



Western Carolina University
Assessment Summary Form
Student Affairs Division

Name of Unit/Area **Health Center**

Name of Person(s) Conducting Assessment Activity **Debbie Beck, Health Center Staff**

Other Partners Involved in Activity (e.g., faculty, staff, alumni, other departments, community, etc.)

Health Center Staff, students, local hospital(s), faculty

Semester & Year of Assessment Activity **Fall 2004**

Objectives for Assessment Activity-

Establish health indicators for programming

Continue meeting the healthy campus 2010 goals and objectives

Determine programs and services that are needed by the campus community

Determine patient satisfaction and assist with changes that improve patient care and services

Establish and assess learning outcomes established by the health center

Enhance processes that lead to external accreditation

Nature of Assessment Activity (e.g., survey, focus group, pre/post-test, etc; instruments used to be attached)

Patient Satisfaction/Learning Outcomes Survey, Women's Clinic Satisfaction and Outcomes Survey, Programming Surveys and Outcomes (wellness, nutrition), National College Health Assessment (data will be available in April), Student Advisory Board, Wellness Student Council, focus groups, Standards of Accreditation from the AAAHC (American Accreditation Association for Ambulatory Care), Bench Marking, and quality assurance processes. Unit Plan evaluation (entire staff sets goals/objectives and time lines for specific areas)

Highlights of Significant Findings from Assessment and Comparison to Criteria for Success Established by Area

Data are still being entered in SPSS for many of the surveys. Initial findings show that patients' are more than 90% satisfied with their care in the women's clinic and more than 88% believe the learning objectives are being met. The area that scored the weakest in the women's clinic was the length of time required to obtain an appointment. Based on this, we increased the number of appointments and days per week the women's clinic is offered. Each area of the clinic performs individual assessments. The fall semester report from the nutrition department is attached. The significant finding in this report is that more than 78% of the students reported that they would have a positive lifestyle change after attending the educational programming.

There are two samples of a quality assurance process that were conducted the fall of 2004 (surgical consent and telephone encounters). These samples involve the quality and effectiveness of the staff's charting procedures to enhance patient care. These procedures are necessary to meet or exceed standards of accreditation for AAAHC. Also attached is a complete chart audit for Fall 2004 which involved the entire chart overview. As part of the audit each individual that was identified as having problems were given feedback and that individual must provide an action plan to correct deficiencies. A peer review evaluation is attached. This QA process involves clinical assessment and treatment based on national guidelines.

Specific Use of Findings in Area(s) and Key Changes Made in Area(s)

See notes above. Main survey results will not be available for several weeks. Key changes throughout the clinic involve chart enhancement processes, enhanced procedures and treatments, involvement of staff, enhanced available hours for women's health and the addition of a "first time" women's health educational program.

Other Comments
