

Column 1 indicates the information being requested for the 2015-16 APRU. **Column 2** is where you enter your program information. **Column 3** contains the instructions for responding to the requested information. You can copy and paste or type in your information into the center column. Save this word doc in the following format: sspbt16apru_*programname*. Once completed, e-mail it as an attachment to watsonlaura@deanza.edu. She will upload the document to the SSPBT Program Review page. Keep a soft copy for your files to ensure that your work is not lost. Please contact: Stacey Cook (cookstacey@deanza.edu) if you have questions about the Annual Program Review and Veronica Avila Acevedo (avilaveronica@deanza.edu) if you have questions about SSLOs and TracDat.

Getting Started: Review your 2013-14 Comprehensive Program Review and 2014-15 Reflection posted on the SSPBT website: <http://deanza.edu/gov/SSPBT>

Column 1 Information Requested for the 2015-16 SSPBT - APRU	Column 2 Input your answers in this column. Word wrap is turned on so the box will expand with your typing. Please provide brief responses. Note: Reference documents can also be attached, i.e. TracDat reports. Make sure to note the name of any reference documents in your explanations.	Column 3 Instructions:
Program Name:	Psychological Services	Enter the name of the program being reviewed.
Name(s) of the author(s) of this report:	Siew Kuek and Michele LeBleu-Burns	Enter the name or names of those who wrote this APRU.
What is the program's Mission Statement?	<ul style="list-style-type: none"> To be a viable support service to De Anza students to help them achieve success in their academic career as well as to develop their character and abilities to become socially responsible members of our community. 	Cut and paste your most current Mission Statement. Please highlight any changes from the 2013-14 Comprehensive Program Review (CPRU)

<p>Have you made any significant changes in your program based on the feedback you received from the SSPBT's review of your 2013-14 CPRU?</p>	<ul style="list-style-type: none"> • N/A 	<p>Include anything done in direct response to the SSPBT feedback on the 2013-14 CPRU.</p>
<p>Have there been any other significant changes to your program since the 2013-14 CPRU?</p>	<ol style="list-style-type: none"> 1. We moved into our own designated, albeit shared space (with Veterans Resources) in February 2016. 2. We hired a part-time Administrative Assistant for our reception area. 	<p>Significant changes in: Staffing, equipment, facilities, operational costs, organizational alignment, State/Federal regulations or laws, other?</p>
<p>What Impact have these significant changes had on your program?</p>	<ol style="list-style-type: none"> 1. The designated space has meant increased visibility for our services. This has improved ease of referrals from members of our campus community as they can physically locate us without being confused by amorphous space usage (as when we were borrowing space from another department.) 2. The presence of the part time TEA has meant some needed administrative, phone and reception help as well as ease access to crises support (as when students in crises are brought to our designated space within the Registration and Student Services Building.) 3. 	<p>Please explain these significant impacts and how your program now operates differently.</p>
<p>What Impact have these significant changes had on your students?</p>	<ol style="list-style-type: none"> 1. The increased in visibility has meant an increase in demand for services. 2. The designated area also improved the containment of crises (there is less confusion in help seeking behavior.) 3. Space has a strong influence on how many interns we were able to recruit to provide services. As the nature of the service requires it be rendered in areas that ensure privacy (rooms with closed 	<p>Please explain these significant impacts on your students including any positive or negative consequences.</p>

	<p>doors.) The lack of rooms limits the number of clinical hours that can be provided while the increase in room availability would make for increased clinical hours that can be provided.</p> <p>4. We were aware that an alternative to individual therapy is group therapy. Previously, the lack of a designated space limited the type of groups we could offer as securing rooms on campus was a challenge. With a designated area, we started to offer ongoing group therapy on a weekly basis. This meant that we expanded the number and frequency of clinical hours to those who were amenable to such treatment.</p> <p>5. Even with all these, we were still not able to meet demands for services. We started to keep a waitlist and the wait did take up to two weeks for request of services for individual therapy. The demand was especially acute often towards the middle and end of the quarter.</p>	
<p>Have you initiated anything new to your program since the 2013-14 CPRU?</p>	<ul style="list-style-type: none"> • Yes, the move to provide ongoing group work both to meet demands and to increase the choice of services. 	<p>This is similar to the above question about significant changes but is meant to single out any new initiatives.</p>
<p>Is there anything else the SSPBT should know about what has happened in your program since the 2013-14 CPRU?</p>	<ol style="list-style-type: none"> 1. There is no lack of services that can be provided for our students. We are, however, limited firstly by space and then by the reality that De Anza College has only one licensed clinician to oversee the supervision of the interns and by extension the treatment of cases. 2. While the interns were paid stipends for their time, there was a lot of responsibility to ensure that the interns were properly trained to deliver services that were effective and ethical. A lot of teaching went into training the interns. The increase in the cases and the complexity of the 	<p>Briefly described anything else the SSPBT should know about your program including any trends, future concerns, things on the horizon, etc.</p>

	<p>symptom presentation of these cases meant that a lot more time was needed for close supervision to ensure quality care.</p> <p>3. We are very concerned about shared space (with the Veterans Department) because the way we use space is very different from the way (at this point of writing, February 2017) the Veterans Department utilize their designated area. Due to the nature of psychological services, we require quiet and contained surroundings with minimal stimulation in order that we might be able to listen well, diagnose and treat. A low stimulation environment works well to calm many of the symptoms for which our students seek help. We plan to give an evaluation of how this shared arrangement work in service delivery.</p>	
<p>Are there any additions/deletions/edits to the list of common or unique services identified in your 2013-14 CPRU?</p>	<ol style="list-style-type: none"> 1. The implementation of one weekly ongoing support group (as opposed to Ad-hoc group events.) 2. We have not been able to provide extended hours (to match the opening hours of our Health Center) due to the lack of enough licensed supervisors for the extended hours. 	<p>List any common or unique services provided to students. Are there any changes to that list?</p>
<p>Are there any changes to the common or unique service designations listed in your 2013-14 CPRU?</p>	<ol style="list-style-type: none"> 1. We plan to recruit one post-doctoral fellow for each academic year. Post-doctoral fellows are individuals who have already earned their doctoral degrees in clinical psychology. They are in need of additional hours to qualify for licensure. These individuals are ideal apprentices who are interested in learning about service provision in community college mental health settings. They also provide needed support to increase the expertise that is needed to attend to the increased number of cases seen in the department. 2. We propose to hire at least one part-time licensed 	<p>Describe these changes and decisions to: Grow, Maintain, Enhance, Change Direction, Reduce, or Discontinue. Are there any changes to these designations?</p>

	<p>clinician for the department in 2017/2018.</p> <ol style="list-style-type: none"> 3. We are in need of one-part time IT and data expert to help us transpose and analyze the demographics of service usage and treatment outcome over time. 4. We plan to implement a more comprehensive sliding scale of low fees to recoup some of the expenses of providing services to our students. 5. By 2017/2018, we plan to offer extended hours for our students through the procurement of space through collaboration with other departments and the hiring of a part-time licensed supervisor to provide supervised oversight. 6. We plan to offer more support groups as an alternative to individual treatment. 	
<p>List all of your current and active Student Services Learning Outcome Statements as they are numbered and recorded in your TracDat account.</p>	<ul style="list-style-type: none"> • Improved mental health as a result of receiving psychological counseling provided by the Psychological Services Department. <p>The utilization of the Outcome Measure - 45.2 (OQ-45.2) administered in a pre and post-test method to track symptom improvement. See attached document for the OQ-45.2.</p>	<p>You may cut and paste your SSLO statements here or attach a document to this APRU and indicate its name here. Attaching a document is preferred for programs with both SLOs and SSLOs. Some programs already have their outcome statements in a separate document and/or in their TracDat Document Repository.</p>
<p>What is or has been the outcomes /assessment activity for 2013-14?</p>	<ul style="list-style-type: none"> • As determined by the OQ-45.2 scoring guide, a score of 14 or more points in either direction shows a reliable change. For our current SLO, an average decrease of 13 points in the total score was found among students. This means that we are approaching a reliable and significant change (increase in overall mental health) related to our services. 	<p>Please include everything done since the 2013-14 CPRU, including any work in progress.</p>
<p>Which SSLOACs were completed in 2013-14?</p>	<ul style="list-style-type: none"> • Number of people involved in Reflection & 	<p>If any, please summarize the results, discussions, analyses, and any improvement plans that do not</p>

	<p>Analysis: 7</p> <p>Note: A larger sample size would be best to further validate the significance of data collected.</p> <ul style="list-style-type: none"> • Reflection: The sample size utilized for means of this SLO is small. Upon discussion, the Psychological Services Department hypothesized that not having a separate building space dedicated to our department impacted the collection of data related to the SLO scores. A designated space would allow for a quiet, stable environment for students accessing our services to give a response. Not having the space meant that several of the paperwork handed out were either not returned or not filled out altogether. This led to the small sample size. <p>A permanent admin assistant should be hired to assist in collecting data and paperwork from students. Currently, our students are given the OQ-45.2 by their individual therapist. This interaction has been found in some cases to affect the therapy and relationship with the therapist as implicit in the exchange is a demand for a response. Having a separate space with an office manager would help to alleviate this possible demand in the treatment relationship, for the students would be given some freedom and choice to respond by filling or not filling out the paperwork, to respond positively or negatively, as appropriate, when it is a third person</p>	<p>involve any new resources to implement.</p>
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	<p>who is handling the distribution and collection of survey data. Further, the office manager would keep track of all paperwork so that each student would more regularly complete the OQ-45.2 upon entering treatment, and again each quarter thereafter.</p>	
<p>Have you identified any improvement plans for which additional resources will be needed in order to achieve a desired outcome?</p>	<ol style="list-style-type: none"> 1. We find that the OQ45.2 may not be the best instrument to assess treatment outcome for our community college population as it takes quite a bit of time to complete. Even though the assessment tool was marketed as not requiring more than 10 minutes to complete, we have not found this to be true. We are also realizing that there may be assessment tools that specifically target college students which might be a better evaluation of the services they have received with respect to symptom reduction. We plan to procure a different assessment tool that is specific to a college population. 2. One IT/data expert is needed to help us transpose and analyze our data. 	<p>If yes, please summarize the results, discussions, analyses, and any improvement plans that will require new resources to implement.</p>
<p>Are there any deletions/edits to the resource requests listed in your 2013-15 CPRU?</p>	<p>Not Applicable</p>	<p>Resources include: Staffing, equipment, facilities, staff development, operational costs, other.</p>
<p>Are there any additions to the resource requests listed in your 2013-14 CPRU?</p>	<p>Not Applicable</p>	<p>If adding new resource requests, please provide a brief explanations to the following for each new request:</p> <ol style="list-style-type: none"> 1. Is the request related to any of the Institutional Core Competencies? 2. Is the request related to any of the Strategic Initiatives? 3. Is the request related to any of the Core Values?

		<ol style="list-style-type: none"> 4. Is the request related to any SSLO Assessment Cycle findings? 5. Is the request related to your CPR 5-year plan? 6. How many times has this request appeared on an APRU? 7. Is the request related to any of the SSPBT priorities? 8. What are the plans to assessment the effectiveness of this request if granted? 9. Is there anything innovative, unique, or cutting edge about this request? 10. Other information in support the resource request.
<p>Specify resources received: staffing, computers, furniture, facilities, etc.</p>	<ol style="list-style-type: none"> 1. The laptop procured is being utilized in supervision, training and workshops. The portability increased the flexibility in space usage as it allowed us to utilize rooms not equipped with the necessary technical equipment. 2. The move to a designated space has increased our presence on campus (and decreased confusion on locating our service.) This has helped increase access and referrals for help from our campus community. 	<p>Describe how students, staff, faculty, the program benefitted from the resources allocated.</p>