

2008 Blueprint Key Performance Indicators						
Goal	Initiative	Action Plan	Responsible Person Department	Key Performance Indicators	Process/Status	Cycle of Measurement
Improve quality of health care services to the University community that promotes academic success	1.a. Provide affordable services to ensure that a broad and diverse population is being served.	Each department within Student Health Services (TSHC, CHDC, CW, SH&VP) will provide services to enhance the quality of health care and monitor demographics to ensure a diverse population is being served	All departments heads and team members within Student Health Services	Collect demographics of population served.	We serve a diverse patient population that reflects the University's enrolled student population. Based on unique patient visits from FY 2008-09 and the latest enrollment data received by Institutional Assessment and Compliance office, we have served 13,163 unique patients, resulting in almost half (47.9%) of the student population at a given point within the	On-going with bi-annual reporting
			All departments heads and team members within Student Health Services	Increase in the number of services being provided to diverse populations and/or increase in the utilization of existing services.	We served 39% of the Freshmen student population, 58% of sophomores, 53% of juniors, 64% of seniors and 35% of graduate and professional students. It should be	On-going with bi-annual reporting
			All departments heads and team members within Student Health Services	Outreach capacity is increased through the development of programs.	Outreach capacity has significantly increased. We have seen an increase in participation on several of our outreach programs that target a diverse community, including 54%	On-going collection with bi-annual reporting
		Implement a comprehensive Peer Network group that Enhances collaboration among the SEED, SHARE, PHE's and other student peer groups to enhance educational programs	Director of Campus Wellness, Peer Advisors and all department heads,	Peer Network is establish with a structured training program	A graduate assistant has been assigned to establish a structured training program for all of our premiere peer education groups.	Fall 2008
			Director of Campus Wellness, Peer Advisors	Assessment of PEER network group via learning outcomes survey analysis indicate quality programs and behavior change	Campus Wellness has implemented the National Peer Education Certification program from the Bacchus Network. Peer health educators provided 87 information	
	1.b. Continue to develop outcomes-based assessments for programs and services.	Each department within Student Health Services (TSHC, CHDC, CW, SH&VP) will continue to develop and review outcomes based assessments for all programs and services	All departments heads within Student Health Services	Outcomes-based assessments are identified, developed and updated annually.	Outcomes-based assessments were developed, including weight management, women's health perceptions, and knowledge about influenza.	Developed by August 15 and reviewed/updated annually (May-June)

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			All departments heads within Student Health Services	Outcomes-based assessments show improvements/positive change in one or more of the following areas: knowledge/attitudes, health behaviors, skills acquisition/utilization, and symptom severity/frequency	Campus Wellness continues to assess health outcomes on all of their programming efforts. This past year, we had 30 students and 217 faculty/staff participate in the Choose to Lose weight management series. Of the 94 that completed the program, 293 lbs were lost. Women's Care conducted a survey about preventive	On-going with bi-annual reporting
	1.c. Develop collaborative relationships with other campus departments and/or community partners	All department heads will develop, assess and expand collaborative relationships with other campus departments and/or community partners	All departments heads and team members within Student Health Services	Campus advisory committees to include student representatives are developed, assessed and expanded		On-going with bi-annual reporting
		Increase partnerships and collaboration with faculty and staff to promote innovation and ensure SHS mission accomplishment	All departments heads and team members within Student Health Services	The number of partnerships and collaborative efforts with faculty and staff to promote innovation and ensure SHS mission accomplishment are increased	Staff members collaborate with various offices and campus programs, including the Black Faculty-Staff Association, Housing, University 101, Student Judicial Programs, Disability Services, Greek Life, Parents	On-going with bi-annual reporting
	1.d. Mandatory hard waiver insurance policy is implemented for all USC students.	Develop plans to implement mandatory hard waiver insurance policy by 2010	Exec. Director SHS	Benchmarking will be completed to identify other institution's policies and practices.	This has been done.	On-going with bi-annual reporting
			Exec. Director SHS	Development and revision of a white paper to be distributed to appropriate personnel.	This has been done.	Summer of 2008
Support and maintain a work environment that is safe, equitable, honest, fair, and respectful of the inherent dignity and worth of all employees.	2.a. Provide opportunities for professional staff growth and development to maintain a highly-qualified, diverse work staff.	SHS will continue to support, encourage and monitor continuing education of staff members	All department heads and team members within Student Health Services	The number of professional development and/or academic credit hours obtained by staff is collected	This is ongoing.	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	The number of certifications, registrations, and/or licensures obtained/maintained	This is ongoing.	On-going with bi-annual reporting

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			All department heads and team members within Student Health Services	Number of courses taught, professional presentations conducted, leadership positions held, publications or membership(s) in professional associations, and preceptorships of students.		On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Continue to provide and update new employee orientation and complete EPMS on time	All departments within Student Health Services are 100% compliant with EPMS.	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Staff practices indicate equitable, honest, fair, and respectful behaviors in the work environment as assessed by EPMS and other appropriate instruments	All departments within Student Health Services are 100% compliant with EPMS.	On-going with bi-annual reporting
	2.b. Policies and procedures are consistent with a work environment that is safe, equitable, honest, fair and respectful of the inherent dignity and worth of all employees.	Policies and procedures are updated annually and assessed to support a safe, equitable, honest, fair and respectful of the inherent dignity and worth of all employees.	All departments heads within Student Health Services	Documentation of employees' access to and review of updated policies and procedures manual.	All staff are required to sign policies during new employee orientation that adhere to the diversity statements of the University and the American College Health Association.	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Reviews and updates to policies and procedures manual occurs annually	This is current and up-to-date. All policy manuals are online within the department's intranet.	On-going with bi-annual reporting
Enhance quality and satisfaction of programs and services through research and assessment.	3.a. Enhance student satisfaction with programs and services, as well as with the staff providing those programs and services	Implement programs and services that are of quality and are appropriate to the campus' needs and expectations (including social norming campaigns and programs to address high-risk behaviors)	All department heads and team members within Student Health Services	Programs are implemented and assessed for impact on high-risk behavior as appropriate, departmental satisfaction surveys are developed, implemented and assessed for areas of improvement	Staff members are active participants in a variety of work groups focusing on high risk behavior. Representation on the Student Life High-risk Behavior focus group will continue, as well as our participation on the Behavioral Intervention Team and Housing's Health and Human Development Committee.	On-going with bi-annual reporting

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			All department heads and team members within Student Health Services	Outcomes-based assessments show an increase in satisfaction with programs and services	Outcomes-based assessments are conducted through our bi-annual patient satisfaction surveys. This survey is implemented throughout all offices of Student Health Services. Over 93% of respondents agreed that the care they received at Student Health Services will help to improve their ability to learn.	On-going with bi-annual reporting
	3.b. Research best practices to enhance the quality of programs and services.	Staff will attend national, regional, and/or state professional conferences and report best practices for appropriate implementation	All department heads and team members within Student Health Services	Staff attends national, regional, and/or state professional conferences and best practices are implemented as appropriate	We regularly attend national, regional, and state professional conferences -- including the American College Health Association's annual meeting. In the past academic year, staff from Student Health Services presented at 14 national or regional conferences	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Access to and dissemination of current literature about trends in college health.	Student Health Services has a membership subscription to the Journal of American College Health; we regularly attend ACHA functions and conferences, and many of our	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Benchmark peer institutions and conduct quality improvement studies.	We have conducted three quality improvement studies that have benchmarked peer institutions at ACC and SEC college health centers. These	On-going with bi-annual reporting
		Utilize Principles of Good Practice in Student Affairs in development of programs and delivery of services	All department heads and team members within Student Health Services	Satisfaction and Learning Outcomes Surveys indicate that Principles of Good Practices in Student Affairs are considered with practice.	Learning outcomes have been set and evaluated based on Principles of Good Practice in Student Affairs. Our high quality of services was reflected in one of our survey items -- 92% of our	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Training of staff and application/modeling are assessed	Our staff training continues to highlight the high standards we have on multicultural inclusion, respect and equality.	On-going with bi-annual reporting
	3.c. Enhance faculty and staff satisfaction with services and programming, as well as with staff providing those services and programs	Satisfaction surveys are administered each semester	All department heads and team members within Student Health Services	Departmental satisfaction surveys are developed, implemented and assessed for areas of improvement.	While Student Health Services as a whole rated very high with all survey items related to patient satisfaction, one particular area of improvement was on the waiting time for walk-in appointments within the CHDC. A productivity study is currently assessing the area to improve schedule efficiency.	On-going with bi-annual reporting

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Maintain accreditation status and ensure compliance with other state and federal regulations, standards and/or laws	4.a. Compliance with standards are ensured through appropriate policies, procedures and practices	All individual areas develop strategies, policies, procedures and practices that demonstrate conformance with their appropriate accreditation standards and/or licensure/credentialing entities	All department heads and team members within Student Health Services	Policies and procedures are updated and implemented based on accreditation standards and results of internal assessment and closed loop quality improvement studies.	Policies and procedures are updated regularly and remain consistent with accreditation standards set by the Accreditation Association for Ambulatory Health Care, Inc. Results of benchmarking studies and other quality improvement activities are regularly communicated to staff.	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Benchmarking is conducted by each area annually and at least 1 "closed loop" quality improvement initiatives are performed by each department every year.	Results from a closed loop QI study on the clinical protocols for male STI screenings showed that 88% of the college health centers surveyed followed what CDC recommends as part of the routine screening. We conducted a study to improve the rate	On-going with bi-annual reporting
			All department heads and team members within Student Health Services	Accreditations are maintained	In the fall of 2008, we received full re-accreditation from the Accreditation Association for Ambulatory Health Care, Inc for another three years.	On-going with bi-annual reporting
			Public Relations and Quality Improvement Coordinator	Benchmarking will occur to assess the need for and utilization of an assessment coordinator for student health services		1-Oct-08
	4.b. All individual areas will demonstrate compliance with state and federal laws and regulations		All department heads and team members within Student Health Services and Environmental Safety Committee	OSHA policies and procedures are completed and implemented indicating compliance	OSHA policies and procedures are completed and a staff training is held annually to ensure compliance. All staff must adhere to these policies.	On-going with bi-annual reporting
			Environmental Safety Committee	Inspections will occur to indicate compliance	This is ongoing.	On-going with bi-annual reporting
			Privacy and Security Officer	Continue to review and update the current HIPAA and other related compliance standards (FERPA and state law) policies, procedures and practices.	This is consistently reviewed and updated. A new employee orientation has been updated to ensure staff are knowledgeable on the current HIPAA regulations.	On-going with bi-annual reporting

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	Provide a comprehensive emergency management process that is integrated with the University's plan.	Implement policies, procedures and training regarding emergency response	Exec. Director, Procurement Officer, Associate Director SHS and 1st responders	Plan is implemented and training conducted to include drills	This is ongoing.	Fall 2008
Develop and implement a comprehensive and integrated technology plan to enhance efficiency and quality of service delivery	5.a. Utilize website and other technology to communicate and access SHS programs and services	5a. SHS Website and other means of technology are updated to enhance communication of programs and services, as well as referral of services	Public Relations and Quality Improvement Coordinator and Information Technology Manager	Successful completion of updates	Updates are made daily to ensure that timely health information is communicated to students.	On-going with bi-annual reporting
			Information Technology Manager	Other forms of technology as appropriate are implemented.		On-going with bi-annual reporting
	5.b. SHS Websites include a comprehensive self-care guide and resource directory to address health care concerns, especially after-hours	Develop and upload SHS Websites to include a comprehensive self-care guide and resource directory to address health care concerns, especially after-hours	Public Relations and Quality Improvement Coordinator and Information Technology Manager	Successful completion and assessment of a self-care guide and investigation of ask a nurse hotline	A self-care guide is currently being developed. Benchmarking of other schools is currently being addressed. The ask-a-nurse hotline phone number is online.	Fall 2008
			Public Relations and Quality Improvement Coordinator and Information Technology Manager	Successful completion and assessment/utilization of resource directory guides including non-electronic media	Both the Guide to Student Health and the Parents Guide to Student Health are accessible online.	Fall 2008
	5.c. PyraMED is implemented and utilized to enhance delivery of services.	Complete the implementation of PyraMED to include a detailed timeline and task list for phased implementation of various components	Information Technology Manager	Successful completion of timeline and task list.		Summer of 2008
			Information Technology Manager	Successful completion of LIS implementation		Fall 2008
			Information Technology Manager	Successful completion of Rx Writer implementation		Fall 2008
			Information Technology Manager	Successful completion of PyraMED and QS/1 implementation		Fall 2008

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	5.d. Enhance the effectiveness and efficiency of the pharmacy services	Complete the implementation of a drop off and pick up window in the pharmacy to enhance the efficiency and satisfaction of students with wait time to fill a prescription	Medical Director and Pharmacists	Drop off and Pick up windows are implemented	The pharmacy was renovated during the spring semester, resulting in ample space for pick-up and drop-off prescriptions and a counseling area for privacy.	1-Sep-08
			Pharmacy Staff	Student's satisfaction with the wait time to fill prescriptions improve	The data on pharmacy-specific customers from our patient satisfaction surveys was insufficient. This will be a priority in the upcoming patient satisfaction survey in the Fall.	Fall 2008
		Complete implementation of an electronic prescription refill request program through SHS web site and phone	Medical Director and Pharmacists, Information Technology Manager	Automated refill request process is successfully implemented		September, 2008
	5e. Protect the confidentiality and integrity of PHI (protected health information)	SHS will establish its own data center and server room	Information Technology Manager	Server room is completed with appropriate firewalls and security protection		September, 2008
Implement a comprehensive and integrated financial plan to enhance efficiency and quality of service delivery	6.a. Fiscal responsibility is established and maintained to enhance delivery and profitability of services	All areas will demonstrate fiscal responsibility by reconciling budgets	All department heads	Budget reports will be due monthly with bi-annual reporting.		September, 2008
		Business and accounting practices will be analyzed to enhance SHS operations and fiscal responsibility	Associate Director Student Health Services	A complete review and analysis of business operations and accounting practices will be conducted and appropriate changes implemented		September, 2008

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		All areas will demonstrate fiscal responsibility by utilizing cost containment strategies	All department heads	At least one cost containment strategy is identified	Cost of our services is less than what is found in the outside community. Along with offering reduced-price prescriptions, the pharmacy continues to expand the number of insurance plans accepted and have added 4 insurance plans this academic year. A	Ongoing and bi-annual reporting
		A comprehensive procurement process and inventory system will be implemented.	Procurement Officer and Associate Director SHS	Procurement process is developed, written policies and procedures are completed, communicated, monitored and enforced. Electronic inventory system is established.		October, 2008
	6. b. Identify ways to increase revenue and identify outside funding resources	Explore other means to increase revenue to include grant writing/acquisition, review of fee structures, third party billing, etc. to enhance service delivery.	All department heads and team members	Grant opportunities will be identified and appropriate and inclusive grant-writing teams assembled	Student Health Services has identified and applied to 9 community grants with local and regional health organizations.	Ongoing and bi-annual reporting
			Associate Director Student Health Services	The feasibility of third party billing will be completed	Insurance filing will be available after the implementation of the new Electronic Health Record (July, 2009). The SHS will file insurance as a courtesy for any patient with health	October, 2008
			Exec Director, Public Relations Coordinator	Educate campus community about health insurance and the specific benefits of the University Sponsored Plan	A health insurance panel was conducted to educate students as they graduate and seek employment. This panel was co-hosted by the Career Center and experts were from the	Fall 2008
Incorporate the mission of Healthy Carolina in program and service delivery.	Increase the visibility and collaboration of Healthy Carolina to support a healthy learning environment	Utilize the Healthy Carolina wordmark in all marketing strategies	All staff members	Wordmarks are present on print media. Wordmarks are present on websites	This is ongoing. A marketing policy was developed in the Fall to ensure all staff were aware of this initiative.	Ongoing and bi-annual reporting
			All staff members	Collaborative partnerships are implemented and assessed	Staff members collaborate with various offices and campus programs, including the Black Faculty-Staff	Ongoing and bi-annual reporting
		Utilization of NCHA data to direct service delivery, programming and evaluation	All staff members	NCHA data are utilized to direct programs, services and evaluation		Ongoing and bi-annual reporting







