes. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and the community.

Opportunities for Growth

The following are opportunities for growth: improving communication with constituents about current issues affecting the program; improve knowledge of budgeting and departmental fiscal resources; improve use of the strategic planning process to set goals, set objectives, and support ongoing assessments.

Action Steps

CS leaders could do a better job of communicating with constituents about current issues affecting the program

and engaging stakeholders regarding some intradepartmental decisions, though there are limits on what can be shared. It is our goal to determine appropriate frequency for communicating issues affecting program with administrators and create a process for informing administrators of successes and difficulties within the department by creating a template for email communications and a spreadsheet for each quarter detailing successes and difficulties. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 6 months.

CS leaders could also do better at advocating for representation in the strategic planning process and articulating how CS is essential to the institution. This may be done through improving knowledge of budgeting and departmental fiscal resources. It is our goal to create an annual procedure for budget review by locating a budget template and working with administrators on creating comprehensive list of expenditures, grant money, and money collected from student health fees. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 6 months.

In regard to effectiveness in strategic planning, there are a couple of positions missing that could lead to greater success with both direct student services and outreach to other departments: a case manager and a health educator. With these positions filled, PS has an opportunity to increase support groups and direct messaging through direct collaboration with other departments. Since CS uses the strategic planning process to evaluate the effectiveness of interventions, CS could do a better job of using the strategic planning process to set goals and objectives, as well as support ongoing assessments. It is our goal to create annual plan for assessing departmental outcomes and goals by keeping list of departmental goals and objectives on hand, ensuring staff are aware of departmental goals and objectives via staff meetings and emails, reviewing outcome measures other college counseling sites use and selecting an existing outcome assessment or create a new assessment. Wil Firmender and Kim Lee will attempt to achieve this key result within 1 year.

Section 7: Human Resources

CAS Section 7 Purpose Summary

Counseling Services (CS) must identify the level of staffing necessary to achieve its mission and goals.
CS staffing must be reviewed regularly with regard to service demands, enrollment, user surveys, diversity of services offered, institutional resources, and other mental health and student services that may be available on the campus and in the local community. CS staffing levels and workloads must be adequate and appropriate for program and service demands.

Section 7 Committee Summary – Average rating (6/4 = 1.5)

CS has rapidly expanded its staffing to adapt to demand, but the vast majority of staff are part-time faculty and unpaid predoctoral interns. CS is currently looking to hire, as well as to create more permanent positions. CS provides weekly training (required for interns, optional for part-time staff) on topics relevant to student population. CS will ensure documentation of current qualifications and updated database of liability insurance, when applicable. Despite many different levels of experience among staff (permanent faculty, permanent paraprofessional staff, part-time faculty, and predoctoral interns), CS integrates all into cohesive unit and allows staff to use their strengths while addressing potential growth areas.

Achievements

All staff are highly qualified for the position with which they hold. CS personnel have the option to attend didactic trainings throughout the year. Licensed clinicians are required to complete professional development trainings and are encouraged to pursue topics that are relevant to their position. Further, PS staff are encouraged to read books and articles related to the population with whom they work in order to decrease student mental health symptoms. Staff are also encouraged to participate in relevant conferences and are routinely sent relevant articles regarding diagnoses, populations, and interventions that might assist them.

All staff have access to supervisors, as well as information on laws, ethics, and procedures relevant to their positions. Additionally, paraprofessionals are given autonomy to complete their job as they see fit. CS

personnel are trained on making referrals when clients are outside the departments scope and in how to handle mental health crises. Qualifications are examined based on review of perspective staff member's CV. Performance of interns are evaluated by rubric provided by their graduate program and is reviewed at least 2 times per academic year. Recognition for quality performance is provided in staff meetings.

PS staffing has gone from 1 director, 1 administrative assistant, and 3 part-time interns in the 2015-2016 academic year to 1 director, 1 administrative assistant, 5 part-time interns, and 7 part-time faculty members. This staffing model is necessary at the present time given the lack of full-time positions within the department. This staffing model has worked well in avoiding a waitlist, which has been our primary goal. PS has used graduate interns for almost a decade as a way to provide services to students under the supervision of a licensed psychologist. There are presently no student employees or volunteers because of the confidential nature of the information within the department.

Opportunities for Growth

CS needs to ensure appropriate staffing based on the De Anza student body population and needs to have staff qualifications available.

Action Steps

CS has been working for years to reach an appropriate staffing level relative to the number of students enrolled. CS staffing is reviewed regularly, and we have the flexibility to hire qualified faculty throughout the academic year. Currently the department is understaffed. It is recommended that the ratio of students to full time staff be 1000:1; CS is currently at about a 2000:1 ratio. All staff are qualified to serve in their positions, with all full-time or part-time staff possessing at least a master's degree. All interns have at least a bachelor's degree and are enrolled in a doctoral program. We have some faculty who are interns who are being supervised, and others who possess their own mental health license. All primary supervisors are licensed, including the director. It is our goal to increase staffing levels to be more in line with recommendations for college counseling centers by continuing to advocate for the creation of new positions, focusing on hiring qualified professionals for currently vacant positions and hiring more professionals with mental health licenses to enable department to take on more staff who require supervision. Wil Firmender and Kim Lee will begin working immediately but this key result will likely not be completed for at least 12 months. Consideration for appropriate staffing is ongong.

CS has written descriptions for all positions and has procedures set out for hiring faculty and selecting interns. CS makes a deliberate attempt to have a diverse workforce, with special attention on finding faculty who match with underserved populations within the college. All employees have been provided with an employee handbook noting clinic policies, as well as a handbook on navigating the electronic health records system. CS leaders have strong relationships with many Bay Area graduate schools, where many of our interns are students. CS does not have up-to-date CVs for all personnel. It is our goal to create a database or document for staff to upload their current CVs by determining appropriate virtual location to house staff CVs, informing staff via email where to send/upload their current CV and adding to the staff handbook the need to replace old CV with current one when updated. Wil Firmender and Kim Lee will attempt to achieve this key result within 6 months.

Section 8: Collaboration and Communication

CAS Section 8 Purpose Summary

Counseling Services (CS) personnel must collaborate and consult with institutional leaders, faculty, individuals, and departments essential to the success of the program. CS must advocate for membership on critical institutional committees, especially those related to crisis response, students at risk, and threat assessment. CS must refer students, designated clients, and other constituents to appropriate resources when assistance is

needed beyond the functional area's scope. Where adequate mental health resources are not available on campus, CS must establish and maintain close working relationships with community mental health resources.

Section 8 Committee Summary – Average rating (5/3 = <mark>1.67</mark>)

Collaboration with other on-campus departments is essential to the success of CS. Collaboration with other departments involves determining needs of other departments and working with them to determine if CS can help. CS strives to be transparent in communication while limiting the means of communication to prevent misunderstandings and ensure CS has adequate time ensure appropriate and thorough responses.

Achievements

CS uses discretion when deciding how to interact with the media, including student publications. However, CS follows school policy for distributing information, often going through the marketing department. CS is very careful when contracting with external agencies and will vet the agencies appropriately. CS uses office of marketing to distribute information to constituents.

PS must maintain relationships with facilities, ETS, International student programs, disability and support services, De Anza student government, Office of equity, psychology club, LGBTQ+ Pride Center, Women Gender and sexuality center,and the athletic department. These relationships are necessary to try to reach students who may otherwise not use our services. They are mutually beneficial because when students from those areas seek counseling, it reduces stress of the other areas and increases liklihood those students will remain enrolled and perform better academically. CS performs outreach and tabling events to keep relationships open, as well as provides workshops, support groups, individual consultation, and attendance/didactics at departmental meetings. PS assesses the success of such relationships based on whether the other departments want to continue working with PS the following year/quarter. There is currently no formal assessment for evaluation of interdepartmental collaboration. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

PS needs to ensure department's mission and goals are available to general public and stakeholders.

Action Steps

CS primarily uses the website and social media to describe the services offered. The materials do not necessarily describe the missions and goals. CS frequently uses outreach to promote the department and the services offered. It is our goal to update website and other promotional materials include information regarding the department's mission and goals by reaching out to the marketing department and provide them with text of the mission and goals, ask marketing to upload that information to the website and ensure that any newly created document coming out of Psychological Services has missions and goals stated, if appropriate. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 6 months.

Section 9: Ethics, Law and Policy

CAS Section 9 Purpose Summary

Counseling Services (CS) must review and adopt appropriate standards of ethical practice including those of applicable professional associations. CS must comply with laws, regulations, policies, and procedures that relate to its respective responsibilities and that pose legal obligations, limitations, risks, and liabilities for the institution as a whole.

Section 9 Committee Summary – Average rating (10/6 = <mark>1.67</mark>)

CS staff follow American Psychological Association code of ethics, as well as state and Federal law (including, but not limited to, FERPA and HIPAA). Ethical and legal obligations are frequently reviewed in supervision and training didactics. CS will be working on creating and disseminating specific policies and making sure students have access to such policies before beginning treatment.

Achievements

CS personnel are subject to American Psychological Association ethics code and California state law. CS has procedures for dealing with legal issues, such as child custody and divorce cases. Also, CS has policies for when clients request their records. CS staff exercise ethical decision making. Staff are aware of APA ethics code and state law and are aware of what is within their scope of practice, especially how and when to refer students when the presenting problem is outside scope of practice. CS staff are aware of how to reach supervisor/director and report when a client is presenting with severe risk factors.

If the client is over 18, all interactions with clients and all topics discussed are confidential EXCEPT if there is an imminent risk to self or others, or if it comes to the attention of the therapist that child abuse may be occurring. If client is under 18, the same exceptions apply, although the client's parent/legal guarding may need to be contacted if client reports any current suicidal ideation or self-harm behavior. Ethical dilemmas are handled first by consulting with supervisor and deciding the proper course of action. Conflicts of interest are handled via discussion with supervisor, at which time a change of therapist may be appropriate. Ethics and legal responsibilities are at the core of everything PS does. We are always considering the most ethical actions and what is best for the client, both in session and outside of session. Confidentiality and mandated reporting are likely the two most important legal/ethical issues for PS.

All staff are instructed to consult with a licensed supervisor if they have any concerns about confidentiality, risk, or mandated reporting obligations. PS staff are given ethical training at the beginning of the academic year regarding the situations they are most likely to encounter in their role as therapists at De Anza. All unlicensed staff have weekly supervision with a licensed psychologist where ethics are frequently discussed regarding specific cases. All licensed staff are required to have training every two years in ethics. PS staff are generally aware of the organizational structure and are provided information regarding the De Anza governance system by their supervisor as needed.

All unlicensed staff receive ethics training and are supervised with a focus on ethical behavior. CS staff recognize that confidentiality is the most important aspect of psychotherapy. All staff are encouraged to seek consultation and are aware of the requirement to maintain client confidentiality during the process. CS staff are aware of risk and safety measures, including the creation of a safety plan and how to get emergency support if client is imminent risk to self or others, or is gravely disabled. CS records are maintained on a secure electronic platform. Paper records are kept in a secure, double locked file cabinet and room, per APA requirements. Records are kept for the appropriate amount of time and are then subsequently shredded by approved provider. CS staff have access to an attorney, if needed. CS staff ensure that no copyrighted material is used without being paid for. Some assessments are part of public domain. All staff are trained and properly qualified to use assessments. CS does not tolerate any form of harassment, whether it be from staff, interns, or clients. CS adheres to institutional policies regarding harassment and has a code of conduct detailed in the clinic handbook. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

CS will be working toward ensuring specific policies are created in multiple domains, and that both students and staff have access to such policies. CS needs to ensure that statements regarding conflicts of interest, management of funds, acceptance of gifts, confidentiality and use of assessment data, and student rights and responsibilities are made clear in CS materials.

Action Steps

CS has written procedures for how to handle emergency and risk situations. CS staff are aware of assessment measures to determine level of risk, as well as safety plan procedures. CS procedures could use update to make sure policies are consistent with institutional policy. Currently CS staff does not have a set timeline for reviewing policies. It is our goal to create a timeline for reviewing policies and comparing them to institutional policies by determining appropriate frequency for comparing departmental policies to institutional policies, locating institutional policies, cross-checking institutional policies with departmental policies and updating departmental policies listed in handbook accordingly. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 6 months.

CS makes sure new hires are aware of ethical standards and policies relating to those standards. CS has informed consent/agreement for services form that expressly states legal responsibilities and limits of confidentiality, which are then repeated verbally during the intake process. CS always informs staff about changes in ethical codes/law that may affect staff's practice. However, CS does not have statements on conflicts of interest, management of funds, acceptance of gifts, confidentiality of assessment data, nor student rights and responsibilities, though these are all things that are discussed internally when they arise. It is our goal that such statements will be made clear on our website and other materials provided to the school community. This will be done by determining appropriate phrasing for expressing policies, contact marketing to add such phrasing on website materials as well as consider pros and cons of adding such language to the informed consent form. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 6 months.

Section 10: Financial Resources

CAS Section 10 Purpose Summary

Counseling Services (CS) must have the funding that is necessary to accomplish its mission and goals. Wherever a fee-for-service model is employed, CS must understand students' health care insurance and work with students to utilize their coverage. CS must determine with administrative leadership what funding is necessary.

Section 10 Committee Summary – Average rating (3/3 = 1)

CS currently has sufficient funding for hiring part-time faculty, which helps to manage the caseload of each therapist. CS also currently has sufficient funding for the purchase of supplies for therapy groups, which makes it much more appealing to students. The fact that CS' budget is contingent on enrollment is worrisome, as a drop in enrollment could cause cuts in staffing to a department that is already understaffed, based on federal recommendations. CS staff are looking to become more active in their budget planning, to ensure both student health fee funds and grant funds are used to benefit underserved populations and ensure the department is both visible and effective.

Achievements

CS manages funds legally and consistent with school and departmental policies and uses funds responsibly to create programs that are useful to the student body. CS provides funds to help with development of psychotherapy groups, provide resources to therapists, and help with professional development. CS is conscious of getting value for their funds and is conscious of the environmental impact of expenditures. PS is additionally funded by student health fees, with occasional additions from state and federal grants. This is an appropriate approach because PS does not want to charge students for appointments. However, both the money collected from the student health fee and the grants are variable and subject to change year-to-year, based on enrollment and the length of the grant. PS does not spend money that is not necessary. Each expenditure is made with an eye to either marketing and outreach or clinical enhancement. CS typically creates an annual budget for staffing and outreach expenditures. However, such a budget was not prioritized during the pandemic. PS endorses the resumption of creating a yearly budget spreadsheet. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

CS must work on ensuring the department has a consistent and sustainable revenue stream and uses the budget to plan out how to better reach underserved population.

Action Steps

CS currently is highly dependent on student health fees. If the number of students at De Anza was to drop, our budget would also decrease. Other revenue streams are needed to ensure the continuity of services and program quality. Fee services are not utilized. CS works closely with administration to determine appropriate funding. It is our goal to ensure that the department will be less vulnerable to decrease in enrollment or ending of grant money by advocating to administrators for additional, more consistent revenue streams to support the department and reviewing how other community colleges fund their mental health counseling departments. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 1 year.

CS is aware of unmet student needs and systematically tries to reach out to appropriate departments to create relationships. CS could do more to use the budget to plan out how to reach out better to underserved populations. CS would benefit from the more frequent creation of budget reports. It is our goal to use the budget to plan out how to better reach underserved populations by determining appropriate frequency for budget review, creating a procedure to create and review budget reports consistently and work with marketing as well as PyraMed care center to create data set regarding demographic representation among Psychological Services' clients. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve this key result within 1 year.

Section 11: Technology

CAS Section 11 Purpose Summary

Counseling Services (CS) must have current technology to support the achievement of its mission and goals. CS must select technology that reflects current best pedagogical practices when it is used to facilitate student learning and development. CS must incorporate accessibility features into technology-based programs and services. CS must ensure that personnel and constituents have access to training and support for technology use. CS must back up data on a cycle established in partnership with the institution's information technology department. CS must implement a replacement plan and cycle for all technology with attention to sustainability.

Section 11 Committee Summary – Average rating (7/4 = 1.75)

CS has been integrating technology more into the departments' practice since the pandemic began in early 2020. Zoom sessions (and phone sessions, when necessary) are still being offered to ensure flexibility for students who prefer not to, or cannot come to campus. The addition of electronic health records also allows staff to work more efficiently from home and increases security by minimizing the amount of sensitive information sent via encrypted email. CS is still in the process of assessing the security of the electronic health records system and determining back up procedure.

Achievements

CS uses technology to make accessing services easier and more convenient for students, whether they are in-person of virtual. CS uses technology that has secure remote access and that are easy for clients and staff to use. CS also has policies in a manual that make clear appropriate use of technology. CS complies with codes and laws regarding the use of the technology and uses only secure platforms when conducting financial

transactions. CS frequently updates the website with new information regarding services offered. CS also has access to encrypted emails that allow users to communicate securely. CS uses secure Zoom meetings when providing services to clients virtually. Additionally, CS uses Instagram to occasionally post info about campus-wide events. CS uses email, phone, Zoom, and occasionally Zoom chat to communicate with clients/hold sessions.

PS uses the encryption function on all digital platforms (e.g., Zoom, Adobe Acrobat, Microsoft Office) to secure shared documents and shared information. PS keeps records of all user access to technology in encrypted documents that are monitored daily, reviewed weekly and updated frequently. PS uses thumb drives to securely transport data for hybrid in person and telehealth services. Thumb drives have been secured using double encryption (e.g., encrypted documents and encrypted folders). For physical security of the digital data, staff have been instructed to lock away thumb drives when not in use (e.g., locked drawer). PS has incorporated the use of QR codes to provide information easily to clients and the community. With the use of a hybrid model, PS has been able to increase availability of online services (e.g., telehealth appointments, telehealth support groups). In addition, PS uses social media platforms such as Instagram to promote outreach events, new services and provide information about new resources. PS has enhanced overall operations by using PyraMed, an electronic health medical record program, which allows for secure documentation of services as well as communication among staff. PS uses Zoom to conduct the training program's didactic trainings, attend trainings that facilitate learning of new or growth of ever-changing topics within the field as well as consult with other departments on campus on developing enhanced services for the community. Additionally, success outcomes for clients are measured using the CCAPS-34 distributed to client securely through PyraMed and MyPortal. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Opportunities for Growth

PS needs to ensure forms are accessible to people with disabilities and evaluate confidentiality of electronic health records and how information is backed up.

Action Steps

CS now uses electronic health records and has the technology necessary to perform the department's mission. CS has selected technology that is easily integrated into current school technology and has ensured that all staff have training in this technology. However, CS could do better with making sure data is backed-up and making sure all technology is accessible. It is our goal to determine if and how data is backed up on electronic health records system as well as determine level of access to backed up data in electronic health records by coordinating with PyraMed help desk and implementing software updates when made available by electronic health records system (e.g., updating system to support virtual computer access using Citrix when available). Additionally, our goal is to determine if forms are able to be read and completed by people with disabilities. If not, to make forms accessible within electronic health records and/or create other methods of completing forms by creating a procedure to test and review how forms look on PyraMed using a test profile created by PyraMed. If not accessible, consult with DSPS and/or communications department to create a formatted template of each form that adheres to accessibility standards. Wil Firmender, Kim Lee and Suzanna Ramirez will attempt to achieve these key results within 1 year.

Section 12: Facilities and Infrastructure

CAS Section 12 Purpose Summary

Counseling Services (CS) facilities must be located in suitable spaces designed to support the functional area's mission and goals. CS facilities must be intentionally designed to engage various constituents, promote learning, and provide accessible and safe spaces. CS facilities must be designed to protect the security and privacy of records and ensure the confidentiality of sensitive information and conversations. CS must maintain a physical and social environment that facilitates optimal functioning and ensures appropriate confidentiality.

CS must incorporate universal design principles. CS facilities must be designed and constructed to be energy-efficient and sustainable.

Section 12 Committee Summary – Average rating (5/4 = <mark>1.25</mark>)

CS' current location is unsuitable for multiple reasons. The primary concerns are the lack of privacy in the waiting area, the lack of privacy in the event of a mental or physical emergency, the dangers facing police and medical staff during a mental or physical emergency, and the limited space available for in-person appointments, which many students are seeking after being isolated for 2+ years. Currently, there is no door on the waiting room (despite being requested prior to when CS first moved the office in 2019) the police are forced to either take a student in distress down a staircase or be in an enclosed space like an elevator. Additionally, if a student were in distress, they would need to walk through a crowded waiting room. Currently, there are only 5 office spaces open on any given day, which causes problems because on some days we have 6 or 7 people who would like to be in person. The environment is likely to improve in the future, as talks are underway for the creation of a new student services space that would provide more room for CS and would directly connect the department with Health Services.

Opportunities for Growth

PS will continue to ensure that the new space being planned for Psychological Services Department will meet the needs of clients and community regarding maintaining privacy as well as ensure the new space will meet needs of each therapist to having a private office where they can see clients in person and virtually.

Achievements

CS only asks for equipment it needs to be successful. Electronics are only replaced when they become obsolete. Facilities and workspace are an essential part of PS, so our facilities are discussed frequently. This is frequently done via discussions of space, appropriateness of computers, and what equipment may be needed for workshops and larger group presentations/didactics. Additionally, sustainability is an important consideration when considering new expenditures. CS is trying to reduce paper waste by switching to electronic health records and reduce plastic waste by providing students compostable cups for water instead of plastic bottles. PS lights are on a timer where, if not in use, the lights will turn off after 10 minutes.

CS staff advocate for appropriate resources and equipment – though such requests are not always heeded in a timely manner. CS facilities are routinely inspected based on whether they can meet the needs of record keeping systems. CS promptly reports faulty facilities and equipment to appropriate party. Facilities are inventoried based on what is needed. PS staff have a list of what is needed and reach out to facilities if something is needed or needs to be replaced/updated. PS makes the most of limited space. Before each quarter, PS evaluates who will be on campus what days to ensure there are appropriate rooms and computers available. There are multiple days where all spaces are used. It is our goal to continue reviewing, updating and maintaining this standard in order to meet the needs of the students and community.

Action Steps

CS will continue to advocate for needs with administrators and facilities/maintenance/ETS. The college is currently in the planning phase for a new student service building that will provide more appropriate space. It is our goal to reach the eventual creation of the new Psychological Services location where privacy and space needs have been addressed. In the meantime, in order to work toward this goal, we will attend meetings relating to creation of new Student Services building, advocate for a new space that allows for privacy, both in waiting room and office, and in the case of a psychiatric emergency as well as a new space that allows therapists to have their own private offices where they can see clients, complete paperwork, and store files and advocate for a space that has enough offices for Psychological Services to meet the needs of the student body based on De Anza enrollment. Wil Firmender, Kim Lee and Suzanna Ramirez will continue to work with the appropriate parties to achieve this key result; the timeframe is ongoing.