Support Unit Review Strategic Implementation Agreement-v3-20180406

The primary goal of the Support Unit Review (SUR) process is to provide a mechanism to ensure improvement of support units on a continuous basis. This form has been designed to support the primary goal of the SUR process by containing a set of recommendations that were developed by the VP of the division in which the unit being reviewed resides. The recommendations need to take into account the results of the support unit review and input from both the head of the unit reviewed and the VP to which the unit head reports. The expectation is that the Recommendations, Proposed Actions and Expected Results will reflect a detailed discussion of the review in a meeting between the VP, the head of the unit reviewed and other appropriate parties.

The form is to be completed by the Vice President of the division in which the unit reviewed resides or the vice president's designee.

A copy of the implementation agreement should be held in the vice president's office and in the original file containing documentation of the review. Implementation documentation should be in a form that can be reviewed prior to the next support unit review.

Date and time of the review discussion meeting:

Review discussion meeting attendees:

Recommendations, Proposed Actions and Expected Results:

Recommendations	Proposed Actions	Expected Results
1. Staffing level would more reasonably be at least 1 FTE counselor to 1,000 students (a ratio adopted by the University of California system, for example).	Dir. of PCS will meet with CSU Stanislaus administrators to request increased budget to hire new counselor position. Consider the option of hiring an Assistant Director or Associate Director for PCS.	To be determined after further meetings on this topic.
There is a need to fill an upcoming counselor vacancy with a psychologist so that PCS has greater interdisciplinary expertise and depth. If the current Director were to leave, the center would be without a psychologist at all, which would be a violation of accreditation standards.		
There is no Assistant or Associate Director position. Evaluate to determine if an Assistant Director role is needed to assist with this growing workload.	Dir. of PCS will meet with Executive Director for Health and Wellness to decide on the correct job description and best way to proceed with this request.	To be determined after further meetings on this topic.

2. The most clinically critical staffing need, from a risk management perspective, is the need for at least one part-time psychiatrist.	Dir. of PCS will consult with Dr. Hennes regarding establishing a part-time psychiatrist position for PCS and the Student Health Center.	To be determined after further meetings on this topic.
3. Previous reviews of PCS commented on the need for 24/7 urgent counseling and mental health access for students. As of this date, no campus service is in place to address students' urgent needs when PCS is closed. This concern has been voiced by the Behavioral Intervention Team and by campus police staff members. PCS has reported that a contract is being evaluated with a behavioral health telephone service, Protocall, to remedy this situation. This service, or one like it, would greatly strengthen the safety net for students.	A ProtoCall Review Committee will be organized with the Director of PCS, the Executive Director for Health and Wellnes, CSU Stanislaus contracts specialist, OIT security experts, representative from CSU Stan Risk Management. Contact ProtoCall to develop contract proposal. Contact CSU Stan VP for Student Affairs, CSU Stan Chief of Police, and CSU Stan President to allocate funds at the point that contract has been developed and approved by Review Committee.	Finalize decision to purchase ProtoCall service for one year beginning 2018 – 2019.
4. Develop PCS Peer Review for Counseling. E.g., counselor peers could review randomly selected client charts of one another once or twice per year and develop procedures and policies to insure all notes contain essential elements, and that adequate documentation occurs.	4. The Director of PCS will develop a process for PCS Peer Review for Counseling. Standardization of note format and treatment goals will be developed interactively with counseling faculty. A process whereby counselor peers will review randomly selected client charts will ensue.	Finalize and implement PCS Peer Review procedure within two years.
5. An important action that would improve the quality assurance mechanisms of PCS is application for accreditation by the accrediting body for university counseling services, the International Association of Counseling Services (IACS). This would insure yearly monitoring and periodic, external peer review of the entire operations of PCS.	Director of PCS will meet with Executive Dir. of Health and Wellness, VP for Student Affairs and will establish a timeline for application to IACS for accreditation. Timeline will be based on completion of move of PCS to "surge space."	PCS will apply for IACS accreditation within three years.

6. It is highly recommended that the new space adhere to the standards for physical facilities set by accreditation guidelines. In particular, the location and building need to be relatively central to the campus, physically accessible, and physically separate from administrative offices, campus police and judicial offices. Also, counselor offices need to be soundproofed to insure confidentiality of counseling sessions. A waiting room needs to offer privacy and be of adequate size, and the number of offices, group/meeting rooms, and staff areas need to adequately accommodate the size of the staff and the breadth of activities of PCS.

Director of PCS will meet with counseling faculty, administrative support staff, Executive Dir. for Health and Wellness, Dir. of Facilities, VP for Student Affairs, officers of Assoc. Students, Inc., interested faculty members, and Pres. of CSU Stanislaus. Director of PCS will discuss options for surge space with counseling faculty and provide feedback to Dir. of Facilities, as well as arrange direct meetings between counseling faculty and Dir. of Facilities. Provisional plans for surge space will be obtained from Dir. of Facilities, provided to counseling faculty and other stakeholder, with feedback relayed to achieve a final plan that meets the needs of stakeholders as much as possible.

The new space for PCS will adhere to standards for accreditation from IACS. Location, sound-proofing, availability of a group room, and adequacy of the environment to provide a healthy, welcoming atmosphere for students will be considered and an effective plan for meeting these needs will be derived and followed when construction of the new facility occurs.

7. Ensure that hiring practices maximize a diverse applicant pool as much as possible.

Director of PCS will review hiring practices and advertisements for positions with the Executive Director for Director for Health and Wellness and the Vice President for Student Affairs.

Procedures will be reviewed, including options for advertising to maximize a diverse applicant pool.

8. Maintain focus on diversity awareness and culturally competent counseling when arranging professional development and continuing education for PCS staff.

Director of PCS will continue to arrange for continuing education and group discussion on topics focused on culturally competent therapy. Cultural aspects of counseling will be addressed through staff case review meetings. Webinar that provides continuing education for licensed counselors, addressing cultural issues that affect counseling, will be arranged. A follow-up meeting will be facilitated to discuss new learning related to culturally competent counseling. Cultural factors that have an impact on counseling will be reviewed on an ongoing basis.

The following individuals have reviewed the recommendation, proposed actions and expected results.

	Signature	Date	
Unit Head/Director	Ore Me	2/08/19	
Division Vice President	Paz Oliverez, Interim VP, Student Affairs	ounseling Services 2/8//7	