Committee on Student Services
Friday, December 9th, 2016 – 2:30-4:30 PM
James, 302

Participants:

Dorothy Apedaile (Co-Chair), Jim Fyles (Co-Chair), Cara Piperni, Elaine Patterson, Erin Sobat, Ian Simmie, Cynthia Tang, Dusica Maysinger, Norm O'Brien, Vera Romano, Lina Di Genova, Axel Hundemer, Nathalie Cooke, Muhammad (Ahmer) Wali, Tamara Western, Kyla Hosie (secretary)

Absences or regrets:

Jenny Ann Pura, Andrew Dixon, Nihal Mandanna, William Cleveland, Amanda Montaque, Gillian Lane-Mercier

Meeting called to order at 1:32

1. Approval of Agenda

Agenda approved as circulated

2. Approval of Minutes

Minutes approved as circulated

3. Business Arising
   a. Innovation Fund – C. Piperni

Emails went out to SLL, SSMU, PGSS, MCSS, MCGSS, MACES and SEDE stating the innovation fund deadline of Jan. 31, 2017 and encouraging people to apply. Past selection cycles had an application deadline for projects over $5000 and an ongoing process for proposals under $5000. For this round, all projects, regardless of value, have a deadline of January 31, 2017. Due to funding limitations, proposed projects may only span one year. We will plan to reserve an hour at the February 13 CSS meeting to review projects over 5k (O. Dyens is also scheduled to present the new budget in February). The funding is released in May. All applications will be initially reviewed by the SDSS, with support from HR, Finance and Assessment experts in the Office of the Senior Director as required.

E. Sobat: Why is the fund ending after this year, thought it was a long-term initiative?
C. Piperni: only saw documentation for three years. Surplus being used by an operational deficit that Student Services carries with new referendum on increasing Student Services Fees in the upcoming year. O. Dyen's budget presentation last year also outlined the large one-time expenses funded by the surplus (mostly tied to Wellness initiatives like the EMR). As financial picture/budget planning moves forward, it could be rediscussed. It is also important as good stewards of these funds, that concluded projects supported by the Innovation Fund have their outcomes assessed to be certain about the positive impact of this investment.

Concerns raised regarding discussion of future investments. Deputy Provost scheduled to come in Feb to discuss budget.

4. New Business
   a. 2015-2016 Advisory Board Reports

The reports were distributed by email for people to peruse.

N. Cooke: Mental Health report stated that the Eating Disorders Program was lacking a therapist? V. Romano: believe this has to do with fact that therapist is on leave and that position won't be replaced.

E. Sobat noted the concerns regarding structure of advisory board and student involvement/attendance, stating that StuServ should reach out to SSMU if there are any questions/concerns. SSMU tries to select people who want to contribute. Meetings sometime don't happen until later in the fall semester, when the reps have been nominated months before. C. Piperni noted mixed success by unit as to how members are engaged (ie. some boards have more/less students). Feedback is welcomed on how to better engage members.

E. Sobat: question regarding MORSL and the role of SLL/StuServ supporting student initiatives for an accessible prayer space on campus.
C. Piperni noted that she and Sara Parks (Director of MORSL) have put together a proposal for flexible interfaith prayer space around campus, especially in close proximity to the library when open 24/7 during exam time. The Deputy Provost has kindly agreed to table this notion at the upcoming executive SLL retreat.

E. Sobat noted there are funds available through the SSMU library improvement fund to help prepare any designated space for such purpose.

E. Patterson: question regarding impact of a new AMUSE agreement on SSAO office and the financial impact on the Work Study program?
C. Piperni: the Work Student program is set up so that the subsidy paid to employers (to incentivize work being done going in priority to students in financial need) is a fixed amount per hour, regardless of the rate of pay set by the employer. Even if wage rate increases, the program is only subsidized by $5 (for example). Envelope of Work Study Funds will thus remain fairly stable.   The program is paid for by two Quebec grants as well as a contribution from the University

E. Sobat: Increase to the rate of subsidy? C. Piperni: not likely because any increase in Work Study subsidy spending would detract from non-repayable bursaries going into students' pockets.

5. Senior Director's Report – C. Piperni
  a.   Wellness Initiatives Presentation

C. Piperni gave a similar presentation for StuServ staff, student government and Peer Support leaders. She hopes CSS members will help champion these efforts as well as being an important group to consult with.
D. Maysinger noted that it is not possible for students to get a note for exams unless they have seen someone beforehand. C. Piperni: can't provide an instant service for notes otherwise it's a bottleneck for students needing urgent access to treatment. However, once a student has a history with their Client Care Clinician, it will be easier to request letters of support. Also have partners with external clinics located close to campus who can give notes. Important that our urgent pathways don't get bogged down for notes.

D. Apedaile noted that the medical clinics listed on Health Services website do not indicate which clinics have mental health services and notes. Will have to check with Jackie (Clinic Manager) and Dr. Perera (Heath Services Director).   N. O'Brien noted that they need to be more explicit in specifying which clinics would be best to consult regarding psychological issues. At end of meeting N.O'Brien also highlighted that it's common practice for G.P.s to assess psychological issues.

D. Maysinger stated that there needs to be more preventative efforts. StuServ can help in providing the information to students as early in term as possible. Prevention is cheaper; info needs to be more straightforward and accessible. C. Piperni: agree, needs to be packaged a certain way. Our web presence redesign project will address this. In terms of workshops for personal skills development, Stu Serv is working with TLS on how to better package content and offerings.

V. Romano noted that in the last few years attendance in Counselling Services workshops have expanded from 100-150 to over 1000 per semester for their workshops (anything that involves dog therapy, yoga, is very popular). Can improve on timing (ie. at orientation, at beginning of semester vs exams).

A. Hundemer is questioning the policy regarding medical notes. He is wondering if it's possible for certain things (ie. mid-terms), students don't need medical notes. Difficult for him as an instructor to deal with medical notes.

C. Piperni: new pilot project for final exams where students who request for the first time (within degree) a deferral due to illness or another extenuating circumstance, will be granted the a deferral without the need for supporting documentation (e.g. a medical note)

Also embarking on working group between TLS, ODOS, OSD to create guidelines for faculties on what kind of accommodations are appropriate

J. Fyles: at Mac, there is a pilot project for a centralized medical note process. Student comes to Student Affairs office, fills out a form, etc. Idea is that if the note seems legitimate, the staff member would email the prof to tell them that the note is fine and should make accommodations for the student. Some notes are suspicious. This centralized process seems to be working but it does take a lot of time. Identifies more students earlier that need intervention. Working more closely with Counselling Services (even though his office is academic).

M. Wali question regarding how many CCC's we have?
V. Romano: consulted best practices, stepped care is currently being implemented across many campuses. All clinicians in Counselling and Mental Health Services have CCC hours, with the exception of psychiatrists who instead offer consults in certain circumstances (e.g. disorder diagnosis, medication).

E. Sobat: have there been scenarios where students need to be referred to a different CCC due to specialization or if it isn't the right fit?
V. Romano: this has rarely happened. Less of a group of specialists and more of a community practice such as for minorities such as Pride team with 7 clinicians – if trans student wants to change to Pride team clinician, they can accommodate that. Another example is the substance abuse program. There have been less than 5 cases where there was a clear lack of harmony between CCC and client. CaMH looks into it when there is a problem. When there is a valid reason, of course, they try to find a better match. Main feedback from students: issue of no same day appts.

E. Sobat: question regarding specialized psychologists (ie: if someone has OCD, how can they be treated the best way)?

N. O'Brien/V. Romano: Everyone has their own specialization but can share cases. Most cases are anxiety, stress, relationship issues. Not many cases that require specialty consult. If they do, we ensure they get access. This model involves a culture change. More of a community system, may not need to ever meet with a professional. Data shows that people will benefit from less intervention. People equate less intensive

intervention with being less helpful – this isn't true. People look for a specific title "brand" but that may not be needed. Example: people want therapy because "it's the best" but it may not be the case for that individual. Want to make clients more informed consumers of the mental health care they can receive.

J. Fyles noted that the less invasive tools make it easier for students to have intervention. Stepped care is nicely thought out to assist students in thinking about their own needs.

N. O'Brien noted that within step 7 (therapy), in the old system he would see the student for therapy and when there's a break (summer), there's a discontinuity of treatment with the possibility of having to do a second consultation. New model: once you're in the system, you're in (don't have to wait months for an appt).

D. Apedaile noted that it is a struggle to convince students that these lower resource options are effective. Students think they are being told to do the lowest intensity options because it is cheaper for the University. V. Romano responded that McGill has the largest amount of clinicians at a University campus in Canada, adding more clinicians has not solved the problem of demand. This is not a cost saving measure.

E. Sobat: how to make menu of options available to students, how to present these options to students without having to see a CCC?

N. O'Brien: currently very difficult to navigate websites. Working on a new one central hub which is very user friendly. If someone is looking for a resource or having an issue, they can get to where they need to be. Website and other component is letting people know that they have accessible support a click away.
C. Piperni: students suggested the idea of a video (to explain what happens when you see a CCC, what to expect). Looking at other ways to express this change.
V. Romano noted the importance of empowering our referral partners. Faculty advisors, etc. should be aware of tools that students have at their disposal.

E. Sobat: question regarding how will this integrate with the existing health promotion?
C. Piperni: this conversation will come, need to look at all outreach and health education setups and make it more a cohesive plan with all the training support and clinical support integrated.

E. Sobat expressed concerns that communication is the last thought. C. Piperni mentioned that she can't speak to anything that happened before her mandate, it was an accelerated mandate. Ideally communications should be done as the change is being implemented and Stu Serv will endeavour to do this going forward.

V. Romano mentioned that more formal venues for feedbacks are being established and have already received great feedback.

C. Piperni noted that there are a lot of other treatment options we can bring to Mac (ie. TAO)

  b. Transition to permanent Senior Director
Martine Gauthier was recruited in early Fall and will start in January; coming from Saskatchewan Polytechnic. She is spending all day next week with the SLL executive team. Cara will be available as a resource for her and will follow her cue as to what level of intensity she wants for the transition. A lot of documentation is already prepared for her review. A lot of the interim work that Cara has done is to prepare for a permanent leader outside of McGill.

6. Other business

It was noted that C. Piperni and V. Romano will give the Wellness Initiatives presentation to ESAAC in January, thanked E. Sobat for recommending this topic for the agenda.

There was no other business.

Meeting adjourned at 4:03

NEXT MEETINGS:

Wednesday, January 11 | 2:00-4:00 PM | James, 302
Monday, February 13 | 1:30-3:30 PM | James, 302
Wednesday, March 15 | 2:00-4:00 PM | James, 301
Monday, April 10 | 1:30-3:30 PM | Location: TBA