1) Agenda Review

2) Approval of Meeting Notes

3) Announcements

4) Dept. Presentation: Health Promotion
   Prevention and Early Intervention programs
   Jeane Erlenborn and Becky Fein

5) Fiscal Update
   - 13-14 status
   - 14-15 budget development (PRPP)

6) PRPP Items
   - Student Learning Outcome Statements – Mapping to Strategic Plan
   - Personnel
   - Technology Plan, Facilities, Sustainability

Confirm upcoming meeting date:
May 1st, 2014
Dept. Presentation: Student Psychological Services
Student Health Services
Health Services Advisory Committee
Meeting Minutes 3/6/14

Attendance: Cindy Dickenson, Anna Valdez, Art Hsieh, Bert Epstein, Susan Quinn, Tina August, Ruth Ann Grogan, Catherine Williams, Deborah Ziccone, Kasia Fortunati, and Shannon Lawee

Guests: Juanita Dreiling (note taker), Becky Fein, Jeane Erlenborn

Agenda Review: The March 6th meeting agenda was reviewed by all.

Announcements:
Susan Q: Recently attended a state-wide Health Services Association conference. There were over 70 people in attendance. Speakers were from the Chancellor’s Office, MHSA technical assistance staff, and more. The conference had a variety of workshops – including various mental health topics. During the conference, Susan provided a presentation of the NCHA data and a comparison between national health data and California data. There were approximately 17 thousand student participants in the survey. Susan would like to further examine some of the data during the next HSAC meeting. Hot topics during the conference: State smoke-free policy (SRJC is the 1st to have one), long acting reversible contraception and nutrition, and plant based foods vs. meat.
Bert E: There is a Forum on Latino Mental Health coming up the first week of April.
Shannon L.: The PEERs Coalition recently had its first meeting in Petaluma! Shannon commented that Mahoney was a nice location for the meeting and that Cindy gave a presentation on long-acting contraception and Plan B. Deborah Z. noted that the students seemed to enjoy the presentation and there was great teamwork!
Anna V.: Senate Bill 850 is currently working its way through the legislature. If successful, it would allow selected community colleges to offer a bachelor’s degree as a pilot project. One of these possible majors could be a BSN degree. It is unlikely SRJC would be approved for the BSN because the current bill says the community college cannot duplicate an existing local degree and Sonoma State has a BSN degree program.
Jeane E.: Attended an initial task force meeting regarding the Campus Save Act with the Sexual Misconduct Workgroup. The workgroup will meet again in a week (next Thursday @ 9:00 a.m.). The goal is to address compliance issues with mandates and develop cohesive District policy.
Art H.: Attended a student success committee orientation where there was a sexual assault awareness component.

Approval of Meeting Notes: Art H. moved to accept the December meeting minutes. Kasia F. seconded the motion. Passed and approved.

Student Health Services Department Presentation – Health Promotion:

Jeane Erlenborn and Becky Fein provided a PowerPoint presentation on the PEI Program – Promoting Mental Health at Santa Rosa Junior College. Discussion points of the presentation included:
A Fall semester comparison of students reached with health information and resources vs. previous years – More classroom presentations, QPR training, and seminars.

The number of attendees of Fall semester events & seminars provided by SHS staff – 4,500 for Send Silence Packing, 65 for Let’s Talk About Sex, 40 for Singing the Blues, 100 for ACA workshops, 40 for Welcoming Vets on Campus. Catherine W. was curious about what has contributed to increased attendance of events. Jeane E. reviewed a number of factors, including extra credit, later presentations, better advertising, faculty suggestions/forwarding info to their students, and day of the event advertising.

2010-2013 Question, Persuade & Refer (QPR) pre/post survey results – Increased knowledge of warning signs, how to ask someone about suicide, how to persuade someone to get help and local resources. Jeane E. added that Shannon L. has been doing a lot of work on this as a teaching fellow and shared a story where a student helped another student who was suicidal.

QPR training feedback and response – Some very positive responses were shared with the committee and Jeane E. thanked the Nursing Program for teaching QPR regularly to all their students. Susan Q. suggested outreach to Peggy Goebel to get QPR into the LVN Program and asked whether there are plans for movement on the Community Health Program. Anna V. responded not that she knows of.

Student Health & Success response – Stress, anxiety, and depression usually have the biggest effect on student success. They are the main topics of class presentations. Alignment with curriculums and the development of a series of “Health and Student Success” to present when faculty members make presentation requests is the idea/goal. Anna V. suggested the “voice-thread” idea – making presentations available for students online with quizzes at the end.

Statistics regarding SRJC as a source of mental health information – Awareness of stress reduction, how to help others, depression and suicide are all up, which can be attributed to MHSA funding.

Online outreach programs, such as Student Health 101, Kognito and the SHS website – Online outreach is up. The SH101 program is being utilized, as well as the Kognito and SHS websites. Art H. asked about how to access these pages and how awareness of them can be improved. Jeane E. noted that there have been PDA presentations including this topic for staff, available on the Staff Development website to Flex Credit. E-mails from the department chairs would help promote this opportunity. Becky F. presented a quick snippet on the SRJC website overhaul. SHS STNC Jane Rankin is sitting on the committee to redesign the SHS website. It will be more functional, mobile compatible and easy to navigate. The website will also empower the department to update its own material. SHS sponsored a student focus group on the college’s web page design. Susan Q. thanked Becky and Jane for their work and tenacity on the website project.

Self-assessment resources – Online anonymous screenings. SHS is partnering with Student Health 101 to provide anonymous self-assessments for several mental health related issues.

Peers Coalition events and workshops – Becky F. provided an update on the Peers Coalition activities. The Spring Wellness Fair is coming up and will include music, games, health outreach, etc. There are 3-4 months left in the Peers grant. Currently, the
coalition includes a team of 9 interns (1 intern was added in Petaluma recently) providing workshops and events. She would like to see the program continue with a 3-4 person intern team providing workshops, a mobile cart for wellness and outreach at annual events. *Susan Q.* also added that a requirement of the grant is to provide a manual for the state that explains how to create a sustainable peer model. Ideally, this concept would link to academic program curriculum requirements for select programs at the college. Linking with preset Work Experience objectives is another approach. *Becky F.* is working on designing a program and laying out the manual now.

- **Upcoming events** - Rompiendo Las Barreras, Spring Wellness Fair and Stress Relief Days.

Discussion about the sustainability and future directions for the PEI program was also touched on with regard to program sustainability and integration efforts:

- *Susan Q.* mentioned a teaching fellowship for suicide prevention to help sustain that work here on campus.
- *Becky F.* asked about integrating suicide prevention into the CalWorks student support program. The Counseling 99I class was mentioned because there are 3 units required for Human Service Certificate students. *Kasia F.* also recommended Maryanne Schwartz-Kessling as a resource to explore connections between her Cal-Works peer support program.
- The County funds PEI. *Jeane E.* has asked to sit on the County-wide advisory group that prioritizes County MHSA funds and was wondering if she could give the HSAC committee’s e-mail address to Harder & Co. for survey purposes. *Susan Q.* added that this would ensure that we have an adequate voice and urged everyone to participate. Basically, we’re trying to obtain additional funding from the County so that we can maintain the PEERS program at current levels.
- *Anna V.* suggested that SRJC approach the County to consider some funding for the administrative work involved in linking interns to programs/credit/internships, since it takes significant resources for this type of work.

**Student Health Services Department – Brief Fiscal Updates from Susan Quinn**

**Fiscal Check-in:**

- **Health Fee Revenue:** Fiscal year 14/15 looks like it may possibly stay the same as 13/14 in terms of base Health Fee revenue. Expenses for permanent staff have gone up, though, primarily in the benefits. There is a potential STRS increase and there will be new hires, and H/W benefits are not certain. Reserve funds will probably be used. A rough total estimate for 14/15 Health Fee revenue is $1,161,000, which includes a small increase over 13/14 for added courses. Permanent staff expenses for 14/15 are projected at $961,500, other staffing (including physician contracts, student workers and interns/intern supervisors) is projected at $155,120, and approximately $45,000 for health software maintenance, medical/office supplies and other miscellaneous necessary expenses. Some items not currently funded in the budget (reserve fund and MAA income dependent) are STNC backup staff, dues, memberships, travel, equipment, and contingencies (for health benefit increases, etc.).
- **MAA Revenue**: May be approximately $70,000 in 14/15. Resources are focused reimbursing the Health Fee fund for S/B of staff.

- **What is a good strategic plan?** For permanent positions that are rolling over – Possibly reducing the NP position from .80 to .70 and one of the MA positions from .100 to .70. Transferring a portion of the HSA’s position to the Athletics budget and possible bond funding was also mentioned to support technology needs.

- **Deborah Z.** asked how much the reserve fund needed to be percentage wise of the total budget. Reserve funds should ideally stay at 15% of the budget by the end of the year.

- **Cindy D.** had a question about equipment needs in relation to bond funding. **Susan Q.** said that bond funding is looking good for November, though still in the exploratory phase.

- **Deborah Z.** mentioned that enrollment figures have been unusual this year because it is still a moving target with late class enrollments.

**Personnel Updates:**
Challenges include a recent major turn over in staff:

- Karen Bowden, full time Medical Assistant, retired in March.
- Donna Jones, Nurse Practitioner, is retiring on June 30th.
- Cheryl White, full time Medical Assistant, is retiring in December.
- It is very difficult to project H/W expenses for new hires and the timing of the hiring process.
- **Susan Q.** asked whether the committee supported using reserve funds for staff or whether anyone had ideas or suggestions. **Anna V.** mentioned approaching the Foundation for equipment needs. **Anna V.** and **Art H.** also suggested a distributed model of labor, i.e. cutting staff/STNC/sha labor for non-essential service delivery and sitting down with staff to discuss what else can be done.

**Meeting Evaluation – Plus Delta:**
- **What seemed to work well:**
  - Jeane and Becky’s presentation was great
  - Having a Note taker here (not a committee member)
  - Relaxed atmosphere
  - Tech was good

**No areas that could be improved upon!**
PEI Program
Promoting Mental Health
at Santa Rosa Junior College

Jeane Erlenborn, MPH
Becky Fein, MPH
Promoting Mental Health on Campus

Inter-Agency Collaboration

Faculty & Staff Training

Student Outreach & Peer Support

Crisis Intervention Resource Team Development

Data Collection: (NCHA & Other)
# Health Promotion Fall Semester

## Students Reached

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
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<tbody>
<tr>
<td>Classroom Presentations</td>
<td>473</td>
<td>646</td>
<td>701</td>
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<tr>
<td>QPR Suicide Prevention</td>
<td>123</td>
<td>303</td>
<td>341</td>
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<tr>
<td>Seminars</td>
<td>61</td>
<td>186</td>
<td>230</td>
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</table>
Fall Events & Seminars

- Send Silence Packing (4,500)
- Let’s Talk About Sex (65)
- Singing the Blues: Coping with Holiday Stress (40)
- ACA Workshops
- Welcoming Veterans on Campus (40)
QPR
Question, Persuade, Refer
Ask a Question, Save a Life

Santa Rosa Junior College
QPR
Suicide Prevention Gatekeeper Training

Presented by:
SRJC
Student Health Services

Facilitators:
Jeane Erlenborn
Shannon Lawee
Santa Rosa Junior College
2010-2013 QPR Pre and Post Survey Results

Knowledge of Warning Signs

<table>
<thead>
<tr>
<th></th>
<th>Totals 2010-2013</th>
<th>Totals 2010-2013</th>
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<tr>
<td></td>
<td>Before QPR</td>
<td>After QPR</td>
</tr>
<tr>
<td>Low</td>
<td>141</td>
<td>10</td>
</tr>
<tr>
<td>Medium</td>
<td>438</td>
<td>152.5</td>
</tr>
<tr>
<td>High</td>
<td>146</td>
<td>567.5</td>
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How to Ask Someone about Suicide

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<tr>
<th></th>
<th>Totals 2010-2013</th>
<th>Totals 2010-2013</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Before QPR</td>
<td>After QPR</td>
</tr>
<tr>
<td>Low</td>
<td>330</td>
<td>12</td>
</tr>
<tr>
<td>Medium</td>
<td>293</td>
<td>185.5</td>
</tr>
<tr>
<td>High</td>
<td>102</td>
<td>538.5</td>
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</table>

Persuading Someone to Get Help

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<th>Totals 2010-2013</th>
<th>Totals 2010-2013</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Before QPR</td>
<td>After QPR</td>
</tr>
<tr>
<td>Low</td>
<td>267</td>
<td>12</td>
</tr>
<tr>
<td>Medium</td>
<td>341</td>
<td>269</td>
</tr>
<tr>
<td>High</td>
<td>110</td>
<td>454</td>
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Knowledge of Information about Local Resources

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<th></th>
<th>Totals 2010-2013</th>
<th>Totals 2010-2013</th>
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<tr>
<td></td>
<td>Before QPR</td>
<td>After QPR</td>
</tr>
<tr>
<td>Low</td>
<td>461</td>
<td>19</td>
</tr>
<tr>
<td>Medium</td>
<td>208</td>
<td>235</td>
</tr>
<tr>
<td>High</td>
<td>54</td>
<td>480</td>
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QPR Responses

- “one of the students that night had heard that her nephew felt suicidal ... her first impulse was to avoid it entirely ... but after the QPR presentation she was intent on making contacting the next morning, visiting the young man, and literally showing up for him.”

- "I truly feel that every single person in the classroom benefitted tremendously from this class. Most of us did not know what to do and now we do. It's very possible that any of us could use the information to save a life..."

- "If more people in our community were more aware of the signs of someone who was thinking about committing suicide and how to go about preventing it, I think that both the number to attempted suicide and committing suicide would dramatically drop."

- "This presentation not only encouraged me to talk to someone who may be contemplating suicide, but it also aided me in the appropriate choice of words."
STUDENT HEALTH SERVICES

Student Health & Success

Fall 2013

Presented by:
Jeane Erlenborn, MPH
Becky Fein, MPH
Student Health & Success responses

- **Students’ goals for health behavior change after presentation:**
  - “Get my anxiety checked out through someone working here or my doctor”
  - “Go to family therapy with my mom”
  - “I will go talk to a counselor because I am stressed and panic a lot”
  - “I will be more aware of emotions and managing them”
  - “I know now where to get help if I have anxiety or depression”

- **Instructor quotes:**
  - “One of my students and her husband went in for counseling after your presentation. So, thank you.”
  - “Your presentation always opens up a conversation that continues throughout the semester. Thanks for getting it started.”
SRJC as a Source of Information

- **Stress Reduction**: 50% students want information, 29% received info in 2010, 21% received info in 2013.
- **How to Help others in Distress**: 40% students want information, 19% received info in 2010, 23% received info in 2013.
- **Depression/Anxiety**: 39% students want information, 31% received info in 2010, 14% received info in 2013.
- **Suicide Prevention**: 32% students want information, 21% received info in 2010, 13% received info in 2013.
Online Outreach

- Student Health 101
- Kognito
- SHS Website
According to a 2011 survey, 60% of college students reported feeling very sad in the past year.

Stop pretending. Take the first step to healing with an anonymous self-assessment.

CLICK HERE to start an anonymous self-assessment.

There’s a 60% chance she’s totally faking it.

Click for more information and resources on campus.
Follow us to...
P E E R S
COALITION

Monthly Workshops
5 PM to 7 PM on the
Santa Rosa & Petaluma Campuses
(Locations vary; “Like” us on Facebook for details.)
Upcoming Events

- Rompiendo las Barreras – Challenges and Opportunities in Latino Mental Health
- Spring Wellness Fair
- Stress Relief Days
- Workshops
PEI In The Future

- Sustainability
- Integration
- Other Ideas?
Planning for 14-15

Rough estimate Health Fee Revenue:

<table>
<thead>
<tr>
<th>Season</th>
<th>Patients</th>
<th>Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Summer 14</td>
<td>12,000</td>
<td>$192,000</td>
</tr>
<tr>
<td>Fall 14</td>
<td>25,000</td>
<td>$475,000</td>
</tr>
<tr>
<td>Spring 15</td>
<td>26,000</td>
<td>$494,000</td>
</tr>
</tbody>
</table>

$1,161,000

Expenditures:

Permanent Staff (Health Fee only):
Director, Asst. Director
NPS (all at 75%)
Medical Assistants (3 full time – 1 new recruitment expected end of 2014)
Health Services Assistants (1 of them with Athletics $$ support)

~ $961,500

~ $200,000 remains for everything else

Physician contracts ~$ 20,000
Student workers ~$ 65,000
Intern supervisors ~$ 57,120
Interns ~$ 13,000

$155,120

~ $45,000 remains for everything else

Software maintenance agreement ~$13,000
Medical supplies/office supplies ~ $30,000
Graphics/phones ~ $ 5,000

-----HERE WE ARE FULLY EXPENDED-----RESERVE FUND and MAA INCOME DEPENDENT

What is not included above:
STNC back up (NPs/MAAs/H.S.A.)
Dues/Memberships/Travel
Equipment
Contingencies (for health benefits increases, benefits increases such as STRS)
SANTA ROSA JUNIOR COLLEGE’S NEW VISION AND MISSION

Vision
SRJC aspires to be an inclusive, diverse and sustainable learning community that engages the whole person.

Mission
SRJC passionately cultivates learning through the creative, intellectual, physical, social, emotional, aesthetic and ethical development of our diverse community.

We focus on student learning by preparing students for transfer; by providing responsive career and technical education; and by improving students’ foundational skills.

We provide a comprehensive range of student development programs and services that support student success and enrich student lives.

We support the economic vitality, social equity and environmental stewardship of our region.

We promote personal and professional growth and cultivate joy at work and in lifelong learning.

We foster critical and reflective civic engagement and thoughtful participation in diverse local and global communities.

STUDENT HEALTH SERVICES
The mission of Student Health Services is to maintain and improve the physical, mental and social health of students at Santa Rosa Junior College, and to strengthen and inspire the well-being of the entire college community, towards supporting student success and life-long learning.

Aligned?
Student Learning Outcome (SLO) Statements
As a result of Student Health Services interventions

1) Students will maintain and improve their health.

2) Students will demonstrate an understanding of individual health conditions, what prevention approaches can be taken and appropriate treatment when needed.

3) Students will demonstrate personal responsibility by taking actions to improve their health, and the health of others.

4) Students will demonstrate skills in accessing and utilizing healthcare resources on campus and in the community.

5) Students will demonstrate increased self-awareness, confidence and communication skills.

Strategic Plan Objectives

A. Support Student Success

Support development of the whole student from early college awareness through successful completion of educational and career goals

- Expand and sustain access by eliminating barriers, expanding strategic outreach efforts, and delivering services effectively through current technologies

- Increase retention and academic progress through student engagement with academic and student services, faculty and staff, and campus and community activities

- Increase the number of students who complete their educational plans and goals

- Enhance cultural responsiveness to better serve all student populations with a focus on first generation college students and the increasing Latino/a population

B. Foster Learning and Academic Excellence

Foster learning and academic excellence by providing effective programs and services

- Support and promote teaching excellence across all disciplines

- Engage students and spark intellectual curiosity in learner-centered environments

- Integrate academic and student support services across the college and curriculum

- Identify and implement responsive instructional practices that increase the learning and success of our diverse students

C. Serve our Diverse Communities

Serve our diverse communities and strengthen our connections through engagement, collaboration, partnerships, innovation, and leadership

- Identify the educational needs of our changing demographics and develop appropriate and innovative programs and services with a focus on the increasing Latino/a population

- Contribute to the richness of our multicultural community by promoting cultural initiatives that complement academics and encourage the advancement and appreciation of the arts

- Meet the lifelong educational and career needs of our communities (e.g. seniors, emerging populations, veterans, re-entry students)

- Provide relevant career and technical education that meets the needs of the region and sustains economic vitality
D. Improve Facilities and Technology

- Provide, enhance, integrate, and continuously improve facilities and technology to support learning and innovation
- Incorporate best practices and innovations for facilities and technologies in order to enhance learning and working environments
- Improve and sustain infrastructure, facilities, and technology to proactively support our diverse learning community
- Increase District-wide coordination and collaboration to improve facilities and technology access, efficiency, and effectiveness
- Provide effective facilities and technology technical training for all employees to ensure operational effectiveness

E. Establish a Strong Culture of Sustainability

- Establish a culture of sustainability that promotes environmental stewardship, economic vitality, and social equity
- Expand, support, and monitor district-wide sustainability practices and initiatives
- Infuse sustainability across the curriculum and promote awareness throughout District operations
- Promote social and economic equity in the communities we serve
- Ensure economic sustainability by leveraging resources, partnering with our communities, and contributing to the economic growth of the region

F. Cultivate a Healthy Organization

- Cultivate an inclusive and diverse organizational culture that promotes employee engagement, growth, and collegiality
- Foster an environment focused on collegiality and mutual respect in regards to cultural and individual perspectives
- Recruit and hire outstanding faculty and staff and implement an exemplary Professional Development Program for all employees
- Establish robust programs to improve the health and wellness of students and employees
- Increase safety planning, awareness and overall emergency
Current Environment
In addition to standard network connections to the College’s Outlook, Escape and Student Information (SIS) systems, the Student Health Services department also utilizes a secured intranet and software system (MediCat) specific for healthcare information processing, including a secure electronic medical records system. A dedicated server for MediCat is housed in Information Technology (IT). All permanent employees, contractors, student workers and psychology interns utilize the system for appointment management, to document student visits and services rendered, tracking for clinical case management purposes, and to access internal reporting, analysis and program evaluation functions. The software system interfaces with the College’s student database, and via a regular schedule of uploads, demographic student information populates selected fields.

At the beginning of 2013, 45 separate users shared the department’s 34 desktop computers and 5 laptops, located in three different facilities on two campuses. The current District policy is to replace hardware every 7 years, averaging to about 6-7 computers each year. The Medicat server also requires replacement periodically.

Technology challenges exist to link our staff and facilities effectively to conduct needed meetings and dialogue that are inclusive. Several pilots/options are being tested.

Future Plans
- Evaluate and adjust appropriately technology solutions in the health centers on the Petaluma and Santa Rosa campuses to best support providers/staff and the clinical practice towards a) ergonomic integrity b) most effective charting/documentation methods c) optimum communicable disease control d) other enhancements as new technologies emerge.
- Expand the existing MediCat software to include Self Check-In functions that have students complete their initial-history, allergies, and medications and symptoms online before their appointment, assure adequate facilities to support confidentiality while students use this on-site, and adequate funding for additional hardware needs.
- Expand the existing MediCat software as needed to add functions that allow students to have secured email communication with clinicians that includes protected health information (Online Student Health). This software module also enables students to book appointments for themselves in the health centers online during off hours.
- Explore and implement (as feasible) options to provide access to Student Health Services’ records system from off-campus locations by providers. (Support MD consultation process and SRJC’s Sports Medicine program are specific functions identified as necessary for clinical quality assurance).
- Explore and identify multimedia / tech methods to establish secured / confidential connections between our campus sites for both planned department meetings, but also to support urgent clinical consultations with students/providers to increase access to services and reduce risk.
- Explore capacity to develop a more efficient hardware plan for SHS utilizing a centralized hardware hub/dedicated server, with networked workstations, to reduce the expense and overhead costs of maintaining 34 full computer workstations.
• Identify best methodology and implement tech enhancements as needed, to support increased online health educational engagement by SRJC students through Student Health Services’ access points, including a broader selection of video materials/products and learning resources.
• Upgrade SHS web site, and explore the use of applications specific to mobile devices to support student health.

**Strategies and Resources**

• Assure adequate hardware and software resources (including media) are on site to support specialized healthcare operations, with the highest standard of medical confidentiality for students.
  o Re-engineer hardware and software plan to maximize resources and efficiencies.
  o Replacement of workstation hardware, and software updates implemented in a timely manner.
• Reconfigure Race Exam Room work stations for improved ergonomic environment for staff.
• Work with MediCat software consultants, Information Technology, and ITG to purchase and implement software upgrades and new modules.
• Assure appropriately trained personnel are on site to maintain and develop an increasingly complex database within Student Health.
• Maintain ongoing access to needed technology resources for all department workers and provide ongoing staff development activities specifically addressing technology changes.
• Continue software maintenance agreements and plan for increases in costs due to software and hardware expansions.

**Budget/Financial Strategies**

  o Health Fee revenue – work with the Health Services Advisory Committee to assist in determining priorities within the budget development process given the available amount of Health Fee revenue on an annual basis (including use of Reserve Fund).
  o Research and scan for external funding sources for IT hardware, software, training, and personnel support to offset expenses to a vulnerable Health Fee fund, i.e. grants, government funding options, and District fund/Bond monies as available.
  o Through careful planning, maximize cost effectiveness of chosen technology applications to minimize negative impact on budget longitudinally.