1. **Support Services Report Template**

**Report Info**

Name of the person completing this report: Andrea Wilson / Flora Salas  
Title of the person completing this report: Director / Admin Analyst  
Supervisor/dean reviewing report: Andrea Wilson, Director  
Service: SHCS - Administrative Services  
Division/College: Administration and Finance  
Name of second reviewer (if necessary): Brad Wells, Vice President

3. **Mandated Service**

*Link to Scoring Rubric*

1.1 Please indicate below if any aspect of the service is legally mandated by any of the following and provide the relevant reference.

Executive Order: 943, 1053, 877

Provide a brief explanation, if necessary, in <60 words.

943: Policy ensures appropriate oversight of all university health services through accessible, high quality medical care, public health prevention programs, educational programs and services.
1053: Policy ensures appropriate oversight of all university mental health services to include accessible, professional mental health care; counseling, outreach and consultation programs; educational programs and services.
877: Compliance restrictions regarding disclosure of protected health information.

4. **Importance of Service**

Briefly describe the service in terms of its primary function(s) and purpose(s) using <120 words

Provide strategic and operational guidance and administrative support for services provided in SHCS. Allocate resources to meet vision, goals, and objectives. Oversight of fully accredited outpatient clinic staffed by Board Certified Physicians, and licensed Nurse Practitioners, Nurses, Counselors, and Health Educators. SHCS offers basic medical care for most illnesses and injuries and various elective services. Oversight to provide the highest quality of care through an integrated approach to patient care and coordination care including monitoring the medical information exchanged including diagnosis, medications, laboratory results and sharing of medical and mental health notes in compliance with HIPAA regulations

*Link to Scoring Rubric*

2.1 Who are the primary receivers of this service? (Please enter the percentage of each user group that is relevant)

Students: 97%  
Faculty: 1%  
Administrators/staff: 1%  
Colleges/departments: 1%  
Total: 100%

*Link to Scoring Rubric*

2.2 Please indicate the direct or indirect impact of the service on students for each of the three University Action/Student...
Impact Areas listed below (for example processing financial aid applications would be direct impact on students while managing utility services would be indirect).

<table>
<thead>
<tr>
<th>Direct Impact on Students</th>
<th>Indirect Impact on Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-college (helping students to enter the system)</td>
<td>✔️</td>
</tr>
<tr>
<td>During college (helping students succeed while they are at Cal State East Bay)</td>
<td>✔️</td>
</tr>
<tr>
<td>After college (helping students establish meaningful lifework and be socially responsible contributors to society)</td>
<td>✔️</td>
</tr>
</tbody>
</table>

Provide a brief narrative (<60 words each) explaining your selection for each area.

<table>
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<th>Evidence submitted to support the chosen selection (&lt;60 words for each)</th>
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</tbody>
</table>

**Link to Scoring Rubric**

2.3 Applying the four choices presented below, please indicate the consequence of NOT having this service on each of the actions in the left hand column.

<table>
<thead>
<tr>
<th>4 - Service provides evidence of direct impact in more than one area</th>
<th>3 - Service provides evidence of direct impact in one area</th>
<th>2 - Service provides evidence of indirect impact in more than one area</th>
<th>1 - Service provides evidence of indirect impact in one area</th>
</tr>
</thead>
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After college (helping students establish meaningful lifework and be socially responsible contributors to society) Students are better contributors to society because they have learned to navigate the healthcare system as a result of administrative services provided. Their personal development in understanding expectations for services provided and requirements will benefit them in a professional environment and meeting their own healthcare needs.

### Link to Scoring Rubric

#### 2.4 Alignment with Shared Strategic Commitments

**How does this service contribute to or align with any of the eight Shared Strategic Commitments (SSC) listed below?**

<table>
<thead>
<tr>
<th>Reinforce academic quality through open-minded inquiry, innovative teaching, engaged learning, and distinguished scholarship</th>
<th>If aligned or contributing, provide a description. (&lt;60 words for each SSC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enhance our inclusive campus, responding to the backgrounds and interests of our diverse community and promoting their academic, professional and personal development</td>
<td>Contributions to student academic and personal development include responding to campus needs as a resource to CARE team, TAT, Safety Committee, etc. Provide professional training opportunities to staff and campus community to enhance skills.</td>
</tr>
<tr>
<td>Serve students first, by expanding access and enhancing each student’s educational experience and prospects for success as a graduate and life-long learner</td>
<td>As a graduate, students are provided access to continue to utilize services for an additional quarter. Future success can be attributed when health and wellness needs are met first.</td>
</tr>
<tr>
<td>Foster a vibrant community through enriched student services and student life that support student engagement and learning</td>
<td>Helps students in achieving their academic and career goals by maintaining optimal health. SHCS shares responsibility with students for their physical and emotional well-being and for making informed, appropriate and healthy life choices. SHCS provides high quality, low cost health care that is responsive to student needs.</td>
</tr>
<tr>
<td>Contribute to a sustainable planet through our academic programs, university operations, and individual behavior</td>
<td>SHCS utilizes electronic medical records system and administrative services works within processes and procedures to maintain a paperless environment.</td>
</tr>
<tr>
<td>Continuously improve our efficiency, transparency, and accountability while practicing mutual respect, responsiveness, and collaboration across the University</td>
<td>Through a formal quality improvement program, and as an accredited organization, SHCS makes strategic efforts to improve efficiency, responsiveness through collaborations to improve programs, processes, and procedures.</td>
</tr>
<tr>
<td>Support the civic, cultural, and economic life of all communities in the regions we serve through partnerships that promote education and social responsibility</td>
<td>Participation and support of health and wellness programs with various departments, and education and training opportunities to support staff/faculty in working with students regarding social responsibility related to alcohol, tobacco and other drugs, and sexual health responsibility.</td>
</tr>
<tr>
<td>Demonstrate our continuing record of leadership and innovation in higher education, focused on 21st century skills, including science, technology, engineering, and mathematics (STEM)</td>
<td></td>
</tr>
</tbody>
</table>

### Link to Scoring Rubric

#### 2.5 How might the demand for this service change over the next five years? (Please choose one category below).

**Likely to increase**

*Provide a rationale for your choice (assumptions, impact of new policy, etc.) in <120 words.*

Student Health and Counseling Services has steadily seen an increase in services in the last two years. There was a 4.8% increase in the utilization of services from 2011/2012 to 2012/2013. As a result, this will require administrative support services and oversight to maintain, enhance, and review departmental needs to make decisions regarding effective programs, services, and
5. Quality of Service

3.1 Do you assess the quality of the service you provide?

Yes

If “Yes”, what benchmarks, best practices or measures of success, either internal or external, do you use to measure service quality (e.g., timeliness, accuracy, adequacy, meeting deadlines, satisfactory completion of assignment, etc.)? Please describe in <120 words. If no, please explain.

SHCS benchmarks services in comparison to all CSU student health centers on an annual basis. Quality is assessed according to national standards set by the Accreditation Association of Ambulatory Health Care (AAAHC). SHCS received a three year accreditation in 2012 through April 2015. SHCS received the highest rating of “Substantially Compliant” in the areas of Governance, Administration, Quality of Care, Quality Management and Improvement. Oversight in these areas include credentialing and privileging of all staff, peer review, and risk management. Additionally, an annual Patient Satisfaction Survey and annual staff survey to review programs/services/departments. A formal quality improvement program meets monthly to identify problems, develop studies to evaluate and improve, monitor the quality of care, perform benchmark activities, and measure performance.

3.2 During the last three years, have you adopted any measures to improve the quality of this service? Please describe in <120 words.

An administrative Quality Improvement study included addressing staff concerns to identify needs in the areas of personnel practices, communication gaps, and addressing staff concerns. The goal was to assess the changes in general practices, communications, staff/supervisor relationships and annual expectations and to assess the efficiency/effectiveness of various changes, activities, and impact in the general center, departmental area, and overall committee work. Majority of staff indicated an improvement in collaborations between departments, better communication, access to administration/management to address concerns. Staff felt their comments/concerns were addressed, felt more validated, appreciated, respected, and treated fairly. Improvements were made regarding setting clear expectations/goals and access to supervisor/mgmt to communicate concerns.

3.3 What idea(s) do you have for improving the quality of this service within existing resources (e.g. development of benchmarks, surveys, feedback, etc.)? Please describe your plan(s) in < 120 words.

Continued self-evaluation and review of programs and services, as well as policies and procedures. Continue benchmarking, patient satisfaction survey, and staff survey to monitor and identify needs.

3.4 What ideas do you have for improving the quality of the service if additional resources were provided. Please describe your idea(s) in <120 words.

Additional resources would allow for an increase in quality improvement opportunities and possibly funding to support more detailed data analysis to develop and articulate study data into a strategic plan with recommendations.

3.5 Do you use any formal or informal process to assess the level of satisfaction of the service users?
Yes, there is an annual Patient Satisfaction Survey as well as an annual Staff Concerns Survey to assess satisfaction of services and administration and oversight of overall and departmental services.

**Link to Scoring Rubric**

3.6 The university recently conducted a customer satisfaction survey for some services (results for this service are attached, if applicable). Do you have any comment or response to the results? Please describe in <120 words.

Student Health and Counseling Services was rated the overall top service for overall importance and quality on campus to students. This is a coordinated effort that all SHCS staff and personnel are focused on our mission and goals to provide and maintain students that are physically, mentally, and emotionally healthy. Optimal health and wellness services are an essential component to the retention and success to students academically, personally, and professionally. Administrative support and oversight is an essential component in making sure that departmental needs are met and that necessary supplies, services, vendor contracts, and in place and that personnel are probably trained, credentialed and privileged to provide high quality of services.

**Link to Scoring Rubric**

3.7 Do you have any formal or informal guidelines for personnel in your department regarding how to treat/interact with receivers of this service?

Yes

If yes, please describe in <120 words. If no, please explain

Guidelines are established through clear policies and procedures developed to meet accreditation standards for personnel expectations, mission, vision, and values. An orientation plan is in place and sets clear goals and objectives for personnel regarding expectations and requirements. Also, Medical Bylaws are available and reviewed to ensure that all patients treated in the facility receive quality health care. Additionally, staff are trained annually on confidentiality and quality of care. Also, as outlined in Patient Rights and Responsibilities, it outlines the expectations of services and personnel responsibilities. Additional personnel training include leadership development and training to support professional growth opportunities.

**Link to Scoring Rubric**

3.8 Does your service have annual goals (targets) of achievement regarding the quality of the service provided?

Yes

If yes, describe the annual quality goals (targets) and indicate if the service achieved those goals (targets). Please provide evidence, if possible, in <120 words. If no, please explain.

Annual goals are set through quality improvement studies that set performance goals for administration services. Goals are evidenced and available through meeting agendas, minutes, and QI studies submitted to evaluate processes and procedures. Goals are also set departmentally based on staff surveys, weekly 1:1 meetings with department supervisors, and oversight of various monthly committees to improve the quality of services/programs through the Disaster Plan Committee, Technology Committee, Website Committee, Student Health Advisory Committee, and Quality Improvement Committees.

**Link to Scoring Rubric**

3.9 Does your service have annual goals (targets) of achievement regarding the quantity of service provided?

Yes
If yes, describe the annual \textbf{quantity} goals (targets) and indicate if the service achieved those goals (targets). Please provide evidence, if possible, in \textless 120 words. If no, please explain.

Annual goals are set according to monthly and annual reports and evaluations completed of overall service and program outcomes. For example, an increase in psychiatry services may identify a need to hire additional support, and maximum or minimum utilization in one particular area may identify a need to increase or reduce services provided.

6. \textbf{Efficiency of Service (cost effectiveness)}

\textbf{Link to Scoring Rubric}

4.1 Using the spreadsheet provided for all employees in your department, please distribute salaries of individuals across all services provided to reach an educated or reasonable estimate of the cost of providing the service.

448524

\textit{Attach your allocated spreadsheet here.}

\texttt{Student Health Svc 2011-12 Expenses Reviewed 08-19-13.xlsx}

\textbf{Link to Scoring Rubric}

4.2 Using the spreadsheet provided, please distribute your department’s annual operating expenses across all services provided to reach an educated or reasonable estimate of the cost of providing the service.

617291

\textbf{Link to Scoring Rubric}

4.3 Using the spreadsheet provided, please distribute the square footage of work space across all services provided to reach an educated or reasonable estimate of the use of this resource.

1590

\textit{Attach your allocated spreadsheet here.}

\texttt{Space AF Stud Health Reviewed 08-19-13.xlsx}

\textbf{Link to Scoring Rubric}

4.4 During the last three years, have you adopted any measures to improve the \textbf{efficiency (cost effectiveness)} of providing this service (e.g. reducing salary costs, operating expenses or use of space, or increased output without increasing cost. Etc.)?

\textbf{Yes}

If yes, please describe the measures in \textless 120 words. If this is a new service introduced over the past three years, please indicate. If no, please explain.

Due to limited staffing in the SH&CS Administrative Support Department, we have been managing the Department's daily operations on Sharepoint. This process allows authorized users to copy, scan, modify and print documents from the computer on which they are working on. The intent in using Sharepoint was to assist the Administrative Support staff in storing the information they produce in a secure, accessible and structured manner. The electronic folders will mirror what we would do with the paper folders. This will help promote consistency, transparency and accessibility of documents within the department.

\textbf{Link to Scoring Rubric}
4.5 What idea(s) do you have for improving the efficiency (cost effectiveness) of this service within existing resources (e.g. restructuring, merging, outsourcing, ways to cut costs, technology, etc.)? Please describe those ideas in <120 words.

1. Use technology to convert highly utilize in-house forms to fillable forms and stored them on a shared drive such as Sharepoint or similar for staff to access. This process would cut down on the volume and cost of paper as well as the time to create and process them.
2. Implement the cashless process. Students will have the option of paying for their service with their Bay Card or SHCS will send charges electronically to the Cashiers Office to be uploaded on to their Financial Account. Charges posted can be paid either on line or at the University’s Cashiers Office. This will eliminate an Administrative Support Staff plus one escort to deliver the deposits on a daily basis.

Link to Scoring Rubric

4.6 What idea(s) do you have for improving the efficiency (cost effectiveness) of the service if additional resources were provided. Please describe your idea(s) in <120 words.

Higher usage of Electronic Medical Records software to improve communications with students and provide survey opportunities regarding services to analyze data and to determine increased/decreased needs for services and programs.

Link to Scoring Rubric

4.7 Do you have any plan(s) to improve the efficiency (cost effectiveness) of this service in the next 1 -2 years (e.g. reducing costs, increasing productivity, etc.)?

Yes

If yes, please specify whether these plan(s) involve reducing salary costs, operating expenses and/or use of space. Please describe your plan(s) in <120 words. If no, please explain.

Use technology to increase productivity and enhance services to our students. Research and maximize use of our Medicat and ProPharm software system to provide a more efficient system. Reduce the amount of paper generated, for example, creating electronic transactions sets, similar to paper Super Bills.

Link to Scoring Rubric

4.8 Please describe the estimated output for this service for fiscal year 2011-12, quantify if possible (e.g. volume, service tickets resolved, people serviced, appointments, etc.) in <120 words.

Total appointments/visits for all clinics = 16,630
Lab tests = 4,678
Radiology = 299

These services all require oversight and administrative support to support functionality, maintainance and monitoring vendor contracts, and that necessary supplies and services are in place.

7. Other

Link to Scoring Rubric

5.1 Are you aware of services similar to this one that are being provided by another department at CSU East Bay?

Yes

If yes, please provide a list of those departments. How are the services described here similar or different? Please describe in < 60 words.
The Department of Educational Psychology has oversight of Community Counseling Center (CCC). There are significant differences in services. SCHS Counseling Services serves the student population of the university in compliance with the Executive Order. The CCC serves the community outside the university. In addition, SHCS employs only licensed and pre-licensed post-master’s professional staff. The CCC is staffed by university students.

5.2 Is there anything unique or distinctive about your service? Please describe what is unique or distinctive in <120 words.

Per accreditation, administrative oversight in SHCS acts as the governing body that addresses and is fully and legally responsible for the operation and performance of SHCS. The governing body responsibilities include determining the mission, goals, and objectives, ensures that facilities and personnel are adequate and appropriate to carry out the mission, establishes an organizational structure and specifying functional relationships among the various components. In addition, the adoption of bylaws or similar rules and regulations for the orderly development and management of the SHCS. Administrative oversight and support is responsible for adopting policies and procedures necessary for the orderly conduct of SHCS, including the scope of clinical activities, as well as develops and maintains a policy defining all aspects of care.

5.3 Are there any additional things about this service that you would like the task group to know? Please describe/explain in <250 words.

The SHCS Quality Improvement Program is broad in scope and develops processes to identify important problems or concerns affecting quality of care, integrates peer review, risk management and quality improvement activities. QI studies evaluate and improve services, monitors important aspects of care including performing benchmarking activities, and establishing performance measures. QI coordinates and performs other quality improvement activities in support of program goals and communicates findings to the staff and to the governing body and documents all processes and outcomes. QI facilitates continuous improvement in SHCS.

Additionally, responsibility includes the development, implementation and oversight of the organization’s infection control and safety programs to ensure a safe environment of care. Adoption of policies/procedures to resolve grievances and external appeals, as required by state and federal law and regulations, establishing processes for the identification, reporting, analysis, and prevention of adverse incidents and ensuring consistent and effective implementation by developing a comprehensive reporting system.

Oversight of staff includes the responsibility of a personnel credentialing and reappointment process, applying criteria in a uniform manner to appoint individuals to provide patient care for the organization. Administration oversight and support approves mechanisms for credentialing, reappointment, and the granting of privileges, and suspending or terminating clinical privileges, including provisions for appeal. Administration makes the initial appointment, reappointment and assignment or curtailment of clinical privileges based on professional peer evaluation.

East Bay is one of very few CSU campuses to completely integrate Health & Counseling Services into one department with administrative oversight versus two departments with two directors.