

Health Services

Development/Supporting

Goal Description:

The Student Health Center will actively assess and promote access to services that foster retention, academic success and the well being of the SHSU student population.

RELATED ITEMS/ELEMENTS

RELATED ITEM LEVEL 1

Tele Psychiatry Services

Performance Objective Description:

The need for Psychiatry services in collaboration with both the Student Health and Counseling services has been identified. This service will allow for students to be prescribed with appropriate medications to enhance their current counseling/treatment plan. Appropriate services will be implemented with consideration for space, access, funding and demand.

RELATED ITEM LEVEL 2

Tele Psychiatry Services

KPI Description:

After evaluating the need and budget for what services could be provided a contracted service was implemented in 2017 for Tele Psychiatry services as a joint venture with the Health Center and Counseling Center. The service was successfully started on March 1, 2017 with the provider being contracted for 8 hours of scheduled appointments per week. The referral process is set up to allow both Counseling Center staff and medical staff in the Health Center to refer for Psychiatry services. New policies were put in place to address delivery of service, confidentiality, use of tele medicine equipment and prescribing of controlled substances.

Results Description:

During the Spring 2017 semester the service was started with limited appointments for a 6 week titration period for the new provider- during that time 21 of 22 available appointments were utilized for a utilization rate of 95%

After a 6 week timeframe weekly available appointments were increased and 46 of 60 available appointments were utilized for a utilization rate of 76%

In the Summer of 2017 volume declined significantly due to decreased student population on campus.

RELATED ITEM LEVEL 3

Tele Psychiatry Services

Action Description:

For this service we will continue to monitor volume and scheduling percentages. We are currently using our available schedule at a rate of 75% or greater for the long semester.

Once we find this utilization is increasing to 90% or greater we would consider expanding the service.

We will also start to monitor no-show and cancellation rates to further evaluation possible improvements to the service.

In addition, in the Fall we will implement a patient satisfaction survey for this service as well. It is a unique service in the aspect of it being delivered via remote location (by the provider) and we need to assess any possible improvements to the patient experience due to this.

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

Patient 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

Patient 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:

This process for patient satisfaction surveys was not continued in 2016-2017. There has been a gap in patient satisfaction survey assessment during this academic year.

RELATED ITEM LEVEL 3

Patient Satisfaction Survey

Action Description:

Our goal is to implement our new patient satisfaction survey in the Fall of 2017 and measure results for our 2017-2018 assessment cycle.

The platform for our survey will be a notification by text message through our EHR for a patient after their visit is complete which will provide them with a link to complete our survey.

We will have 2 surveys that we will use. We will always ask the question of

1. Would they recommend the SHC?
2. Were they greeted in a friendly manner and helped by the front desk?
- Additional rotating questions in regards to each clinical area will be asked based on the survey currently in use.

Our goals will be based on response rate and satisfaction by area.
Response rate goal will be 50%
Satisfaction rate goal will be 75%

These are initial goals based on the implementation of a new process.

Supporting/Health Promotion

Goal Description:

Assess the prevalence of risky health behaviors among SHSU students and provide education and resources to promote safer behaviors for retention and academic success

RELATED ITEMS/ELEMENTS -----

RELATED ITEM LEVEL 1

Risky Health Behaviors

Performance Objective Description:

1. Reduce the prevalence of SHSU students that engage in high-risk alcohol use
2. Reduce the prevalence of SHSU students that engage in unsafe sexual activity

3. Reduce the number of negative alcohol-related experiences reported by SHSU students
4. Increase the prevalence of students that report that after the KIN 2115 “Safer Sex” video they are more likely to use a condom or other barrier method during sexual activity

RELATED ITEM LEVEL 2

Health Risk Assessment- Safer Sex Survey

KPI Description:

In KIN 2115, students will view the Safer Sex video and complete a survey to assess risk behaviors amongst the student body. Based on those survey results the Office of Health Promotion will develop programming and educational efforts to address the specific risks identified amongst SHSU students.

Attached Files

[☐ Safe Sex 101 Evaluation Form](#)

Results Description:

Participation in Safer Sex Survey

- Fall 2016 – 498
- Spring 2017 - 370

Percentage of students who are more likely to use a condom or other barrier method when engaging in sex after watching the presentation

- Fall 2016 – 87.8%
- Spring 2017 – 82.7%

Of those who have ever had sex, what percentage **do not practice** safe sex by using a condom or other protective barrier (Meaning they do not use condoms 100% of the time)

- Fall 2016 – 69.6% do not always practice safer sex (this was not broken down by the various forms of sex)
- Spring 2017 – Survey was phrased differently so that “Most of the time or Always” was the top option, followed by “Rarely or Sometimes”, followed by “Never”, then “Not Applicable” à Therefore, “Does not practice safe sex” in this survey will be categorized by those who responded as “Rarely or Sometimes” or “Never” using protection
- Oral Sex – 77.7% do not practice safer sex
- Vaginal – 29.7%
- Anal – 19.6%

Assessing high risk alcohol behavior

- Fall 2016- 31.5% of respondents report at least 1 time in the last 2 weeks
- Spring 2017 - 26.3% reported at least 1 time in the last 2 weeks

UPD crime logs were reviewed to measure the number of alcohol related incidents and DWI's or MIP's

- Fall 2016- 13 reports
- Spring 2017 - 10 reports

RELATED ITEM LEVEL 3

Health Promotion/Risky Behaviors

Action Description:

Based on survey results we are certainly on the right track with our sexual health education and reduction in risky behavior with alcohol related incidents

Continued goals are to:

*Increase the percentage of students who are more likely to use a condom- we are currently at 85% positive survey response to this question, our goal would be to increase this to 95% in our next cycle.

*Increase knowledge of alternative methods of protection beyond condom use. Specific opportunity is with Oral Sex where currently 77% are not practicing a safer sex method. Our goal would be to reduce this number to 50%

*Re-vamping the safer sex video to make it more engaging for the student population.

*Continue with ADAI program and collaboration with UPD and other departments to positively impact and continue to reduce the likelihood of high risk alcohol behaviors for retention and academic success.

Update to Previous Cycle's Plan for Continuous Improvement

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

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.

Update of Progress to the Previous Cycle's PCI:

For 2016-2017 assessment time frame, the new Health Center Director reviewed the previous years goals and revised as indicated base on new focus areas. Most of the plan will be ongoing and carried into the 2017-2018 cycle as continued projects.

Health Center and Health Promotion Plan

Closing Summary:

The Student Health Center and Office of Health Promotion have a continued improvement plan based on the common goal of improving student health and wellness, academic success and retention. Our hope is that we reach students to improve not only in their college experience but promote lifelong healthy lifestyle choices.

Health Promotion/Risky Behaviors

*Increase the percentage of students who are more likely to use a condom- we are currently at 85% positive survey response to this question, our goal would be to increase this to 95% in our next cycle.

*Increase knowledge of alternative methods of protection beyond condom use. Specific opportunity is with Oral Sex where currently 77% are not practicing a safer sex method. Our goal would be to reduce this number to 50%

*Continue the trend of reduced alcohol related incidents and risky alcohol related behaviors.

Patient Satisfaction

Our goal is to implement our new patient satisfaction survey in the Fall of 2017 and measure results for our 2017-2018 assessment cycle.

Response rate goal will be 50%

Satisfaction rate goal will be 75%

In addition, in the Fall we will implement a patient satisfaction survey for this service as well. It is a unique service in the aspect of it being delivered via remote location (by the provider) and we need to assess any possible improvements to the patient experience due to this.

Tele Psychiatry

For this service we will continue to monitor volume and scheduling percentages. We are currently using our available schedule at a rate of 75% or greater for the long semester.

Once we find this utilization is increasing to 90% or greater we would consider expanding the service.

We will also start to monitor no-show and cancellation rates to further evaluation possible improvements to the service.

Our plan is to build upon current relationships with our Office of Health Promotions and increase our joint programming efforts to reach more students with the same message to impact their behaviors and choices.

We are implementing a new patient satisfaction survey program that will be distributed through our EMR immediately after completion of an appointment in order to gain relevant and real time feedback.

We will implement this in both our medical and tele psychiatry clinics and be able to view reports and implement improvement plans based on data.

Our Psychiatry clinic is a growing program and we want to continue our focus on appropriate referrals, timely intervention and access to services.

We will continue to track and trend utilization rates, no show / cancellations and wait times for initial evaluations and follow up appointment scheduling.

In our 2017-2018 cycle we also plan to increase data collection and evaluation in the medical clinic to include - utilization rates, visit volume, types of visits and wait times of our patients.