UNIT REPORT
Health Services
Assessment Plan Summary

Health Services

Assess and Improve Health Literacy at SHSU

Goal Description:

Health Literacy is the ability to understand, process, and apply health information for the betterment of life. This includes a broad spectrum of healthcare related activities including, proactive preventative health practices, navigating health systems, understanding pharmaceuticals, and selecting and negotiating health benefit plans.

The goal of assessing and improving health literacy at SHSU is to measure the level of health literacy of the student body through employing the evidenced-based Test of Functional Health Literacy for Adults (TOFHLA) and then based on the assessment results, raise and/or support health literacy levels on campus to best ensure positive health practices, and therefore outcomes, at SHSU.

Attached Files

SHC Strategic Plan Campus Lab 2015-2016

Focused Implementation HL SD1 2015-2016

RELATED ITEMS/ELEMENTS- - - -

RELATED ITEM LEVEL 1

Assess Health Literacy Rate of Students at SHSU

Performance Objective Description:

Assess the health literacy rate of SHSU students, especially within the freshman and sophomore populations to ascertain a baseline measure of incoming students.

The Patient Protection and Affordable Care Act of 2010, Title V, defines health literacy as the degree to which an individual has the capacity to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions. Health literacy skills are what students need to apply either to make sense of health information and services or to provide health information to others. They also need health literacy skills to find information and services, communicate their needs and preferences and respond to information and services, process the meaning and usefulness of the information and services, understand the choices, consequences and context of the information and services, and decide which information and services match their needs and preferences so they can act.

RELATED ITEM LEVEL 2

S-TOFHLA Assessment

KPI Description:

The TOFHLA is an evidenced-based assessment tool used to measure health literacy developed by experts from Georgia State University, Emory University, and Case-Western Reserve and has long been recognized as the leading assessment tool for health literacy in the public health and clinical arenas. The TOFHLA measures for three outcome levels; Inadequate Functional Health Literacy, Marginal Functional Health Literacy, and Adequate Functional Health Literacy. Students who have Adequate Functional Health Literacy scores will be able to read, understand, and interpret most health texts and communications, while those who have Inadequate or Marginal Functional Health Literacy scores will have varying degrees of difficulty, requiring modifications in the health care setting and related preventative care outreach.

Measurement: In the 2015-2016 school year, at least 80% of the students enrolled in the Kinesiology 2115 class will complete the S-TOFHLA assessment in both the Fall and Spring semesters with at least 50% of the students participating in the survey achieving a moderate level of health literacy or higher.

Results Description:

Due to the untimely departure of the Health Center's director, the S-TOFHLA was not able to be administered.

RELATED ITEM LEVEL 3

Health Literacy

Action Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this

project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

RELATED ITEM LEVEL 2

Health Literacy

Action Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

RELATED ITEM LEVEL 1

Assess SHSU student's knowledge, skills, and attitudes (KSAs) about health

Performance Objective Description:

Implement the American College Health Association's National College Health Assessment to the SHSU student body, especially the freshmen and sophomore population to establish baseline student health knowledge, perceptions, and beliefs around health during the 2016-2017 school year.

The ACHA-National College Health Assessment (NCHA) is a nationally recognized research survey that collects precise data about student health habits, behaviors, and perceptions. While other health surveys of college students cover a single topic area, the ACHA-NCHA will allow SHSU to measure a wide range of health issues, including alcohol, tobacco, and other drug use, sexual health and contraception use, preventative health practices, weight, nutrition, and exercise, mental health issues, and personal safety and violence.

RELATED ITEM LEVEL 2

National College Health Assessment Implementation

KPI Description:

With the NCHA assessment tool, the most significant health priorities and trends of the SHSU student body can be determined over time through bi-annual implementation and analysis.

Developed by an interdisciplinary team of college health professionals, the ACHA-NCHA was pilot tested in 1998-1999 and systematically evaluated with reliability and validity analyses comparing common survey items with national studies such as the National College Health Risk Behavior Survey (CDC). These analyses include, comparing relevant percentages with nationally representative databases, performing item reliability analyses comparing overlapping items with a nationally representative database, conducting construct validity analyses comparing ACHA-NCHA results with a nationally representative database, and conducting measurement validity comparing results of the ACHA-NCHA with a nationally representative database.

Since SHSU plans to implement a non-randomized distribution of the 66 question web-based survey via the Kinesiology 2115 course required for all SHSU to complete before graduating, our data will not be apart of the national comparison database, but the analysis of our student's beliefs and practices regarding health will be evident via the statistical analysis of our respective dataset, although biases will need to be set aside.

The survey data will allow the Student Health Center to:

- Identify the most common health and behavior risks affecting students' academic performance
- Identify gaps in student health priorities.
- Design evidence-based health promotion programs with targeted educational and environmental initiatives.
- Create social norms marketing campaigns by comparing students' actual behaviors to their perceptions about peer behavior.
- Provide needs assessment data for campus and community task forces on sexual assault, alcohol use, eating disorders, etc.
- Have readily available graphs and data for policy discussions and presentations with faculty, staff, administration, and board members.
- Impact the campus culture by opening a dialogue about health with students and staff.
- Develop proposals to secure grant funding to expand or develop programs.
- Evaluate our programming efforts by conducting repeat administrations of the survey

Measure: At least 80% of all students enrolled in Kinesiology 2015 will complete the online NCHA survey within the 2015-2016 school year, resulting in a baseline census of student practices related to health at SHSU.

Results Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

RELATED ITEM LEVEL 3

NCHA

Action Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

Quality Health Services

Goal Description:

The Health Center will provide quality health care services by ensuring continuous collaborative compassionate care.

RELATED ITEMS/ELEMENTS -----

RELATED ITEM LEVEL 1

Alcohol Abuse Prevention

Learning Objective Description:

The Sam Houston Alcohol Referral Program (SHARP) educates students about the negative effects of alcohol abuse. This program is administered by a certified instructor to all students who have violated alcohol / drinking policies at SHSU. All students participating in the program participate in a pre and post test evaluation to measure their baseline pre-course understanding of alcohol and it's potential effects as compared to what they have learned over the 6 hour course period.

RELATED ITEM LEVEL 2

SHARP Effectiveness

Indicator Description:

The SHARP program, via certified instructor, implements the Alcohol Education Program for Minors (AEPM) issued by the Texas Department of State Health Services. The 6- hours course is mandatory for all students who have violated alcohol use policies at SHSU. The AEPM curriculum employs a pre and post test to establish a baseline for incoming knowledge and post-course comprehension regarding alcohol use and abuse. The AEPM course is taught three times per semester.

This objective addresses the requirement that all student participants must pass the post-course test with a 70 or higher to avoid mandatorily retaking the course.

Criterion Description:

Students participating in the SHARP course will learn the negative effects of alcohol abuse and at least 80% of the students will pass the post-test assessment with a 70 or higher during the 2015-2016 school year.

Findings Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

RELATED ITEM LEVEL 3

SHARP Program

Action Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

RELATED ITEM LEVEL 1

Student satisfaction survey

Performance Objective Description:

Patient (students) satisfaction surveys will help the student health center identify ways to improve our practice, resulting in better care and happier patients. In addition, a patient satisfaction survey will cultivate an environment that embraces quality improvement that is generalizable and can be reported back to the patients and the university at large. Three areas of measurement will be considered in the survey process: quality issues (i.e., is the patient satisfied with his or her medical care?), access issues (i.e., is it easy to make an appointment or get a referral?), and interpersonal issues (i.e., are the physicians and staff caring and compassionate?).

The Student Health Center's clinical staff will be implementing a 5 question scaled (1-10) survey at the end of each clinical visit and all data will be entered into an Excel spreadsheet, along with basic demographic data to include, age, year in school, major, race, and sex, place of residence (on or off campus) and zip code.

Measurement: 75% of all patients seen by the clinical staff at the student health center will complete the patient satisfaction survey in the 2015-2016 school year.

RELATED ITEM LEVEL 2

Student Satisfaction Survey

KPI Description:

The Student Health Center's clinical staff will be implementing a 5 question scaled (1-10) survey at the end of each clinical visit and all data will be entered into an Excel spreadsheet, along with basic demographic data to include, age, year in school, major, race, and sex, place of residence (on or off campus) and zip code.

Measurement: 75% of all patients seen by the clinical staff at the student health center will complete the patient satisfaction survey in the 2015-2016 school year.

Results Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

RELATED ITEM LEVEL 3

Patient Satisfaction

Action Description:

Due to the departure of the Health Center's primary administrator as a result of unexpected circumstances, several initiatives that had been planned were left either uninitiated or unresolved. The current assessment project is one of these items. Details regarding this project have been passed on to the Health Center's new administrator, who will evaluate it for implementation during the next assessment cycle.

Update to Previous Cycle's Plan for Continuous Improvement

Previous Cycle's Plan For Continuous Improvement (Do Not Modify):

Quality Health Services will be continually provided through the identified isolation room for TB positive patients that will remain in standard use as needed. The Dental clinic staff received training and were assessed via the AAAHC accreditation process. There were no concerns found throughout the process with regards to dental practices and education, indicating that no further action is required. Follow up to ensure future compliance will take place as continued preparation and participation in future AAAHC accreditation surveys are performed over the next three years. Any partial compliance (PC) measurements highlighted during the AAAHC accreditation process will be addressed and ameliorated before the next accreditation process in the 2018-2019 school year.

Update of Progress to the Previous Cycle's PCI:

Health Center administration continues to stayabreast of changes in AAAHC accreditation standards in anticipation of future accreditation site visits. A new software package was purchased to help with the management of all data and documentation necessary for the accreditation process.

Summary of FY16 Assessment Plan

Closing Summary:

Due to the untimely departure of the Health Center's director in the middle of the year, none of this year's assessment projects were able to be completed. The nature of her departure was immediate and did not allow for any transition or the delegation of duties. Once hired, the new Health Center director will be tasked with determining which, if any, of this year's assessment projects should be revisited during the new assessment cycle. The new director will also be tasked with developing some redundancy into the Health Center's assessment process to ensure that a similar event can not put an entire year's assessment plan at risk.