Facilities and Healthcare Committee Meeting 23rd April, 2014

Present: Michelle Kriner, Angharad Davis, Chad Marion, Wendy Xiao

Apologies: None recorded

Meeting opened 8:30pm

1. **Project Updates**
	1. FHC Major Projects Database
		1. MK has been working on the FHC major projects database (available on google docs). She requests that people who have worked on major projects this year go and fill in details to help next year’s committee work forward (e.g. CM on tax advice)
		2. Housing and facilities
			1. A particular concern was the need for improved housing information for new students. The Graduate Housing Office is still working on updating their website; WX commented that the new site has been rolled out but that it still requires additional work.
				1. WX spoke to Lisa Brandes about the Facebook group for incoming students; Justine from Publicity will take on the role of answering housing questions here.
			2. Lisa Brandes and George Longyear will hopefully be coordinating future housing events, following on from the success of WX’s housing fair this year. (This would give the events greater budget flexibility, which would be useful.)
			3. Issues of housing quality, affordability and availability are all currently being addressed by the housing committee.
				1. MK asked if it is currently the plan for the housing committee to meet indefinitely. WX believes this to be the case; they are working on the HGS project, new housing projects, and working with developers around New Haven – all of these are ongoing projects without a definite closure/completion date.
				2. MK thinks that this will be a positive and productive thing, assuming that open communication between the GSA and the housing committee can be maintained.
			4. Planned renovations to HGS will go ahead, but not for another few years.
				1. MK checked if the plans include graduate housing; WX confirmed that housing will be included, albeit less than is currently available (e.g. no housing will be offered in the Tower).
				2. MK asked what percentage of currently available graduate housing within HGS is located in the Tower? PB checked the graduate housing website; it seems that the majority of HGS grad housing is located outside the Tower.
				3. The GSA will continue for advocate for 24-hour access to the McDougal Center or to some other common space within HGS.
				4. Lisa Brandes seemed concerned about whether the dining hall will be sustainable in a renovated HGS; MK believes that if housing is retained, then the dining hall will probably be kept also.

AD commented that closing the HGS dining hall would be a problem, since presumably the renovations will not incorporate kitchen access for students housed there. This is a particular issue since Commons is no longer open in the evenings.

There was some discussion about whether the decision to close Commons for dinner could be an issue that is worth re-opening; especially given that there was some student disquiet regarding the decision when it was made. PB noted that student athletes in particular were against the decision.

* + - 1. Study space and 24/7 student space: Few departments now lack any form of study space, so 24/7 common space seems like the next sensible goal to pursue. This issue may be partially addressed by the potential expansion of library opening hours.
		1. Tax advice
			1. CM’s Tax Advice even was well attended; more sessions will be held next year, and these will be preceded by a meeting between students and the accountant to coordinate the most useful way of approaching the topic. CM has emailed Charles DelVecchio to discuss this, and will recruit representatives to attend the preliminary meeting when he hears back from him.
			2. CM will not be returning to the GSA next year; a new representative willing to take on the Tax Advice project will be needed.
		2. Healthcare
			1. PB attended a recent meeting with Dr Genecin and other university representatives to discuss the website, the transition to EPIC (electronic record-keeping), and the use of metrics to gauge improvements to mental health treatment on campus.
			2. PB reported that at this meeting Ernest Baskin brought up the issue of access to medication over the Summer; AD noted that this might be an issue with regard to certain medications – such as many anti-anxiety medications – that are issued without repeats and must be re-prescribed every time (rendering access while travelling etc. potentially complicated).
			3. PB did not seek re-election and may not be in New Haven in the Fall; if he is in town, he will still participate in FHC meetings as a ‘civilian’. He noted that many people who have been involved with mental health issues within the university are moving on or becoming increasingly busy, but that it is important to have good point people working on this project since it is both an important and a very present topic within the university community.
		3. Secondary projects
			1. MK noted that it would be advisable next year to re-establish contact/dialogue with the Payne Whitney Gymnasium.
			2. MK has been responsible for monitoring the email address for the Dental and Vision plans. There is a meeting next week to discuss next year’s plans; MK will use the data gathered from the recent healthcare survey to help make decisions about any changes to coverage.
				1. Any increase in coverage incorporating access to premiere dentists comes with a significant price increase. Last year, it was attempted to incentivize the use of PPO (lower tier) dentists so that the dental plan could expand its services without increasing the cost dramatically. However, there have not always been positive reports about the PPO dentists: most students seem to prefer the premiere dentists even when they cost more.
				2. WX asked about eye care: is there a program wherein a member could be reimbursed for a certain amount out of pocket when paying for an eye exam, glasses, contact lenses etc. no matter where they sourced them? (Especially given that purchasing glasses etc. online is significantly cheaper than going through traditional storefront shops/surgeries). Currently, members are reimbursed a lower amount when they patronise out-of-network providers, but given that these may be cheaper to begin with, students may still opt for that route. Would a flat amount reimbursement be feasible? MK didn’t know.
				3. MK noted that it is worthwhile investigating why exactly Yale Health doesn’t offer contact lens exams.
				4. MK noted that Yale health employs oral surgeons, but she doesn’t know if they do wisdom tooth extraction. She queried whether it might be more feasible to try to get this procedure covered through the health plan rather than through the dental plan.
			3. MK outlined a number of possible future projects, based on the results of the healthcare survey, including campaigning for:
				1. Increased availability and reduced cost of childcare
				2. Making health care for couples without children more affordable (currently spouses/partners must pay for their health insurance whereas it is provided for free for families of 3 or more)
				3. Pastoral care, focusing on matters at a departmental level: e.g. making sure that departments are held accountable for providing suitable support mechanisms to their graduate students (such as via a DGS review process)
			4. Some additional project ideas are also recorded in the major projects database which the committee has not previously taken up.
	1. Planning for next year
		1. MK noted that the next few weeks will be important for creating a smooth transition to next year’s committee. Replacements for MK and other committee members must be sought; MK recommends recruiting new FHC members at the welcoming barbecue next week.
	2. Mental Health
		1. AD attended the university administrators’ discussion panel at the recent Mental Health and Wellness weekend sponsored by the Coalition for Mental Health and Wellbeing at Yale. As one might expect, the discussion was primarily focused on issues relevant to the undergraduate students, with emphasis placed on the roles of the colleges in fostering student wellbeing.
			1. AD noted that she brought up two issues during the discussion, neither of which she felt were adequately responded to at the time: firstly, the apparent disconnection between student wellness and academic issues that is perceptible on campus in general and during this discussion in particular, and secondly, the potential role of the faculty tenure process in promoting a healthy university environment by rewarding faculty members who themselves create a positive environment for student learning and growth.
		2. AD also heard back from Tracy George, one of the new McDougal Health and Wellness fellows, regarding the potential inclusion of some form of mental health awareness at student orientation in the Fall.
			1. TG was in favour of the idea, and suggested that representatives from the FHC might work with the McDougal Fellows over the summer to put something together.
			2. AD is willing to work on this; there were no additional volunteers.
			3. PB noted that in a previous meeting he talked with Kim Goff-Crews about the orientation process as a whole; he observed that it may be a good idea to move forward with graduate school orientation on its own, since it may be easier to get the ball rolling there.
		3. WX noted that her department received particularly low scores on the university-wide survey with regard to student advising, career services etc. This was discussed during their whole-department meeting, but the department was hostile to the idea that it was in any way their role to support students in any matters other than the purely academic.
			1. WX was of the opinion that the answer to the mental health problem on campus is not solely to be found in more money and more healthcare providers, but that it is difficult to pin down additional solutions. AD noted that during the administrators’ panel at the Mental Health and Wellness Weekend, President Salovey also commented that this is not an issue that is going to be fixed by hiring additional doctors.
			2. PB commented that it’s not practical to seek to change the opinions of all of the faculty. However, it is not unreasonable to suppose that addressing other areas of concern to grad students (e.g. improved career services, library hours, and the provision of more student space) can also help address mental health.
			3. PB noted that the results of the healthcare survey with regard to pastoral care issues were not promising.
				1. PB queried how we can encourage departments to create positive environments and programs for their students. WX pointed out that it is difficult to teach people how to be good mentors. PB responded that this is why the provision of department fellows can be useful, although that does to some extent remove the organic spontaneity of these developments.
	3. Student coverage taskforce
		1. MK received an email from Katie Kelley; the Student Coverage Taskforce will reconvene in the Fall.
		2. PB noted that in addition to securing a student representative to the Student Coverage Taskforce for next year, he will also need a replacement on the Yale Health Member Advisory Committee and the Disabilities Committee.
1. **Concerns/ideas from the Floor**
	1. AD proposed a vote of thanks to Michelle Kriner for her sterling work chairing the Facilities and Healthcare Committee this year.

Meeting adjourned 9:12pm