

COMPREHENSIVE PROGRAM REVIEW REPORT

Health Center

Program Context (suggested word limit 400)

Mission (100 word limit)

1. How does your program align with the college and district mission?
https://smccd.edu/dpgc/files/dsgc-DistrictMission.pdf https://canadacollege.edu/about/mission.php

Cañada Health Center supports student success by providing accessible, low- or no-cost healthcare aligned with Cañada College's mission to engage and empower a diverse student body. Grounded in institutional values like Social Justice, Racial Equity, Student-Centeredness, and Cultural Empathy, we eliminate financial barriers, fulfill program health requirements, and deliver data-driven care through strong campus and community partnerships—empowering every student to achieve their academic goals.

Program Description (500 word limit)

2. Provide a brief description of your program, what does your program do and who does your program serve?

The Cañada Health Center promotes, protects, and restores physical health and well-being to support student academic success. Grounded in diversity, inclusion, and health equity, the program delivers accessible health services to support all registered Cañada College students when classes are in session

Assessing Program Impact on Diverse Student Populations (Suggested word limit 750)

3. How many students are served by your program?

In 2026, the Health Center completed over 1,600 appointments (including repeat visits). Beyond direct medical care, the Health Center offers educational health programming designed to reach all students, including events such as annual health fair

4. How does your program intentionally serve underrepresented, disproportionately impacted or racially minoritized students (ie. Black and/or Indigenous People of Color; Gay, Lesbian, Bisexual, Transgender, Queer, Intersex, and Asexual; 1st Gen; Foster; Homeless; Undocumented; Veteran; Low-Income; or other disproportionately impacted student populations identified in our Student Equity data, etc.)? Support this with data.

The Health Center intentionally serves underrepresented and disproportionately impacted students by lowering financial, cultural, and healthcare access barriers. Through Medi-Cal and Family PACT certifications, eligible low-income, uninsured, or privacy-seeking students receive no-cost contraceptive services, STI testing, and reproductive care. Additionally, with the leadership of Dr. Wong, an experienced ally to the LGBTQIA+ community, the center offers accessible gender-affirming care and hormone therapy support. Bilingual, Spanish-speaking staff members further ensure effective, culturally sensitive communication for Spanish-speaking student populations.

5. How has student access, retention, and completion changed (where applicable) for this program during this review cycle?

During the 2021–2022 to 2025–2026 review cycle, student access to the Health Center expanded rapidly, increasing over 800% from 163 to 1,473 enrollments. Alongside this growth, student success rates improved significantly from 71.2% to 82.2% (peaking at 83.2% in 2024–2025), while retention rates consistently remained high, averaging 92.6% over the 5-year period. Here is the graph illustrating the 5-year trends in student access (enrollments), success rates, and retention rates for the Health Center from 2021–2022 through 2025–2026:



6. How does your Student Services program deliver its services to ensure accessibility and effectiveness for all students? Please detail the range of delivery methods offered (e.g., in person, online, hybrid, evening, in the community, etc.)

The Health Center ensures accessibility and effectiveness by offering flexible service delivery options tailored to student needs:

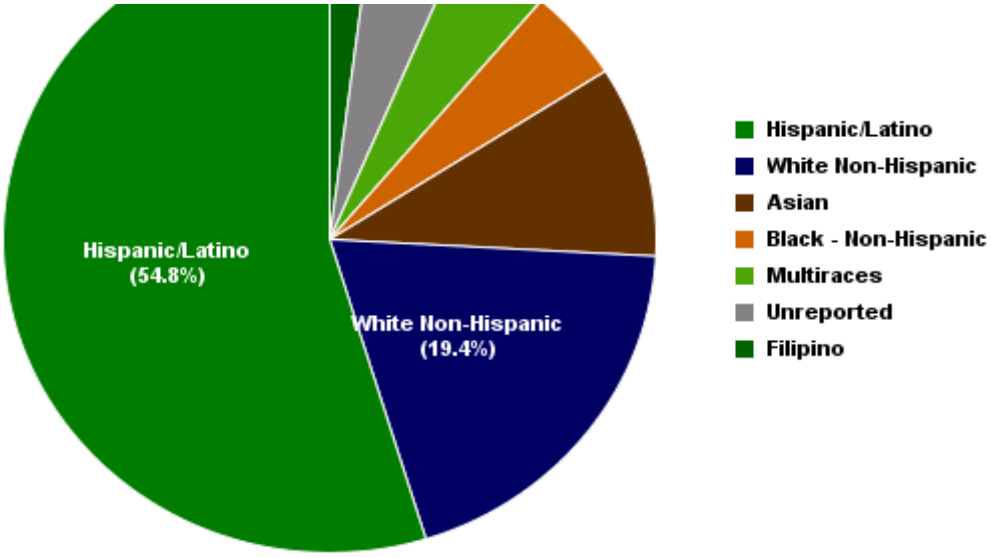
- **In-Person Care & Walk-Ins:** Provided for services requiring physical contact (e.g., tuberculosis skin testing) and for urgent, unanticipated health issues that arise on campus.
- **Telehealth Services:** Offers convenient remote care for routine consultations, as well as flexible, after-hours telehealth appointments with the Medical Director for students with complex health needs.
- **Guided Scheduling:** Staff assist students via phone or email during the scheduling process to determine the most beneficial delivery method for their specific situation.

7. What is the breakdown of students you serve by educational goal disaggregated by race? How does your program support transfer students towards achieving their goal?

The Health Center serves a diverse student body, predominantly supporting Hispanic/Latino students (55.3% in 2025–2026) alongside White Non-Hispanic (19.0%), Asian (9.5%), Black Non-Hispanic (4.8%), Multiracial (4.4%), and Filipino (2.2%) students. To support students working toward transfer, the center provides affordable, required health services—such as physical exams, immunizations, and medical clearances. By removing medical and financial barriers, the center ensures students remain healthy, eligible, and on track to achieve their transfer goals.

Unduplicated Headcount by Gender and Ethnicity					
	2021-2022	2022-2023	2023-2024	2024-2025	2025-2026

Asian	4	9.5%	7	10.6%	15	11.6%	19	9.0%	26	9.5%			
Black - Non-Hispanic	1	2.4%	4	6.1%	4	3.1%	13	6.2%	13	4.8%			
Filipino					3	2.3%	4	1.9%	6	2.2%			
Hispanic/ Latino	27	64.3%	35	53.0%	69	53.5%	114	54.3%	151	55.3 %			
White Non-Hispanic	6	14.3%	14	21.2%	26	20.2%	41	19.5%	52	19.0 %			
Unreported	2	4.8%	4	6.1%	5	3.9%	9	4.3%	13	4.8%			
Multiraces	2	4.8%	2	3.0%	7	5.4%	10	4.8%	12	4.4%			



8. What data and/or feedback do you use to evaluate the success of these delivery methods?

To evaluate the success of its delivery methods, the Health Center collects direct feedback through surveys administered to students who use its services and community partners attending the annual Cañada College Health Fair. This input helps assess service quality, accessibility, and the effectiveness of campus-community collaborations.

9. Provide examples of your on-campus and/or off-campus community partnerships and how they support student success.

The Health Center collaborates with key internal and external partners to remove barriers to care, support basic needs, and foster student success. On campus, partnerships with the Disability Resource Center (DRC), Personal Counseling Center (PCC), and SparkPoint ensure coordinated support for accommodations, mental health, and basic needs stability. Off campus, collaborations with the San Mateo County Public Health Department, Planned Parenthood, Quest Labs, and San Mateo

County Clinics expand access to public health resources, reproductive care, diagnostic testing, and comprehensive medical services.

10. How does your program support Cañada College as a Hispanic-Serving Institution (HSI) and Asian American and Native American Pacific Islander-Serving Institutions (AANAPISI) designated institution? Please support your answer with qualitative or quantitative data and/or specific examples

The Health Center directly supports Cañada College's HSI and AANAPISI designations by providing culturally responsive care and preventative health education targeted at addressing significant health disparities within these student populations.
Quantitatively, the center's unduplicated headcount reflects a strong focus on these communities, with Hispanic/Latino students representing the largest group served (55.3% in 2025–2026) alongside growing Asian (9.5%) and Filipino (2.2%) student populations. Qualitatively, the center emphasizes early intervention and health education—such as nutritional and lifestyle guidance to mitigate conditions like diabetes, which disproportionately affects Native American and other minority communities. The center empowers Hispanic and AANAPISI students with preventative education to achieve long-term wellness and academic success.

Looking Back: Accomplishments and Challenges (Suggested word limit 400)

11. Describe major accomplishments since the last program review cycle.

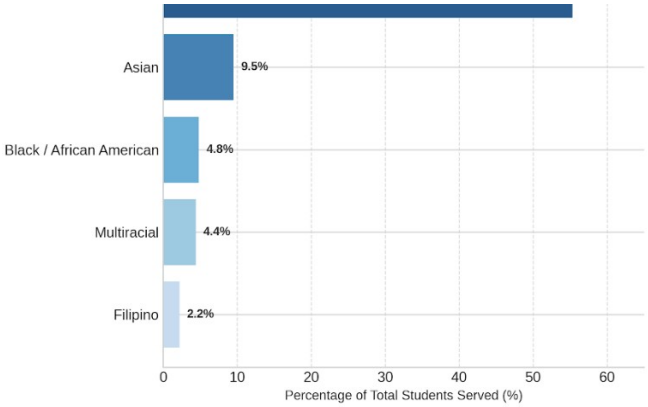
· **Regulatory Compliance & Provider Certifications:** Maintained and secured core healthcare credentials, including an updated NPI number, CLIA certification, CDPH Provider-Performed Microscopy (PPM) lab licensing, and official site certifications for both Medi-Cal and Family PACT.
· **Multiple Modalities Supporting Health Initiatives:** Delivered continuous, flexible healthcare using hybrid telehealth and in-person models, directly contributed to the SMCCD Emergency Operation Center, and partnered with the San Mateo County Public Health Department to host annual flu vaccination clinics.
· **Student Services & Harm Reduction:** Modernized healthcare accessibility through a digital student health portal and HIPAA-compliant electronic forms, implemented readily available Naloxone on campus per SB 367 requirements, partnered with Planned Parenthood on sexual health education, and hosted annual Wellness Health Fairs.
· **Substantial Service Expansion & High Success:** Scaled overall service capacity over 800%, expanding annual student enrollments from 163 to 1,473 while simultaneously raising success rates from 71.2% to 82.2% across the 5-year cycle

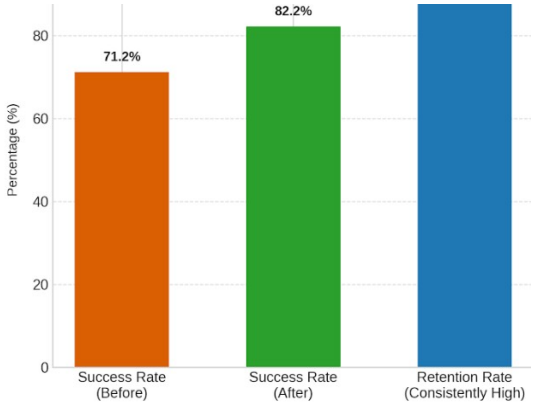
12. How did your accomplishments help to close the opportunity gap for disproportionately impacted, underserved or racially minoritized students as identified in the current SEAP plan? Support this with qualitative and quantitative data.

The Health Center directly helps close the opportunity gap for disproportionately impacted, underserved, and racially minoritized students identified in the Student Equity and Achievement Program (SEAP) plan by removing healthcare access barriers and providing targeted, culturally empathetic support.
Quantitatively, service utilization among minoritized groups expanded substantially across the cycle: Hispanic/Latino student engagement grew over fivefold, representing 55.3% of total students served (151 students) in 2025–2026, alongside steady growth among Asian (9.5%), Black/African American (4.8%), Multiracial (4.4%), and Filipino (2.2%) students.

Program Review

Over the same period, overall student success rates for health center participants rose from 71.2% to 82.2%, while retention remained consistently high at 92.5%. Qualitatively, accomplishments such as Medi-Cal and Family PACT certifications, no-cost telehealth/in-person care, on-campus Naloxone availability, and bilingual staff outreach eliminate financial and institutional hurdles to wellness. The center's preventative education initiatives directly empower historically underserved students to maintain their physical and mental health, enabling them to remain enrolled and succeed academically.





13. Describe major challenges since the last program review cycle. How have these challenges contributed to the expansion or continuation of equity gaps?

Since the last program review cycle, several operational and resource constraints have hindered our capacity to scale health services;

Resource & Budgetary Constraints: budget limitations and limited staffing have capped overall operational capacity, restricting our ability to expand services.

Clinical Staffing Disruptions: Following the departure of our previous nurses, delays in recruiting and hiring a certified Nurse Practitioner created a prolonged lapse in on-site medical care. This gap disrupted in-person access for health services.

14. Please list the goals you worked on during the previous program review cycle and describe any progress towards achieving those goals?

Goal 1: Enhance Clinical Capacity & Service Quality

Finalize the recruitment and onboarding of a campus physician while implementing continuous student feedback loops to drive operational improvements and quality of care.

Goal 2: Re-establish Community Health Partnerships

Revitalize collaborative community partnerships by hosting joint campus events with local blood banks to expand health outreach and civic engagement.

Goal 3: Expand Inclusive Care & Cultural Competency

Successfully launch gender-affirming care and hormone therapy services by providing specialized cultural responsiveness and sensitivity training for all Health Center personnel

Impact of Resource Allocations Process (Suggested word limit 250)

15. Describe the impact to date of previously requested resources (staff, non-instructional assignment, equipment, facilities, research, funding) including both resource requests that were approved and were not approved.
Last year we didn''t have approved resoruces.
The resource requests from privious years allowed the health center to continue providing care for students who are within the most vulnerable group. With federal policy changes, reduction in access to healthcare, and disenrollment of millions of Californians from MediCal, low income students will be relying on the Student Health Center more than ever.

16. How have these resources (or lack of resources) affected disproportionately impacted students/clients?
The lack of broader healthcare resources—compounded by federal policy changes, reduced healthcare access, and the disenrollment of millions of Californians from Medi-Cal—disproportionately impacts low-income and vulnerable students at Cañada College. Because these systemic barriers restrict their ability to secure outside care, these students must rely far more heavily on the Student Health Center as their primary, and often only, source of basic healthcare. Sustaining support for the health center is therefore critical to ensuring these disproportionately affected students retain access to essential medical services.

SAOs and SLOs (Suggested word limit 250)

17. State your Service Area Outcomes (SAOs) and/or Student Learning Outcomes (SLOs) for this program review cycle.
SAO 1: Community health providers participating in the annual Fall Health Fair will report increased engagement with Cañada College students and improved collaboration with campus health services.

ASO 2: Students, faculty, and staff will be able to report their level of satisfaction with the services they receive from the Health Center.

18. Describe how your program assessed your SAOs and/or SLOs. Share your SAO/SLO data findings
SAO 1: Community health providers participating in the annual Fall Health Fair will report increased engagement with Cañada College students and improved collaboration with campus health services.

To assess Service Area Outcome 1 (SAO 1), which focuses on increasing community health provider engagement with Cañada College students and improving collaboration with campus health services, an active post-event survey was administered to participating providers following the annual Fall Health Fair. The survey evaluated provider satisfaction, the level and quality of student engagement, the perceived effectiveness of collaboration with the Health Center, and suggestions for future event improvements. The established criteria for success required achieving an 80% provider satisfaction rate and a 70% student engagement rate.
The data findings demonstrate that the program successfully met its collaboration benchmarks, with 100% of responding providers rating the collaboration effectiveness as Moderate or higher and 85.7% rating it as High (14.3%) or Very High (71.4%). Qualitatively, health providers praised the organization of the fair and highlighted it as an "excellent way to have students connect with services". To address the primary area for improvement—providers requesting earlier advance notification to better plan tabling events—the program will adjust its planning timeline for future fairs.

ASO 2: Students, faculty, and staff will be able to report their level of satisfaction with the services they receive from the Health Center.

Program Review

The survey data ($N = 20$) shows mixed findings regarding the target benchmarks. Overall, 80% of respondents reported satisfaction with the quality of service (80% satisfied vs. 15% dissatisfied), 80% felt using the Health Center was an effective use of their time, and 90% felt respected during their interaction. However, portal navigation revealed an area for improvement, as only 35% strongly agreed that the Student Health Portal was easy to navigate. While the core satisfaction, respect, and time-effectiveness goals were met, the Health Services Portal presents clear administrative and user-experience navigation challenges to address.

Summary Findings:
75% of respondents came in person
Health Services Portal may not be that easy to navigate
More than 75% of respondents say using the HC was an effective use of their time
More than 75% of respondents say using the HC were satisfied; but 3 out of 20 were dissatisfied
90% of respondents felt respected when interacting with HC staff

Looking Ahead: Goals and Program Improvement Initiatives (Suggested word limit 400)

19. State your program goals for the next 3 years. What strategies would you use to address challenges that hinder the expansion or continuation of the equity gaps (from question 12)?

- **Goal 1: Complete Provider ACEs Aware Training**
    - Train all clinic providers through the official ACEs Aware Training program to ensure staff are equipped to identify Adverse Childhood Experiences and qualify for Medi-Cal screening reimbursements.
- **Goal 2: Capture Medi-Cal Reimbursements for Clinic Sustainability**
    - Establish a billing process for qualified Medi-Cal providers to claim ACEs screening reimbursements, generating supplemental revenue to offset operational costs and fund the expansion of student health programs.
- **Goal 3:**
    - Establish a standardized operational process to install, and maintain zero-barrier Narcan (naloxone) vending machines and emergency boxes across designated campus locations to strengthen harm reduction efforts, prevent overdose fatalities, and enhance community safety.

20. With an equity and antiracism lens, what are some improvements that have been, or can be, implemented as a result of SAO/SLO Assessment? Please include meaningful action plans to improve student access and success.

Based on the assessment data for SAO 1 and SAO 2, several targeted, actionable improvements can be implemented to advance student equity, remove barriers to access, and foster antiracist service delivery:

- Addressing Digital Access & Portal Equity (SAO 2): While 90% of users felt respected when interacting with Health Center staff, survey findings revealed that the Student Health Portal is difficult

to navigate for a significant portion of respondents. Digital navigation barriers disproportionately impact first-generation students, non-native English speakers, and students with limited digital literacy. Action Plan: implement quick-start video tutorials and offer drop-in navigation assistance at the Health Center desk to ensure equal access to digital scheduling and health resources.

- Expanding Community Representation & Advance Access (SAO 1): Provider feedback from the Fall Health Fair highlighted high overall collaboration (85.7% high/very high) but noted a need for earlier advance notice to plan tabling events. Action Plan: Establish an annual Fall Health Fair planning calendar that issues provider invitations 3–4 months in advance. Actively recruit and prioritize diverse community organizations that specialize in culturally competent care to broaden representation and directly connect historically underserved students with vital off-campus resources.

21. How did your program's SAO/SLO assessment address equity and antiracism?

Our program's SAO assessments addressed equity and antiracism by explicitly evaluating both inclusive interpersonal climate and equitable access to health services across diverse service delivery channels.

- Evaluating Inclusive environment: The Health Center's SAO 2 assessment directly incorporated a targeted metric grounded in institutional equity principles: "Cañada College are committed to principles of student equity and antiracism. In your interaction with Health Center staff, did you feel respected?" The findings showed that 90% of respondents felt respected during their interactions ($N=20$), demonstrating that staff consistently foster an inclusive, welcoming, and culturally affirming environment regardless of whether students access care in person or remotely.

- Disaggregating Data to Identify Access Barriers: The SAO 2 survey disaggregated student responses by modality (in-person vs. email/telephone) to identify structural barriers. This revealed that while 80% of respondents were satisfied overall, the digital Student Health Portal was difficult to navigate for many users (only 35% strongly agreed it was easy to use). From an equity lens, identifying technology barriers ensures the program can proactively support students who may face digital literacy or technology access challenges.

- Broadening Culturally Relevant Community Connections: The SAO 1 Fall Health Fair assessment focused on strengthening partnerships with external health providers to connect students directly with broader community resources. By assessing provider collaboration and student engagement, the Health Center ensures that diverse, community-based health organizations are effectively integrated into campus life, expanding access to culturally competent care for historically underserved student populations.

22. How will you address the opportunities for improvement that you identified throughout the prior sections of this Program Review?

To address the opportunities for improvement identified throughout this Program Review, we will implement targeted action plans to improve the health Portal and event planning operations:

- Enhance Student Experience for the Health Portal (SAO 2): To resolve navigation challenges with the Student Health Portal, where only 35% of surveyed users strongly agreed it was easy to use. We will create and publish short visual navigation guides to ensure all students can easily access services without technological barriers.

- Advance Planning for Outreach and Culturally Relevant Services (SAO 1): Based on provider feedback requesting earlier notice for tabling events, we will establish an extended 3- to 4-month outreach schedule for the annual Fall Health Fair. Advanced scheduling will allow external community health partners—particularly those specializing in culturally competent care and serving marginalized student populations—sufficient lead time to coordinate bilingual staff and deploy specialized outreach resources.

TAL informed SAOs and SLOs for the Next Review Cycle (Suggested word limit 100)

23. With the TAL Framework in mind, state your SAOs and/or SLOs for the next review cycle. Click here for Transformational Antiracist Leadership (TAL) refresher.
SAO 1: Community health providers participating in the annual Fall Health Fair will report increased engagement with Cañada College students and improved collaboration with campus health services.
ASO 2: Students, faculty, and staff will be able to report their level of satisfaction with the services they receive from the Health Center.

Non-Personnel Item (2026 - 2027)

Requested Year
2026 - 2027

Program Requesting Resources
Health Center

Item Requested
McKesson (medical supplies)

2. BRP pharmaceuticals (Rx meds, OTC meds, and common antibiotics)

3. Quest labs (external lab contracted for various testing)

Item Description
We need to ensure that the requisitions placed by the health center are processed and approved otherwise we will not be able to provide any care.
Basic medical supplies like gauze, bandaids, and gloves allow the medical staff to provide first aid while keeping themselves safe with use of PPE (personal protective equipment). Other medical supplies include pregnancy tests which can help provide quick test results for planning
Pharmaceutical purchases include Tylenol, ibuprofen, allergy meds, Plan B, and antibiotics to treat sexually transmitted infections.
Lab testing is not only at low cost for students but also includes IGRA/TB blood test (also known as Quantiferon) for district employees.

Program Goals this Request Supports
Providing basic health care to Cañada College students

Status
Continued Request - Active

Type of Resource
Instructional Expenses (over $5,000) e.g., equipment

Cost
6,000

One-Time or Recurring Cost?
Recurring Cost

Critical Question: How does this resource request support closing the equity gaps as identified in the current SEAP plan?
This resource request directly supports closing equity gaps identified in the SEAP plan by preserving essential safety-net healthcare services for the campus's most vulnerable, low-income, and disproportionately impacted students. As recent federal policy shifts, reduced regional healthcare access, and widespread Medi-Cal disenrollments leave millions of Californians without coverage, low-income students rely on the Student Health Center as their primary or sole source of care. Securing this funding removes critical health-related barriers to learning, preventing basic health challenges from turning into academic disruptions and directly safeguarding retention, persistence, and success for target equity populations.

Resource Requests

Critical Question: How does this resource request support LatinX, AANHPI, and Black and African American students?

This resource request directly supports Latinx, AANHPI, and Black and African American students by maintaining a functional Student Health Center that counteracts systemic losses in healthcare coverage. Because Latinx and AANAPISI/AANHPI students represent a significant portion of the campus population impacted by recent federal changes and reduced healthcare access, securing this funding ensures these disproportionately affected communities retain low-barrier, continuous care on campus to protect their overall well-being and academic continuity.

Map Request to College Goals and Strategic Initiatives

Which of Cañada College's Goals does this resource request support?

Equity-Minded and Antiracist College Culture
Student Access and/or Success and/or Completion

Which of Cañada College's Strategic Initiatives does this resource request support?

Help meet the basic needs of Cañada students and other community members