

## **STUDENT FEES ADVISORY COMMITTEE (SFAC)**

### **FY2019 PROGRAM QUESTIONNAIRE**

INSTRUCTIONS: *Please respond to all questions. Restate the question before providing your response. **An electronic copy of your responses in PDF format should be sent to: SFAC Chair, in care of the Dean of Students Office, at [wmunson@uh.edu](mailto:wmunson@uh.edu) by 1:00 p.m., Thursday, October 19, 2017. It should be noted that only electronic submissions will be considered.***  
**Only those requests submitted by 1:00 p.m., October 19, 2017 will be guaranteed full consideration.**

1. **Please provide a one-page executive summary of your questionnaire responses. This summary should include, in brief terms: your unit's mission, how you accomplish your unit's mission, and a justification of your unit's student fee allocation in terms of benefits for students.**

Our mission is to provide cost-effective, comprehensive, compassionate and quality primary medical care to all UH students so they can learn best health practices and maintain their focus on successful academic outcomes.

In actuality, our Student Health Center (SHC) goes way beyond what the mission statement is able to capture. It has and continues to be our desire to lead health care support and literacy on campus and positively impact all those we are trying to reach. Unfortunately, we cannot predict and/or encompass everything with our current resources and staff. The recent mental health related tragedy leaves many grappling for answers and searching for solutions to best prevent such losses. We feel we have a vital role to play in education, prevention and treatment even beyond the primary medical care we deliver daily. We care.

We are often the first line in not only educating our student body population but engaging with UH health and wellness entities as well as stakeholders in the Houston area who want to attack public health issues that affect us on campus and in the surrounding area.

We take any and all opportunities to bridge any gaps, when working with sister departments and student groups to get our message out, about the following:

- a. The many services we offer.
- b. The fact that we are a HIPAA compliant and AAAHC certified entity. *Health Insurance Portability and Accountability Act relates to confidentiality and the Accreditation Association for Ambulatory Health Care recognition implies we keep up with current trends and uphold quality standards in our operation.*
- c. The fact that you're getting services rendered by Board Certified Physicians and Providers and not substandard care.
- d. We offer General Medicine, Men's and Women's clinics, Orthopedics and Psychiatry services to the UH community. We provide travel medicine counsel and immunizations. We utilize a CLIA certified lab that offers comprehensive and accurate testing with quick turnaround in reporting of results.

- e. We have an onsite Pharmacy that has prices and the selection of a commercial competitor. It accepts most third party billing and payments at their window to reduce inefficiencies.
- f. Although not affiliated, we house dental services and support Dent-Well in its commitment to promote better overall health through oral care provided to students, staff and faculty on campus.

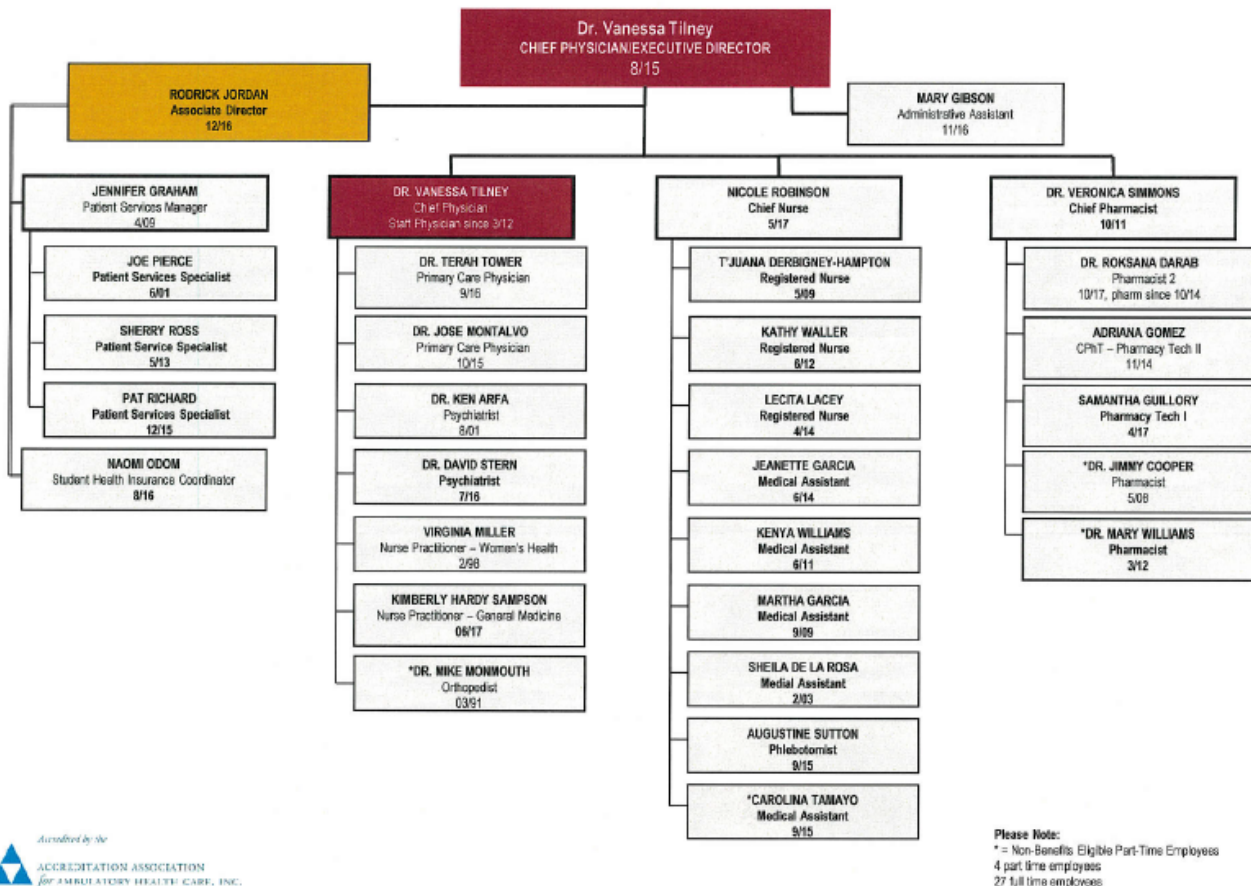
Our provider to student ratio is well below the national average yet we find ways to maximize our providers' schedules, so that we can accommodate and treat as many students as possible. All templates were modified to increase availability of our two psychiatrists and improve utilization of our general medicine services.

Last year, a new student health insurance program (SHIP) was negotiated and the introduction of Academic Health Plans under BC/BS, since the Fall of 2016, was a very positive one in terms of all the benefits this SHIP offers to those who are covered (as well as those who could potentially be covered).

In summary, here at the Student Health Center, we approach how we provide care to our students' holistic well-being very seriously. We want to diagnose and treat physical and mental ailments as soon as possible so we can return the students, whole, to their learning environment. We are constantly looking for ways to be good stewards of the student fee fund that helps partially cover some of the essentials needed for a health center to exist on campus.

- 2. Provide an organization chart of your unit. Large units may need to have an overview chart and then more specific charts for each program. Where you have multiple staff in the same position (e.g. counselor, advisor, etc.), note this on your chart. Student employees should be cited on the chart and identified as students.**

**UNIVERSITY of HOUSTON**  
STUDENT AFFAIRS & ENROLLMENT SERVICES  
Health Center



3. List your unit's strategic initiatives and action steps identified for the 2016-2017 academic year and cite the specific Division of Student Affairs and Enrollment Services (DSAES) Strategic Initiatives and University of Houston Strategic Goals to which they relate (links below). Please comment on your success in achieving these strategic initiatives/action steps. If a strategic initiative/action step changed during the year, please note this and explain. Also, list any new strategic initiatives/action steps, the rationale for the addition, and comment on your success in achieving these items.

DSAES Plan: ([http://www.uh.edu/dsaes/about/strategic\\_plan.html](http://www.uh.edu/dsaes/about/strategic_plan.html))

UH Goals: (<http://www.uh.edu/president/vision-priorities/>)

- A. Contribute to student success and retention by increasing penetration rate (unique patients divided by total fall enrollment as of ORD) of the UH Health Center by students with health concerns by 5% in FY17. DSAES Initiative: 4A

The numbers for periods 9/1/16 thru 8/31/17 show that we saw a total of 8713 patients. The same previous period 9/1/15 thru 8/31/16 we saw a total of 8855 patients. Have not attained the ambitious goal yet due to a period of much staff turnover but were able to sustain solid numbers. The total visit numbers did increase though and is likely due to an upward trend in more continuity of care.

Fall 9/1/2016 thru 12/31/2016 numbers = 18,049  
Spring 1/1/2017 thru 5/15/2017 = 14,554.

Our in-house survey results for "How did you hear about us?" shows:

29.68% via Student orientation, 28.79% UH Website, 18.09% Referral by faculty/staff/student and 12.48% Student Health Center website.

The data allowed the Student Health Center to drill down and redirect our efforts to marketing measures which have been proven to be more effective. We are focused on increasing our message to students and departments as to who we are and what we do.

- B. Increase the Health Center staff training initiatives to correspond with current clinical & pharmaceutical trends in order to offer high quality care to UH students. DSAES Initiative: 1E

The Chief Pharmacist has instructed/educated the clinical staff on the changes with the Pharmacy industry and keeps them updated on: Prices, Phased out medications, Generic equivalents. Providers are assigned pertinent topics to discuss with clinical staff during monthly in-services so that all can stay up to date with current medical information relevant to their practice. All physicians, nurse practitioners and pharmacists maintain their current licenses and certifications via renewals and continued education credits.

- C. Develop a health initiative with the Student Health and implement a freshman housing opportunity in order to increase new patient education opportunities focused on personal health and well-being. DSAES Initiative 4B

Due to inadequate staffing, we were unable to complete this. The chief nurse and associate director met with residential life coordinators in an effort to promote awareness of our services to those living on campus. Our hope is to get our clinicians to review common topics like flu versus cold, sexually transmissible illnesses, anxiety, etc. with freshmen in the near future.

- D. Identify or define and remove existing barriers of access for students to seek care at the Student Health Center.

Due to inadequate staffing in 2016 and assimilation of several new key employees in 2017, we were unable to complete an updated survey. We have old data but want to revisit those barriers we can eradicate to welcome more students as patients.

**4. Please discuss the means that you are utilizing to evaluate both your success in achieving the aforementioned strategic initiatives and/or action**

**steps and their importance as compared to others that you might pursue. Where data exist, discuss the number of persons served by each of your programs and any assessment measures and/or learning outcomes used to evaluate program success. Please provide the method for collecting these data.**

Here on the main campus, the current ratio of primary care provider to students is roughly 1:13,000 and we have a ratio of 1 Psychiatrist to 22,500 students.

FY 16-17 presented several challenges to the Student Health Center. Number one was that the Executive Director was overextended in her duties. At the time she was without an Executive Assistant, a recently departed Associate Director and several vacancies in General Medicine and Psychiatry that needed to be filled in order to ensure that the clinics could function.

As a result of her having to wear many hats and not having had the support needed to be able to complete the aforementioned initiatives, some of them were not completed. Finally this year, the organizational chart has stabilized with all current positions being filled and new talent has breathed new life into our organization.

Today's (mostly new administrative) team is enthused to move forward and sustain progress for the long term. Time was needed for familiarization with our electronic health records system and understanding of the clinics' structure/flow and expectations set by the Division of Student Affairs and Enrollment Services.

Our electronic medical record (EMR) Point & Click (PNC) allows us to generate operating and productivity reports when needed. We hold meetings with PNC IT and UH IT to review which tools are most valuable and what enhancements/updates will improve its use.

Service Summary - Total Distinct Patients - OpenChart v12.10 - Summary 2016 Patient Service Summary 2017

Parameters Dates Custom From 9/1/2016 To 8/31/2017

**Service Summary - Total Distinct Patients**

The report counts total distinct patients served for all visits, including all appointment and non-appointment visit types.  
Start Date: 9/1/2016  
End Date (Inclusive): 8/31/2017

Population	Patient Count
Total Distinct Patients	6017

Service Summary - Total Distinct Patients - OpenChart v12.10 - Summary 2015 Patient Service Summary 2016

Parameters Dates Custom From 9/1/2015 To 8/31/2016

**Service Summary - Total Distinct Patients**

The report counts total distinct patients served for all visits, including all appointment and non-appointment visit types.  
Start Date: 9/1/2015  
End Date (Inclusive): 8/31/2016

Population	Patient Count
Total Distinct Patients	6068

- Please discuss any budget or organizational changes experienced since your last (FY2018) SFAC request, their impact on your programs, and your reason for implementing them. SFAC recognizes that some programs did**

**not receive the funds that they requested, that some programs were impacted by additional expenses after the conclusion of the budget cycle, and that some programs may be ahead of or behind their self-generated income projections**

During the past year, there have been additions to our organization.

The chief physician/executive director hired a dynamic administrative assistant who has contributed tremendously to the arena involving communications, planning and organization.

We replaced the recently retired chief nurse with a registered nurse who also holds a Master's and Nurse Practitioner degree after years of supervisory experience.

We hired a new Associate Director who comes with practice management experience having worked in the Texas Medical Center at various institutions such as M.D. Anderson Cancer Center, Texas Children's Hospital, Memorial Hermann Hospital and Tenet Health.

We hired a full-time Family Practice Nurse Practitioner (NP) to allow us to see more patients on a consistent basis. We also now offer Friday Women's Clinic; whereas before we didn't due to the fact that our routine Women's Nurse Practitioner's schedule has always been Monday through Thursday. We presently contract with a board-certified Nurse Practitioner with previous college health experience, to come in and provide coverage for Fridays. The CP/ED strategically chose to hire more mid-level practitioners to expand services at a lesser cost. This does add supervisory responsibilities to the M.D. delegating, however.

There was some restructuring within the pharmacy this past year that lead to the addition of a pharm tech II position. This has allowed them to effectively accommodate more students.

- 6. If your unit concluded FY2017 with a Student Service Fee (SSF) Fund 3 addition to the SSF Reserve in excess of \$5,000, please describe the conditions which caused the addition and provide a line-item identification of the budgetary source(s) of the addition (i.e. lapsed salary, conference travel, etc).**

No funds were returned.

- 7. Please list your unit's 2018-2019 strategic initiatives and action steps in priority order and cite the specific Division of Student Affairs and Enrollment Services Values and University of Houston Strategic Goals to which they relate. Larger units may wish to group responses by subprogram. Under each unit strategic initiative, please state the specific action steps (programs, activities, services, policies/procedures, etc.) that you intend to implement to accomplish your stated initiative.**

- a. Improve collaboration between various stakeholders in the health and wellness entities on campus in order to attain a more cohesive and visible presence on campus. (Collaboration, Diversity, Innovation).

Here at the Student Health Center we have made a concerted effort to be present at a majority of events to present to students, student groups and sister organizations. We

take those opportunities to showcase the benefits the SHC offers and how we can partner with different departments to work more cohesively.

As you can see by our tabling, speaking opportunities, we attempt to disseminate our message to as many stakeholders as we can.

DATE	EVENT	ACTIVITIES
Fall 2016	Campus Prowl Department Open House	Offering resources to students in fun and interactive way
October 2016	UH Family Weekend Open House and Free Flu Shot Event	Promoting awareness of SHC to parents and flu shots to all
Fall 2016	Cougar Resource Fair	Informational interaction with students
December 1	World AIDS Day	Tabling event
November 28 – Dec 2, 2016	Free HIV Testing Week	Offered free HIV testing to campus community
December 1	HIV Event at UHSL	Tabling event
Fall 2016 and Spring 2017	International Law Students' Orientation	Tabling event - informational
Fall 2016 and Spring 2017	Law Center Resource Fairs	Tabling event
January 12, 2017	International Students' Orientation	Informational: introduction to UH, SHIP and UH student health center services.
March 4	Sunnyside Multiservice Center	Community Outreach – tabling event
March 9	Safe Spring Break	Tabling event – distributed UH items from health center to promote safe sex
March 9	UH Pregnancy Services @ UH Health Center	Collaboration with student (Caroline Hentges) in the C.T. Bauer College of Business
March 23 – 24	Frontier Fiesta	Health center participation in various activities
April 3	Sexual Assault Awareness Kickoff	Tabling event – Provide resources and services that are offered, distributed UH items from health center
April 13	Intercultural Development Inventory (IDI) Coaching	Promote awareness amongst staff members at SHC
April 4	NAACP	Educating on the ACA

April 11	Pregnancy Crisis Outreach	Collaboration with student (Tanna Vayon) – Undergraduate student advocate for pregnancy
July 12	Benefits Fair	Tabling event – Provide resources and services that are offered, distributed UH items from health center
July 28	RLC Student Intervention Training	Inform, educate on services provided
August 1	Bauer Graduate School orientation	Tabling event – Provide resources and services that are offered, distributed UH items from health center
August 8	New Student Orientation Law Center	Tabling event - informational
August 15	New faculty orientation	Tabling event – Provide resources and services that are offered, distributed UH items from health center
August 17	New International Student Orientation	Presentation on Student Health Insurance and Health Center Services at the new international student orientation
August 17	New International Students Welcome Reception	Meet and greet the new international students and officials representing their countries
August 17-18	Cougar Move-In	Welcome new and returning students back to campus by helping them move in to residential buildings.
August 17	Clinic/Pharmacy Table Event	Inform campus re: services at the student health center and pharmacy
August 21	Week of Welcome - Cougar First Impressions	Offer students a chance to receive campus maps and directions to class from UH staff members stationed across campus during the first two days of the semester.
September 7	Campus Prowl	Offer students info on health insurance and services provided by the health center
August 29 – Postponed	Zumbathon	Offer students info on health insurance and services provided by the health center



- b. To totally revamp the Health Center's website, that allows the Health Center to educate students in the most comprehensive way. The goals being to strategically market, website enhance, educate students on the pricing and services of the Health Center. (Innovation, Transparency, accountability)
- c. Initiate a student internship program to enhance the education of a student(s) that are interested in not only Medical but the Public Health field. The goal would be to expose the student to the administrative/policy & procedures aspect of how healthcare works, thus making for a better prepared graduate to enter the workforce or a related graduate program.

**8. Recognizing that the potential to generate additional Student Service Fee income for FY2019 base funding is extremely limited and recognizing that it is likely that some units will not be allocated the FY2019 base budget augmentations and/or one-time funds requested. Please provide a narrative of how your unit would accommodate a reduction of 5% in your total approved FY2018 base Student Service Fee budget and provide a line-item explanation of where budgetary cuts would be made**

Simply stated, a cut in this amount would lead to the loss of a mid-level practitioner (approx. 87K); hence, we could anticipate lesser availability for same day scheduling in our clinic and longer wait periods to be seen. All the other big item expenses listed such as lab supplies and costs of goods sold (medications ordered), are crucial to our operation being able to deliver comprehensive care expected from any quality health center. We are ready to review line items and the rationale behind each expense.

**9. What are the other possible sources of funding available to your unit and what efforts are being made to access them (e.g. grants, donations, etc.)? If you receive funds from other sources, please briefly describe the source, purpose, and duration of the funding and report the amounts received in the appropriate rows/columns on the SFAC Spreadsheet.**

Funding/reimbursement in healthcare is extremely complicated, so much so that larger clinics, hospitals have entire departments that are tasked with billing and billing problems.

We do not anticipate any donations or gifts.

We have an additional cost center that is the Self Generating fund, which includes the fees patients are charged for encounters with the providers. This includes a reduced flat fee (less than any copay outside) to see a physician then any fees that may be incurred from further testing deemed necessary by the provider. These fund 3's generate income that also help us sustain our operations.

When third party billing is accepted, the fees are varied in scale according to what the severity of the patient's presenting illness is and the medical decision making the provider has to apply to that particular visit/encounter note. The purpose of the fees are a form of reimbursement that follows the fee for service model in healthcare funding. We experience this model now with Academic Health Plans (SHIP).

**10. Please describe any services that are similar to yours and/or any overlap between your unit and any other unit(s) providing services to students and the rationale for the overlap.**

Here on campus there are several departments that have an indirect/direct impact on a student's mental and physical health. They provide another venue for students to access in the event that we can't get a student on the schedule or don't have the capacity.

The departments are:

**Counseling and Psychological Services (CAPS)**

- They also provide mental health services, but they do so under a different treatment model which is complimentary to the medical model a psychiatrist offers.
- We have psychiatrists that are MD's which allow them to prescribe medications both controlled and regular prescriptions.
- Reason for the overlap: That disproportionate psychiatrist to student ratio doesn't allow for an adequate safety net, in dealing with mental health issues. CAPS offers an opportunity for students to have walk-in access to counseling and counseling groups whereas we are appointment based only.

**Wellness**

- The Wellness department does provide HIV screening via SMART Cougars ( A non-profit entity that is housed in the Wellness department) on a regular basis, versus the Student Health Center offering the testing during special events. We offer serum and not oral swab test.
- Reason for the overlap: The Wellness department educates students on the value of being in balance with your environment and your personal health, which often intertwines with the Student Health Center's advice from the providers towards students in dealing with stressors.

**Center for Students with DisAbilities (CSD)**

- Help identify and document medical conditions which may be eligible for special accommodations.

**Cougars in Recovery, LGBTQ, Women and Gender Resources Center, Registered Dietitian**

- Receive and give referrals when either recognize the value both can contribute to caring for a certain individual.
- Providing equitable and compassionate care to diverse group of students (i.e. providing care to transgender students).