

STUDENT HEALTH SERVICE

Unit Plan: 2009 - 2014

MISSION AND ASPIRATIONS

The Student Health Service is a core function of the University of Wyoming, as it is the primary source of health care for on-campus students. It encompasses the Student Health Service and the Wellness Center, located in the Half Acre Gym. Our Mission Statement is:

- to provide high quality health care that enables students to perform optimally physically, mentally, and emotionally, and thus achieve their academic goals while minimizing interruptions in their course of studies; and,
- to provide effective health education and wellness programming that motivate students to develop and maintain healthy lifestyles that enhance their intellectual and personal growth and development.

The Student Health Service and Wellness Center aspire to provide services to students in a non-judgmental, efficient and cost effective manner that respects their right to confidentiality and privacy. If a new service, product or procedure is undergoing review to be added it must “fit the bill” per this expectation. The two entities also aspire to collaborate with other units on campus, and, if appropriate, in Laramie, to improve the health and wellness of students and the campus community through outreach and educational activities.

PREVIOUS PLANNING ACCOMPLISHMENTS

The Student Health Service has been guided by our Self Study 2005-2010 with additional initiatives added as warranted. Major accomplishments are as follows:

- Successful three year re-accreditation by the Accreditation Association for Ambulatory Health Care in March 2007.
- Successful introduction of an Electronic Medical Record in May 2006, which continues to evolve with new products and upgrades. This has fundamentally changed the way in which care is provided in the Student Health Service.
 - “Paperless” office is the goal; we will never achieve fully paperless processes but will come as close as possible.
 - Staffing changes came about as the result of this switch from paper to electronic charts. We hired a Computer Support Specialist, Senior, and have not rehired a Medical Transcriptionist. We did not rehire one part-time academic year front office staff position and two part-time academic year front office staff positions have been coalesced into one (almost) year round staff position.
- Peer education group, SexPERTS, was launched under the guidance of our Health Educator Andrea Coryell. These motivated students are trained to provide guidance and education on healthy relationships, sexuality, birth control and HIV counseling and testing. This has been a very successful project for the students involved who receive a valuable leadership and education opportunity as well as the students that are reached by the group.

RELEVANT INSTITUTIONAL ISSUES

Our Action Items relate to Motif 1, **Building depth versus adding breadth**. We aim to build on what we already have in place to improve what we can offer to students. Some of the items may not be visible to students, such as interfaces, but will result in improvements in service to them as staff will be more efficient.

Our Action Item relating to an expanded Student Health Service/teaching facility in partnership with the College of Health Sciences relates to the **Leadership** Motif 5. Health care is a “profession critical to the region’s future” as stated in Creation of the Future 3, which calls for a “comprehensive clinical education plan in the College of Health Sciences”. This facility can be part of that plan.

ACTION ITEMS

The staff of the Student Health Service discussed several items to consider as part of a long range plan. The following are those that are appropriate to consider over the next five years.

- Digital Processes – Motif 1
 - With implementation of our Electronic Medical Record, we continue to look to ways to be more efficient and paperless. Presently, several evaluative services our Health Service performs require a report on paper that is then scanned into the EMR and subsequently shredded. These services include EKGs, spirometry and peak flow meters. In addition, x-rays are taken on film which is stored in jackets with a copy of the reading on paper (the reading is received by fax which is attached to the EMR and printed out to be stored with the x-ray films).
 - With conversion to digital processes, an electronic record would be made which would be easily stored into the EMR and transported digitally (in the case of EKGs and x-rays) to be read elsewhere.
 - Cost is a factor, especially for conversion to a digital x-ray system. But our traditional x-ray system is also costly with monthly maintenance, fluids, transportation of films, copies required for students taking films elsewhere, etc.
- Interfaces with EMR – Motif 1
 - Presently, reports for laboratory studies from several labs (Regional West Laboratory Services, MetroPath) are supplied by fax and others in paper form (WY State Lab). Our x-ray reports are received by fax (Advanced Medical Imaging) and EKG reports by paper (although this may be alleviated if we go to a digital EKG process as noted above). All require a tedious process when entering each study result into the EMR.
 - With an interface established, the lab or x-ray report would be entered directly into the respective patient’s EMR from the lab or x-ray facility. This will also allow abnormal results to be flagged in the patient’s clinical note, not just on the lab result, resulting in a double check system.
 - Student Health can purchase an interface that can work with multiple sites or an interface with each individual group.
- Planning process for state of the art Student Health Service/teaching facility – Motif 5
 - The Student Health Service is limited in space and cannot expand to provide more or different services or increase staff.

- The College of Health Science has clinical faculty that are unable to teach in a setting on campus. Most teaching is done at off-campus sites. The Student Health Service medical staff precepts 1st year medical students and 2nd year Nurse Practitioner students, but due to patient load can only accept two/academic semester.
- To address both of these issues, an expanded Student Health Service that would incorporate College of Health Science clinical faculty is a lofty but attainable goal. The clinical faculty would provide service to students, thus expanding the Student Health Service staff, and provide an on-campus site to teach health science students.
- During the Strategic Planning time period, a Planning Committee should be named to determine such a facility's scope and expectations.
- Travel medicine expertise – Motif 1
 - The campus has a broader focus on internationalization (including in our own building) with recruitment of international students and increased opportunities for study abroad for students.
 - At present, we use internet resources to assist students in planning their immunizations and medication needs for travel.
 - Greater travel medicine expertise is necessary and having one or two medical staff members trained in travel medicine would better serve our students.
- Additional medical staff member during the academic year – Motif 1
 - The Student Health Service has not seen as many students as it has in the past. Part of this is due to being short staffed; part of it is due to longer time given to new patients to be enable a full medical history.
 - Once the medical staff is fully staffed, it can be ascertained if lower patient visits are a reality. If so, hiring a Nurse Practitioner or Physician Assistant during the academic year (170 day) would be reasonable to increase the appointment slots available for students.
 - Space and funding, of course, will be an issue for this item.

IMPLEMENTATION

All Action Items will take time and deliberation. Until renovations are completed in our building, sometime in 2009, progress cannot be made on most Items. We need to be back in our “space” in a building that is not under construction to go forward.

<u>Action Item</u>	<u>Expected Implementation</u>
Digital Processes	In stages. Peak flow meters and EKG machine – 2009/2010 Digital x-ray – 2012/2013 unless our present machine has a major breakdown and cost of repairs is prohibitive
Interfaces with EMR	2009 for first interface to be initiated and effective
Planning for SHS/ Teaching facility	Will await naming of new Dean of College of Health Sciences to start process; 2010
Travel medicine	2010/2011 to have a medical staff member obtain CME in this area

Additional medical 2010 after a year fully staffed to ascertain patient volume
staff member

Respectfully submitted,

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