# University of California San Francisco CHANCELLOR'S STUDENT SERVICES FEE ADVISORY COMMITTEE

Meeting Minutes February 12, 2024

**Members Present:** Woodger Faugas (Chair), Tram Pham, Abha Patkar, Veronica Bundang, Catherine Gonzales, Richard Ngo, Olivia Shearin

Absent: Mags Hines, Theresa Jaramillo (faculty chair), Diana Ponce (note meeting recorded)

**Faculty Present:** 

Ex-Officio Members Present: Alece Alderson

Staff Present: Jennifer Rosko, Matthew Tout, Kathy Bates-Woodward, Emina Seremet,

**Presenters**: Jill Rovaris and Charlie McDonough (Student Health & Counseling Services), Jana Avila and Nicquet Blake (Student Academic Affairs/Graduate Division)

- 1. Welcome & Introduction: Jennifer opened the meeting with review of agenda. It was noted that concurrently SHCS is holding a town hall but will join this meeting at 6:15 to present their proposal. Proposals can either be voted on as a slate, or one by one. It was noted that the committee reviewed the proposals at the last meeting, but tonight's activity will be to vote on approvals. Woody asked, how would it affect the timing of this meeting if we vote on all at once. Jennifer responded that we could use the time to discuss individual unit feedback and Matthew can use time to present updated financial report.
- 2. Fund Summary (Matthew): All unit proposals were consistent with what we previously anticipated for 2024-25. He displayed the fund summary analysis report. The numbers are projected for enrollment this year and next year, which reflect current per student fee and fee revenue. Return to Aid represents the % that gets allocated to support scholarships, which offsets gross revenue each year. These are based on UC mandated percentages. Revenue also includes Chancellor's recurring augmentation.

The projections into 2024-25 represent a balance budget, with a 4.7% ending reserve, as % of total expenses. A material piece of the activity for Student Health includes the general allocation and the second component is for Student Mental Health Services, which is based on the systemwide mandated approach to allocate 50% of the net fee revenue resulting from fee increases to support mental health services.

Woody asked re SHCS – what is the rationale for separating the two categories of expenses? (SHCS overall and the Student Mental Health allocations)

Matthew explained that it is a historical, systemwide approach. He displayed and explained fee increases and the beginning of the approach in 2015-16. Fee increases therefore led to escalation in the allocation amounts for student mental health.

Woody asked – there's been more fluctuation in mental health services since 2016-17. Students have concerns about their mental health needs being met. How stable is this funding as a category of expenses?

Matthew explained a couple of the years also include temporary funding on top of the mandatory base allocations. FY17 to FY19 would not have been as high. The incremental fee increases starting FY23 due to fee increases contribute to the SSF allocations, which is only a small portion of mental health revenue.

Jennifer added that we will see the full funding analysis in their proposal presentation tonight.

## 3. Proposal Review \*\*committee only

Woody made motion to approve the funding for all units (except SHCS), Richard seconded. Students voted unanimously to approve all proposals reviewed.

#### 4. Feedback to Units

<u>Family Services</u>: Jen recapped previously discussed recommendation that this (and all units) be mindful and increase outreach, such as tabling at the food market or resource fares.

Woody added concern re safety re Sittercity service (how are providers vetted?)

Alece suggested the ask to the unit could be for a student educational handout re what to look for before using the service.

#### Wellness & Community (Arts & Events)

The unit should make it more visible (additional outreach) to students so that they are aware of the discounts for which they are eligible.

The following are question and answers that came up from the committee following their proposal at the last committee meeting, which were addressed via email:

- Q: It was noted in the proposal that there were a lower number of events due to the restructure
  and the committee wondered if there are any mitigation strategies for the future to lessen impact
  on events.
  - A: Due to the restructure, Arts and Events became a team of 1 vs a team of 3. So internal resources to host and support more events diminished. We have now hired 2 more contract event specialists for Arts and Events with the goal of expanding our offering of events. Also, due to the need to rebrand as a new unit, a lot of time was dedicated to marketing and promotion which will no longer be the same time commitment in the future.
- Q: There is a note that more events could be offered pending approval of events. Is Arts & Events having a hard time getting approval from the campus?
  - A: As you know, animal events (llamas) seem to be among the most popular on campus but do require leadership exceptional approval. We are only speaking to those types of events, not our standard events during the year. We have recently added a series of "Pop-up" Paint Nights and Paint and Plant Nights.

#### Fitness & Recreation

In response to question at the last meeting, they provided some statistics about their group X classes.

- Q. How is the Group X pilot for students going? Do you have any evaluations you can share regarding student engagement with them?
  - A: Please see attached for some recent student participation stats for group exercise classes. They do anticipate that student participation will continue to trend higher throughout 2024 as new classes are added to the schedule. They also do not have a student-specific evaluation process currently in place. However, they would be open to adding if this information is helpful to the committee.

Additional question: Could they have discounts for family members for the outdoor programs? [follow-up pending]

#### Graduate & Professional Student Association

No additional feedback.

## Office of Career & Professional Development

No additional feedback. Their outreach is working.

#### Student Life

For the basic needs portion - how can we support students on externships, especially if they're in food desert.

**5. Meeting Minutes Review and Approval (Jennifer):** Jennifer asked for members to review and approve the January 29, 2024, meeting minutes.

Woody – asked students to confirm concerns raised in the last meeting have been addressed, for example around the utilization of basic needs services. Amend minutes.

Woody asked for clarification re state funding. Jennifer explained food pantry to be opened at Mission Bay.

Note: After the SHCS presentation, Woody made motion to approve with clarifying amendment. Abha seconded. With no objections, minutes approved.

#### 6. Proposal Presentation (Student Health & Counseling Services):

Charlie McDonough (Operations Manager), Dr. Jill Rovaris (Executive Director)

Presentation included the Mission, Organizational Chart, Utilization – including breakdown of in-person and telehealth. Clinical and Outreach Groups are also offered via zoom meetings. Please share with the SHCS team if you have suggestions for additional programs. Data from Student Feedback surveys was also presented.

This year's request is for \$2.8% increase, or \$60,000 of allocation to offset the increase in salaries and benefits, as well as supplies and expenses, and to cover one time cost. As we transition our services from primary care to UCSF health.

Woody asked: You mentioned student training program, given the potentially less permanent nature (of employment) can our students be sure that their care won't be adversely affected?

Charlie explained that our Post Doc Training Program is for our counselors, who have already graduated from an accredited University, working to gather hours in a clinical setting to prepare them for taking the examination and being licensed in the State of California. They work closely with both the Mental health director as well as the mental health clinical director to have oversight and guidance. Their charts are reviewed on a regular basis.

Jill added that when they come to us, they've had over 2,000 hours of training at 2 or more sites and are very qualified to provide mental health services.

Abha: At the University of the Pacific they have a mental health counselor; is there someone at the School of Dentistry that is a point of contact? I noticed mental health utilization was low for Dentistry students.

Jill: Yes, We have Dr. Alexandra Thurston, who is the point person for the school of Dentistry. We have a liaison for every school and a counselor on site. (**CORRECTED later in meeting**: it is Dr. Jean Stanford, not Dr. Thurston)

Abha: Can I access directly, or do I need a referral? Is there a waitlist?

Jill: No, there is no waitlist, you should be able to get in right away directly with SHCS.

Woody – Regarding the number of unique patients – if there are less unique appointments, is that an indicator of dissatisfaction in care received? Whereas the number of unique patients has decreased but the number of appointments has gone up.

Charlie – noted that a small number of students may have been seen more regularly. He would have to bring the question back.

Woody asked, there is a decline in primary care services, is it tied to student satisfaction survey? Charlie – student feedback sent at the end of each week. Responses are provided to student health by those that respond. There are probably a mix of students that had a good experience and those that had less of a positive response. Staffing is a better indication to the number of visits rather than the quality of care received.

Jill added that when students consistently come back, it is a sign of satisfaction. Currently, services are available for unlimited visits.

Olivia- Outreach not sufficient to show that there is a School of Dentistry liaison. Glad to learn this exists. We were not told about this at our orientation.

Charlie responded that he would convey this to our Mental Health Director to do outreach to the school. Abha – I second Olivia, I don't think anyone knows about this, and knows that the appointments are so easily accessible to us. (website currently has a broken link). I think it'd be very helpful to do more outreach and come to our orientation.

Woody asked what are reasons for moving primary care to UCSF Health?

Charlie explained one key issue has been difficulty with staffing and hiring a permanent Medical Director and providers to offer adequate access. Additionally, the costs of staffing two clinics for a relatively small number of students we're seeing. Another townhall will be held in March. I think that will provide more information on some of the unanswered questions as we go through this transition.

Woody asked how will you spending the funds allocation for primary care services next year? Charlie explained in the transition we still need to meet new student requirements and annual TB testing to meet UC immunization policy. There might be unidentified expenses that need to be identified and covered to make this transition successful. There may be some remodeling costs as well as we transition primary care exam rooms into offices for our wellness and health promotion team as well as expanded offices for mental health staff that will be working on site. There is uncertainty about the full expense components.

Woody also stated the committee will be interested in the renewal of funds and transition in allocations. Jennifer added a reminder that if not all funds used in the year, unused funds would be returned to the SSF fund. Next year's proposal will address these changes. Jill thanked the committee for these excellent questions.

## 7. Proposal Review \*\*committee only

Student Health & Counseling Services

Committee will expect update next year regarding 2023-24 actual costs given transition to UCSF Health for primary care. Woody asked to what degree do we safeguard the allocation with so many unanswered questions regarding the transition.

Matthew displayed the proposal Appendix slide – underlying detail projections. There are related decreases in other revenue sources. The approach at this time is keeping the general allocation at the same level, and project to expend the allocation.

Jen raised question re FTE; the committee can ask for comprehensive analysis of what they use each pot of funding for/what services.

Matthew noted that the approach around the Student Health & Counseling Supplemental Fee (campusbased fee approved by student referenda) will also need to be addressed due to this transition. Woody asked do what degree can we trust the management of this money if students not receiving

Abha agreed that students need more explanation with primary care services closing down.

Olivia- I agree completely that we need more clarification, especially because of their reasoning that 1,200 students, which I think, is a pretty sizable chunk of UCSF students is considered a small number in terms of primary care, but it is those same students' fees that are supporting these endeavors. So, I think if they want to continue using this pot while also drastically reducing what students are being offered. I would really like explanations, especially considering they do, as you mentioned, have other revenue sources that could be contributing as well.

Woody – We should approve budget with these questions.

services and there being unanswered questions.

Matthew – This was just announced Feb. 1. So, they did not reasonably have time to in this year's process to completely update plans.

Jennifer – Committee could ask the Chancellor to request SHCS provide an update in the interim between this committee's cycle and the next.

Richard asked would we be able to fill in whoever is succeeding us next year?

Jennifer: Yes, staff involved can make sure recommendations are carried.

The committee will include in the recommendation letter provisional approval and that at least one touch point per quarter (end of spring quarter), plus next fall and winter re updates to expenditure plan for 2024-25 are provided to this committee with rationale.

Jennifer also mentioned that the Student Health Advisory Committee (SHAC) will also need to discuss the transition and provide feedback.

Emina asked will there be transition help for students navigating the services?

Matthew added that there will still be an administrative team and wellness team. He also noted the

Campus Based Fee (Student Health & Counseling Services Supplemental fee) referendum included primary care, so there remain open questions whether it will be revised.

Jennifer reiterated that these questions and feedback will be given to the unit.

Woody asked do they have anyone who has done this before?

Alece and Jennifer noted that EVCP Lucey and other senior leadership and UCOP have consulted.

Richard motioned to approve SHCS budget. Olivia seconded.

Discussion ensued however regarding the exact language of the motion, as it was discussed that it was a provisional approval. Jennifer clarified that she and Kathy would work on the minutes and will summarize the language for the committee to approve.

Olivia made motion to approve with the provisional language. Abha seconded.

Students voted to approve the budget with the condition that transparent details of how funds will be spent that had been earmarked for primary care. (See Addendum).

## 8. Next Steps and Adjournment

Minutes and draft Committee Recommendations will be circulated for approval.

#### **ADDENDUM**

# Via Email from Jennifer Rosko to Student Health and Counseling - February 18, 2024

Since there is a bit of flux in the transition, the committee will be requesting that Student Health and Counseling Services (SHCS) provide quarterly updates to the Student Services Fee Advisory Committee (SSFAC) via email as well as the Student Health Advisory Committee (SHAC) on the following:

- An overview of how SSF, SHCS supplemental fee, and state mental health funding will be spent in 2024-25.
- Some questions to consider while preparing the quarterly reports.
  - With primary care closing, how are funds from the above sources being redirected if they are not being returned?
  - With primary care closing, is there a revenue stream that will no longer exist that covered mental health services or other administrative positions that will remain?
  - Will there be an increase mental health services if primary care funds are not being returned?
  - Will more students be served through mental health services if primary care funds are not being returned?

Please email me the updates on the following dates and I will share with the committee:

- Mav 1
- August 1
- November 1

#### Response from Jillandra Rovaris – March 4, 2024

Thank you for circling back. I think the requests are reasonable and understandable. I don't have any questions.