**Sinclair Community College - Continuous Improvement Annual Update 2010-11**

**Program:** Mental Health Technology

**Section I: Trend Data**

Information includes data to Spring 2011 for MHT.AAS, MHT/CD.AAS, CDC.STC and ACP.STC

1. **Program Trend Data**

Enrollment for the department has continued to increase. FTE was over 100% of previous year in 2010-2011 every quarter. The range of increase from previous year is from 102.8% in Fall 2010(14 day), 105.8% in Winter 2011 (14 day) to 118.2% in Spring 2011. (Prior to beginning of spring quarter.) Fall FTE in 2006 was 59.2, Fall 2008 FTE was 62.6, Fall 2009 FTE was 98.6, Fall 2010 was 101.67.

We had to add sections of second year courses in the group dynamics and practicum sequences for the first time in our history.

DAWN data of declared majors consists of 106 for the MHT.AAS, 96 for MHT/CD.AAS, 44 for CDC.STC and 17 for ACT.STC.

Seat count in the Activity Program Certificate three course sequence has increased in the last two years but remains small. ACP 155 (the initial course) had a seat count of 11 in 2007/08 and 23 in 2009/10. Current enrollment for winter 2011 in that certificate is 9.

**Interest in Program –**Interest in MHT.AAS, MHT/CD.AAS and CDC.STC remains high. Advisory committee members continue to report a preference for graduates from these programs over local university graduates. There is no competition for these degrees and certificates in community colleges from Montgomery County south to the Ohio river. Competition for jobs rests mainly with Bachelor of Social Work graduates.

The Activity Program Certificate continues to struggle. This three course program has now been offered as distance learning for a year. Enrollment in the winter of 2011 for the first course (MHT 155) was nine. Courseview cancelled a planned MHT 155 for spring 2011 with an enrollment of four. To comply with Ohio Department of Health requirements, long term care facilities must hire activity professionals who have completed this nationally certified certificate. Instructors are limited to two available people in Southwest Ohio. There is a need for activity program completers but this need appears to be a small need.

**Student Success**

Students are admitted to the MHT.AAS and MHTCD.AAS after completing MHT 101 (Introduction to Mental Health Work). The average success rate for that course over the last five years ranges in to 51 to 58 percent. The department began requirement of Dev 110 in 2009-2010 resulting in the highest percentage of success at 58.27%. When compared with introductory courses for other programs the success rate remains low.

Success in the progression of core courses are improved to over 90% for all courses.This is an improvement from 78 to 84% for some of the courses offered previously. Currently MHT 115 is 91.7%, 201 is 93.4%, 202 is 92.2% and 203 and 204 were at 100% for 2009-2010.

**Student and Faculty Diversity:** Full time faculty, 3 tenured and 1 ACF are all white, 3 female, one male. Adjunct faculty for 2010-2011 include nine white and four African American instructors, eight female and five male. Students enrolled in MHT courses for Fall 2010 include 297 female and 90 male Caucasian students (total 387). 44 female and 9 male African American students. (total 53). There were also 5 female 3 male students of other ethnicity. The total student population for Fall 2010 was 88% Caucasian, 12% minorities.

**Average Class Size** Average class size for Spring 2011 is 19.7. Fall 2010 ACS was 17.5, Winter 2011 is 19. ACS increased over the last two years in winter and spring and remained the same in fall quarters.

**Graduates:** This datacombines MHT and MHT/CD Degree completion for the past 5 years ranges from a total of 19 in 2006/07 to 35 in 2009/10. The MHT/CD program is only three years old. We project approximately 40 graduates for spring and summer 2011.

1. **Interpretation and Analysis of Trend Data** *Suggestions of questions that might be addressed in this section: 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 program or department? What actions have the department taken that have influenced these trends? What strategies will the department implement as a result of this data?*
* Enrollment is strong and has increased over the last two years. We have been told by the provost that historically enrollment increases just before conversion from quarters to semesters and that enrollment then drops just after the conversion. Enrollment then tends to stabilize as time passes. This phenomena may be one effecting our department.
* We continue to be one of the few Life and Health Sciences departments that are not restricted in enrollment by accreditation or other factors. We have been able to accommodate the growth by adding sections of degree courses, offering distance learning courses in Activity Program and planning with Courseview to offer the Activity Program Certificate and the Chemical Dependency Certificate. If Courseview can provide a group lab classroom at their facility we plan to expand the MHTdegree program in Fall 2013.
* Success rates are high in all core courses except for MHT 101 Introduction to Mental Health Work. Even after implementing some changes the problem continues. The staff will examine this issue in the coming year to see if we can identify ways to improve success in these sections.
* The over forty-year history of the department and its excellent reputation in the community are strong and this should ensure continued healthy enrollments.
* One issue that can have a definite impact on our programs is funding of non profit businesses. Since employers of our graduates are overwhelmingly non profit, budgets at the federal, state and local level influence support of services to our client populations. The media coverage of budget cuts and closures can have an impact on attracting people to the field of behavioral health and other human services. The department plans to address these concerns with our advisory committee for their advice and planning.
* Marketing efforts are being launched for the Activity Program Certificate. In a recent meeting with marketing, we identified key customers. We have revised a post card that was sent to Dayton and Courseview regions previously. This post card will be sent electronically and hard copy to target groups, like long term care facilities, in the state.

However, the limited number of instructors can influence frequency and number of courses we offer.

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

1. What was the fiscal year of the most recent Program Review for this program? 2008
2. Briefly summarize the goals that were listed in Section IV part E of the most recent Program Review Self-Study (this section of the Self-Study asks “What are the department’s/program’s goals and rationale for expanding and improving student learning, including new courses, programs, delivery formats and locations”)?
* We have accomplished the goals of increasing course offerings at Courseview and integrating motivational interviewing into our practice courses.
* We have gathered assessment data and annually identified areas to improve instruction in two of our program outcomes.
* We are now offering the activity program certificate online. But we have not been able to offer the chemical dependency courses online because the distance learning department has not made that a priority. We continue our efforts to make this happen through informing distance learning and the dean for LHS of the need.
* We have increased average class size since 2009 in all quarters.
1. Have these goals changed since your last Program Review Self-Study?  If so, please describe the changes.
* We continue to believe that offering the chemical dependency courses online would increase enrollment in those courses. The state requires 270 clock hours of chemical dependency specific education for licensure as a chemical dependency counselors. They have accepted our courses to meet their requirements. Many areas of the state do not offer this education.
1. What progress has been made toward meeting any of the goals listed above in the past year?
* We have offered activity program and chemical dependency courses at Courseview and have increased ACS again this year.
1. What Recommendations for Action were made by the review team to the most recent Program Review? What progress has been made towards meeting these recommendations in the past year?

The recommendations were prioritized in the following sequence:

* Initiate new collaborations with baccalaureate degree programs at universities in the region to facilitate transfer of students and establish written articulation agreements.

*We are in the process of drafting an articulation agreement with Ohio Wesleyan University for their addiction studies program. Dr. Collins, Kathy Elson and I met with the department chair and admissions director to discuss the specifics. Their degree is entirely online. The transfer would be about 2 ½ at Sinclair and 1 ½ at Ohio Wesleyan.*

*Dr. Collins and I met with the new department chairperson for addiction studies at University of Cincinnati. We have not drafted an affiliation agreement, however, but the program is very liberal in accepting our chemical dependency courses. We plan to draft an articulation agreement after conversion to semesters by both institutions.*

*Wright State University Department of Social Work continues to refuse to accept the MHT courses. They continue to claim the refusal is due to accreditation. They also require far more general education courses than private universities. However, private universities accredited by the Council for Social Work Education (CSWE) seem to easily accept some of the MHT courses. There are no other Bachelor in Social Work degrees in the Dayton area. We still have students who travel to Columbus to Capital University because they can complete the BSW there in about 1 ½ years instead of the 3 or 4 required at Wright State and University of Cincinnati. I have had conversations in Winter 2011 with the chairperson of the Social Work department at Breschia University in Louisville, Kentucky. They are offering the BSW online and are accredited by CSWE. They are on semesters and I plan to provide them with master syllabi for courses that appear to be appropriate for transfer and pursue articulation with them.*

* Expand program to Courseview and Learning centers.

*The goal of offering the Activity Program in Warren County is underway. I have met with Nancy Thibeault and marketing to intiate marketing efforts for the Activity Program Certificate. We have begun offering chemical dependency certificate courses at Courseview. We continue to offer electives at the learning centers.*

* Revise marketing efforts.
* *Tom McElfresh has been working on revision of the department website. I have adjusted FTE and ACS projections that more accurately reflect actual numbers.*

*I attended the Activity Director conference in Columbus Fall 2010 to inform them of the distance learning certificate. I also am working with marketing to inform parties statewide of the certificate.*

* Aggressively increase use of adjunct faculty.

*I have more aggressively pursued use of part time faculty and hired three new part time faculty to teach in Dayton as well as Courseview. There are issues of standardized expectations and communications that threaten the quality of instruction when full time faculty are offering core courses.*

**Section III: Assessment of Outcomes**

The Program Outcomes for this program are listed below. **At least one-third of your program outcomes must be assessed as part of this Annual Update, and across the next three years all of these program outcomes must be assessed at least once***. I have discussed with Jared Cutler our prevous 5 year plan of assessing 2 outcomes per year. Next year we will begin assessing 1/3 of our outcomes.*

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| **Mental Health Technology** Program Outcomes | In which courses are these program outcomes addressed? | Which of these program outcomes were assessed during the last fiscal year?  | Assessment MethodsUsed |
| **1)** Accurately gather information through clinical interviews and observation. | MHT 201 |  |  |
| **2)** Assess and prioritize client needs. | MHT 204 |  | * Demonstrate improvements
 |
| **3)** Plan effective intervention strategies. | MHT 204 |  | * Analyze data
 |
| **4)** Demonstrate interventions to meet client needs. | MHT 204 |  | * Analyze data
 |
| **5)** Establish/maintain effective therapeutic relationships with others. | MHT 202, 203 and 204 |  | * Collect data
 |
| **6)** Demonstrate professional and ethical practice with a sensitivity to and respect for cultural, ethnic, and life style differences. | MHT 204 |  | * Collect data
 |
| **7)** Demonstrate effective self awareness and self-management. | MHT 204 |  | * Demonstrate improvements
 |
| **8)** Facilitate group interactions reflecting a knowledge and understanding of group dynamics. | MHT 213 |  |  |
| **9)** Demonstrate effective oral and written reporting skills*.* | MHT 204 |  |  |
| **10)** Demonstrate an understanding of the dynamics and patterns contributing to the development of an individual’s current functioning. | MHT 204 |  | *
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1. For the assessment methods listed in the table above, what were the results? What changes are planned as a result of the data? How will you determine whether those changes had an impact?

**Collecting of data**:

Since practicum supervisors evaluate these outcomes at the agency in which the student is placed, data was collected for outcomes five (5 Establish/maintain effective therapeutic relationships with others.) and six (6 Demonstrate effective self awareness and self management) using department developed rubrics completed by practicum supervisors for all students in MHT 204 Practicum III (our capstone courses).

**Analyzing data:**

Data was collected in 2009 for the following program outcomes using department developed rubrics that were completed by each practicum supervisor assessing their student in our final practicum course (MHT 204). Twenty four rubrics were returned.

* Outcome 3: Plan effective intervention strategies

Four criteria were identified on the rubric with a 1-4 likert scale. Four is the highest score students could achieve. The means for the four criteria ranged from 3.333 to 3.541.

This score indicates that students are at minimum able to

* Outcome 4: Demonstrate interventions to meet client needs.

Three criteria were identified on the rubric with a 1-4 likert scale. Four is the highest score students could achieve. The means for the four criteria ranged from 3.250 to 3.666.

**Improvements implemented:**

* Outcome 2: Assess and prioritize client needs

According to the data, the overall mean score of 8.35 out of 10 on a department developed rubric completed by practicum supervisors suggested that the students were achieving at an above average level. The faculty also met to discuss improvement in instruction on our treatment planning assignments which are the primary assignments connected with this outcome. We have a treatment planning course and also have treatment planning assignments in MHT 203 and MHT 204. We discussed standardizing our instruction. The next step is to discuss community expectations of from agency representatives of identifying needs and intervening at our next advisory committee meeting. Re evaluating with the same tool in the next cycle will determine if there is improvement.

* Outcome 7: Demonstrate effective self awareness and self management.

The mean score on this rubric was 8.235 out of 10 and suggests that students perform at the above average level.

The department plan on having students self evaluate on this outcome as well as others. This will enable the student to personally identify areas where they can improve.

b) What other changes have been made in past years as a result of assessment of program outcomes? What evidence is there that these changes have had an impact?

* We are adding a new course in professional documentation. This course will be a special topics course in 2011/2012 and will become a regular semester course in 2012/2013. By offering this professional documentation, we will be able to concentrate on the basics of not only professional writing but also recording behavioral observations.
* We introduced a likert scale as part of the supervisor’s evaluation of the student’s overall performance in clinical and work skills.
* We have integrated a best practice, Motivational Interviewing, into our curriculum. Three faculty were trained in this technique. Motivational Interviewing is a new method of listening to clients and being client led in intervention choices.
* Our department was reaccredited in 2009 without any negative findings.
1. Describe general education changes/improvements in your program/department during this past academic year (09-10).
	* We have a prerequisite of successful completion of DEV 110 or placement into college English for students enrolling in introductory courses in the department. We have seen small improvement in success in those courses. We still have students who do not seem to have basic college writing skills. We have borrowed rubrics from the English department to assist in grading writing skills. These rubrics provide students with better feedback on their performance and ways to improve.
*

**Section IV: Improvement Efforts for the Fiscal Year**

1. **FY 09-10:** What other improvement efforts did the department make in FY 09-10?  How successful were these efforts?  What further efforts need to be made? If your department didn’t make improvement efforts during the fiscal year, discuss the strengths and weaknesses of the department over the last year and how the department plans to address them in the coming year.
* The department still struggles with the assessment process. We were on the five year cycle with 10 program outcomes. So measuring improvements has really not happened yet. Going to a three year cycle will enable us to obtain feedback as to whether changes we make are producing results. We also need to consider the process and perhaps find ways to make it less complicated for us.
* We are recommending the student success course to students who do not pass our introductory courses.
1. **FY 10-11:** What improvement efforts does the department have planned for FY 10-11? How will you know whether you have been successful?
* As we have processed the quarter to semester conversion we are able to identify areas of the curriculum that we could improve. We are adding the professional documentation course and integrating motivational interviewing, for example.

Questions regarding completion of the Annual Update? Please contact the Director of Curriculum and Assessment at 512-2789 to schedule a time to review the template and ask any questions.