Baseline Data Establishment

CAMPUS-WIDE SURVEY
Options are currently being explored with regards to national surveys such as the American College Health Association’s National College Health Assessment and the Core Institute Survey for implementation on campus. Such a survey will be launched in Spring 2016 and will become the baseline measure for health and wellness-related behavior for the campus. It will be important to gather campus-wide data from students to: 1) engage in needs assessment efforts, 2) provide normative data for a variety of behaviors, and 3) examine trends of student behavior. An incentive structure will be established in compliance with Business Affairs Office requirements in order to best promote student participation in the survey.

POINT AND CLICK DATABASE
In data gathering for this Annual Report, a variety of reports were generated in Point and Click after quite a bit of trial and error with the software. Unfortunately, a significant amount of data was inaccessible due to limitations with the current Point and Click components. With the addition of the Open Communicator component (expected in Summer 2015), however, greater ease of data gathering is expected. For instance, all fields in the Healthy History form (which is required of all new students) will become searchable with the installation of Open Communicator. The data gathered for this 2014-2015 Annual Report will serve as baseline data in terms of the students who utilized services for the year. Subsequent analysis after the installation of Open Communicator will provide additional campus-wide baseline information (such as the number of tobacco smokers on campus and what percentage of Oregon Tech students have been tested for STI’s).
ISHC Component Assessment

**MEDICAL CLINIC**

Assessment of ISHC medical services will be divided into two categories: Patient Satisfaction and Quality Control.

**Patient Satisfaction**

Students will complete a “Check-out Procedure” at the close of each medical appointment which will provide the opportunity to provide feedback about their visit. This will be a new procedure, as there is currently no Check-Out process in place. Students will be directed to the reception area at the close of each medical appointment, where they will be provided a tablet which is electronically connected to a confidential Qualtrics survey. Potential items to be included on the Patient Satisfaction Survey would be:

- Do you feel that your concerns were “heard” during the visit?
- Do you believe that your issue was addressed thoroughly?
- Did you feel respected during your visit to ISHC?
- Did you feel comfortable asking questions of the provider?
- If so, were all your questions answered fully?
- Would you recommend ISHC to other students?
- Would you return to ISHC in the future, if needed?

Students will also be notified that they will receive a follow-up e-mail in at the end of the month.

**Quality Control**

At the close of each month, all of the students who have completed medical appointments at ISHC that month will receive a second Qualtrics survey via e-mail which addresses Quality Control issues. Potential items to be included on the Quality Control Survey would be:

- Was your medical issue this month resolved by your ISHC provider or did you have to seek additional care?
  - If additional care sought, was there something else the ISHC medical staff could have done to better address your issue?
- How happy were you with the level of care provided by your provider?
- Did you have any additional questions after you left your appointment?
  - If so, did you contact ISHC for additional information?
- Did you have any issues getting prescription medications filled which were prescribed by the ISHC provider?
Do you have any questions about any charges or fees associated with your visit this month?
  o If so, would you like someone to contact you to clarify this for you?
  o Were potential charges/fees discussed with you during your visit?

Did you require a referral this month as a result of your medical issue?
  o If so, how helpful were ISHC staff in assisting with that referral?

By follow-up with each student who seeks medical assistance on a monthly basis, the ISHC is more likely to obtain more specific and timely feedback regarding the quality of care provided by the medical clinic.

**HEALTH PROMOTION**

As detailed in the Health Promotion section of this report, assessment efforts within Health Promotion will center upon the Choose Well campaign. Student behavior change will be measured by follow-up to specific events to determine the extent to which student implement healthy behaviors following campus health promotion events. Impact of the larger Choose Well promotional campaign will be measured with items on the annual campus-wide survey (such as brand recognition and impact upon engaging in the global Choose Well behaviors).

**MENTAL HEALTH SUPPORT**

Assessment with regards to mental health support will be divided into two primary categories: Quality Control (Forward Progress Towards Mental Health) and Client Satisfaction (via Counselor Rapport).

**Quality Control (Forward Progress Towards Mental Health)**

Options are currently being explored with regards to assessment instruments which would measure forward progress towards positive mental health objectives. Although change cannot always be expected within the counseling setting, it is reasonable to expect that students would experience a reduction of emotional distress and an increase in coping skills along the course of the therapeutic process. Instruments exist that measure such variables across time.

Currently, all students who come for counseling complete a behavioral functioning rating scale at their initial session, but this is not a standardized instrument and is limited in its scope. Similarly, students who come to ISHC in crisis (or who have a history of depression or anxiety) complete the PHQ-9, which assess their risk level in terms of anxiety and depression. However, this type of instrument is not suitable to measure forward progress towards positive mental health; it is better suited for monitoring acute functioning. A few
instruments have an established relationship with the Point and Click software, such as such as CCAPS provided by the Center for Collegiate Mental Health (CCMH). Subscales on CCAPS include: Depression, Generalized Anxiety, Social Anxiety, Academic Distress, Eating Concerns, Family Distress, Hostility, and Substance Use. Since Point and Click is a “Certified CCAPS Distributor”, this could work well in terms of being embedded in the program and easily accessible to ISHC staff. These are being given priority during the review process, but the downside could be the need to create another amendment with Point and Click, which has proven difficult in the past.

Ideally, each student who came for counseling would complete such a Quality Control instrument at intake (or during the initial session of the term), mid-way through their treatment, and at the last session of each term. Given that most students average 7 sessions with ISHC (as detailed in the Mental Health Support section of this report), it would make sense to have the students complete the progress instrument at sessions one, three, and seven.

Client Satisfaction (via Counselor Rapport)
Because the majority of students who engage in counseling tend to visit ISHC frequently (once a week or more often), it does not make sense to have them complete a satisfaction survey at the end of each session as will be the case with medical appointments. As such, a number of instruments are being currently explored which measure variables such as rapport with counselor, how effective the counselor’s methods seems to be for that client, and personal “fit” with the counselor’s style. This type of measure is most appropriate mid-way through treatment, as it takes time to develop the therapeutic relationship (or not). Thus, it would make sense for students to complete this following session four and at the close of their last session for the term. The procedure would be the same as detailed for the Medical Clinic Patient Satisfaction Survey, in that the student would complete the instrument via a tablet-based Qualtrics survey when Checking-Out from their session.

This year, a change in case assignment was made in order to better match clients with ISHC counseling staff. Previously, whichever counseling staff was available at a time which was convenient for the student was the one who facilitated the intake session and (the majority of the time) would then continue working with that student in counseling. However, the new procedure that was established this year is that any counseling staff can complete an intake, but during case consult each week the counseling staff discuss new clients and determine who would be the best “fit” for each in terms of style, approach, and primary issue. As such, it is hoped that counselor rapport will be rated highly in the coming year, as students are better matched with counselors.
Approach

Given that baselines for many variables of interest are yet to be established, the majority of goals for the coming year will be process-oriented. For instance, once campus-wide norms are established via the campus-wide survey and Open Communicator (in Point and Click), a needs assessment can be conducted in order to determine potential outreach target areas; reasonable associated outcome goals can then be established. Additionally, once patient satisfaction and quality control baselines are established, outcome goals will be created with regards to these areas for the following year. For each goal below, one or more measurable objectives have been established.

**PROCESS GOALS**

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>GOAL</th>
<th>OBJECTIVES</th>
</tr>
</thead>
</table>
| Assessment | Establish methods to assess each component within the ISHC in order to better determine effectiveness. | **Objective 1: Health Promotion** – Conduct follow-up surveys for at least 3 health promotion events to examine the extent to which students implement healthy behaviors as a result of attending outreach events.  
**Objective 2: Counseling** – Collect counselor rapport measures for at least 75% of all counseling clients seen at ISHC at both intake and the final session for the term.  
**Objective 3: Medical** – Collect patient satisfaction surveys for at least 75% of all medical appointments completed at ISHC. |
| Marketing | Establish a comprehensive marketing plan in order to increase awareness of ISHC services among the campus community. | **Objective:** Implement the promotional aspect of the Choose Well campaign to the degree that at least 60% of students report on the annual campus survey that they recognize the campaign branding. |
## ISHC: GOALS FOR 2015 - 2016

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>GOAL</th>
<th>OBJECTIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staffing/Infrastructure</td>
<td>Continue solidifying an integrated approach to health and wellness within the ISHC.</td>
<td><strong>Objective:</strong> Promote a unified sense of staff during the annual retreat as measured by 90% of staff members indicating that they believe team cohesion is continuing to improve at the <em>Very Much</em> to <em>Much</em> level.</td>
</tr>
<tr>
<td>Procedures</td>
<td>Finalize the procedures involved in processing Health History forms via Open Communicator.</td>
<td><strong>Objective:</strong> Work with Point and Click to resolve “glitches” which occur when using Open Communicator as evidenced by 100% of new student Health History forms being accurately processed into the system by the close of the Winter term.</td>
</tr>
</tbody>
</table>
| Outreach                      | Increase campus outreach efforts which include medical and counseling staff.                                      | **Objective 1:** *Sexually Transmitted Infection (STI) testing* – Encourage STI testing among Oregon Tech students by subsiding the cost of labwork during Collegiate Sexual Responsibility Week and the week of World AIDS Day; to be measured by at least 10 students getting tested each of those two weeks.  
**Objective 3:** *Mental Health Screening* – Conduct at least 2 mental health screening events such as Depression Screening, Alcohol Screening, Anxiety Screening, or Eating Disorder Screening; to be measured by completion of at least 20 screening forms at each event. |
<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>GOAL</th>
<th>OBJECTIVES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outreach</td>
<td>Increase campus outreach efforts which include medical and counseling staff.</td>
<td>Objective 1: <em>Urinary Tract Infection (UTI)</em> – Conduct at least 1 successful outreach event which focuses upon UTI prevention as evidenced by at least 75% of student participants committing to implement one UTI prevention behavior into their lifestyle.</td>
</tr>
<tr>
<td>Outreach</td>
<td>Provide health promotion events which has demonstrated positive results.</td>
<td>Objective: Continue to offer stress relief to students by bringing Angels in Whiskers therapy dogs to campus during Dead Week each term; success to be measured by 85% of participants who indicate reduced stress as a result of attending the event.</td>
</tr>
</tbody>
</table>