

# WESTERN ILLINOIS UNIVERSITY BEU HEALTH CENTER



## ANNUAL REPORT 2010

July 1, 2009 – June 30, 2010

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Western Illinois University  
Division of Student Services  
Beu Health Center  
Annual Report FY 2010

**MISSION**

The mission of Beu Health Center is to enhance the educational process of the university through assisting students in the modification or removal of health-related barriers to learning by providing appropriate medical services and collaborative programming.

**ORGANIZATION**

Beu Health Center is an office within the Division of Student Services of Western Illinois University. The Health Center Director is responsible for overall supervision and executive management of the health services activities and reports to the Vice-President for Student Services. The Medical Chief of Staff is an Illinois licensed physician with certification from the American Society of Addictions Medicine, and provides medical oversight for the health center, reporting to the Director.

The Administrative Committee of the Health Center consists of the Health Center Director, Medical Chief of Staff, and the Assistant Director. This committee is responsible for the development and implementation of health center policy and procedure, as well as ensuring adherence to University policy and procedures.

**ACCREDITATION/LICENSING**

Beu Health Center has been nationally accredited since 1996 by the Accreditation Association for Ambulatory Health Care (AAAHC). This voluntary process provides an opportunity for the health center to measure its performance against national standards on quality health care. Beu Health Center was re-accredited by AAAHC for the period of August 2008- August 2011. More information about accreditation is available at [www.AAAHC.org](http://www.AAAHC.org).

The Beu Alcohol and Other Drug Resource Center, located in Seal Hall, is licensed by the Illinois Department of Human Services to provide ASAM Level 1 Adult Outpatient treatment, Early Intervention, DUI Evaluation and DUI Risk Education. Services are accessible for students to minimize disruption of academic pursuits.

Our laboratory is a moderately complex laboratory certified to perform tests as required by the Clinical Laboratory Improvement Amendment of 1988 (CLIA). The laboratory was re-accredited in March, 2010 by COLA, a physician lead organization that evaluates excellence in laboratory medicine and patient care. Compliance with standards was 100%. The laboratory was also awarded the COLA Excellence Award in Spring, 2010 for commitment to excellence in safety and patient care.

The annual re-certification inspection of the radiology department by the Illinois Emergency Management Agency was conducted in October, 2009 with no deficiencies noted.

The on-site pharmacy is licensed as an Illinois category V Retail Pharmacy, and has not been selected for inspection during FY 2009-10 by the Illinois Board of Pharmacy. However, licensure has been maintained per state regulations.

Physicians, mid-level practitioners, nurses, and allied health professionals are licensed in Illinois and credentialed in their respective professions.

### **PROGRAM DESCRIPTION**

Beu Health Center offers general primary care services including the diagnosis and treatment of acute and chronic medical conditions; limited psychiatric assessment and treatment; Level 1 treatment for alcohol and other drugs; physicals, gynecological exams, immunizations, allergy desensitization, and referrals. Ancillary services include x-ray, laboratory, pharmacy and health education services. During FY 2009-2010, 22,498 patient visits were made to the Health Center. The Health Center administers a self-insured accident and illness insurance program for eligible students, with approximately 5500 students enrolled in the program.

Services are provided 8:00 a.m. - 4:30 p.m. Monday through Friday by appointment. The Pharmacy is open from 8:00 a.m. – 12:00 a.m. and 1:00 p.m. – 5:00 p.m. Monday through Friday. The Health Center is closed on weekends, University holidays or other days that the University is closed. After hours emergency care is available at McDonough District Hospital, an accredited trauma center located in Macomb, Illinois. Our web site, <http://www.student.services.wiu.edu/beu/> provides additional information about our program.

### **ELIGIBILITY FOR SERVICES**

All full and part-time students assessed the health center fee are eligible to use the health center, including Spoon River Community College students living in WIU on-campus housing. Spouses or domestic partners of eligible students may also use the health center on a fee basis. Through a 1997 intergovernmental agreement with the Illinois Consortium of Student Health Programs, visiting students from member institutions that are eligible to utilize their school health services may receive services while visiting Western Illinois University. Emergency first aid is provided for all campus students, faculty, staff and visitors.

## **PROGRAM GOALS**

**GOAL 1:** Beu Health Center will provide high-quality, cost-effective, health and preventative services for eligible individuals.

**GOAL 2:** Beu Health Center will administer an Alcohol and Other Drug Resource Center providing ASAM Level 1 outpatient treatment.

**GOAL 3:** Beu Health Center will develop and implement a comprehensive Health Education and Promotion plan that addresses health priorities and risk factors of the student population.

**GOAL 4:** Beu Health Center will administer an affordable self-funded accident and illness insurance plan designed to insure appropriate access to health care for eligible students.

**GOAL 5:** Beu Health Center will collaborate with university and community partners to *engage students in programs that foster and reinforce wellness.* (WIU Strategic Plan Goal).

## **QUALITY MANAGEMENT AND IMPROVEMENT PROGRAM**

The purpose of the Quality Management and Improvement (QMI) program is to ensure quality of care and to promote effective and efficient utilization of facilities and services of Beu Health Center. Although efforts are led by the QMI Team, Quality Management involves all aspects of the organization and is not regarded as the sole responsibility of a single group. The Quality Management and Improvement program integrates three major areas of quality management: 1) Maintaining a Peer Review Program, 2) Promoting a Quality Improvement program that incorporates Quality Improvement Studies and Performance Benchmarking; and 3) Conducting a Risk Management program in conjunction with University policies.

### **Peer Review**

Peer review is an integral part of Beu Health Center's ongoing Quality Management and Improvement process. It contributes to clinical audit and other activities such as professional development, information collection for credentialing, service planning and evaluation. Peer review focuses on two areas of evaluation: A) clinical outcomes review and B) provider review of patient visit/clinical records. The overall purpose of peer review is to inform others about one's own practice in relation to that of the peer group. Peer review data is used as part of evaluating practitioner and allied health professional performance including the assignment of clinical privileges. During the 2009-2010 academic year, review of patient visit/clinical charts were conducted each quarter, with no serious deficiencies noted; individual concerns were shared with the practitioner involved. Health Care Practitioners initiated case study/clinical outcome review (cases of concern, unusual diagnosis) as part of the quality improvement process.

### **Quality Improvement Studies**

The Quality Improvement Program is a continual process designed to assess both the quality of service and the quality of care, or the degree to which health services for patients and the WIU population increase the likelihood of desired health outcomes and are consistent with current professional knowledge. The total operation of the health center is considered when assessing quality, and incorporates not only clinical aspects, but the administrative, fiscal, environmental and support services necessary to achieve high quality services. During FY2010 there were 9 quality improvement studies completed as follows:

- Reducing Patient No-Show Rate
- Documentation of LMP on X-rays
- Documentation of Mechanism of Injury on X-rays
- Credit Hours vs. Health Center Usage
- Telephone Usage (Peak Hours) Study
- PPO Reconciliation of Provider Discounts
- Improving High-Risk Influenza Rate
- Paper Towel Utilization
- Reducing "No ECC" on Pap Tests

Three follow up studies were completed on:

- Staff Influenza Vaccination Rate
- Student Influenza Utilization Rate
- College Immunization Rate

### **Patient Satisfaction Survey**

An annual patient satisfaction survey was conducted during Fall, 2009. Results indicated that students surveyed felt that Beu Health Center and its staff are well-regarded as an organization, but needs some improvements in terms of decreasing wait times for lobby and exam rooms and increasing efficiency in patient flow. Complete survey results are available upon request at Beu Health Center. A patient flow study was conducted during Spring, 2009 to identify potential areas to improve efficiency. Areas identified as needing improvement are patient check-in and check-out. We are currently in the process of implementing an electronic check-in which will reduce congestion at the front desk and allow for easier check-out. A follow up study will be conducted to ensure that patient flow has improved.

### **Benchmarking activities**

Numerous benchmarking activities conducted during FY 2010 provided opportunities to compare our performance with other populations and practices and included:

- ACHA Pap Test and STI Benchmark Survey Spring, 2010
- Live Free Smoke Free Universities Tobacco Survey
- U.S. Department of Education's Higher Education Center for Alcohol and Other Drug Abuse and Violence Prevention. Spring 2009
- CORE Survey, Spring 2010
- Illinois College Immunization Benchmarking
- ICSHP informal surveys on clinical and operational issues
- ICSHP Sinusitus Benchmarking Study, Spring, 2010

### **Risk Management**

Risk management activities included safety drills, incident management investigations, training, regulatory and self-inspections. All incidents/unusual events were monitored for trends and corrective action taken where appropriate.

## **PROFESSIONAL DEVELOPMENT**

Ongoing education is not only a required part of professional licensing, but is considered a critical part of staff development throughout the health center. During FY 2010, two days were devoted to group staff development activities as well as monthly all-staff meetings throughout the academic year to keep staff informed of current issues affecting college health. Topics presented at group staff development included:

- FERPA/HIPAA/State Law
- Electronic Medical Records updates
- Exposure Control Plan for Bloodborne Pathogens
- Safety Sharps Annual Evaluation
- Safety Training
- CPR/AED
- H1N1
- Exposure Control Plan for Airborne Transmission of TB
- Ethics
- Sexual Harassment
- Sexual Assault Resource Team

Staff received specialized in-service training in:

- ACLS Training
- Building Emergency Coordinator Training
- Campus Connect Suicide Prevention Train-the-Trainer
- Threat Assessment Team Training
- NPLEx -National Precursor Log Exchange Training
- Pharmacy Technician Training
- MDH Clinical View EMR Training
- PCI Training
- Pap Test
- Anemia
- Affordable Care Act

Individual staff members were provided professional development stipends to attend outside seminars and workshops and other continuing education opportunities (e.g. self-study courses) that were relevant to college health practice and organizational development. Due to budget and travel constraints, more on-line and distance learning was incorporated this year. Dr. Sujata Karkare was re-certified by the American Board of Internal Medicine 2010 – 2019.

## **STUDENT LEARNING AND DEVELOPMENT**

Beu Health Center supports student learning and development in accordance with the WIU Strategic Plan. Our mission includes minimizing health related barriers to academic learning, which is accomplished through individual health counseling and the provision of population-based health programming. The health center also provides several opportunities for student skills and leadership development as follows:

- Students Talk/Health Education 210
- Certified Peer Educator Training: 11 students were trained and received certification as Peer Educators through the BACCHUS/GAMMA Network.
- B.A.C. Squad (Battle Alcohol Consequences) graduated 7 peer educators as a new prevention initiative.
- Three student employees were employed in immunization compliance and health education.
- Four graduate students completed assistantships/internships in the Alcohol and Other Drug Center and Health Education.
- Athletic training students from the WIU Kinesiology Department completed clinical rotation with Beu physicians.
- Four medical assistant students completed clinical rotations at Beu through a cooperative agreement between WIU and Carl Sandburg Community College.
- One Clinical Laboratory Science student interned in laboratory

### **UNIVERSITY AND OTHER COLLABORATIVES**

The health center staff participated in a variety of campus and other collaborative initiatives during FY 2010 including:

- Director Harris served on the WIU Institutional Review Board, WIU ADA Committee, WIU Emergency Consult Team, WIU Emergency Planning Committee, WIU Threat Assessment Team, McDonough County Pandemic Influenza Planning Committee, Sexual Assault Resource Team, the Institutional Review Board and the Eagle View Community Health Systems Advisory Committee.
- Administrative Nurse Birch served on the Sexual Assault Resource Committee.
- Staff nurse Barb Slater conducted monthly inspections of campus day care and PACT Headstart.
- Staff nurses Barb Slater and Denise Edwards conducted CPR/first aid classes for physical plant employees and academic advisors.
- Staff Physician Karkare served as medical advisor for the Bella Hearst Diabetes Center, The Eating Awareness Coalition, the McDonough District Hospital Diabetes Outreach Program, the McDonough County Tuberculosis Sanitarium Board and the Institutional Review Board.
- Health Education Coordinator Hairston-Jones serves on the McDonough District Hospital Community Outreach Committee, and completed a 5 year term on the Illinois Society for Public Health Education, and Past President of ISOPHE.
- Staff participated for the third year in the Big Pink Volleyball Tournament to raise money for the Susan G. Komen Foundation.

- Staff designed and constructed Beu's first homecoming float, "Help the Beu Wipe Out the Flu" emphasizing handwashing and H1N1 prevention.
- Beu Health Center participated in "Adopt-a-Soldier" B Battery, Afghanistan.
- Additionally Beu Staff commit numerous hours of community service with organizations like The Salvation Army, Red Cross, Boy Scouts, YMCA, Big Brothers and Sisters to name a few.

## **ADMINISTRATION HIGHLIGHTS**

H1N1 pandemic, staffing shortages, the university's cash flow, and healthcare reform were a few of the issues that topped FY 2010. Beu Health Center's response to these challenges was acknowledged by being nominated and selected as the Division of Student Services Spring 2010 Top Flight Team.

### **Financial Summary**

The Health Center is a self-funded division of the Student Services Division in that it does not receive direct financial support from the University's general revenue fund. Of the \$2.7 million operating budget for FY 2009, 68% is derived from the student health center fee that is assessed with tuition for eligible students. Minimal fees are charged for office visits and medical procedures, laboratory tests, x-rays, prescription drugs and durable medical goods. State funding is limited to categorical funding for tobacco risk reduction. Indirect support is received through the University for services including, but not limited to, building services, physical plant, payroll, accounting, information technology, security and human resources.

Although we do not receive general revenue funds, our operations have been affected by the delay in state payments to the university. Spending has been limited to immediate operational needs only. We continue to conserve spending, limit travel and search for cost-cutting measures. A no-show fee was implemented this year and has proven to be effective in reducing no-show appointments from 9% to less than the national average of 5%.

The Frank Beu Fund is a small foundation account available to the health center to offset services for students with a financial need. During 2009-2010, a total of \$2,480.50 was charged for transportation services for medical appointments, medical care and sexual assault medical services.

### **Medical Records**

The Electronic Medical Records committee continued working on enhancing our Electronic Medical Records systems. Multiple training sessions were held to keep users informed of system updates and features. Procedures were developed to document No Show, Missed, and Canceled appointments for better tracking of utilization. Electronic correspondence letters and referrals were developed, and chart audits were performed for quality assurance and improvement activities. Representatives of the committee serve on the regional Health Information Exchange initiative for our region in Illinois.

Beu Health Center has been granted access to McDonough District and OSF St. Francis hospital clinical view to access patient data and improve continuity of care for Beu patients receiving services at these facilities.

### **Immunization Compliance**

A follow-up study conducted on the WIU Illinois College Immunization Compliance indicated that the percentage of immune WIU students (95.8%) slightly exceeded last year's rate (95.6%) as well as the state universities' benchmark (84%) as reported by the Illinois Department of Public Health.

### **Emergency Planning and Preparedness**

Beu Health Center has played an active role in emergency response and preparedness activities at WIU, and in the community. The health center is represented on the WIU Emergency Operations Planning Team, WIU Emergency Consultation Team, and the McDonough County Pandemic Planning committee.

## **CLINICAL SERVICES HIGHLIGHTS**

### **General Medicine**

The clinical staff includes physicians, a contracted psychiatrist, advance practice nurses, a physician assistant, registered nurses, licensed practical nurses and medical assistants.

The academic year began with the Health Center taking the lead in preparing WIU for the likely onset of a pandemic. This was accomplished through the planning and implementation of a university wide tabletop exercise in collaboration with the WIU Risk Manager, Mercer County Health Department/Illinois Department of Public Health. Keynote speaker was Anita Barkin, director of the health center at Carnegie Mellon University, who has gained national recognition in pandemic planning in higher education.

Beu volunteered to become an H1N1 provider through the Illinois Department of Public Health in order to ensure that students, faculty and staff had access to H1N1 vaccine. Over 2000 doses of vaccine were provided through various locations across campus – in addition to 1500 doses of seasonal influenza vaccine. Several night clinics were conducted in residence halls to make it easier for students to receive a vaccination. Through targeted outreach efforts the vaccination rate among high-risk students (e.g. those with diabetes, asthma, heart disease) increased from 40% to 85%, exceeding the Healthy People 2010 goal.

This was the 4<sup>th</sup> year of CDC flu surveillance, and monitoring was increased from weekly reporting to daily. We saw a dramatic increase in influenza-like illness by October, 2009. Clinic visits for fall increased by almost 1100 visits – nearly 13,000 in total, mostly due

to H1N1. This resulted in additional stress to our system. We were not able to see all students requesting appointments, and relied on phone-triage to allocate appointments. Despite inadequate facilities to segregate ill students and lack of exam rooms, we were able to see the most acutely ill students and those most at risk of complications. The laboratory implemented rapid influenza in-house testing to assist in the diagnosis of influenza.

Beu collaborated with UHDS, SDO, Sodexo, Division of Student Services and the Office of the Provost to develop policies and protocols to assist ill students. Every ill student was contacted by a nurse for a wellness check - often times this meant afterhours and weekend follow up.

Numerous presentations were made to various student and faculty/staff groups to educate our WIU community about H1N1, the importance of handwashing and other preventative measures. The extra work of planning/preparedness, getting the seasonal flu and H1N1 shots out in a timely manner, increased surveillance activities, and the prevention education significantly reduced the impact of H1N1 pandemic influenza on our institution.

### **Psychiatric Services**

In cooperation with the University Counseling Center (UCC) and McDonough District Hospital, we have continued to provide students with on-campus access to a psychiatrist. We are exploring telemedicine with the Iowa City Veteran's Administration as an option for improving access to psychiatry and psychology services for student veterans.

An Eating Disorders Treatment Team consisting of Beu Health Center, University Counseling Center and the WIU Dietetics Department was implemented in the spring, to provide better case management for individuals diagnosed with an eating disorder.

## ANCILLARY SERVICES HIGHLIGHTS

### Laboratory

Beu Health Center laboratory is a moderately complex laboratory accredited by COLA, a physician lead organization that evaluates excellence in laboratory medicine and patient care. Our laboratory received the COLA Laboratory Excellence Award, which is the organization's highest commendation.

This year marks the first year of a collaborative with the Clinical Laboratory Sciences program at WIU to assist students in preparation for competitive entrance into professional clinical laboratory science schools.

New items added to the laboratory menu include:

- Rapid Influenza A/B testing
- Sickle cell testing

### Pharmacy

The on-site pharmacy is licensed as an Illinois category V Retail Pharmacy, and has not been selected for inspection during FY 2009-2010 by the Illinois Board of Pharmacy; however, licensure has been maintained per state regulations. Prescriptions written by Beu health care providers may be filled at the on-site pharmacy or filled at outside pharmacies. We continue to fill prescriptions from outside physicians providing the medication is contained in our formulary.

Pharmacy activities:

- ~ Upgraded to the NRx pharmacy management system
- ~ Upgraded the pharmacy alarm system
- ~ Enhancements of e-prescribing.
- ~ Decreased drug waste by reducing on-hand inventory.
- ~ Crossed-trained a Medical Records Technician as a Pharmacy Technician.
- ~ Updated the pharmacy formulary.
- ~ Updated the over the counter medications.

### Radiology

Routine diagnostic x-rays such as chest, spine and the extremities are provided on site in our radiology department. All images are read by a board certified radiologist contracted by the health center. Advanced imaging services are referred to outside facilities. The annual re-certification inspection of the radiology department by the Illinois Emergency Management Agency was conducted in October, 2010 with no deficiencies noted.

Two additional extra-help medical radiographers were added to provide better coverage for the department. We are pursuing an agreement as a clinical site for McDonough District Hospital's Radiography program, and hope to have this implemented for Fall, 2010.

### **HEALTH EDUCATION AND PROMOTION HIGHLIGHTS**

Students T.A.L.K. peer educators: Eleven new students were trained as certified peer educators. Peer educators provided health and wellness programming to residence halls, Greek housing, and classrooms through presentations and awareness events. Stall Talk, a weekly health flyer was produced and distributed to residence halls, Greek housing and academic offices.

A Health/Wellness Promotion Committee was formed to elicit input about WIU college health needs from all Beu departments. The input was used to increase outreach on Beu services and to provide a variety of health topics to students, faculty and staff. H1N1 was a major focus during the fall semester.

Additional health strategies included the development of a Beu Facebook page at <http://www.facebook.com/BeuHealthCenter> and two Youtube videos, "[Rocky's Appointment](#)" and "[Dr. Rocky says 'Stay Healthy'](#)".

[Student health 101](#), an interactive on-line magazine was provided to all WIU students, parents and staff.

### **ALCOHOL AND OTHER DRUG CENTER HIGHLIGHTS**

The AOD Resource Center relocation to Seal Hall from Wetzel marked the most universal change for this school year. It was accomplished prior to the beginning of Fall Semester with no disruption in client service. The new office configuration has improved staff and student security; student access to appointments between classes; and staff accessibility to administrative resources. A significant change due to relocation came in late Spring Semester when it was decided that AOD would see students through the summer now that permanent offices are available. In November, 2009, the Department of Alcohol and Substance Abuse (DASA) conducted the re-licensure review. AOD was also commended for the quality of services being provided and received a high compliance rating.

Student involvement with AOD increased this year. AOD established relationships with the Department of Social Work and with the Department of College Student Personnel for practicum sites. This led to working with one Bachelor's level Social Work intern for the first time during the Spring semester and we also had 6 student volunteers over 2 semesters.

The Enforcement of Underage Drinking Laws (EUDL) grant provided funding for AOD to coordinate a speaker event on campus in April. Scott Friedlein, a nationally-known speaker on alcohol law enforcement issues, was brought to campus. The audience included community members, faculty, staff, and students. He discussed the scope of the problem of underage drinking and what has been successful in Champaign, IL as well as in other communities. The Enforcement of Underage Drinking Laws Coalition also was formed this year to foster community action.

The biennial CORE survey was conducted this Spring, with sponsorship from the Illinois Higher Education Center at Eastern Illinois University. In addition, the pre-matriculation course Alcohol-Wise became mandated for all incoming freshmen and transfer students to the Macomb campus. AOD implemented 3 new research projects and continued 3 others this year.

*Prevention:* Due to increased collaboration, Prevention/Outreach events more than tripled from 2008-2009 to 2009-2010, from 25 to 85. AODRC has become increasingly involved in participating in and/or attending University Union Board and Campus Recreation alternative events. There were 85 events representing a total of 136 hours. There were an estimated 4022 outreach contacts made. A Peer Education group titled BAC (Battle Alcohol Consequences) Squad was formed with 7 students completing the education and providing additional support to Prevention/Outreach efforts. AOD Prevention Staff presented "Marijuana Use in the College Setting" at the annual IHEC conference.

*Clinical:* There were 762 individuals seen at AOD—438 in the Fall and 324 in the Spring. A total of 1952.75 client contact hours were provided in a combination of individual and group services. Of those responding to the satisfaction/effectiveness survey, 62% in the Fall and 71% in the Spring had some prior knowledge of the AOD Resource Center before being mandated to attend, compared to 54% in prior years. The reported desire to change in both semesters was statistically significant ( $p < .001$ ) with the majority (86% for Fall, 79% for Spring) responding after the one-time Step-1 intervention. There were 34 clients seen in Early Intervention, Level .05, and there were 31 (91%) who completed the program to be discharged as planned. There were 22 clients seen in Level I treatment. There were 77% who were discharged as planned by completing the treatment plan. The AOD Resource Center is being effective in outreach and intervention as evidenced by these outcomes.

## **STUDENT INSURANCE ADMINISTRATION HIGHLIGHTS**

This year was the 6<sup>th</sup> year of the self-funded insurance program. A transition was made to a new third party administrator, CTIA, this fall. The pre-processing of claims is now done electronically, with a turn-around time of paid claims to an average of 7 days for Beu Health Center claims, and 21 days for outside healthcare claims.

The issue of healthcare reform included in the Affordable Care Act will have a significant impact on student health insurance plans, including the WIU plan. While this is an evolving situation, some of the potential changes include no lifetime limits, prescription drug benefits, and preventative care benefits.

Significant plan savings was derived from implementing reconciliation of PPO charges through our third party administrator.

## PROGRESS ON GOALS AND ACTIVITIES

**GOAL 1:** Beu Health Center will provide high-quality, cost-effective, health and preventative services for eligible individuals.

Objective 1.1: *Research options for renovation, expansion or re-location of student health services.* (Long-range)

- 1.1.1 Enhance privacy by soundproofing exam rooms (mid-range)
- 1.1.2 Enhance security by reconfiguring first floor lobby area to restrict access to clinical operations (mid-range)
- 1.1.3 Implement electronic check-in capabilities to alleviate congestion in front lobby area (mid-range: MET)
- 1.1.4 Relocate Student Insurance to front office area when paper charts are no longer needed on location (mid-range)
- 1.1.5 Develop a Strategic plan document that identifies areas for improvement of the existing health center facility by March, 2009 (short term: MET) \*
- 1.1.6 Conduct pre-design consulting for health center by December, 2010 (short-term)\*
- 1.1.7. Identify potential funding sources for renovation/expansion of student health services by fall, 2010 (short-term)\*

Objective 1.2: *Increase psychiatric access for WIU students.* (mid-range)

- 1.2.1 Develop a program with Iowa City VA for tele-psychiatry access for WIU veterans by Spring, 2011 (mid-range: in process)\*
- 1.2.2 Assess feasibility for expanding tele-psychiatry services to the general student population by fall 2012 (mid-range)\*

Objective 1.3 Conduct a needs assessment for eating disorders by Spring, 2011\*

Objective 1.4 Develop a treatment team protocol for eating disorders in collaboration with UCC and Dietetics by Fall, 2010. (short-term)

Objective 1.5: *Provide ongoing quality improvement studies that address critical areas during 2009-2010 academic year:* (short-term - ongoing)

Objective 1.6: *Conduct a feasibility study on 3<sup>rd</sup> party billing as a strategy for revenue enhancement* (mid-range)

Objective 1.8: *Achieve re-accreditation with AAAHC by August, 2011* (short-range)

Objective 1.9: Develop a technology plan for Beu Health Center by January, 2011 (short-term)\*

- 1.9.1 Develop a cost analysis of traditional hardware replacement vs. Thin Client technology by April, 2010 (short-term: MET)\*

- 1.9.2 Hard-wire exam rooms by December 2010 (short-term)\*
- 1.9.3 Replace server by April, 2011 (short-term)\*
- 1.9.4 Replace 10 desktop computers with Thin-client units by April, 2011 (short-term)\*
- 1.9.5 Develop an RFP for new EMR by Jan, 2011 (short-term)\*
- 1.9.6 Install Rocky-dollars card reader as alternate payment method for services by fall 2011 (short-range)\*
- 1.9.7 Develop an acceptable digital surrogate plan for EHR images so that paper records may be destroyed and not retained, as provided in the Illinois Records Act by fall, 2011 (short-term)\*
- 1.9.8 Implement electronic check-in capabilities to alleviate congestion in front lobby area See 1.1.3 above. (mid-range: MET)
- 1.9.9 Conduct a security risk assessment in accordance with the National Institute of Standards and Technology Risk Management Guide for Information Technology Systems by fall, 2010 (short-range)\*
- 1.9.10 Implement electronic disease reporting through INEDDS by December, 2010 (short-term)\*
- 1.9.11 Develop an electronic database for adverse incidents by December, 2010 (short-term)\*
- 1.9.12 Convert Beu Health Center Policies and Procedures to a hyperlinked, easy to navigate system by January, 2011 (short-term: in process)\*

**GOAL 2:** Beu Health Center will administer an Alcohol and Other Drug Resource Center providing ASAM level 1 outpatient treatment.

Objective 2.1: *Develop a plan to relocate AOD Resource Center with the Beu Health Center, upon expansion of existing health facility (long range)*

Objective 2.2: *Develop a plan to relocate the AOD Resource Center when Wetzel Hall is taken off-line, expected date 2012. (mid-range: MET Fall 2009)*

Objective 2.3: *Participate in the Core Alcohol Survey by May, 2009 (short-term: deferred until 2010: MET)*

Objective 2.4: *Evaluate (short term) the need for provision of ancillary services for at-risk students (mid-range)*

Objective 2.5: *Develop a peer education group for AOD by fall, 2009 (short-term: MET) \**

Objective 2.6: *Participate in 2<sup>nd</sup> year of Enforcing Underage Drinking Laws grant; apply for 3<sup>rd</sup> year funding (short-term: MET)\**

Objective 2.7: *Complete WIU Biennial Survey by December 2010 (short-term).\**

**GOAL 3:** Beu Health Center will develop and implement a comprehensive Health Education and Promotion plan that addresses health priorities and risk factors of the student population.

*Objective 3.2: Develop a comprehensive alcohol risk-reduction plan for WIU by January 2009 (short term- in process) as part of the WIU Strategic Plan to meet or exceed national benchmarks in the Core Alcohol Survey by 2018 (long range).*

*Objective 3.3: Gain Administrative support to mandate Alcohol-Wise pre-matriculation education and implement a compliance plan by fall, 2010 matriculants (short range: in process)\**

*Objective 3.4: Continue implementation and evaluation of 3-year Health Education and Evaluation Plan 2007 – 2010; Develop a new plan for 2010 – 2013 by December 2010 (short-term)\**

**GOAL 4:** Beu Health Center will administer an affordable self-funded accident and illness insurance plan designed to insure appropriate access to health care for eligible students.

*Objective 4.1: Evaluate the self-insurance plan for compliance with federal healthcare reform objectives (short term: on-going)\**

*Objective 4.2: Recommend continuation of self-funded or fully funded plan for fall, 2011 (short-term)\**

**GOAL 5:** Beu Health Center will collaborate with university and community partners to engage students in programs that foster and reinforce wellness. (WIU Strategic Plan Goal). See also Objective 3.1 and 3.2

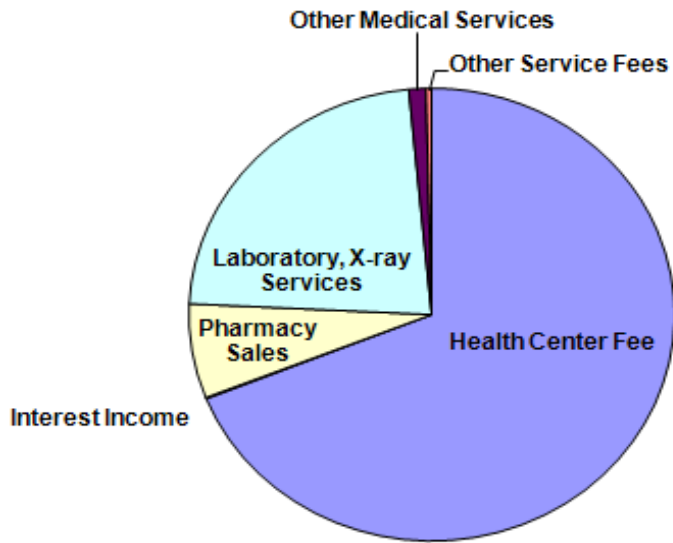
\*new goal for 2009-2010

## SELECTED BEU HEALTH CENTER STATISTICS

Practice Statistics		
	2009-10	2008-09
Patient visits	22,498	23,151
Procedures	43,280	46,560
Prescriptions filled	14,108	13,740
X-ray exams	816	899
Laboratory – Total # patients	6549	8,872
Laboratory – CLIA test count	21709	19,019
AOD contact hours	1572	1,419
Immunization compliance	95.2%	95.6%
Flu shots administered		1,365
Student Insurance Claims	\$	\$ 2,640,258

Top Five Diagnostic Codes			
2009-2010		2008-2009	
Acute Upper Respiratory Infection	2,865	Acute Upper Respiratory Infection	3,728
Routine Medical Exam	2,351	Routine Medical Exam	2,270
Acute Pharyngitis	1,732	Acute Pharyngitis	2,154
Prophylactic Immunotherapy	1,598	Acute Sinusitis	2,104
Urinary Tract Infection	1,321	Acute Tonsillitis	2,007

# Revenue



# Expenses

