Assessment Cycle 2025-2026

Health Services

Division or Department: Student Affairs

Prepared by: Jessica Nash, RN **Date:** June 9, 2026

Approved by: Dr. Yonna Pasch **Date:** June 9, 2026

Northwestern Mission. Northwestern State University is a responsive, student-oriented institution committed to acquiring, creating, and disseminating knowledge through innovative teaching, research, and service. With its certificate, undergraduate, and graduate programs, Northwestern State University prepares its increasingly diverse student population to contribute to an inclusive global community with a steadfast dedication to improving our region, state, and nation.

The Student Experience Mission. The Student Experience provides the University community with programs and services to support the academic mission *of* creating, disseminating and acquiring knowledge through teaching, research and service while empowering a diverse student population to achieve their highest educational potential. The Student Experience creates a stimulating and inclusive educational environment that is conducive to holistic personal growth. The commitment to students initiates prior to entrance, sustains throughout the college experience, and continues beyond graduation. Enrollment Services provide equal access for education to potential students throughout the state and region and promote economic stability and financial access to citizens. Student Affairs enhances student development and broadens intellectual, social, cultural, ethical, and occupational growth. The Student Experience works closely with faculty, staff, students, and the community to ensure graduates have the capability to promote economic development and improvements in the region.

Student Affairs Mission. The Division of Student Affairs prepares students to be productive members of society and to improve the quality of life of students. Student Affairs provides support services in career development and placement, advocacy and accountability, academic support, mental and physical health, disability accommodations, student activities and organizations, student union life, and opportunities in leadership, community service, and programs for new students. Through hands-on involvement in programs and services, Student Affairs promotes personal development in a student-centered environment, which delivers innovative practices in an environment of respect. Student Affairs encourages integrity, diversity, and collaboration with all members of the university community.

Health Services Mission. The mission of Health Services is to provide cost effective, convenient, high quality and professional health care to eligible Northwestern State University students in a clinic setting addressing physical, emotional, social, and spiritual needs. Health Services will enhance student development through campus wide and individual health education with a focus on student learning outcomes in the areas of healthy lifestyle choices, independence, and discernment as a healthcare consumer.

Methodology: The assessment process includes:

1. Data from assessment tools (direct & indirect, quantitative & qualitative) are collected and returned to the director.

2. The director will analyze the data to determine whether the applicable outcomes are met:

3. Results from the assessment will be discussed with the appropriate staff.

4. Individual meetings will be held with staff as required (show cause).

5. The director, in consultation with the staff, will determine proposed changes to measurable outcomes, assessment tools and service changes for the next assessment period.

Student Health Services Effectiveness

Service Outcomes:

SO 1. Health Services staff will provide individual, complaint specific education to 100% of patients seen in the clinic and provide interventions to decrease interference with their degree seeking process.

Measure 1.1 Health Services staff will provide written instructions to patients regarding their current health complaints including discharge instructions, referral forms, self-care, medications, non-pharmacological treatment measures, follow-up care, referral appointments, directions to community resources or prevention efforts. The target is to provide printed Lexicomp educational information documents from the EMR to1,800 patients seen in Health Services.

Finding: Target was met.

Analysis.
In AC 2024-2025 the target was met. The target is that 100% of students will receive all complaint-specific documents provided by the nurses at Health Services. All patients (2,301) were given written instructions on either self-care, medications, non-pharmacological treatment measures, follow-up care, referral appointments, directions to community resources or prevention efforts. Complaint specific educational documents from Lexicomp in the electronic medical records were given out 2,518 times. Discharge instructions were given 3,372 times. Directions, instructions, and referral forms were given 516 times for MD or Walk in Clinic appointments. In total, 6,406 educational documents were provided to patients.

Based on the analysis of the AC 2024-2025 results, the staff implemented the following changes in AC 2025-2026 to drive the cycle of improvement. The target must remain at 100% of students receiving complaint specific documents provided by the nurses at Health Services.

As a result of these changes, in AC 2025-2026, the target was met. All patients (2,009) were given written instructions on either self-care, medications, non-pharmacological treatment measures, follow-up care, referral appointments, directions to community resources or prevention efforts. Complaint specific

educational documents from Lexicomp in the electronic medical records were given out 2,212 times. Discharge instructions were given 2,491 times. Directions, instructions, and referral forms were given 341 times for MD or Walk in Clinic appointments. In total, 5,044 educational documents were provided to patients.

Decision:
In AC 2025-2026 the target was met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. The target will remain at 100% of students receiving complaint specific documents provided by the nurses at Health Services.

These changes will improve the student's ability to understand their specific health conditions and what preventative efforts they should be taking to improve their overall health, thereby continuing to push the cycle of improvement forward.

Measure 1.2 Health services staff will help increase student knowledge in terms of health and safety. 95% of patients will report an increase in knowledge regarding their health by demonstrating or verbalizing understanding at time of discharge.

Finding: Target was met.

Analysis.
In AC 2024-2025 the target was met. The electronic survey was available for students to participate in, in both the Fall and Spring semesters with a 95% goal of students reporting increased knowledge about their current health condition. All front desk workers encouraged students to complete the satisfaction survey They provided individualized teaching to patients regarding their chief complaint to improve knowledge. The staff and front desk workers were instructed on the importance of reminding patients to complete the satisfaction survey upon discharge from Health Services. The staff verbally confirmed understanding with the patient during the visit and asked for any questions upon discharge to provide a better understanding for the patient. The total number of students seen for clinical evaluations at Health Services during the Fall and Spring semesters was 2301. Of those, 204 (or 8.87%) students completed satisfaction surveys with 204 (or 100%) of students reporting that they gained specific knowledge about their current health condition during the clinical visit. The goal of 95% was reached and exceeded by 5%.

Based on the analysis of the AC 2024-2025 results, the staff implemented the following changes in AC 2025-2026 to drive the cycle of improvement. The electronic survey was available for students to complete in both the Fall and Spring semesters with a 95% goal of students reporting increased knowledge about their current health condition. All front desk workers encouraged all students to complete the satisfaction survey, increasing survey participation to 15%.

As a result of these changes, in AC 2025-2026 the target was met. Staff provided individualized teaching to patients regarding their chief complaint to improve knowledge. The staff and front desk workers were instructed on the importance of

reminding patients to complete the satisfaction survey upon discharge from Health Services. The staff verbally confirmed understanding with the patient during the visit and asked for any questions upon discharge to provide a better understanding for the patient regarding their chief complaint. The target remains the same at 95% increased knowledge during clinical visits. The total number of students seen for clinical evaluations at Health Services during the Fall and Spring semesters was 2,009. Of those, 387 (or 19.2%) students completed satisfaction surveys with 387 (or 100%) students reporting that they gained specific knowledge about their current health condition during the clinical visit. The goal of 95% was reached and exceeded by 5%.

Decision:
In AC 2025-2026 the target was met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. The electronic survey will remain available for students to participate in, in both the Fall and Spring semesters with a 95% goal of students reporting increased knowledge about their current health condition. All front desk workers will encourage all students to complete the satisfaction survey, increasing survey participation to 20%.

These changes will improve the students' ability to demonstrate what they have learned and the importance of maintaining good health, thereby continuing to push the cycle of improvement forward.

Measure 1.3 Health services will monitor class attendance for each patient in hopes of decreasing missed class time for their patients. Health Services will survey each student regarding class attendance, and at least 90% of patients will report a decrease in missed classes.

Finding: Target was met.

Analysis.
In AC 2024-2025 the target was met. We provided education to each student on the use of medications, how to improve their health more quickly, and the use of telemedicine to decrease missed class time. The electronic survey was available during the Fall and Spring semesters for student participation. The staff assessed the impact on retention using the satisfaction survey provided electronically during the Fall and Spring semesters and drove improvement by providing over the counter medication and referrals for physician visits as needed to decrease missed class time. Health Services provided more education regarding the students' medical concerns as evidence of survey responses. The total number of students seen for clinical evaluations at Health Services during the Fall and Spring semesters was 2301. Of those, 204 (or 8.87%) completed satisfaction surveys with 189 (or 92.7%) students reporting a decrease in the number of classes missed because of illness. The goal of 90% was reached and exceeded by 2.7%, therefore the target was met.

Based on the analysis of the AC 2024-2025 results, the staff implemented the following changes in AC 2025-2026 to drive the cycle of improvement. We provided education to each student on the use of medications, how to improve their health more quickly, and

the use of telemedicine to decrease missed class time.

As a result of these changes, in AC 2025-2026 the target was met. The staff assessed the impact on retention using the satisfaction survey provided electronically during the Fall and Spring semesters and drove improvement by providing over the counter medication and referrals for physician visits as needed to decrease missed class time. Health Services provided more education regarding the students' medical concerns as evidence of survey responses. The total number of students seen for clinical evaluations at Health Services during the Fall and Spring semesters was 2009. Of those, 387 (or 19.2%) completed satisfaction surveys with 361 (or 93.3%) students reporting a decrease in the number of classes missed because of illness. The goal of 90% was reached and exceeded by 3.3%, therefore the target was met.

Decision:
In AC 2025-2026 the target was met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. We will continue to provide education for each student on the use of medications, how to improve their health more quickly, and prompt referrals for higher levels of care to decrease missed class time.

These changes will improve the student's ability to remain healthy, decreasing the amount of missed class time, thereby continuing to push the cycle of improvement forward.

SO 2. Health Services will remain 100% compliant with Electronic Medical Record (EMR) updates and software refinements. EMR coordinator will create accounts and train new nursing staff on the use of EMR in Medicat for the Natchitoches Health Service clinic and the Shreveport Health Service clinic. Staff will increase the use of technology over the previous year and focus efforts on the means of communication students prefer.

Measure 2.1 Health Services will remain 100% compliant in EMR software updates.

Finding: Target was met.

Analysis:
In AC 2024-2025 the target was met. Health Services remained 100% compliant with EMR software updates. Accounts were created and inactivated as needed for changing staff in the counseling services intern program. Health Services participated in all updates provided by the software company. Templates were added or adjusted to improve workflow. The Patient Portal was utilized more frequently to communicate with students and provide medical education in a more technologically advanced way. Set up new accounts on the Shreveport campus and provide training for new personnel. Accounts were created and inactivated as needed for the changing staff in counseling services internship program and new employee hires. Ongoing training for nursing staff on the use of Medicat and training on the Shreveport campus were conducted as requested. Health Services participated in all updates provided by the software company and will continue to adjust templates to improve workflow. The plan to implement the Patient Portal Module to facilitate an online communication process for health information was

met. Research continued to be conducted to determine the best use of resources for Natchitoches Health Service clinic. The Medicat home office completed 1 system wide update on 4/19/2024. The EMR coordinator set up 4 new user accounts for Counseling and Career. There was no new user accounts set up for Shreveport Health Service clinic. No new users accounts were set up for Natchitoches Health Services, therefore, no Medicat EMR training was hosted. Templates were updated 12 times throughout the Fall and Spring semesters. Health Services remained 100% compliant with software updates.

Based on the analysis of the AC 2024-2025 results, the staff implemented the following changes in AC 2025-2026 to drive the cycle of improvement. Health Services was 100% compliant with EMR software updates. Accounts were created and inactivated as needed for changing staff in the counseling services intern program. Health Services participated in all updates provided by the software company. Templates were added or adjusted to improve workflow. The Patient Portal were utilized more frequently to communicate with students and provide medical education in a more technologically advanced way. Set up new accounts on the Shreveport campus and provide training for new personnel.

As a result of these changes, in AC 2025-2026 the target was met. Accounts were created and inactivated as needed for the changing staff in counseling services internship program and new employee hires. Ongoing training for nursing staff on the use of Medicat and training on the Shreveport campus were conducted as requested. Health Services participated in all updates provided by the software company and will continue to adjust templates to improve workflow. The plan to implement the Patient Portal Module to facilitate an online communication process for health information was not successful. Research continued to be conducted to determine the best use of resources for Natchitoches Health Service clinic. The Medicat home office completed 1 system wide update. The EMR coordinator set up 5 new user accounts for the Counseling Center and 2 new user accounts set up for Shreveport Health Service clinic. No new users accounts were set up for Natchitoches Health Services. Medicat EMR training was hosted 2 times for the new hires at the Shreveport clinic. Templates were updated 10 times throughout the Fall and Spring semesters. Health Services remained 100% compliant with software updates in AC 2024-2025. Therefore, the target was met.

Decision:
In AC 2025-2026 the target was met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. Health Services will remain 100% compliant with EMR software updates. Accounts will be created and inactivated as needed for changing staff in the counseling services intern program. Health Services will participate in all updates provided by the software company. Templates will be added or adjusted to improve workflow. The Medicat system will update to the newest version of Medicat software, Medicat One and attend training on the new system. The Patient Portal will be utilized to communicate with students and provide medical e Patient a more technologically advanced way. They will continue to set up new accounts on the Shreveport campus and provide training for new personnel.

These changes will improve the student's ability to be best informed about their health and

to be able to easily and confidentially communicate with Health Services Staff, thereby continuing to push the cycle of improvement forward.

Measure 2.2 Health Services will increase communication efforts with students using the top-rated technology methods a minimum of 30 times.

Finding: Target was not met.

Analysis.
In AC 2024-2025 the target was not met. The staff posted more frequently to the Instagram page providing weekly tips for health improvement and disease prevention, encourage use of the electronic survey, and increase the usage of the Patient Portal. The task of posting relevant health information, reminders, and news were shared by the health director and clinic nurse. The clinic used social media platforms, email, and student messenger to reach students with information related to our services, programs, and current global health issues. Health services provided information on health topics using Health Services Instagram page. We made use of the online school calendar a minimum of 10 times and maintained the target of 30 times using technology to connect with students. We made use of the newly installed Patient Portal to communicate directly with each student individually. The target was set for 30 times using technology to communicate with students and usage of the online school calendar a minimum of 10 times. Staff utilized the NSU Health Services Instagram account and Student Messenger campus email accounts to advertise programs and educate students about various health topics and health programs offered throughout the campus community. Announcements were sent regarding Life Share blood drives, flu shot clinics, and STI awareness. Social media posts for educational wellness reminders were conducted a total of 18 times and online school calendar was used 4 times.

Based on the analysis of the AC 2024-2025 results, the staff implemented the following changes in AC 2025-2026 to drive the cycle of improvement. The staff posted more frequently to the Instagram page providing weekly tips for health improvement and disease prevention, encouraged use of the electronic survey, and increased the usage of the Patient Portal. The task of posting relevant health information, reminders, and news was shared by the health director and clinic nurse.

As a result of these changes, in AC 2025-2026 the target was not met. The staff posted less frequently to the Instagram page due to new ADA compliance guidelines. The use of the electronic survey was increased, while the usage of the Patient Portal was not. The task of posting relevant health information, reminders, and news were shared by the health director and clinic nurse. The clinic used social media platforms, email, and student messenger to reach students with information related to our services, programs, and current global health issues. Health services provided less information on health topics using Health Services Instagram page. We made use of the online school calendar a minimum of 10 times and maintained the target of 30 times using technology to connect with students. The use of the Patient Portal was not used, as proper training is scheduled for the summer. This will allow for direct communication with each student individually. The target was set for 30 times using technology to communicate with students and usage of the online school calendar a minimum of 10 times. Staff utilized the NSU Health Services Instagram account and Student Messenger campus email accounts to advertise programs and educate students about various health topics and health programs offered throughout

the campus community. Announcements were sent regarding Life Share blood drives, flu shot clinics, and STI awareness. Social media posts for educational wellness reminders were conducted a total of 4 times and online school calendar was used 4 times.

Decision:
In AC 2025-2026 the target was not met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. The staff will post more frequently to the Instagram page following new ADA guidelines, providing followers with weekly tips for health improvement and disease prevention, encouraged use of the electronic survey, and increased the usage of the Patient Portal after system upgrade and Medicat One training. The task of posting relevant health information, reminders, and news was shared by the health director and clinic nurse.

These changes will improve the student's ability to be best informed about health education initiatives and programs offered by Health Services and throughout the community, increase the student's knowledge of services provided by Health Services, physician referrals, partnership with NRMC; increase communication, and give feedback to the clinic staff thereby continuing to push the cycle of improvement forward.

SO 3. Staff will collaborate with faculty, staff, campus organizations or community stakeholders to provide requested programming.

Measure 3.1 The Health Services staff will participate in a minimum of 32 programs hosted by other on-campus units.

Finding: Target was met.

Analysis.
In AC 2024-2025 the target was met. The staff increased the number of collaborations with on and off campus departments and organizations from 30 to 32 programs. Health Services utilized the resources of Natchitoches Regional Medical Center through their partnership to increase the number of health-related initiatives provided to students. Furthermore, the staff sought new partnerships and expanded collaborations with the College of Nursing on the Natchitoches campus. Health Services staff increased collaborations in 2023-2024 with other on-campus departments from 30 programs to 32 programs. Health Services sought out new partnerships and expanded collaborations with the Natchitoches Regional Medical System Walk in Clinic, offering Teleheath visits for students seen in the Health Services Clinic who needed further assessment or higher level of care. The staff of Health Services collaborated with other on campus units to support 41 programs. On campus collaborations involved:

- Freshman/Parent Connection Orientation (5-22-2024, 5-29-2024, 6-13-2024 & 7-10-2024)
- Freshman Follies (5-22-2024, 5-29-2024, 6-13-2024 & 7-10-2024)
- Calm Room assistance (5-22-2024, 5-29-2024, 6-13-2024 & 7-10-2024)
- Distribution of Condoms and Educational Materials to CAPA (8-29-2024)
- Scholars College Student Orientation (8-23-2024)
- Color Chaos (8-19-2024)
- Information Station (8-19 & 20-2024)

- First Night fest (8-17-2024)
- Wellness Fest (11-05-2024)
- College of Nursing: Nursing clinical site for 5th level students two days per week for the Fall semester totaling 14 days
- Krewe of NSU (2-27-2025)
- N Side View (2-15-2025)
- Collaboration with Theta Chi Alpha on HIV awareness and prevention (2-5-2025)
- Literary Rally (3-15-2025)
- Special Olympics (3-18-2025)
- Partnering with the Natchitoches Parish Health Unit and the Louisiana Department of Health to provide STI testing and education (4-22-2025 & 4-24-2025)
- Freshman Connection education on Health Services offerings (2-17-2025)

Based on the analysis of the AC 2024-2025 results, the staff implemented the following changes in AC 2025-2026 to drive the cycle of improvement. The staff collaborated 32 times with on and off campus departments and organizations. Health Services utilized the resources of Natchitoches Regional Medical Center through their partnership to increase the number of health-related initiatives provided to students. Furthermore, the staff sought new partnerships and expanded collaborations with organizations and sports teams on the Natchitoches campus.

As a result of these changes, in AC 2025-2026 the target was met. The staff maintained the number of collaborations with on and off campus departments and organizations at 32 programs. Health Services utilized the resources of Natchitoches Regional Medical Center through their partnership to increase the number of health-related initiatives provided to students. Furthermore, the staff sought new partnerships and expanded collaborations with the College of Nursing on the Natchitoches campus. Health Services staff increased collaborations in 2024-2025 with other on-campus departments from 30 programs to 32 programs. Health Services sought out new partnerships and expanded collaborations with the Natchitoches Regional Medical System, offering referrals to be seen at NRMC Walk in Clinic with no out of pocket cost when further assessment or higher level of care is needed. The staff of Health Services collaborated with other on campus units to support 49 programs. On campus collaborations involved:

- Freshman/Parent Connection Orientation (5-21-2025, 5-28-2025, 6-12-2025 & 7-9-2025)
- Freshman Follies (5-21-2025, 5-28-2025, 6-12-2025 & 7-9-2025)
- Calm Room assistance (5-21-2025, 5-28-2025 & 7-9-2025)
- Distribution of Condoms and Educational Materials to CAPA (8-20-2025)
- Scholars College Student Orientation (8-21-2025)
- Color Chaos (8-18-2025)
- Information Station (8-18 & 19-2025)
- Faculty Institute Tabeling informational (8-14-2025)
- International Student Tour (8-15-2025)
- NSU Carnival (10-30-2025)
- Wellness Fest (11-04-2025)
- Freshman Connection Interviews (11-7-2025)
- College of Nursing: Nursing clinical site for 5th level students weekly for the Fall semester totaling 21 days

- Krewe of NSU (2-2-2026)
- Panelist for Miss Black and Gold (3-16-2026)
- Literary Rally (3-14-2026)
- Special Olympics (3-24-2026)
- Collaboration with SAB for Safe Spring Break (3-26-2026)
- Partnering with the Natchitoches Parish Health Unit and the Louisiana Department of Health mobile Wellness bus to provide STI testing and education (4-14-2026)
- Freshman Connection education on Health Services offerings (2-23-2026)

Decision:
In AC 2025-2026 the target was met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. The staff will maintain the goal of 32 collaborations with on campus departments and organizations. Health Services will utilize the resources of Natchitoches Regional Medical Center through their partnership to increase the number of health-related initiatives provided to students. Furthermore, the staff will seek new partnerships and expand collaborations with campus organizations and sports teams on the Natchitoches campus.

These changes will improve the student's ability **t**o be better informed about specific health resources available on campus for treatment and prevention, thereby continuing to push the cycle of improvement forward.

Measure 3.2 The Health Services staff will participate in a minimum of 15 programs hosted by off campus entities.

Finding: Target was met.

Analysis.
In AC 2024-2025 the target was met. The Health Services staff increased the number of Telehealth visits performed with NRMC, educating our students about the new service and what is included. They utilized the vast resources of the Natchitoches Regional Medical Center to collaborate more often on student health education. The staff reached out to off campus entities requesting collaboration on future projects and programs. Health Services staff were able to work with off campus organizations and health providers to plan and implement new programs and services offered. Staff collaborated with off-campus entities to provide support for 129 programs. Health Services sponsored Life Share blood drives (8-26 & 27-2024) (10-28 &29-2024), (1-28, 29 & 30-2025), (4-30-2025), Flu Shot Clinic partnered with Walgreens (10-2-2024), Nurse Family Partnership training (4-10-2025), Partnered with Natchitoches Parish Health Unit for STI testing and education (4-22 & 24-2025), Provided 117 Telehealth visits through the partnership with NRMC Walk in Clinic.

Based on the analysis of the AC 2023-2024results, the staff implemented the following changes in AC 2024-2025 to drive the cycle of improvement. The Health Services staff increased the number of Telehealth visits performed with NRMC, educate our students

about the new service and what is included. They utilized the vast resource of the Natchitoches Regional Medical Center to collaborate more often on student health education.

As a result of these changes, in AC 2025-2026 the target was met. The Health Services staff utilized the vast resource of the Natchitoches Regional Medical Center to collaborate more often on student health education. The staff reached out to off-campus entities requesting collaboration on future projects and programs. Health Services staff was able to work with off campus organizations and health providers to plan and implement new programs and services offered. Staff collaborated with off campus entities to provide support for 32 programs, not including referrals to NRMC Walk in Clinic. Health Services sponsored Life Share blood drives (9-2& 3-2025) (11-4 & 5-2025), (1-28 & 29-2026), (3-24 & 25-2026), Flu Shot Clinic partnered with Walgreens (9-30-2025) & (11-4-2025) during Wellness Fest, Nurse Family Partnership training (8-7-2025) while providing 3 student referrals for expectant mothers, Partnered with Natchitoches Parish Health Unit and Louisiana Mobile Wellness for STI testing and education (4-14-2026), Provided 324 referrals through the partnership with NRMC Walk in Clinic, Referred 17 students for appointments with Drs. Long and Mayeux.

Decision:
In AC 2025-2026 the target was met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. Health Services will educate students on the vast healthcare resources available and what is included. They will collaborate more often with NRMC to provide more specific healthcare education as well as requesting future collaborations with other off campus organizations.

These changes will improve the student's ability to increase knowledge about their heath, how to remain healthy by living a healthier lifestyle, what off campus services and programs are available in the community and how to utilize them and allowing the student to receive a higher level of care via the use of Telehealth services, thereby continuing to push the cycle of improvement forward.

SO 4. Health Services staff will work with federal and state health departments to participate in initiatives regarding personal and public health and expand services where possible.

Measure 4.1 Health Services staff will collaborate with the CDC in the United States Outpatient Influenza-like Illness Surveillance Network as a sentinel site for monitoring public health by 100% weekly report submissions.

Finding: Target was met.

Analysis.
In AC 2024-2025 the target was met. Health Services continued to be 100% compliant with testing and reporting to the CDC and Louisiana Department of Health of sentinel data, using their online reporting system. As the status of pandemic for COVID 19 has ended, online reporting is no longer required. Health Services remained compliant as new global health concerns arose and mandates

changed. Health Services remained 100% compliant with obtaining samples and reporting sentinel data to the Louisiana Department of Health using their online monitoring system. Health Services was 100% compliant with the report. ILI reporting helps the Department of Health determine which respiratory viruses are circulating in the region and helps determine what strains to include in the following flu vaccine. There were no reportable cases with flu checks completed on 30 patients yielding 12 positive results. Health Services continued testing patients for COVID 19, performing 494 tests, however, reporting to the Louisiana Department of Health was no longer required.

Based on the analysis of the AC 2024-2025 results, the staff implemented the following changes in AC 2025-2026 to drive the cycle of improvement. Health Services was 100% compliant with testing and reporting to the CDC and Louisiana Department of Health of sentinel data, using their online reporting system. Health Services must remain compliant as new global health concerns arise and mandates change.

As a result of these changes, in AC 2025-2026 the target was met. Health Services continued to be 100% compliant with obtaining samples and reporting sentinel data to the Louisiana Department of Health using their online monitoring system. Health Services was 100% compliant with the report. ILI reporting helps the Department of Health determine which respiratory viruses are circulating in the region and helps determine what strains to include in the following flu vaccine. There were no reportable cases with flu checks completed on 25 patients yielding 9 positive results. Health Services continued testing patients for COVID 19, performing 433 tests, however, reporting to the Louisiana Department of Health was no longer required.

Decision:
In AC 2025-2026 the target was met.

Based on the analysis of the AC 2025-2026 results, the staff will implement the following changes in AC 2026-2027 to drive the cycle of improvement. Health Services will be 100% compliant with testing and reporting to the CDC and Louisiana Department of Health of sentinel data, using their online reporting system. Health Services will remain compliant as new global health concerns arise and mandates change.

These changes will improve the student's ability to actively participate in the regional data collection of respiratory viruses are circulating in the country and to help determine what strains to include in flu vaccine for the next years thereby continuing to push the cycle of improvement forward.

Assessment Cycle 2025-2026

Comprehensive summary of key evidence of improvements based on analysis of results. The following reflects all the changes implemented to drive the continuous process of seeking improvement in AC 2025-2026. These changes are based on the knowledge gained through the AC 2024-2025 results analysis.

1.1: The target must remain at 100% of students receiving complaint specific documents provided by the nurses at Health Services.

1.2: The electronic survey was available for students to complete in both the Fall and Spring semesters with a 95% goal of students reporting increased knowledge about their current health condition. All front desk workers encouraged all students to complete the satisfaction survey, increasing survey participation to 15%.

1.3: We provided education to each student on the use of medications, how to improve their health more quickly, and the use of telemedicine to decrease missed class time.

2.1: Health Services was 100% compliant with EMR software updates. Accounts were created and inactivated as needed for changing staff in the counseling services intern program. Health Services participated in all updates provided by the software company. Templates were added or adjusted to improve workflow. The Patient Portal were utilized more frequently to communicate with students and provide medical education in a more technologically advanced way. Set up new accounts on the Shreveport campus and provide training for new personnel.

2.2: The staff posted more frequently to the Instagram page providing weekly tips for health improvement and disease prevention, encouraged use of the electronic survey, and increased the usage of the Patient Portal. The task of posting relevant health information, reminders, and news was shared by the health director and clinic nurse.

3.1: The staff collaborated 32 times with on and off campus departments and organizations. Health Services utilized the resources of Natchitoches Regional Medical Center through their partnership to increase the number of health-related initiatives provided to students. Furthermore, the staff sought new partnerships and expanded collaborations with organizations and sports teams on the Natchitoches campus.

3.2: The Health Services staff increased the number of Telehealth visits performed with NRMC, educate our students about the new service and what is included. They utilized the vast resource of the Natchitoches Regional Medical Center to collaborate more often on student health education.

4.1: Health Services was 100% compliant with testing and reporting to the CDC and Louisiana Department of Health of sentinel data, using their online reporting system. Health Services must remain compliant as new global health concerns arise and mandates change.

Plan of action moving forward.

1.1: The target must remain at 100% of students receiving complaint specific documents provided by the nurses at Health Services.

Assessment Cycle 2025-2026

1.2: The electronic survey will remain available for students to participate in, in both the Fall and Spring semesters with a 95% goal of students reporting increased knowledge about their current health condition. All front desk workers will encourage all students to complete the satisfaction survey, increasing survey participation to 20%.

1.3: We provided education to each student on the use of medications, how to improve their health more quickly, and the use of telemedicine to decrease missed class time.

2.1: Health Services will remain 100% compliant with EMR software updates. Accounts will be created and inactivated as needed for changing staff in the counseling services intern program. Health Services will participate in all updates provided by the software company. Templates will be added or adjusted to improve workflow. The Medicat system will update to the newest version of Medicat software, Medicat One and attend training on the new system. The Patient Portal will be utilized to communicate with students and provide medical e Patient a more technologically advanced way. They will continue to set up new accounts on the Shreveport campus and provide training for new personnel.

2.2: The staff will post more frequently to the Instagram page following new ADA guidelines, providing followers with weekly tips for health improvement and disease prevention, encouraged use of the electronic survey, and increased the usage of the Patient Portal after system upgrade and Medicat One training. The task of posting relevant health information, reminders, and news was shared by the health director and clinic nurse.

3.1: The staff will maintain the goal of 32 collaborations with on campus departments and organizations. Health Services will utilize the resources of Natchitoches Regional Medical Center through their partnership to increase the number of health-related initiatives provided to students. Furthermore, the staff will seek new partnerships and expand collaborations with campus organizations and sports teams on the Natchitoches campus.

3.2: Health Services will educate students on the vast healthcare resources available and what is included. They will collaborate more often with NRMC to provide more specific healthcare education as well as requesting future collaborations with other off campus organizations.

4.1: Health Services will be 100% compliant with testing and reporting to the CDC and Louisiana Department of Health of sentinel data, using their online reporting system. Health Services will remain compliant as new global health concerns arise and mandates change.