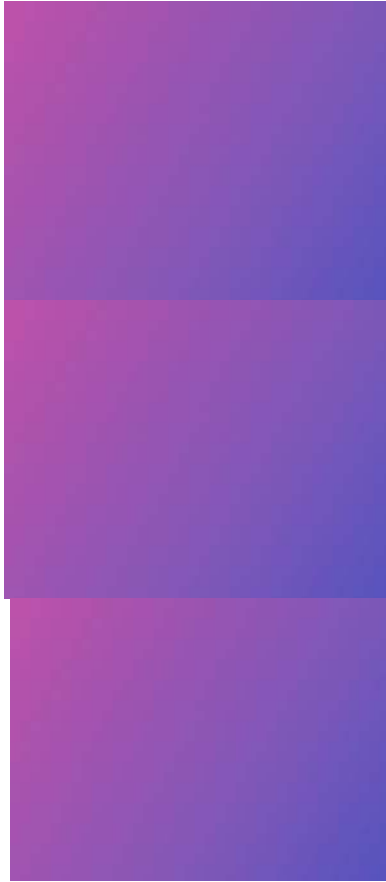


Unit Strategic Plan Update 2003/2004



University **HealthServices**

We heal. We educate. We care.

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EXECUTIVE SUMMARY

2003-04 was an exciting but demanding year for the staff of University Health Services (UHS), highlighted by our re-accreditation by the Accreditation Association for Ambulatory Health Care (AAAHC). Our staff responded with enthusiastic determination, demonstrating professionalism, dedication and flexibility, while still maintaining their commitment to providing the highest quality service possible to students and other customers.

Although delivering primary health care, health promotion, and preventive health services to students is our main focus, UHS also provided important leadership on health issues to the greater Penn State community. Penn State faculty, staff, and retirees throughout the PSU system, as well as conference attendees and visitors to University Park also benefited from UHS services.

Students

The total number of “official” individual contacts with students throughout UHS was 163,596, but UHS impacted thousands more students through campus-wide health promotion campaigns.

Individual student contacts:

- ◆ Clinical Services – 83,439 service encounters in General Medicine, Urgent Care and Women’s Health, including:
 - 60,736 in-person clinic visits
 - 22,703 health advice phone calls
- ◆ Ancillary Services - 22,620 service encounters in lab, x-ray and physical therapy
- ◆ Ambulance – 814 ambulance calls
- ◆ Pharmacy – 54,948 prescriptions to students
- ◆ Health Promotion and Education – 1,775 student encounters for prevention services

Group student contacts:

Staff health educators and more than 70 student peer educators also presented group educational programs to hundreds of students. Health educators coordinated campus-wide health education campaigns on alcohol, eating disorders, and tobacco cessation. These health promotion efforts reached thousands of students.

Non-students

In addition to providing student-centered health services, UHS fosters a healthy Penn State campus community in several other ways. The UHS Pharmacy provided 86,667 prescriptions to PSU employees and retirees through the Maintenance Drug Prescription Program. UHS staff collaborated with University and community partners in numerous ongoing programs and several new projects. UHS provided emergency services to thousands of spectators and participants at special events at University Park campus, including eight home football games.

The UHS commitment to quality improvement (QI) continued to be a focal point. More than 20 QI projects involving clinical and non-clinical teams were either completed, continued, or launched. Every department made significant improvements in service delivery and customer satisfaction.

While the challenges of the present are significant, UHS understands that future challenges will be even greater. Federal regulatory changes, the problems of medical malpractice in Pennsylvania, financial constraints within higher education, and the ever-rising cost of health care and the complexities of health insurance will continue to increase. In this context, UHS will need to maintain the high quality of service and programs while devoting appropriate resources to design and build our new health and counseling services building.

VISION

University Health Services fosters a healthy Penn State campus community where students, faculty and staff enjoy optimal health as they pursue their academic, career and personal goals.

MISSION

University Health Services provides student-centered primary health care, health promotion, and preventive health services, and provides leadership on health issues to the Penn State community.

VALUES

- ◆ Integrity: Make honesty, fairness, and justice the keystone of all interactions with patients/customers and co-workers.
- ◆ Excellence: Celebrate change and innovation and accept risk (and therefore possible failure) as a part of our commitment to quality.
- ◆ Civility: Promote and support the attitudes, behaviors, knowledge and skills necessary for staff to work respectfully, sensitively, and effectively with patients/customers, and co-workers in a culturally diverse work environment.
- ◆ Responsiveness: Strive to anticipate, acknowledge, and meet the appropriate needs of our patients/customers and co-workers.

GOALS

- ◆ Foster and promote optimal health for the PSU community.
- ◆ Be more student-centered in all that we do.
- ◆ Continue to provide high quality, efficient and accessible services and programs.
- ◆ Attract and maintain motivated, diverse, caring quality staff.
- ◆ Effectively market UHS staff and services.
- ◆ Collaborate with University, community, and professional partners in creating new services and strengthening existing ones.
- ◆ Secure financial stability.
- ◆ Improve interdepartmental communication and cooperation.
- ◆ Continue to improve our current space as we plan for the new building.

MOST SIGNIFICANT ACHIEVEMENTS

UHS conducted two major assessments in 2003-2004 resulting in a unique opportunity to improve and enhance services and programs. At the same time UHS was preparing for a three-year re-accreditation by the Accreditation Association for Ambulatory Health Care (AAAHC), we were also in the process of developing the 2004-2009 Strategic Plan. The combination of the two efforts resulted in an in-depth assessment of the health care needs of our students and how to meet those needs.

Accreditation

Our most significant achievement in 2003-04 was re-accreditation by AAAHC, a prestigious national organization. AAAHC accreditation means that UHS has gone above and beyond the basic requirements and met a set of rigorous national standards. AAAHC emphasizes the need to be a more patient-focused organization, which fits in with Penn State's student-centered approach. The entire UHS staff was involved in preparing for an on-site, peer-based survey of facilities and services, including patient rights, clinical record-keeping, quality of care standards and professional development. This is the fourth time UHS has been accredited by AAAHC, the first occurring in 1994.

IMPACT ON STUDENTS: By meeting AAAHC's high standards, UHS can reassure students and parents about the outstanding quality of care patients receive at UHS.

2004-2009 Strategic Plan

The strategic planning team sought input not only from the entire UHS staff, but also from all of our constituencies: students, parents, Student Affairs colleagues, other Penn State employees and retirees, and health care professionals in the community. Focus groups, written surveys, and electronic communications helped to identify and prioritize the health care needs of students. The UHS vision and mission statements were re-written to emphasize our student-centered approach to service delivery and our leadership role in the broader Penn State community. New goals and objectives were also identified (see page 4). The UHS staff developed five-year action plans for implementing these objectives.

IMPACT ON STUDENTS: By listening carefully to the views of students and other constituents and implementing recommended changes that are compatible with our mission, the UHS Strategic Plan connects the needs of students to our organizational goals and objectives.

New Health Services Building

UHS worked with Penn State administrators and student leaders to develop preliminary plans for a new health services facility. UHS staff finalized a funding model and served on the University site selection committee to identify potential sites for the new building.

IMPACT ON STUDENTS: A modern health care facility will benefit students in many ways, including quality of care and the efficiency and range of services.

Other significant achievements:

- ◆ UHS engaged in over 20 quality improvement initiatives, both in clinical and non-clinical areas; these are all part of our ongoing efforts to improve the quality of care, services, and programs to benefit our patients. (See page 11.)
IMPACT ON STUDENTS: Students will benefit from improved quality of care and efficiency of services.
- ◆ UHS updated existing software and installed new programs in several areas in order to improve

services, capabilities and efficiencies. (See page 14.)

IMPACT ON STUDENTS: Although these improvements may not be visible to students, they will still benefit from these improved efficiencies in service delivery.

- ◆ UHS initiated several social norming campaigns on important health issues for college-aged students in order to positively impact lifestyle choices. Topics included alcohol poisoning, responsible drinking, tobacco use, smoke pollution, eating disorders, sexual assault, and HIV/AIDS. (See page 10.)

IMPACT ON STUDENTS: Social norming will positively impact the lifestyle choices of students and help them become better decision-makers about their own health.

EDUCATIONAL PROGRAMMING AND ACTIVITIES

Community-Focused Activities and Programming

Collaboration is the cornerstone of UHS health education, prevention, and promotion programs and activities. On a campus the size of Penn State, it is crucial to work closely with other University departments and area community organizations, as well as with students.

Health promotion and education programs complement UHS medical services for acute and chronic health problems. Helping students get healthy and stay healthy is accomplished through numerous education and public health initiatives. These efforts address issues relevant to college-aged students, including tobacco, smoke pollution, alcohol, sexual health, HIV/AIDS risk reduction, eating disorders, body image, and sexual assault.

Some of the community-focused activities include:

- ◆ UHS community health educators are active participants in The Partnership: Campus and Community United Against Dangerous Drinking, which continued its efforts to change the Penn State and community culture to reduce high-risk behavior in consumption of alcohol.
- ◆ UHS community health educators collaborated with the Centre County Tobacco Prevention Coalition in tobacco prevention, cessation, and education efforts; joint efforts included increasing awareness about tobacco smoke pollution and reducing smoking among Penn State students.
- ◆ UHS clinical staff and health educators continued to partner with numerous community agencies to provide a coordinated response to assist Penn State students who are sexual assault victims. UHS provides forensic exam services through the Women's Health Department.
- ◆ UHS community health educators collaborated with the Pennsylvania Department of Health to offer HIV services at no cost to Penn State students through the HIV Testing and Counseling Program. UHS also participated in World AIDS Day initiatives both on- and off-campus.
- ◆ UHS Physical Therapy staff hosted a continuing education course on the Penn State campus for physical therapy and athletic training professionals from Penn State, the community, and other areas of Pennsylvania
- ◆ The *Health Line*, which appears every Tuesday in *The Daily Collegian*, generated many queries from students on topics ranging from sore throats to premature balding to sexually transmitted infections. Written by UHS staff members, *HealthLine* also includes a Question & Answer sidebar.
- ◆ The *Family HealthLine*, an electronic newsletter, was sent to more than 4,000 family members of University Park students. The goal of this communication tool is to keep families informed about UHS services and policies and update readers about important health issues.
- ◆ Emergency Medical Services (EMS) staff taught a variety of courses, including general

first aid, CPR, and what to do until the ambulance arrives, to community members and to Penn State students.

IMPACT ON STUDENTS: Students can benefit greatly from community-focused activities and programs. They learn how to become responsible health care consumers. They learn about the benefits of healthy lifestyle choices. They learn that media images and/or students' perceptions of typical college behavior is not always accurate.

BASIC SERVICES

Clinical and Ancillary Services

UHS provided 60,736 in-person clinical care appointments and telephone advice and triage to 22,703 students. General Medicine and Urgent Care provided 47,776 appointments. Of those, clinicians (physicians, physician assistants, and nurse practitioners) handled 33,874 appointments and nurses conducted 13,902 appointments. Women's Health provided 12,960 appointments. The Immunization Allergy and Travel Clinic handled 3,529 appointments.

Ancillary Services (lab, x-ray, physical therapy, and ambulance) provided 22,620 units of service. The pharmacy filled 141,615 prescriptions total (54,948 for students and 86,667 for PSU faculty and retirees).

The staff of the Physical Therapy Department treated 3,766 patients this year and 697 new evaluations for a total of 4,813 patient encounters.

Walk-in Immunization Clinics provided immunizations for flu, meningitis, and Hepatitis B. Services offered by appointment at the health center included immunizations for diseases such as Hepatitis B, TB, and meningitis, and vaccines required for travel abroad, such as yellow fever and typhoid immunizations. UHS worked in cooperation with Housing to provide ample opportunities for incoming students to receive the Menomune vaccine as mandated by the state. We held clinics on Summer and Fall move-in days for all students living in university housing, and provided immunizations by appointments at our General Medicine Department.

University Ambulance Service provided 814 ambulance calls. EMTs provided emergency services to thousands of spectators and participants at 319 special events at Penn State. 509 patients were seen at special events last year, up from 477 the previous year. 240 patients were seen at football games alone. EMS also worked with the Penn State Environmental Health and Safety Department to implement the University Policy addressing the purchase and use of Automated External Defibrillators (AEDs) across the University. The Office of Emergency Medical Services has reviewed and approved AED plans at 15 campuses (including University Park) and 3 remote sites from 36 departments for 76 AEDs.

Office of Health Promotion and Education (OHPE)

OHPE provided 1,775 individual prevention contacts with students. 1,021 students participated in health promotion and education workshops.

The Alcohol Intervention Programs (AIP1 and AIP2) provided a total of 1,090 student encounters. 568 students were seen in AIP1 and 174 were seen for 3 visits each in AIP2.

The HIV Testing and Counseling Program provided 2 visits each to 233 students. HIV Testing and Counseling was offered offsite, including testing at the LGBT Student Resource Center and Multicultural Resource Center.

Thirty-four S-Plan student volunteers mentored 65 African American and Latino students new to Penn State. S-Plan conducted 7 programs that encouraged cultural understanding, educated students about sexual health, sexual assault, and substance use. S-Plan worked with a Muslim student organization, CAPS, smoking prevention programs, African American student groups, and student government.

Seventeen returning HealthWorks peer educators and 14 new peer educators conducted 74 programs and outreach presentations to facilitate better college student health, reaching students in a way that only other students can. These accomplishments helped students to make more informed decisions about their health, develop healthier living patterns, receive support for healthy choices, and address their social concerns that often lead to poor health choices.

OHPE and interested students launched two networking efforts. Staff and student volunteers developed a BacchusGamma Chapter on campus which will serve as an umbrella organization to streamline efforts to improve student health and to facilitate cooperation among Greek student organizations, student government and OHPE. They also worked with the USG Health Committee to conduct the first annual Health Networking Reception for student organizations. More than 50 student organizations were represented.

A new model for peer health intervention was developed and students were trained in the new approach. Beginning in Fall 2004, cross-trained peer educators will provide services in HIV, AIP2 and Smoking Cessation. This should result in improved quality of service by increasing volunteer retention and providing additional experiences and leadership development opportunities for students.

OHPE developed a brochure, *The Health of Penn State Students: Results of a Student Survey 2003*, describing the results of TheHealthSurvey which was conducted in January 2003.

Social “Norms” Marketing Campaigns

OHPE conducted and evaluated several social marketing campaigns. Social norms marketing is based on the belief that if students have accurate perceptions (based on facts, not media images or false beliefs) about what their peers are doing, they will be less likely to feel pressure to engage in unhealthy behaviors. UHS campaigns focused on topics such as legal issues, sexual assault, alcohol poisoning, responsible drinking suggestions, and responsible hosting suggestions. The planning, development, and implementation involved staff and students.

- ◆ Tobacco - OHPE worked with Penn State Students for Tobacco Awareness on tobacco education initiatives, including tobacco smoke pollution, a homecoming float, and a smoke-free bar initiative. They completed and distributed county-wide anti-tobacco public service announcements and held the first *Quit and Win* Great American Smoke-Out in November. They received external funding for Tobacco Cessation and Tobacco Advocacy initiatives and collaborated with WPSX and University Publications on anti-tobacco projects. All of these activities resulted in increased program awareness and services.
- ◆ Nutrition – In addition to the Nutrition Clinic, which served 219 students, OHPE also sponsored an eating disorder awareness campaign which included bus ads, Public Service Announcements and press releases.
- ◆ HIV/AIDS - The HIV/AIDS Risk Reduction Project was led by a group of students, with support from OHPE. New and innovative outreach initiatives included: mini-grants offered to other student groups, LateNite Penn State activities, education and condom distribution, evaluation using a web-based survey and focus groups, and a prevention marketing campaign titled: *HIV/AIDS: Don't Ignore It. Prevent It*. The group co-sponsored a World Campus Film Premiere of *A Closer Walk*.

- ◆ Alcohol – Working closely with The Partnership: Campus and Community United Against Dangerous Drinking, UHS health educators continued efforts to reduce high-risk behavior in consumption of alcohol. The “big-headed people” posters and ads can be found in multiple locations around campus.

Student Insurance Office

The Student Insurance Office (SIO) had 24,173 total contacts with students and families between July 2003 and June 2004. This included 12,490 telephone contacts and 11,683 in-person contacts. The SIO staff collected, processed, and adjusted 1,131 insurance premiums, processed 351 waivers for international students and 346 declination forms. SIO improved the coordination of services between UHS and Penn State’s student insurance plan (MEGA).

Information Systems

The Information Systems Department (IS) responded to more than 3,900 help requests from UHS staff, installed more than 50 new computers, including new servers for the Laboratory and Pharmacy systems, and either conducted or assisted with delivering numerous group training sessions for UHS staff.

An overview of clientele use of all services is listed in [Appendix 1](#).

Quality Improvement

More than twenty Quality Improvement (QI) projects involving clinical and non-clinical teams were either completed, continued, or launched in 2003-2004. The goals of these QI initiatives were to:

- ◆ Improve patient care and services
- ◆ Improve patient satisfaction with services
- ◆ Improve/protect fiscal resources (decrease wasteful spending and prevent loss of UHS income)

QI initiatives included:

- ◆ Educating students about the fact that antibiotics are not effective on viral infections and decrease prescription rates for bronchitis and viral upper respiratory infections. (This QI project was begun in 2002. The 2004 data shows a continued decrease in unnecessary antibiotic prescriptions.)
- ◆ Improving the management of patients with urinary tract infections, regarding diagnosis, urine cultures, and duration of antibiotic treatment
- ◆ Improving the management of patients with asthma
- ◆ Improving the consistency of evaluation and treatment of patients with iron-deficiency anemia
- ◆ Increasing the frequency of screening female patients for chlamydia as part of their regular preventive health visit.
- ◆ Improving wait times for initial Physical Therapy evaluations.
- ◆ Improving documentation of Physical Therapy services by peer reviews of all PT staff.
- ◆ Eliminating unnecessary “holds” on the accounts of students who are inadvertently identified as “non-compliant” patients re: Prematriculation Immunization Requirements
- ◆ Improving the internal process for scheduling Alcohol Intervention Programs (AIP1 and AIP2) by requiring students to call the AIP appointment phone number. This change resulted in an improved quality of interaction and reduction of delays and or distractions for those scheduling appointments.

Surveys and Studies

The UHS Operations Team also conducted a Time Study to measure how long it took patients to move through the UHS system from check-in to check-out. The goal was to evaluate how UHS could improve the “thru-time.”

The average over-all thru-time for patients who had to go to x-ray and/or lab was 56.39 minutes. The average thru-time for students who did not receive any ancillary services (such as lab and x-ray) was 50.61 minutes. Patients with no appointment (walk-ins) waited 20 minutes longer than patients who had appointments.

A Penn State Pulse Survey in November 2003 measured student use of UHS services, student satisfaction, and student knowledge of UHS services. 1,095 students participated in the survey which was conducted by phone and on-line. The majority (60%) had used UHS services; of those who used UHS, they came to UHS an average of 4.5 times. More than 2/3 of those who used UHS services (71%) were satisfied with UHS services, 20% were neutral, and 9% were not satisfied. Regarding "wait time": 61% of those with appointments reported they waited 15 minutes or less to see the clinician. Patients with appointments waited less time than those without appointments. Of the 40% who did not use UHS services, 85% said it was because they did not need care.

Communications and Marketing

New informational brochures were created for the Office of Health Promotion and Education, Physical Therapy Services, Nutrition Clinic, Men's Health Visits, Student Health Insurance, Pharmacy Services for Students, and Pharmacy Services for Penn State employees and retirees enrolled in the Maintenance Drug Prescription Program. A "Quick Reference Guide to UHS Services" was distributed to the Residence Life staff, including all resident advisors (RAs). The newsletter "Your Penn State Health Connection" was provided to more than 7,000 parents of incoming students attending FTCAP (First-year Testing, Counseling and Advising Program). A flyer about UHS services and the importance of patient confidentiality was mailed at the start of the 2003 fall semester to all students living on campus. Bookmarks listing reliable Web sites for 16 pertinent health topics were made available to UHS patients; the project was developed by a marketing student intern in response to students' growing dependence on the Internet as a primary source of health information.

HUMAN RESOURCES

UHS continued to emphasize three areas of human resources:

- ◆ Efficient use of staff time and talents
- ◆ Professional development opportunities for all staff members
- ◆ Improved staff diversity

Efficiency

UHS continued efforts to maximize the contributions of existing staff by cross-training staff in several functional areas, rotating employees among various functions to ensure that all staff members become proficient in the specialized tasks in their departments. Departments also reviewed position requirements and duties, determining several areas where staff could be reassigned to 9-month contracts, positions could be "collapsed" due to changes in processes, and night shift staff could be switched to day shift eliminating differential pay expenses. All of these efforts resulted in a more efficient use of staff. A part-time Physical Therapist position was added due to demand for services.

Professional Development

UHS offered 64 in-house continuing education programs with a total attendance of more than 2,000. Clinical staff attended 18 Continuing Medical Education credit programs and 17 Pennsylvania State Nurses Association programs. There were 27 noncredit programs, including topics such as What's Your Stress Profile, Valuing Diversity/Sexual Orientation in the Workplace, Affirmative Action, and Know Your Numbers. The majority of the UHS staff participated in the Student Affairs and UHS Professional Development Days.

Workstation ergonomics was also emphasized throughout UHS. Due to the implementation of the electronic medical record, time spent at the keyboard continues to increase. In an effort to prevent related injuries, UHS facilitated the evaluation and improvement of work stations for all staff. Ergonomically sound equipment purchases for clinical staff included keyboards, pull out keyboard trays, flat panels, chairs and other items to improve employee workstation ergonomics.

Updating clinical and technical skills was a major focus. Two more clinicians received Sexual Assault Forensic Training (SART). Several clinicians who are considered “key users” of HealthMatics, the electronic medical record system, attended an in-depth training program in North Carolina. Community health educators and student peer educators participated in Pennsylvania Department of Health Certification Training as HIV Prevention Counselors. Information Systems staff attended numerous training programs on computer security, HIPAA privacy issues, and implementing the upcoming switch to a new Penn State ID number.

The UHS Rewards and Recognition Program continued to reward outstanding performance and improve staff morale. The committee sponsored several special events including quarterly breakfast gatherings where recognition is given to individual staff members and employee teams nominated for outstanding performance by colleagues.

Diversity of Staff

Improving the diversity of our staff is an ongoing challenge in recruitment and retention. The Strategic Plan for 2004-2009 addresses this need. The UHS staff continued to attend and participate in a variety of diversity programs offered by UHS and Penn State.

Staff assistants in the OHPE coordinated Toys for Tots and food drives for the State College Area Food Bank. UHS staff was very generous in giving back to the community.

Several UHS employees were recognized for their achievements ([Appendix 7](#))

FACILITIES, SPACE AND EQUIPMENT IMPROVEMENT

The major facilities news from the past year is that UHS will have a new building scheduled for completion in 2008. With support from student leaders and Penn State and Student Affairs administrators, UHS has made great progress toward a modern health care facility. A financial plan for the new building has been finalized; it provides for UHS to fund 2/3 of the cost and students to fund 1/3 of the cost. UHS staff continues to participate in the planning phase, including site selection.

However, until the new building is completed, space issues continue to be a major problem for UHS, affecting the workflow, efficiency, patient privacy, and convenience in nearly every department of the building. In some areas such as clinical services, this space shortage and poor configuration has profound impact on the quality of services to customers. UHS continues to work with the space we have in the hopes of improving care and service delivery to our students.

Other areas improved include:

- ◆ The student waiting area in the Office of Health Promotion and Education was made more student-friendly by maximizing existing space and reassigning office space.
- ◆ Workstation locations in Health Information Management were redesigned to provide more privacy for

- students who are completing forms. The new office layout improves confidentiality and security.
- ◆ The Health Information Management Department also converted file rooms to office space and centralized some of their functions.
 - ◆ The UHS Clinical Lab purchased an Immunochemistry Analyzer TOSOH A1A 600 II to perform thyroid functioning tests. This equipment cut costs to outside agencies, improved accessibility for students and clinicians, and vastly improved turn around time for test results.
 - ◆ Select EMS equipment was upgraded and/or replaced as part of our ongoing modernization plan. Two Automated External Defibrillators (AEDs) were replaced with newer versions and the purchase of a traction splint increased flexibility in treatment options.
 - ◆ External and internal signage in Ritenour Building was improved; extraneous information was deleted and new signs were created using the UHS wordmark.

COMPUTER INFORMATION SYSTEMS AND DATA ANALYSIS

The Information Systems (IS) staff continued to assist all UHS departments with updating equipment and software, resulting in improvements in services, capabilities, and efficiencies.

Major IS efforts included:

- ◆ Auditing and constantly monitoring the security of HealthMatics, the electronic medical record system, and all UHS medical records.
- ◆ Upgrading HealthMatics, including identifying data integrity and accuracy, and enabling clinicians to have direct access to digital images imported into HealthMatics.
- ◆ Scanning more than 10,000 student health history forms and past medical records, eliminating the need to track, update, and purge paper records.
- ◆ Retrieving health information from the Mount Nittany Medical Center Medi-tech system.
- ◆ Participating in the University-wide planning efforts for the conversion from student social security numbers as the “official” identifier to a new Penn State ID numbering system. Because UHS is involved in sending health care bills to some government agencies and private insurance companies, the switch is very complicated and involves a two-track system.
- ◆ Upgrading the Nutritionist Pro Database, making the nutrition assessment easier for student interventionists and dietitians in the UHS Nutrition Clinic.
- ◆ Importing ultrasound images into HealthMatics from the new UltraSound equipment in Women’s Health.
- ◆ Installing a new server for Microsoft SMS Client System Management Services and updating anti-virus software on all UHS computers.

The EMS Department also improved scheduling software, with the goal of EMS staff viewing real-time schedule updates from their home computer.

The UHS external Web site continued to be “tweaked” with the goal of making it more user-friendly and easier to navigate, as well as providing helpful information for specific customers.

RELATIONSHIP TO CAMPUSES

UHS continued to provide consultation and support to health services at 17 different locations. Assistance included:

- ◆ Consulting services to administrators, clinicians, nurses, regarding medical and nursing staff and patient care issues.

- ◆ Assisting candidate interviews and selection process for a new campus health nurse at Worthington/Scranton.
- ◆ Guiding campus health services in their responses to University community illness problems, such as the Hepatitis A outbreak in Western Pennsylvania.
- ◆ Hosting the annual three-day meeting of college health nurses.
- ◆ Facilitating arrangements for vaccine immunization services for students at four campus locations.

EMS worked with Environmental Health and Safety to implement University policy addressing the purchase and use of Automatic Emergency Defibrillators. This included reviewing and approving AED plans at 15 campuses and 3 remote sites for a total of 76 AEDs across the University.

TRENDS AND FUTURE DIRECTIONS

The goals developed as part of our Strategic Plan (see page 4) are based on extensive research and discussions of the trends and directions of health care and higher education. Changes in health care delivery and funding, medical technology, higher education funding, student demographics, and the fluctuation in supply and demand for health care professionals will continue to challenge our ability to provide quality health care services in a cost-effective manner. Added to these “market facts” are the changes in students themselves—their needs seem more complex every year. As a student-centered health service, our greatest challenge is meeting the health care needs of students while at the same time providing efficient, cost-effective services.

Even as we move ahead with plans for a new building, space issues in Ritenour Building are still a top priority for all of our health service operations. Making the most efficient use of the space we currently have will remain a daily challenge.

Health insurance for our students continues to be a pressing issue for UHS. Our General Medicine, Women’s Health, and ancillary departments will continue to work closely with the Patient Services and Finance Department and the Office of Student Health Insurance to educate students and parents about the need for appropriate coverage, as well as exploring the possibility of establishing relationships with some third party payors. We will continue to review the two Penn State student health plans (the MEGA plan for undergraduate and graduate students, and the Graduate Assistants and Graduate Fellows Health Insurance Plan for graduate assistants and fellows), including discussions of students’ need for coverage of the cost of prescriptions for chronic medical problems.

All UHS departments will continue to focus on improving the quality of care, especially through QI projects (such as those listed on page 9). Clinical services plans to develop a peer education program for international students with latent TB (positive TB chest but normal chest x-ray). Another goal is to increase the number of cross-departmental QI activities to address patient care and client services issues that involve multiple departments.

The need to provide additional services, such as dental and vision services for students and family medicine services for dependent children and spouses is uncertain. However, space limitations at this time prevent adding services in any of our current clinic sites. As we begin to plan for a new building, we will need to fully evaluate the importance and feasibility of providing these services.

While we have made great advancements in information systems and technology over the past few

years, there are additional services we need to explore. Possible advances include: further integration and interfacing of our existing systems; Web-based services for patients, including scheduling, secure communications with clinicians, and laboratory test results; on-line bill paying via PSU's e-Commerce web site; replacement of the existing practice management system; and replacement of the existing phone system with Voice-over-IP. The new PSU ID conversion program will require an organization-wide commitment. HIPAA requirements will continue to need attention.

EMS is examining the expansion of Advanced Life Support (ALS) capabilities for special event operations in order to provide improved care capabilities in accordance with current practice standards. Special events continue to consume our staffing capabilities. We are currently recruiting local EMS personnel to assist with our staffing needs, while trying to increase the number of student staff. We have increased the training program in the classroom with some limited success, but the student staff still needs additional hands-on time.

UHS community health educators will continue to develop initiatives targeting high-risk drinking, tobacco use, smoke-free environments, eating disorders, and condom use. We will continue to use health promotion strategies that have enhanced our ability to affect student health awareness, such as: social norms marketing campaigns (including tobacco and alcohol); cross-training peer interventionists; using an environmental management model as a tool for addressing student health concerns; and improving the ability of the Cross Cultural Health Program to inform international students about health resources. Our hope is to continue to assess the outcomes of our initiatives in terms of actual health behavior and to be more creative in our ability to reach students.

We will continue our efforts to educate students, families, and PSU employees about UHS services and how to access them. The graphic identity used on all our materials in the last two years has reinforced our name and professionalism. We will pursue a positioning campaign focusing on the caliber of our clinicians using both print and electronic media. We will create additional interactive pages on the UHS Web site, as well as update the patient education information.

UNIVERSITY HEALTH SERVICES

Appendix 1

Clientele Use of Services 1995-6 through 2003-2004

Provider Visits	FY 2003- 2004	FY 2002- 2003	FY 2001- 2002	FY 2000- 2001*	FY 1999- 2000	FY 1998- 1999	FY 1997- 1998	FY 1996- 1997	FY 1995- 1996
General Medicine/Urgent Care Clinicians	30,798	28,062	30,570	35,326	35,398	34,527	31,848	34,169	33,199
General Medicine/Urgent Care Nurses	12,071	14,007	14,477	10,896	12,432	12,101	11,612	11,017	8,645
Immunizations and Allergy Desensitization	3,529	3,189	4,024	5,752	10,735	9,024	10,406	10,473	10,262
<u>East Halls Clinic</u>	851	1,278	1,722	1,885	2,231	2,339	2,122	2,082	2,789
Women's Health Department Clinicians	6,395	5,978	5,861	6,283	6,200	5,974	5,615	5,469	5,674
Women's Health Department Nurses	2,895	2,975	3,256	3,398	3,146	2,678	2,345	1,976	1,619
<u>Shulze Hall Clinic</u>	475	756	693	605	690	640	701	818	712
Occupational Health Department Physician & Physician Assistant	#	410	1,823	1,626	1,575	1,305	1,533	1,303	1,182
Occupational Health Department Nurse	#	165	994	938	1,356	1,139	1,098	1,056	951
Total	57,014	56,820	63,420	66,709	73,763	69,729	67,280	68,344	65,033
<u>Ancillary Services</u>									
Clinical Laboratory - Patients	14,239	12,693	13,071	13,186	12,422	12,394	11,333	11,479	10,879
X-Ray Department - Patient	2,906	2,551	2,699	2,763	2,833	3,009	3,098	3,028	2,972

* Statistics may not be all encompassing due to changes in software data methodology during the year.

Occupational Health is no longer part of University Health Services.

UNIVERSITY HEALTH SERVICES

Appendix 1 (Continued)

Clientele Use of Services 1995-6 through 2003-2004

Provider Visits	FY 2003-2004	FY 2002-2003	FY 2001-2002	FY 2000-2001	FY 1999-2000	FY 1998-1999	FY 1997-1998	FY 1996-1997	FY 1995-1996
Physical Therapy *									
Patients	3,766	3,646	3,508	3,289	4,641	3,485	1,116	4,126	3,235
Treatments	4,778	4,655	4,423	5,413	6,393	4,349	3,600	10,174	8,127
New Patient Evaluations	697	650	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Pharmacy									
Student Prescriptions	54,948	48,167	50,281	60,839	57,230	68,202	57,072	58,720	56,110
MPDP Prescriptions	86,667	82,658	82,107	79,162	80,127	76,081	60,048	49,330	46,478
Ambulance Trips	814	805	747	665	620	619	589	602	608
Preventive Health Services:									
Women's Preventive Health Visits	2,640	2,678	2,587	2,757	2,598	2,399	2,283	2,110	2,130
ECP Visits	555	430	418	388	409	328	217	219	161
ECP Phone Calls	249	183	248	258	174	32			
Men's Preventive Health Visits	527	361	412	425	574	539	399	460	n/a
Health Educator Preventive Health Visits	N/A	N/A	N/A	N/A**	123	201	200	157	n/a
General Medicine Telephone Advice Calls	17,664	18,463	23,200	21,851	26,613	23,226*	16,857	15,309	n/a
Women's Health Telephone Advice Calls	4,790	5,032	5,775	3,267	5,474	4,978	n/a	n/a	n/a
General Medicine Phone Test Results	N/A*	N/A*	N/A*	N/A*	2,575	4,715	4,938	5,198	n/a

*General Medicine Phone Test Results are now combined with advice line calls.

** Health Educator Preventive Health Visits are no longer being done.

UNIVERSITY HEALTH SERVICES
Appendix 2
Community/Professional Activities

<p>Margaret Spear, MD (Director) American College Health Association Mid Atlantic College Health Association Surveyor & Accreditation Committee Member, Accreditation Association for Ambulatory Health Care Member, Board of Directors Centre County Women's Resource Center</p> <p>John Bianco, EMT-P Mount Nittany Medical Center Medic 24 National Association of EMS Educators EMS Education Committee for the Pennsylvania Emergency Health Services Council (PEHSC) At Large Delegate for PEHSC</p> <p>Jill Buchanan, CRNP Member, Community Outreach Committee, Penn's Valley Conservation Association</p> <p>Wes Cartwright, EMT-P University Ambulance Service delegate to the Centre County Ambulance Association (CCAA) CCAA representative to the Centre County Radio Advisory Board CCAA representative to the Centre County Fire Chiefs Association</p> <p>Linda Eck, PT National Athletic Trainers Association (NATA) National Strength Conditioning Association (NSCA)</p> <p>Lorraine Flaherty, PT American Physical Therapy Association (APTA), Orthopedic Section</p> <p>David Garrison, MD Diplomat of the American Academy of Family Physicians</p> <p>Melanie Harris American Registry of Radiologic Technologists</p>	<p>Simon Holowatz, M. Ed. Association of Professional Latinos</p> <p>Lynn Huddell, PA-C Member, Pennsylvania Society of Physician Assistants Member, American Academy of Physician Assistants</p> <p>Patricia Irwin, RN, MSN Central Pennsylvania Association for Health Care Risk Management (CPAHCRM) CPAHCRM Board Member</p> <p>Shirley Irvin National Association Medical Staff Services (NAMSS)</p> <p>Dave Jones, EMT-P Alternate delegate to the Pennsylvania Emergency Health Services Council (PEHSC) Member, Board of Directors, PEHSC Delegate to the Seven Mountains EMS Council</p> <p>Susan Kennedy, PhD Fellow, American College Health Association/Mid Atlantic College Health Association State College Area School District: Drug Free Schools and Community Advisory Committee Co-Chair, American College Health Association Committee on Standards of Practice for Health Promotion in Higher Education Consulting Editor, Journal of American College Health State College Public Issues Forums Planning Committee World Food Day Committee</p>
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UNIVERSITY HEALTH SERVICES

Appendix 2 (continued)

Community/Professional Activities

<p>Kristin Klinefelter American Society of Clinical Pathologists Clinical Laboratory Management Association American Society of Clinical Laboratory Scientists</p> <p>Candace Kugel, CRNP Volunteers in Medicine, State College, PA Shoulder to Shoulder – Cincinnati, OH Board Member, Midwives for Midwives, Antigua, Guatemala Conference planning committee member for PA Office of Rural Health, Migrant and Immigrant Health in Rural PA Conference, 2004</p> <p>Linda LaSalle, PhD American College Health Association Member, Board of Directors, Central Pennsylvania Trips for Kids</p> <p>Alicia Lentz, RN Pre-natal classes instructor for Family Health Services: You and Your Baby Program</p> <p>Nora Maginnis, CRNP LGBT Support Network</p> <p>Melissa Martilotta, MS, RD American Dietetic Association Pennsylvania Area Dietetic Association</p> <p>Jo Anna Moyer, CRNP Centre County Domestic and Sexual Violence Task Force Coordination Team sub-committee</p> <p>Carol Myers, CRNP Mid State Nurse Practitioner State Conference Planning Committee</p>	<p>Ellen J. Nagy College and University Public Relations Association of Pennsylvania</p> <p>Janet Nelson, MT American Society of Clinical Pathologists</p> <p>Kathy Petroff, RN Certified clinical facilitator, American Lung Association Member, Sigma Theta Tau International</p> <p>Leslie Ramish, MT American Society of Clinical Pathologists</p> <p>Diana Ramos, M.Ed. Centre County Tobacco Prevention Coalition</p> <p>Sydney Sayers, MT American Society of Clinical Pathologists</p> <p>Linda Shorey, CRNP Centre Wildlife Care, Volunteer, Lemont, PA</p> <p>Nicole Shunk, RHIT American Health Information Management Association</p> <p>Lisa Witt, RHIT American Health Information Management Association</p> <p>Joanne Weyman Penns Valley School District, Board of Directors Central Susquehanna Intermediate Unit, Board of Directors</p>
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UNIVERSITY HEALTH SERVICES

Appendix 3

Academic Appointments

Harold Basset, DO

Clinical Faculty, Department of Internal Medicine, College of Medicine

John Bianco, EMT-P

Affiliate Instructor, Department of Kinesiology
College of Health and Human Development

Hattie Faison, MD

Clinical Faculty, Department of Internal Medicine, College of Medicine

Robert Heinbach, MD

Clinical Faculty, Department of Internal Medicine, College of Medicine

Dave Jones, EMT-P

Affiliate Instructor, Department of Kinesiology
College of Health and Human Development

Susan Kennedy, PhD

Adjunct Assistant Professor, Biobehavioral Health, College of Health and Human Development

Candace Kugel, CRNP

Clinical Faculty, University of Cincinnati School of Nursing

Melissa Martilotta, MS, RD

Clinical Nutrition Instructor, Department of Nutrition, College of Health and Human Development

Yvonne Patterson, MD

Clinical Faculty, Department of Internal Medicine, College of Medicine

Ed Rosick, DO

Clinical Faculty, Department of Internal Medicine, College of Medicine

Margaret E. Spear, MD

Professor of Medicine, College of Medicine
Adjunct Professor, Health Policy and Administration,
College of Health and Human Development

Phyllis Stackhouse, CRNP

Adjunct Instructor, School of Nursing, College of Health and Human Development

UNIVERSITY HEALTH SERVICES

Appendix 4

Formal Instruction

Course	Instructor/s	Credits
AAAS 496 – S-Plan Independent Study	Simon Holowatz	1-3
Basic Trauma Life Support (fall 2000)	David Lindstrom, John Bianco, Dave Jones, Wes Cartwright	0
BBH 320 - HealthWorks	Courtney Kaufman	1
BBH 332 – Sexual Peer Health Education	Diana Ramos	2
BBH 440 – Principles of Epidemiology	Edward Rosick	3
BBH 497	Holli Kubalak, Joan Donahey	3
BBH 497B - HIV Test Counselor Alcohol Intervention	Diana Ramos	1-3
CPR Update for Instructors (summer 2001)	Dave Jones, John Bianco	0
Emergency Vehicle Operations Course (fall 2000)	David Lindstrom, John Bianco, Wes Cartwright	0
Kinesiology 295B (summer 2003, fall 2003, spring 2004) Careers / Observations in Kinesiology	Linda Eck, Lorraine Flaherty, Amy Dodd, Sally Bondurant, Ellen Jankowski	1
Kinesiology 395B (summer 2003, fall 2003, spring 2004) Leadership Practicum Experience	Linda Eck, Lorraine Flaherty, Amy Dodd	1
Kinesiology 395I	Robert Heinbach, MD	3
Kinesiology 403 – Emergency Medical Technician (EMT) (fall 2003 & spring 2004)	David Lindstrom, John Bianco, Dave Jones	4
Kinesiology 403 – EMT- Obstetrical Emergencies (fall 2003, spring 2004)	Bob Heinbach, MD	4
Kinesiology 495B (summer 2003, fall 2003, spring 2004) Field and/or research practicum in Kinesiology	Linda Eck, Lorraine Flaherty	6-12
Kinesiology 496 - Independent Study (fall 2000)	David Lindstrom	3
Kinesiology 498A – CPR Instructor (spring 2004)	John Bianco, David Lindstrom	1

Kinesiology 498B – EMS Asst. Instructor (fall 2003, spring 2004)	John Bianco, David Lindstrom	1
Kinesiology 498C – EMS Teaching Practicum (fall 2003, spring 2004)	John Bianco, David Lindstrom	1
Kinesiology 498D – CPR Instructor (fall 2003)	John Bianco, David Lindstrom	1
Kinesiology 498D – EMS Seminar (spring 2004)	John Bianco, David Lindstrom	1
Kinesiology 498E – EVOC (fall 2003)	Wes Cartwright, David Lindstrom	1
Kinesiology 498F – UAS Operation Practicum	Dave Jones, David Lindstrom	1
Kinesiology 498G – EVOC (spring 2004)	Wes Cartwright, David Lindstrom	1
Kinesiology 498I – Introduction to UAS Operations (spring 2004)	Dave Jones, David Lindstrom	1
Nursing 415 – Clinicals	Betty Ann Milliron, Alicia Lentz, Sheila Pollock, Shelley Haffner, Theresa Conway, Mary Pat Griffin, Elaine Hazi, Kathy Petroff, Diane Smith, Jane Tornatore and Rebecca Toranto	4
Nutrition 350 - HealthWorks	Melissa Martilotta	2
Nutrition 496 - Independent Study	Melissa Martilotta	1-3
Nutrition 400 - Nutrition Counseling	Melissa Martilotta	3
Nutrition 401 – Nutrition Counseling Practicum	Melissa Martilotta	1
Nutrition 375 – Nutrition Peer Education Training	Melissa Martilotta	2
Nutrition 497 B/C – Dietetic Internship	Melissa Martilotta	1-9
Advanced Cardiac Life Support	John Bianco, Dave Jones	0
Emergency Vehicle Operators Course	Wes Cartwright	0

UNIVERSITY HEALTH SERVICES
Appendix 5
Papers Delivered, Published and Presentations

Amy Dodd

Stretching at the Computer, presentation to all UHS staff, Spring 2004

Lorraine Flaherty

Evidence based practice in the PT management of recurring low back pain, Annual College Health Medical and Nursing Program, May 2004

Back Pack Safety, presented to all UHS Staff

John Bianco, EMT-P

Connections: Athletic Event EMS Hometown Venues, EMS Update 2004, Emergency Medical Service Institute, Seven Springs Mountain Resort, March 2004

Emergency Incident Rehabilitation, EMS Update 2004, Emergency Medical Service Institute, Seven Springs Mountain Resort, March 2004

Pennsylvania State EMS Evaluator, EMS Update 2004, Emergency Medical Service Institute, Seven Springs Mountain Resort, March 2004

Instructor Update Good Provider. Good Instructor?, EMS Symposium 2004, EMMCO West, Sharon, PA, March 2004

Simon Holowatz, M.Ed.

Cultural and Linguistic Competence, University Health Services, October 2003

Leading Causes of Death for African Americans, Kappa Alpha Psi Fraternity, October 2003

Special Health Concerns of LGBT People, LGBT Mentor Program – December 2003

How to Use Language Line, University Health Services, December 2003, January 2004

Social Change, Social Change Week 2004 Panelist, January 2004

Diverse Populations and Diverse Health Risks, Health Matters, Penn State, February 2004

Susan Kennedy, PhD

Standards of Practice for Health Promotion in Higher Education, American College Health Association Annual Meeting, June 2004

Performance Indicators for Program Assessment and Professional Self-Development, American College Health Association Annual Meeting, June 2004

Candace Kugel, CRNP

Midwives for Midwives Guatemala: A Traditional Birth Attendant Model and Much More, International Health Medical Education Consortium Conference - Antigua, Guatemala – February 2004

Care of Women in Poor Countries, International Health Conference, University of Cincinnati, Cincinnati, Ohio, September 2003

Domestic Violence Issues in a Mobile Population, Presented at Migrant and Immigrant Health in Rural Pennsylvania, State College, PA, September 2003

Midwifery in Honduras: A Survey of Practices and Needs of Rural Parteras, and Caring and Sharing, AWHONN 2004 Convention, Tampa, FL, June 2004

Training of Traditional Midwives in Honduras, American College of Nurse, Midwives 49th Annual Meeting, New Orleans, LA, June 2004

Migrant Farmworker Health: An Introduction, 12th Annual PA Rural Health Conference, State College, PA, June 2004

Linda LaSalle, Ph.D.

Tobacco Prevention and Cessation Initiatives at Penn State, U.S. Department of Education's Alcohol and Other Drug Abuse and Violence Prevention Annual Meeting, October 2003

The Nittany Lion and Penn State Students Against Big Tobacco, BACCHUS and GAMMA National Tobacco Symposium on Young Adults, April 2004

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Appendix 5 (continued)

Papers Delivered, Published and Presentations

<p>Diana Ramos, M.Ed.</p> <p><i>HIV Prevention Counseling, University Health Services, 2004</i></p> <p><i>Treating Tobacco Use and Dependence, UHS Clinical Practice Guidelines, 2003</i></p> <p><i>Penn State's Tobacco Cessation Program, (BACCHUS/GAMMA) National Tobacco Symposium on Young Adults, April 2004</i></p> <p><i>The Penn State Tobacco Cessation Program, Shippensburg University – May 2004</i></p> <p><i>How to Use Language Line, University Health Services, February 2004</i></p>	
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UNIVERSITY HEALTH SERVICES

Appendix 6

University Committees and Advisory Boards

Committee/Advisory Board	UHS Representative(s)
<p>Vice President's Council for Campus/College Student Affairs Advisory Board to General Clinical Research Center Member, Penn State Coalition to Address Relationship and Sexual Violence Chair, Commonwealth Education System Health Services Advisory Board Member, Student Insurance Committee</p>	<p>Margaret E. Spear, MD</p>
<p>Pre-Physical Therapy Club Advisor</p>	<p>Linda Eck, MSPT, ATC</p>
<p>Student Insurance Committee Penn State College Health Services Advisory Board</p>	<p>Doris Guanowsky</p>
<p>Schreyers Honor College Diversity Committee</p>	<p>Simon Holowatz, M.Ed.</p>

University Biomedical Institutional Review Board Penn State Colleges Health Services Advisory Board Commonwealth College Health Services Quality Assessment Committee	Pat Irwin, RN, MSN
University Park Campus Community Partnership	Susan Kennedy, PhD
Co-chair, The Partnership: Campus and Community United Against Dangerous Drinking Advisor, Penn State Student for Tobacco Awareness Chair, AIP Evaluation Team	Linda LaSalle, PhD
PSU Commission for LGBT Equity, Co-chair Support Network Board member, Hope for Kids	Nora Maginnis, CRNP
Chair, Student Insurance Advisory Committee	Julie Martinez
Nutrition Consultant for Housing and Food Services Alternate member of University Regulatory Compliance Committee for Human Subjects	Melissa Martilotta, MS, RD
Penn State Coalition to Address Relationship and Sexual Violence	Jo Anna Moyer, CRNP
Student Affairs Web Development Team Student Affairs Newsletter Team	Ellen J. Nagy
AIP Evaluation Team	Diana Ramos, M.Ed.
South Hills School of Business and Technology Health Information Technology Program Advisory Board	Lisa Witt, RHIT

UNIVERSITY HEALTH SERVICES

Appendix 7

Awards and Recognition

University Health Services Outstanding Employee Award	Recipient
August 2003	Ellen Nagy (Marketing)
December 2003	Stephen Tingley, MD (General Medicine)
March 2004	Lynn Huddell PA-C (General Medicine)
May 2004	Linda LaSalle (Office of Health Promotion and Education)
University Health Services Essence of Excellence Award	Recipient
August 2003 For work in a clinical setting	Chet Evans, RPh (Pharmacy)
August 2003 For work in a non-clinical setting	Lisa McClain (Facilities)
Team Work Award	Recipient
August 2003	Sexual Assault Response Team
December 2003	Flu Vaccination Clinic Team
March 2004	Health Information Management Department
May 2004	Professional Development Committee

