**Sinclair Community College**

**Continuous Improvement Annual Update 2017-18**

**Please submit to your Division Assessment Coordinator / Learning Liaison for feedback no later than March 1, 2018**

**After receiving feedback from your Division Assessment Coordinator, please revise accordingly and make the final submission to your dean and the Provost’s Office no later than May 1, 2018**

**Department:** **LHS - 0619 – Human Services and Behavioral Health**

Year of Last Program Review: FY 2014-2015

Year of Next Program Review: FY 2019-2020

**Section I: 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. Responses from the previous year’s Annual Update are included, if there have been no changes to report then no changes to the response are necessary.

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| **GOALS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| Creation of a Human Services AAS degree program (possibly called HUS.S.AAS) to comply with accreditation standards for implementation by Fall 2016. | In progress  Completed XX  No longer applicable | Effective Summer 2016, our AAS in Mental Health Technology degree title was officially changed to AAS in Human Services while maintaining the MHT.S.AAS designation. This brings our department into compliance with accreditation recommendations. Likewise, we’ve submitted to CMT a revised MHT.S.AAS curriculum which allows for a Residential Specialist track in addition to the Human Services track. This degree became an option in Fall 2017. |
| Conversion from Mental Health Technology/  Chemical Dependency (MHTCD.AAS) to a Chemical Dependency AAS degree program (possibly called CDC.S.AAS) and explore accreditation through the National Addiction Studies Accreditation Commission (NASAC). | In progress X  Completed  No longer applicable | MHTCD.S.AAS has been reduced from 73 to 63 credit hours and went into effect Fall 2016.  The development of a new Chemical Dependency AAS is not necessary, small revisions will be sufficient. In Summer/Fall 2017, we plan to pursue a simple name change in degree title for MHTCD.S.AAS to Addiction Services. Regarding national accreditation for our chemical dependency AAS: We were advised by the national accrediting body to run our 63-hour chemical dependency (CD) degree program for a couple of years before applying for accreditation in order to test the curriculum and work out the bugs. We’ll likely pursue national accreditation for the CD program in 2018 or 2019. |
| Secure articulation agreements with more 4-year universities; especially Capital University Social Work Program. | In progress  Completed XX  No longer applicable | A transfer agreement between Sinclair HSBH and Capital University Social Work was finalized in 2016. We are now working with Wright State University Rehabilitation Services program on a transfer agreement. A division-wide articulation agreement with Antioch University remains in place.  Once again, in 2016 we had discussion with the chair of Wright State University Social Work program regarding transfer. They told us this was not possible without making numerous changes to our curriculum which would render our degree unemployable and make it more like Sinclair’s university parallel Social Work AA degree. Our employers and advisory board strongly support our current curriculum which is skill-based and leads to state licensing and jobs.  We have considered articulation agreements with University of Cincinnati for the Addiction Services degree. The next step is contacting the department chair or program director at UC. |
| Closely track graduates of HSBH programs on a yearly basis to obtain important data regarding program satisfaction, transfer, and employment for assessment and evaluation purposes. | In progress  Completed XX  No longer applicable | Prior to graduation we now obtain students’ non-Sinclair email addresses to use for follow-up surveys. Soon-to-be graduates are invited to join our HSBH Alumni Facebook page. We work cooperatively with RAR when developing surveys of recent graduates. Survey results are held for analysis on a yearly basis. The use of Survey Monkey has increased response rates to grad surveys. |

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. Responses from the previous year’s Annual Update are included, if there have been no changes to report then no changes to the response are necessary.

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| **RECOMMENDATIONS** | **Status** | **Progress or Rationale for No Longer Applicable** |
| In the self-study, the department noted the challenges of offering the MHT 1130 Introduction to Addictive Illness course to incarcerated students – the department is encouraged to thoughtfully review whether this course offering is appropriate for a prison setting given the inability of many of these students to obtain CDCA credentials due to their criminal backgrounds. | In progress  Completed XX  No longer applicable | Through continuing regular conversation with Cheryl Taylor, Sinclair’s coordinator for prison programs, we have agreed to continue offering MHT 1130 in the prisons even though the likelihood of those students receiving state credentialing in low due to their current legal/criminal status. Approximately 90 students (both fall and spring semesters) and 50 (summer semester) take MHT 1130 in our prison sections. |
| The department presented a compelling argument for the necessity of a new Human Services degree – the Review Team recommends that the department chair meet with the Manager of Curriculum and Articulation and the Assistant Provost of Accreditation and Assessment to discuss the best approach for development of this degree. This consultation may help streamline the process, and will help get degree development on track for the Fall 2016 goal the department has set for offering the program. | In progress    Completed XX  No longer applicable | MHT.S.AAS degree title was changed from Mental Health Technology to Human Services effective 16/SU. The 2016-17 *Sinclair College Catalog* now shows the degree title as Human Services. |
| Best practices at Sinclair should be shared as widely as possible for the benefit of other departments. Several examples of these kinds of best practices from the HSBH department were discussed in the meeting with the Review Team. One priority for sharing best practices from the department should be the *Minimum Behavioral Expectations* – it is a document that could improve the approach that many other departments take in dealing with student behavior issues, and the expertise of the faculty in this department uniquely qualifies them to share the *Expectations* with other departments. Can the faculty member who serves on the Behavioral Intervention Team (BIT) share this document with the BIT team as a means of more widely disseminating it across campus? Could the department chair share it with Department Chairperson’s Council (DCC)? Could it be shared in a session in Fall Faculty Professional Development Day? The student behavior interventions pioneered by this department deserve wide dissemination, and ought to be adapted for use in many other departments on campus. | In progress  Completed XX  No longer applicable | This activity has been completed and yet will continue well into the future. Department faculty continue to offer breakout sessions regarding the *Minimum Behavioral Expectations* policy and best practices at Fall Faculty Professional Development Days. The Health Sciences division has adopted a version of this document for use within the division. In the past year, HSBH department faculty have been asked to present our use of the *Minimum Behavioral Expectations* document to other departments on campus. One HSBH faculty who currently serving on the BIT Team continues to utilize the *Minimum Behavioral Expectations* document with her colleagues on the team. In March 2017, two HSBH faculty member will make a presentation about Sinclair’s use of the *Minimum Behavioral Expectations* document at the *League for Innovation* conference in San Francisco. In April 2017, two of our faculty made a presentation at the Health Sciences division Spring Meeting about the use of *Minimum Behavioral Expectations* as a tool for student success. In October 2017, two faculty presented at the state-wide Ohio Association of Two Year Colleges conference. At this point we have presented this work to our Sinclair colleagues and to a state and national audience. |
| On a related note, the department is encouraged to continue to monitor its dismissal and re-instatement policy in regards to the *Minimum Behavioral Expectations,* both to ensure that its implementation continues to be beneficial to students and the program as a whole, and to allow for collection of data that can document and demonstrate its benefits to other departments. | In progress  Completed X  No longer applicable | The department’s dismissal and reinstatement policy has been clarified and published in our *HSBH Statement of Policies*. Our current work is on developing a clear and effective policy and pathway to handle student complaints and violations of department policies.  It is noted that having the new college-wide complaint policy has provided a clear pathway to address and document student complaints. |
| On the whole, the Review Team would encourage the department to carry on the excellent work it is currently doing advising and educating students, producing skilled and capable graduates, meeting community needs and maintaining connections with agencies, and being a valuable resource for Sinclair as an institution. So much good work is done in this department, and the Review Team strongly recommends these practices be continued. | In progress X  Completed  No longer applicable | You should know of an important change in our department. Effective 5/31/17, Tom McElfresh (HSBH faculty since 1984) will retire from Sinclair and Associate Professor Gwen Helton will assume chairperson duties.  In Fall 2017, an HSBH and RET faculty member created an IPE experience for students from both programs in which case studies were created to increase empathy. HSBH students facilitated discussions of 3 case studies. 1. Respiratory patient with mental health issues 2. Respiratory patient with Opioid overdose 3. Respiratory patient with end of life decisions in which he wanted his respiratory therapist to decide whether he should go in to Hospice. This IPE experience was evaluated and students reported they were better equipped to handle respiratory patients with other behavioral health issues. This is an innovative IPE experience linked to producing skilled and capable graduates for both departments while meeting the HS goal of collaborative learning between healthcare partners.  It should be noted that the Dean of Health Sciences has suggested this IPE experience be submitted as a proposal to the League for Innovation. Although many are doing IPE nationwide, the inclusion of empathy into clinical care’ is ground-breaking.  The HSBH has integrated into the HS division in a way they have not every before. The new Health Sciences Center’s collaborative model and focus on IPE has made this possible. Students now identify as Health Sciences students. |

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

For the FY 2016-17 Annual Update, departments are asked to provide assessment results for **Information Literacy**.

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| **General Education Outcomes** | Year assessed or to be assessed. | Course identified by the department where this outcome could be assessed | Assessment Methods  Used | What were the assessment results?  (Please provide brief summary data) |
| **THIS YEAR’S ASSESSMENT RESULTS** | | | | |
| Computer Literacy | **2017-2018** | MHT 2222 | Sinclair’s  Computer  Literacy rubric | We will conduct this assessment in Spring 2018. |
| **LAST YEAR’S ASSESSMENT RESULTS** | | | | |
| Information Literacy | **2016-2017** | MHT 2222 | Sinclair’s Information Literacy rubric modified for HSBH | Utilizing a 4-point scale [1=Absent, 2=Developing, 3=Competent, 4=Exceptional] HSBH faculty teaching the capstone course, MHT 2222, completed Sinclair *Information Literacy* rubric to assess student performance on the Capstone Research Project. **RESULTS (N=24) Criteria 1:** *Pose valid research questions based on need and formulate thesis idea and purpose connected to research* 3.21/4.00 = 80.25%. **Criteria 2:** *Organize and integrate information and use information ethically* 3.17/4.00 = 79.25%. **Criteria 3:** *Select sources to support an idea that are appropriate, credible, and relevant to the idea being presented* 3.21/4.00 = 80.25%.  **TOTAL MEAN: 3.20/4.00 = 80.00%.** |

The Program Outcomes for the degrees are listed below. Responses from previous years are provided 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**.

**Assessment of Program Outcomes by Field Placement/Practicum Supervisors – Comparison 2013-17**

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| **Program Outcome** | **To which courses is this program outcome related?** | **Assessment Method Used** | **Assessment results - Spring 2013 (N=39)** | **Spring 2014 (N=32)** | **Spring 2015 (N=32)** | **Spring 2016 (N=40)** | **Spring 2017 (N=24)** |
| **MHT 1) Accurately gather information through clinical interviews and observation.** | MHT 1201, 2121, ENG 1101 | Practicum supervisor rubric | Score on rubric = 82.67% | 79.02% | 81.25% | 84.20% | 82.90% |
| **MHT 2) Assess and prioritize client needs.** | MHT 1130, 1201, 2121, 2222, PSY 1100, PSY 2217 | Practicum supervisor rubric | Score on rubric = 78.82% | 78.12% | 80.64% | 78.27% | 78.40% |
| **MHT 3) Demonstrate self-awareness and effective self-management.** | MHT 1101, 1130, 1201, 1202, 2121, 2222, 2105, 2111, 2211,COM 2206 | Practicum supervisor rubric | Score on rubric = 78.72% | 77.32% | 82.81% | 84.37% | 84.09% |
| **MHT 4) Plan effective intervention strategies.** | MHT 2121, 2222, 2205, ALH 1101 | Practicum supervisor rubric | Score on rubric = 81.43% | 78.89% | 79.71% | 86.25% | 82.95% |
| **MHT 5) Demonstrate interventions to meet client needs.** | MHT 2121, 2222, 2105, 2111, 2211 | Practicum supervisor rubric | Score on rubric = 80.11% | 81.79% | 83.33% | 79.40% | 90.90% |
| **MHT 6) Establish and maintain effective therapeutic relationships.** | MHT 1201, 2121, 2222, 2111, 2211 | Practicum supervisor rubric | Score on rubric = 91.97% | 89.09% | 92.10% | 83.80% | 91.60% |
| **MHT 7) Demonstrate effective oral and written reporting skills.** | MHT 1101, 1130, 1201, 1202, 2121, 2222, 2105, 2111, 2211, 2245, ENG 1101 | Practicum supervisor rubric | Score on rubric = 80.42% | 77.40% | 85.15% | 81.25% | 85.20% |
| **MHT 8) 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 SOC 1101, BIO 1111 | Practicum supervisor rubric | Score on rubric = 77.62% | 77.40% | 78.12% | 90.77% | 77.20% |
| **MHT 9) Demonstrate professional and ethical practice with a sensitivity to and respect for cultural, ethnic and life-style diversity.** | MHT 1101, 1201, 2121, 2222, 2111, 2211, 2245, ALH 1101, SWK 2207 | Practicum supervisor rubric | Score on rubric = 87.73% | 90.85% | 90.32% | 94.10% | 87.20% |
| **MHT 10) Facilitate group interactions reflecting a knowledge and understanding of group dynamics.** | MHT 2121, 2222, 2111, 2211 | Group Leadership Checklist | Score on checklist = 83.85% | 86.30% | 86.93% | 83.35% | 88.46% |
| **CD 11) Apply case-management roles, including service coordination, client advocacy, and linkage.** | MHT 1236, 2137, 2235, 2239 | Practicum supervisor rubric | **The following Program Outcomes (CD11-CD18) also apply to those HSBH students receiving the Chemical Dependency (MHTCD.S.AAS) degree.** |  |  |  | 92.10% |
| **CD 12) Demonstrate culturally relevant individual, relationship, and group intervention strategies.** | MHT 1130, 1236, 2137, 2112, 2212, 2235, 2239 | Practicum supervisor rubric | **We have not assessed these outcomes separately to this point. With the changes in MHTCD curriculum (decrease to 63 and the revision of MHTCD curriculum), we started assessing these in Spring 2017 utilizing a practicum supervisor rubric.** |  |  |  | 88.60% |
| **CD 13) Describe various theories of addiction.** | BIO 1111, MHT 1130, 1236, 2137, 2235, 2239 | Practicum supervisor rubric |  |  |  |  | 78.12% |
| **CD 14) Identify and evaluate ethical issues and apply the code of ethics and standards of practice to promote the best interests of the client and profession.** | MHT 1101, 1130, 2137, 2138, 2235, 2121, 2222 | Practicum supervisor rubric |  |  |  |  | 85.90% |
| **CD 15) Identify major drug classifications including symptoms of abuse or dependency, levels of tolerance, and withdrawal symptoms.** | BIO 1111, MHT 1130, 1236, 2137, 2121, 2138, 2222, 2239 | Practicum supervisor rubric |  |  |  |  | 86.60% |
| **CD 16) Initiate service plan with client, formulating and prioritizing mutually agreed upon problems, goals, objectives and methods.** | MHT 1203, 1236, 2137, 2121, 2222, 2239 | Practicum supervisor rubric |  |  |  |  | 78.10% |
| **CD 17) Perform and document all aspects of clinical assessment except diagnosis.** | MHT 1203, 1236, 2121, 2222, 2239, PSY 2217 | Practicum supervisor rubric |  |  |  |  | 85.80% |
| **CD 18) Prepare accurate and concise clinical documents consistent with professional standards.** | ALH 1101, MHT 1203, 1236, 2137, 2121, 2222 | Practicum supervisor rubric |  |  |  |  | 90.00% |
| **CD 19) Provide culturally relevant education raising awareness of substance use, prevention and recovery.** | MHT 1130, 2137, 2121, 2222, 2239, Cultural Diversity Elective of PSY 1160 or SWK 2207 or SOC 1108 | Practicum supervisor rubric |  |  |  |  | 83.33% |

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| **Are changes planned as a result of the assessment of program outcomes? If so, what are those changes?** | When reviewing our student success data and completion numbers, we found that some students had difficulty with our rigorous second-year courses which require stronger critical thinking skills and sharp clinical precision. In the past, these students simply failed out. In Fall 2017 a non-clinical track called Residential Specialist was approved through CMT. Rather than working in fast-paced clinical treatment settings like hospitals and clinics, those who complete the Residential Specialist track of the MHT.S.AAS degree will find employment opportunities in residential settings such as group homes for the developmentally disabled, halfway houses for those returning to society from incarceration, homeless shelters, respite care, long-term care facilities, etc. We plan to develop an “Early Alert” process to quickly identify and re-direct struggling students to the program pathway where they are most likely to be successful. Utilizing ***Inspire for Faculty*** we can identify students who are falling behind and intervene more quickly.  We also saw a decline in outcome MHT 8. We added additional practice by way of case studies in MHT 2222 Practicum II prior to student completion of the Capstone project where this outcome is measured. |
| **How will you determine whether those changes had an impact?** | We will simply look at completion percentages. We anticipate lower drop-out numbers and higher completions going forward.  Historically, promotion for HSBH programs through the marketing department has been limited to creating half-page flyers and information sheets that we take to college and career fairs. The HSBH department has recently worked with Denny Wilson and his staff to create a video featuring a departmental diversity event. We also plan to work with Greg Deye to create an online orientation video for our community and departmental webpage.  We plan to look at MHT 8 outcome specifically to determine if the outcome percentage matches the anecdotal feedback about adding case study practice re: dynamics contributing to a client’s overall functioning. |

**OPTIONAL:**

Please use the space below to keep track of any annual data that your department wishes to maintain. This section is completely optional and will not be reviewed by the Division Assessment Coordinators.