**Sinclair Community College**

**Continuous Improvement Annual Update 2013-14**

**Please submit to your dean and the Provost’s Office no later than Oct. 18, 2013**

**Department:** 0619 – Mental Health Technology

Year of Last Program Review: FY 2007-2008

Year of Next Program Review: FY 2014-2015

**Section I: Department Trend Data, Interpretation, and Analysis**

**Degree and Certificate Completion Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Degree and Certificate Completion Trend Data (Raw Data is located in Appendix A*): i.e. What trends do you see in the above data? Are there internal or external factors that account for these trends? What are the implications for the department? What actions have the department taken that have influenced these trends? What strategies will the department implement as a result of this data?*

**NOTE**: The first page of last year's Annual Update did not include completion data for FY11-12. The tremendous jump in MHT department completions these past two years is hard to explain. We have not engaged in any recruitment activities beyond what we normally do (i.e., college and career fairs). We continue very close faculty advising as always.

Certainly, our enrollment has increased significantly. Fall 2012 head count was 315, Fall 2013 head count is 419; Fall 2012 FTE was 107, Fall 2013 FTE is 124. For the past two years, we have found more and more displaced workers returning to the classroom and to our degree programs. We also suspect that many students in 2011-12 made the big push to complete before the move to semesters.

At one point in time, students rarely considered sticking around to complete the second of two degrees offered by our program. They simply finished their major and moved on. We are seeing more and more students stick around for an additional 2 semesters to complete the Chemical Dependency degree (MHTCD.AAS) after completing the MHT.AAS degree and vice versa. In other words, students came seeking one degree and realized a second degree was within easy grasp.

Every student in the MHT.AAS and MHTCD.AAS programs has a faculty advisor. We believe that utilizing the MAP application has simplified and clarified the path toward completion. Therefore students have been less likely to miss required courses or take unnecessary courses.

Lastly, in the past 2 years we have moved from offering one (1) course in chemical dependency to those in prison at Dayton Correctional Institution to offering seven (7) chemical dependency courses at numerous Ohio prisons. In Fall 2013, enrollment was 107 in the courses offered at prisons. We enjoy a wonderful relationship with Cheryl Taylor, the prison program coordinator.

**Implication**: Due to our increased enrollment, more adjunct faculty are needed to cover courses, especially our introductory courses MHT 1101 and 1130. Recruitment of adjunct faculty to teach courses during the highly desired late mornings and afternoons has been a very difficult challenge. Almost all of our adjunct faculty work full-time at community human service hospitals, clinics, and agencies.

Also, due to higher enrollment in second year courses and all four tenure-track faculty teaching the maximum load possible, we have been forced to ask adjunct faculty to teach advanced second-year courses and this has led to highly variable results. There has been limited time and resources to train these adjunct faculty adequately. We ask new tenure-track (and ACF) faculty to shadow full-time faculty in the classroom prior to teaching the course independently. Adjunct faculty have not been agreeable to attend classes (without compensation), in advance of teaching the course independently, in order to understand numerous important responsibilities, procedures, and activities. Some of these important responsibilities include use of our video-recording equipment, key grading criteria, interfacing with community agency personnel, and critical readiness-advising prior to students entering the practicum phase.

**Need**: An additional full-time faculty person is needed to maintain continuity when the MHT program expands to Courseview. Adjunct faculty cannot carry primary responsibility for program management and for major instructional portions of the second year of the MHT and MHTCD programs at Courseview.

**Course Success Trend Data – OVERALL SUMMARY**

Please provide an interpretation and analysis of the Course Success Trend Data (Raw Data is located in Appendix A). Looking at the success rate data provided in the Appendix for each course, please discuss trends for high enrollment courses, courses used extensively by other departments, and courses where there have been substantial changes in success.

- Completion rates of most required second-year MHT courses is in excess of 90% generally and we are pleased with this result. The level of expectation is much higher in our second-year courses and we know that students are prepared for employment and transfer to four-year institutions when they succeed in our second-year courses.

- Two areas of concern still exist, year after year. These are the low success rate of our non-restricted MHT 1101 Introduction to Human Services (formerly MHT 101) and the online MHT 2250 Child and Adolescent Mental Health (formerly MHT 140). MHT 1101 has both online and face-to-face sections. Success in our online courses is lower than we'd like and this mirrors what is happening campuswide in distance learning.

- Clearly, we expect attrition in our MHT 1101 course since many of these students never intend to enter the MHT and MHTCD programs. These students include those taking the course for personal reasons and those exploring majors. The likelihood of under-prepared students taking MHT 1101 is also high since it is unrestricted.

Please provide any additional data and analysis that illustrates what is going on in the department (examples might include accreditation data, program data, benchmark data from national exams, course sequence completion, retention, demographic data, data on placement of graduates, graduate survey data, etc.)

In 2014 we are up for program re-accreditation and will develop our self-study and have a site visit. Additional data will be presented at next year's Program Review.

**Section II: Progress Since the Most Recent Review**

Below are the goals from Section IV part E of your last Program Review Self-Study. Describe progress or changes made toward meeting each goal over the last year.

|  |  |  |
| --- | --- | --- |
| **GOALS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| **Goal:** Continuous review of assessment process and data. **Rationale:** Since we are just beginning this process, the department has much to learn about our assessment process. | In progress  Completed  No longer applicable | Due to numerous medical absences and the eventual retirement of the department chair and the heavy push to launch our program in the semesters format, the assessment of last year's general education outcome was overlooked. However, we assessed all 10 program outcomes. The new chair met with the divisional learning liaison recently to learn about continuing our assessment and reporting activities. |
| **Goal:** Increase courses at Courseview and the learning centers. **Rationale:** Base increase on regional demands and improve enrollment. | In progress  Completed  No longer applicable | Somewhere along the line, the decision was made to offer the entire MHT.AAS and MHTCD.AAS degree programs at Courseview despite a history of low enrollment and cancelled courses. MHT 1101 and MHT 1130 have been offered in the past and are offered again in Fall 2013. In addition, MHT 1200 is set to run Fall 2013 "B" term at Courseview. Our plan is to offer the next tier beyond introductory courses at Courseview for Spring 2014; these include MHT 1201 and MHT 1203. We'll continue to offer introductory MHT courses at Englewood Learning Center. |
| **Goal:** Offer chemical dependency and activity program certificate courses through distance learning. **Rationale:** To remain competitive in community college and university enrollment and to respond to projected increased needs of students. | In progress  Completed  No longer applicable | **From Fall 2012**: The activity program certificate is not completely available online.  The distance learning department has not agreed to offer our chemical dependency certificate through distance learning. Since it has been several years since the initial proposal to offer the CD certificate, others have stepped in to offer the equivalent. At this point feasibility would have to be revisited.  **Addendum Fall 2013**: MHT 1130 Introduction to Addictive Illness was recently developed into an online course. |
| **Goal:** New course(s) in motivational interviewing. **Rationale:** To meet the demands of regional employers. | In progress  Completed  No longer applicable | The theory and methods of Motivational Interviewing have been integrated into MHT 1130, 1200, 2105, and 2137. A separate course in Motivational Interviewing is being developed currently. This Motivational Interviewing course will also be part of the newly developed Wellness Coaching STC in conjunction with the Exercise and Nutrition Sciences department. |

Below are the Recommendations for Action made by the review team. Describe the progress or changes made toward meeting each recommendation over the last year.

|  |  |  |
| --- | --- | --- |
| **RECOMMENDATIONS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| Regarding transfer:   * Initiate new collaborations with baccalaureate degree programs at universities in the region to facilitate transfer of students, and establish written articulation agreements. * Include transfer as part of the departmental mission. * Review the data on the program’s relatively low transfer rate to understand more fully student patterns. | In progress  Completed  No longer applicable | A long-awaited articulation agreement with Wright State University Social Work program was developed in Spring 2013. An agreement with the Chemical Dependency program at the University of Cincinnati is currently going back and forth and will be finalized soon. Conversations began with the Human Services program at Wright State University in Fall 2013 to clarify our current agreement since both schools switched to semesters. Our plan is to review the existing agreement with Capital University Social Work program to assure that it reflects semester conversion language. Contact with Indiana Wesleyan University was made months ago and there was no follow-up. This will be a goal for the 2013-14 academic year. Information about transfer is given to students upon interview and acceptance into the MHT and MHTCD programs. A Wright State University professor of Social Work is now a member of our Advisory Committee. Representatives from Wright State and Capital usually come once a year to meet with our students as invited guests in the classroom and between classes. |
| The department is strongly encouraged to more fully explore the issues that lead to poor performance in MHT 101 and evaluate how to improve retention and success within that course. While possible solutions might include pre-requisites, a placement questionnaire and online course development were discussed. Any decisions regarding action should be supported by data, which can be provided to the department by Research, Analytics and Reporting upon request. | In progress .  Completed  No longer applicable | **From last year's Annual Update**: Factor 2 in internal course success factors: Success continues to be low in MHT 101 and 140. MHT 101 has online sections and MHT 140 is completely online. Online course success has always been more difficult. MHT 101 is also a course that is chosen by students to see if Human Services and Behavioral Health is a field of interest. So students who choose to not continue in our department is not necessarily a negative. We require DEV reading and writing as pre-requisite for the introductory MHT course.  **Addendum for Fall 2013**: Although the introductory course has a success rate of approximately 50 to 60%, the success rate of the next course in the MHT sequence [MHT 115/1200] has been near 90%. This suggests that those who are successful initially maintain their success in the next tier of MHT coursework. |
| While the numbers and types of assessment are commendable, the next step is to better ‘close the loop’ – apply findings to make changes in program, curriculum and/or service, and reassess the impact of changes. The department is encouraged to document the changes made to program outcomes or the curriculum as a result of assessment and to report these changes in annual updates and the next self-study report. | In progress  Completed  No longer applicable | No changes in program outcomes have been made. Several changes to course assignments and instructional methods have been made in the past year. Chiefly, a Capstone Research Project was created and added to MHT 2222 in Spring 2013 in order to provide students with the opportunity to write a research paper and to demonstrate proficiency of several important general education and program outcomes.  **NOTE**: Also, due to increased enrollment, adjunct faculty are teaching advanced courses regularly rather than occasionally. Maintaining consistency in content delivery and evaluation has been a tremendous challenge. In the past year, meetings and individual training sessions with certain adjunct faculty has led to content delivery and evaluation standards are being applied with greater consistency. The loss of two adjunct faculty in particular has helped us maintain a higher level of consistency. Students seem better prepared for 2nd year courses than in previous years. |
| Explore the feasibility of offering the program in Warren County. | In progress  Completed  No longer applicable | **From Fall 2012**: The feasibility study was conducted and many in the human services field agreed that the need for human services in Warren Co. is great as is the need for human service workers. However, we sponsored a meet and greet at Courseview and invited 40+ mental health agencies and providers and no one showed up for the event. Breaking into the Warren Co. market and introducing ourselves will take a great deal of effort. |
| With revision of the institution’s website, revise marketing efforts for programs, using EMAS for marketing and recruitment. | In progress  Completed  No longer applicable  X | We currently have no information and no understanding of this recommendation. Conversations with the division dean yielded no additional understanding. We review periodically and update our department website as needed. If there is a need to still address this recommendation, please advise. |
| Review the projected ACS with actual and adjust projections to more accurately reflect actual. | In progress X  Completed  No longer applicable | Average class size in the HSBH department has stayed fairly level during the past year (15.58 in Fall 2012 and 15.51 in Fall 2013). We have been encouraged to run smaller classes at the Learning Centers in order to build our presence at Courseview and Englewood. We have a cap of 16 in our practicum courses. In the coming year, the new department chair will be mentored about ACS and making projections. |
| More aggressively pursue the use of part time faculty. | In progress .  Completed X  No longer applicable | Due to added enrollment, on campus and in the prisons, the use of adjunct faculty has been crucial. Since becoming department chair  [June 1, 2013], I have interviewed 12 prospective adjunct faculty. Eight of these are teaching in Fall2013 for the first time. Of the 47 sections of program courses offered in Fall 2013, 32 are taught by adjunct faculty equaling 68%. That's pretty aggressive! However, as stated earlier, quality and consistency has suffered. |

**Section III: Assessment of General Education & Degree Program Outcomes**

The Program Outcomes for the degrees are listed below. **All program outcomes must be assessed at least once during the 5 year Program Review cycle, and assessment of program outcomes must occur each year**.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **General Education Outcomes** | To which degree(s) is this program outcome related? | Year assessed or to be assessed. | Assessment Methods  Used | What were the assessment results?  (Please provide brief summary data) |
| Critical Thinking/Problem Solving | | All programs | **2012-2013** | none | Due to an oversight, this outcome was not assessed in 2012-13. It and the next scheduled gen ed outcome will be assessed in 2013-14. |
| Values/Citizenship/Community | | All programs | **2013-2014** |  |  |
| Computer Literacy | | All programs | **2014-2015** |  |  |
| Information Literacy | | All programs | **2015-2016** |  |  |
| Oral Communication | | All programs | **2016-2017** |  |  |
| Written Communication | | All programs | **2016-2017** |  |  |
|  | |  |  |  |  |
| **Program Outcomes** | | To which course(s) is this program outcome related? | Year assessed or to be assessed. | Assessment Methods  Used | What were the assessment results?  (Please provide brief summary data) |
| Accurately gather information through clinical interviews and observation. | | MHT 1200, 1201, 2121, ENG1101, ENG 1201 | 2012-13 | Practicum supervisor rubric | Score on rubric = 82.67% |
| Assess and prioritize client needs. | | MHT 1200, 1130, 1201, 2121, 2222,PSY1100, PSY2217 | 2012-13 | Practicum supervisor rubric | Score on rubric = 78.82% |
| Plan effective intervention strategies. | | MHT 1200, 2121, 2222,2205;ALH1101, | 2012-13 | Practicum supervisor rubric | Score on rubric = 81.43% |
| Demonstrate interventions to meet client needs. | | MHT 2121, 2222, 2105, 2111, 2211,MAT OTM elective | 2012-13 | Practicum supervisor rubric | Score on rubric = 80.11% |
| Establish/maintain effective therapeutic relationships. | | MHT 1200, 1201, 2121, 2222, 2111, 2211 | 2012-13 | Practicum supervisor rubric | Score on rubric = 91.97% |
| Demonstrate professional and ethical practice with a sensitivity to and respect for cultural, ethnic and life-style diversity. | | MHT 1101, 1200, 1201, 2121, 2222, 2111, 2211, 2245 ALH 1101 | 2012-13 | Practicum supervisor rubric | Score on rubric = 87.73% |
| Demonstrate self-awareness and effective self-management. | | MHT 1101, 1200, 1130, 1201, 2121, 2222, 2205, 2111, 2211,COM2206 or 2211 | 2012-13 | Practicum supervisor rubric | Score on rubric = 78.82% |
| Facilitate group interactions reflecting a knowledge and understanding of group dynamics. | | MHT 2121, 2222, 2111, 2211 | 2012-13 | Group Leadership Checklist | Score on checklist = 83.85% |
| Demonstrate effective oral and written reporting skills. | | MHT 1101, 1200, 1130, 1201, 2121, 2222, 2205, 2111, 2211, 2245 ENG 1101, 1201 | 2012-13 | Practicum supervisor rubric | Score on rubric = 80.42% |
| Demonstrate an understanding of the dynamics and patterns contributing to the development of an individual’s current functioning. | | MHT 1101, 1130, 1201, 2121, 2222, 2105, 2111, 2211, 2245 SOC1101,BIO1107 | 2012-13 | Practicum supervisor rubric | Score on rubric = 77.62% |

**General Education Outcomes**

1. Are changes planned as a result of the assessment of general education outcomes? If so, what are those changes?

Due to numerous medical absences of the department chair and her eventual retirement, and the first year of the newly developed semester curriculum, the Problem Solving/Critical Thinking outcome was not assessed. This was an oversight.

1. How will you determine whether those changes had an impact?

Our plan is to assess the Critical Thinking/Problem Solving (2012-13) and Values/ Citizenship/Community (2013-14) outcomes during the upcoming year. Results will be reported in next year's Program Review.

**Program Outcomes**

1. Are changes planned as a result of the assessment of program outcomes? If so, what are those changes?

We are pleased to see small to moderate increases in practicum supervisor ratings (during the capstone course) for a couple of our program outcomes. However, there were also small dips on a few others. Although all of the most recent ratings are considered acceptable, we want to increase all ratings to 80% and higher. Reviewing the latest assessment results in our weekly department meetings over the next few months will lead to possible solutions for increasing students performance on all program outcomes.

1. How will you determine whether those changes had an impact?

Currently, four faculty teach the capstone course MHT 2222. With the addition of two new tenure-track faculty (one in 2012-13 and one in 2013-14), we have been using and will continue to utilize our weekly faculty meeting to discuss curriculum issues and course expectations to move toward greater intra-departmental consistency and inter-rater reliability. We will know from the Spring 2014 capstone assessment data if student performance increases as we hope.

**Improvement Efforts**

1. What were the results of changes that were planned in the last Annual Update? Are further changes needed based on these results?

Because we've added 2 new brand new tenure-track faculty to replace long-time professors who retired in the past 2 years, we found ourselves needing to develop evaluation rubrics for many assignments where none existed before. Mental health counseling is a dynamic, fluid, subjective, and situational endeavor. These new faculty are still wrestling to understand our approach, culture, and expectations for these assignments. The newly developed grading rubrics have been very useful in this effort. Student performance has not changed significantly, as yet, since these rubrics have been distributed for student use.

1. Are there any other improvement efforts that have not been discussed in this Annual Update submission?

The expansion of MHT courses into the prison system in the past year has help boost enrollment numbers.

**APPENDIX – PROGRAM COMPLETION AND SUCCESS RATE DATA**

**Degree and Certificate Completion**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Division | Department | Department Name | Program | FY 07-08 | FY 08-09 | FY 09-10 | FY 10-11 | FY 11-12 | FY 12-13 |
| LHS | 0619 | Human Services & Behavioral He | ACP.S.STC | . | . | . | . | . | 6 |
| LHS | 0619 | Human Services & Behavioral He | ACP.STC | . | 18 | 16 | 5 | 10 | . |
| LHS | 0619 | Human Services & Behavioral He | CDC.STC | . | 2 | 3 | 4 | 5 | 4 |
| LHS | 0619 | Human Services & Behavioral He | MHT.AAS | 29 | 17 | 26 | 22 | 39 | 37 |
| LHS | 0619 | Human Services & Behavioral He | MHT.S.AAS | . | . | . | . | . | 1 |
| LHS | 0619 | Human Services & Behavioral He | MHTCD.AAS | 3 | 10 | 5 | 11 | 26 | 28 |
| LHS | 0619 | Human Services & Behavioral He | SAST.STC | 2 | . | . | . | . | . |

**Course Success Rates**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Department** | **Department Name** | **Course** | **FY 07-08** | **FY 08-09** | **FY 09-10** | **FY 10-11** | **FY 11-12** | **FY 12-13** |
| 0619 | Human Services & Behavioral He | MHT-101 | **57.0%** | **52.9%** | **58.6%** | **58.6%** | **63.3%** | **52.4%** |
| 0619 | Human Services & Behavioral He | MHT-1101 | . | . | . | . | . | **62.6%** |
| 0619 | Human Services & Behavioral He | MHT-1130 | . | . | . | . | . | 74.3% |
| 0619 | Human Services & Behavioral He | MHT-115 | 89.6% | 86.4% | 91.7% | 89.9% | 90.0% | . |
| 0619 | Human Services & Behavioral He | MHT-1155 | . | . | . | . | . | **66.7%** |
| 0619 | Human Services & Behavioral He | MHT-120 | 85.7% | 88.9% | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-1200 | . | . | . | . | . | 90.9% |
| 0619 | Human Services & Behavioral He | MHT-1201 | . | . | . | . | . | 87.1% |
| 0619 | Human Services & Behavioral He | MHT-1203 | . | . | . | . | . | 81.3% |
| 0619 | Human Services & Behavioral He | MHT-121 | . | 92.7% | 82.4% | 94.7% | . | . |
| 0619 | Human Services & Behavioral He | MHT-122 | 72.7% | 71.4% | 80.0% | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-123 | 100.0% | 86.4% | 97.0% | 93.6% | 92.6% | 93.5% |
| 0619 | Human Services & Behavioral He | MHT-1236 | . | . | . | . | . | 93.5% |
| 0619 | Human Services & Behavioral He | MHT-1256 | . | . | . | . | . | 100.0% |
| 0619 | Human Services & Behavioral He | MHT-126 | 82.6% | 77.2% | 80.0% | 80.6% | 79.5% | 81.8% |
| 0619 | Human Services & Behavioral He | MHT-128 | 73.1% | 90.0% | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-130 | 100.0% | 77.8% | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-132 | 100.0% | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-135 | 80.0% | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-136 | 84.6% | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-137 | . | . | . | 90.9% | . | . |
| 0619 | Human Services & Behavioral He | MHT-138 | 81.3% | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-139 | . | . | 92.5% | 86.6% | 97.5% | 94.3% |
| 0619 | Human Services & Behavioral He | MHT-140/2250 | **63.8%** | **65.2%** | **56.3%** | **54.2%** | **61.0%** | **66.7%** |
| 0619 | Human Services & Behavioral He | MHT-141 | 100.0% | 100.0% | 100.0% | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-142 | 100.0% | 100.0% | 88.9% | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-143 | 55.0% | 87.9% | 88.9% | 83.8% | 75.0% | . |
| 0619 | Human Services & Behavioral He | MHT-144 | 87.0% | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-151 | 62.5% | 66.7% | 55.6% | 85.7% | . | . |
| 0619 | Human Services & Behavioral He | MHT-155 | 88.9% | 66.7% | 95.7% | 63.6% | 87.5% | . |
| 0619 | Human Services & Behavioral He | MHT-156 | 100.0% | 92.9% | 100.0% | 91.7% | 100.0% | . |
| 0619 | Human Services & Behavioral He | MHT-157 | . | 100.0% | 100.0% | 100.0% | 100.0% | . |
| 0619 | Human Services & Behavioral He | MHT-201 | 83.3% | 78.0% | 93.4% | 87.1% | 91.8% | 100.0% |
| 0619 | Human Services & Behavioral He | MHT-202 | 92.5% | 83.9% | 92.2% | 92.5% | 92.2% | . |
| 0619 | Human Services & Behavioral He | MHT-203 | 97.3% | 100.0% | 100.0% | 87.5% | 93.9% | . |
| 0619 | Human Services & Behavioral He | MHT-204 | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | . |
| 0619 | Human Services & Behavioral He | MHT-205 | 86.5% | 79.1% | 93.9% | 98.1% | 89.3% | . |
| 0619 | Human Services & Behavioral He | MHT-206 | 93.3% | 90.5% | 100.0% | 88.5% | 87.5% | . |
| 0619 | Human Services & Behavioral He | MHT-209 | 100.0% | 60.0% | 88.4% | 90.7% | 93.8% | 100.0% |
| 0619 | Human Services & Behavioral He | MHT-2105 | . | . | . | . | . | 91.4% |
| 0619 | Human Services & Behavioral He | MHT-211 | 86.0% | 73.2% | 85.5% | 86.8% | 85.9% | . |
| 0619 | Human Services & Behavioral He | MHT-2111 | . | . | . | . | . | 86.7% |
| 0619 | Human Services & Behavioral He | MHT-2112 | . | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-212 | 94.6% | 93.1% | 97.7% | 88.9% | 96.2% | . |
| 0619 | Human Services & Behavioral He | MHT-2121 | . | . | . | . | . | 87.3% |
| 0619 | Human Services & Behavioral He | MHT-213 | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | . |
| 0619 | Human Services & Behavioral He | MHT-2137 | . | . | . | . | . | 90.0% |
| 0619 | Human Services & Behavioral He | MHT-2138 | . | . | . | . | . | 88.0% |
| 0619 | Human Services & Behavioral He | MHT-217 | . | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-218 | . | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-2211 | . | . | . | . | . | 90.2% |
| 0619 | Human Services & Behavioral He | MHT-2212 | . | . | . | . | . | . |
| 0619 | Human Services & Behavioral He | MHT-2222 | . | . | . | . | . | 97.8% |
| 0619 | Human Services & Behavioral He | MHT-2232 | . | . | . | . | . | 94.4% |
| 0619 | Human Services & Behavioral He | MHT-2235 | . | . | . | . | . | 85.7% |
| 0619 | Human Services & Behavioral He | MHT-2239 | . | . | . | . | . | 82.8% |
| 0619 | Human Services & Behavioral He | MHT-2245 | . | . | . | . | . | 88.4% |
| 0619 | Human Services & Behavioral He | MHT-2250 | . | . | . | . | . | **54.9%** |
| 0619 | Human Services & Behavioral He | MHT-2253 | . | . | . | . | . | **25.0%** |
| 0619 | Human Services & Behavioral He | MHT-235 | . | 71.4% | 85.3% | 89.4% | 95.0% | . |
| 0619 | Human Services & Behavioral He | MHT-236 | . | 93.3% | 95.8% | 91.1% | 90.2% | 92.9% |
| 0619 | Human Services & Behavioral He | MHT-237 | . | 77.8% | 100.0% | 87.9% | 92.9% | 88.9% |
| 0619 | Human Services & Behavioral He | MHT-238 | . | 80.0% | 88.6% | 91.8% | 89.5% | . |
| 0619 | Human Services & Behavioral He | MHT-239 | . | 81.0% | 87.5% | 91.7% | 84.6% | . |
| 0619 | Human Services & Behavioral He | MHT-245 | 100.0% | 95.8% | 96.9% | 91.2% | 92.9% | . |
| 0619 | Human Services & Behavioral He | MHT-264 | . | 100.0% | 92.5% | 91.7% | 96.6% | 100.0% |
| 0619 | Human Services & Behavioral He | MHT-265 | . | . | 100.0% | 100.0% | 100.0% | . |
| 0619 | Human Services & Behavioral He | MHT-296 | 75.8% | 77.6% | 74.2% | . | 79.3% | 94.7% |