



FLORIDA INTERNATIONAL UNIVERSITY
BOARD OF TRUSTEES
HEALTH AFFAIRS COMMITTEE

Thursday, December 1, 2016
10:30 am *approximate start time
Florida International University
Modesto A. Maidique Campus
Graham Center Ballrooms

Committee Membership:

Jose J. Armas, *Chair*; Justo L. Pozo, *Vice Chair*; Cesar L. Alvarez; Jorge L. Arrizurieta; Leonard Boord;
Michael G. Joseph

AGENDA

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|--|-----------------------------------|
| 1. Call to Order and Chair's Remarks | Jose J. Armas |
| 2. Approval of Minutes | Jose J. Armas |
| 3. Academic Health Center (AHC) Reports <i>(No Action Required)</i> | |
| 3.1 General Update | John A. Rock |
| 3.2 NWCNHS Comparisons of Faculty Salaries and Faculty to Student Ratios | Kenneth G. Furton |
| 3.3 Zika Awareness Program and Implementation | Eneida O. Roldan |
| 3.4 FIU Student Health Update | Eneida O. Roldan
Cheryl Nowell |
| ■ Budgetary Analysis of Student Health Fee | Matilde Gramling |
| 4. Information Items <i>(No Action Required)</i> | |
| 4.1 School of Integrated Science and Humanity | Walter Van Hamme |
| 4.2 Herbert Wertheim College of Medicine | John A. Rock |
| 4.3 Robert Stempel College of Public Health and Social Work Update | Tomás R. Guilarte |
| 4.4 Nicole Wertheim College of Nursing and Health Sciences | Ora L. Strickland |
| 4.5 Board of Governors Health Initiatives Committee | John A. Rock |
| 5. New Business <i>(If Any)</i> | Jose J. Armas |
| 6. Concluding Remarks and Adjournment | Jose J. Armas |

The next Health Affairs Committee Meeting is scheduled for Friday, March 3, 2017

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2. Approval of Minutes

Approval of Minutes

THE FLORIDA INTERNATIONAL UNIVERSITY
BOARD OF TRUSTEES
Health Affairs Committee
December 1, 2016

Subject: Approval of Minutes of Meeting held September 1, 2016

Proposed Committee Action:

Approval of Minutes of the Health Affairs Committee meeting held on Thursday, September 1, 2016 at the Modesto A. Maidique Campus, Graham Center Ballrooms.

Background Information:

Committee members will review and approve the Minutes of the Health Affairs Committee meeting held on Thursday, September 1, 2016 at the Modesto A. Maidique Campus, Graham Center Ballrooms.

Supporting Documentation: Minutes: Health Affairs Committee Meeting, September 1, 2016

Facilitator/Presenter: Jose J. Armas, *Health Affairs Committee Chair*

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**FLORIDA INTERNATIONAL UNIVERSITY
BOARD OF TRUSTEES
HEALTH AFFAIRS COMMITTEE
MINUTES
September 1, 2016**

1. Call to Order and Chair's Remarks

The Florida International University Board of Trustees' Health Affairs Committee meeting was called to order by Committee Chair Jose J. Armas at 9:51 am on Thursday, September 1, 2016, at the Modesto A. Maidique Campus, Graham Center Ballrooms.

The following attendance was recorded:

Present

Jose J. Armas, *Chair*
Justo L. Pozo, *Vice Chair*
Jorge L. Arrizurieta
Leonard Boord
Michael G. Joseph

Board Chair Claudia Puig and Trustees Alian Collazo, Marc D. Sarnoff, and Kathleen L. Wilson, and University President Mark B. Rosenberg were also in attendance.

Committee Chair Armas welcomed all Trustees, University faculty and staff to the meeting.

2. Approval of Minutes

Committee Chair Armas requested the approval of minutes of the Health Affairs Committee meeting held on Wednesday, December 9, 2015. A motion was made and passed to approve the minutes of the Health Affairs Committee Meetings held on Wednesday, December 9, 2015.

3. Academic Health Center Reports

3.1 Course of Action for Passing Rates for National Council of Licensure Examination

Dean of the Nicole Wertheim College of Nursing and Health Sciences, Ora Strickland presented an update on the first time pass rates for students taking their respective licensure exams. She reported that over the past five years, for all disciplines except nursing, there has been a consistent rise in first time pass rates in licensure exams. She noted that the progress of initiatives established to increase first time pass rates cannot be immediately measured given that most programs take two to three

years to complete. She provided an overview of first time pass rates in terms of academic programs requiring licensure examinations within the College.

Dean Strickland noted that in addition to projected massive nurse staffing shortages, the nation's nursing schools are also facing a shortage of faculty members. She mentioned that attracting and retaining quality faculty is highly competitive, adding that experienced faculty and an adaptive curriculum to reflect the changing health care field are key to student success. She delineated other factors that impact first time pass rates, noting that non-traditional aged and foreign educated students have a greater likelihood of not performing as well on their first attempt.

Committee Chair Armas requested, for the next regularly scheduled meeting, a benchmark analysis of similar institutions, both public and private, that compares use of adjunct faculty, faculty to student ratio, and faculty salaries.

3.2 General Update

Dean and Senior Vice President for Health Affairs, John A. Rock, provided a status report on the impact of the Zika virus on South Florida. He stated that FIU is committed to responding to the growing concern and requested that Chief Executive Officer of the FIU Health Care Network; Dr. Eneida O. Roldan and Professor and Clinical Lab Director, Department of Medicine Dr. Aileen Marty further elaborate on the University's education and prevention efforts.

Dr. Roldan reported that a University-wide taskforce was established in order to raise awareness amongst the University community regarding the Zika virus. Professor Marty presented information on the history of the Zika virus, how it is transmitted, and also discussed recommended means of prevention.

Committee Chair Armas requested a follow-up report, for the next Health Affairs Committee meeting, that details the University's Zika awareness program and its implementation, along with information on communication efforts and access to care in terms of the student population.

3.3 Integration of FIU Student Health Services (SHS) with the FIU Health Care Network

Dr. Roldan reported that the estimated date of completion for construction is October 2016. She reported that SHS is now offering specialty care, such as dermatology and she reported that there has been an increase in women's health services, such as gynecology.

3.4 Benchmark Analysis of Student Health Services within the State University System

Dr. Roldan reported that the following metrics have been compared: student health fees; insurance mandate; eligibility; services offered; hours of operations; percentages of residential versus commuting students; and; an analysis of the 2015-16 FIU SHS. She reported that FIU's services had a utilization rate of 23% for the fiscal year 2015-16, representing an increase of 3% over the prior year despite disruptions such as the transition, integration of services, realignment, and construction.

Trustee Leonard Boord requested follow-up in terms of the student health fee comparative analysis in order to allow for further comprehensive benchmarking. For the next regularly scheduled Committee meeting, Committee Chair Armas requested a detailed budgetary analysis in terms of the

University's health fee, the premium, allocations, and a historical benchmark on student access to health services. He requested information on next steps in terms of increasing access of care for students and substance abuse in relation to behavioral health services.

Trustee Collazo inquired as to student outreach efforts in terms of sharing information on new services provided by FIU Health. He stated that in his interactions with the student population, he has been made aware of a lack of awareness in relation to the available health services on campus. In response to Trustee Collazo's inquiry, Dr. Roldan added that since the integration, SHS clinical services have increased particularly in women's health and behavioral health. She noted that specialty care has been increased by adding dermatology services.

3.5 Overview of FIU Health Care Network Behavioral Services

Dr. Roldan reported that the University has welcomed a new Director of Behavioral Health Services. She mentioned that behavioral health services will focus on increasing and enhancing the therapeutic and psychiatric services that are offered.

4. Information Items

Committee Chair Armas requested that the reports within the Information Items be accepted as written. There were no objections.

5. New Business

No new business was raised.

6. Concluding Remarks and Adjournment

With no other business, Committee Chair Jose J. Armas adjourned the meeting of the Florida International University Board of Trustees Health Affairs Committee on Thursday, September 1, 2016 at 10:50 a.m.

Trustee Requests	Follow-up	Completion Date
1. <i>Committee Chair Armas requested a follow-up report, for the next Health Affairs Committee meeting, that details the University's Zika awareness program and its implementation, along with information on communication efforts and access to care in terms of the student population.</i>	<i>Chief Executive Officer, FIU Health Associate Dean, Eneida O. Roldan</i>	<i>December 1, 2016</i>
2. <i>Committee Chair Armas requested, for the next regularly scheduled meeting for Dean Strickland to provide a benchmark analysis of similar institutions, both public and private, that compares use of adjunct faculty, faculty to student ratio, and faculty salaries.</i>	<i>Dean of the College of Nursing and Health Sciences, Dr. Ora Strickland</i>	<i>December 1, 2016</i>

3. <i>Trustee Collazo inquired as to student outreach efforts in terms of sharing information on new services provided by FIU Health. He stated that in his interactions with the student population, he has been made aware of a lack of awareness in relation to the available health services on campus.</i>	<i>Chief Executive Officer, FIU Health Associate Dean, Eneida O. Roldan</i>	<i>December 1, 2016</i>
4. <i>Committee Chair Armas requested a detailed budgetary analysis in terms of the University's health fee, the premium, allocations, and a historical benchmark on student access to health services. He requested information on next steps in terms of increasing access of care for students and substance abuse in relation to behavioral health services.</i>	<i>Chief Executive Officer, FIU Health Associate Dean, Eneida O. Roldan</i>	<i>December 1, 2016</i>
5. <i>Committee Chair Armas requested for Dr. Eneida O. Roldan to provide an update on the integration of FIU Student Health Services with FIU Health Care Network.</i>	<i>Chief Executive Officer, FIU Health Associate Dean, Eneida O. Roldan</i>	<i>On-going</i>

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3.3 Zika Awareness Program and Implementation



University-wide actions regarding ZIKA

DEPARTMENT	ACTIONS	DATE
Department of Emergency Management (DEM)	<ul style="list-style-type: none"> • Post information, hotline number, and links to local, state, federal, and FIU resources at dem.fiu.edu • Disseminate information from Miami-Dade County to appropriate departments. • Coordinate University actions to ensure consistency, including student awareness campaign at move-in, convocation, week of welcome, and athletic events. • 25,056 repellant towelettes and educational materials were distributed to students. • Convened University-wide task force to address ongoing issues and potential for research. • Participated in a conference call with UCF staff to inform them of the actions FIU is taking re: Zika. • Received forwarded email from FIU's Biscayne Bay Campus (BBC) Student Health. County wanted FIU to sign waiver to place mosquito trap there. Forwarded to General Counsel who had concerns about the language. 	<p>Started February 2016, ongoing</p> <p>Began July 2016, ongoing</p> <p>August 2016, ongoing</p> <p>August 16-30, 2016</p> <p>September 9, 2016, ongoing</p> <p>September 8, 2016</p> <p>October 19, 2016</p>
Environmental Health & Safety (EHS)	<p>General Safety</p> <ul style="list-style-type: none"> • Zika prevention awareness has been incorporated into the EH&S New Employee Experience training presentation and it is on-going. • Inspection criteria has been established and incorporated into already existing EH&S inspections of all sites and satellite locations. EH&S inspections are on-going. • Zika awareness and mosquito control measures have been incorporated into pre-event planning sessions and added to the criteria for on-site inspections. • Information updates regarding Zika have been added to the meeting agenda of the Employee Safety Committee. 	Ongoing

	<p>Treatment</p> <ul style="list-style-type: none"> As recommended by the CDC, the Florida Department of Health, and Miami-Dade County, FIU's contractor Aramark is currently using Bacillus Thuringiensis Israelensis (BTI) for treatment for mosquito and larvae control. Ongoing treatment includes: <ul style="list-style-type: none"> Bromeliads, any associated standing water, Currently storm water drains, Ponds and small water systems. Treatment of Lakes: It was verified with the FIU contractor that large water bodies like lakes do not need to be treated. <p>Regulatory Safety/Environmental</p> <ul style="list-style-type: none"> Consulted the Florida Department of Environmental Protection Association (EPA) for guidance on treating FIU lakes/ponds, drains, and storm water systems, and to coordinate a site visit to FIU. EPA referred FIU's EH&S Department to Miami Dade County Department of Solid Waste Management Mosquito Control Section (MCS). <ul style="list-style-type: none"> Contacted Chalmers Vasquez, Operation Manager of MCS for guidance as advised by EPA. <i>Neither EPA nor MCS are conducting site visits unless they are associated with treatment and sampling.</i> Contacted Department of Environmental Resource Management (DERM) Safety Officer Alain Donderiz who confirmed that Naled and BTI are being used for mosquito and larvae control. He referred EH&S to the Miami-Dade Mosquito Control Section for more information. <p>General Safety</p> <ul style="list-style-type: none"> A web banner and links to University Zika awareness information have been added to the EH&S webpage. <p>Treatment</p> <ul style="list-style-type: none"> As recommended by the CDC and the Florida Department of Health, Miami-Dade County applied Naled in specific targeted areas in the county to reduce the population of adult mosquitos and BTI for larvae on 08/04/2016. <p>Safety Data Sheets (SDS) Reviews</p> <ul style="list-style-type: none"> Reviewed Safety Data Sheets (SDS) for the two most commonly used insecticides for mosquito prevention and larva control: Naled and BTI. Per the EPA, BTI is an approved biological alternative for mosquito larvae control that does not pose a risk to humans, crops, water supplies, or wildlife with the exception of mosquitos, fungus gnats, and black flies.
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Completed as of August 19, 2016

	<ul style="list-style-type: none"> • Proper application and recommended concentration of Naled is required to minimize environmental and health risks. • <i>BTL was FIU's choice of treatment for bromeliads, ponds, and associated standing water.</i> 	
External Relations	University-wide emails for Zika education and information have been sent with appropriate links to FL Dept. of Health, CDC, and FIU resources.	August 5 and 19, 2016
Parking and Transportation	Placed signs at the Modesto A. Maidique Campus (MMC), BBC, and Engineering Center (EC) entrances reminding everyone to take personal precautions to prevent mosquito bites. Placed signs at FIU sites on Miami Beach.	August 19, 2016
Regional Academic Locations	Direct outreach from Dr. Pablo Ortiz's office to each of the academic location directors to inform them to call Facilities for any standing water. <ul style="list-style-type: none"> • Jewish Museum of Florida-FIU worked with the City of Miami Beach to drain their parking lot. 	August 19, 2016 August 23, 2016 Ongoing
Facilities Management Department (FMD)	<p>At all campuses and regional academic locations, FMD surveys and assesses any areas where there may be standing water whether by accident or design and takes action to correct/eliminate/mitigate.</p> <p>Examples:</p> <ol style="list-style-type: none"> 1. Because bromeliad plants retain water, they are now being treated with an insecticide pellet designed to prevent/kill mosquito larvae. Treatments started approximately one (1) week from August 19. 2. Where recycling containers were identified with water, they have all been emptied and are now secured with the tops closed to prevent water collection. 3. The loading dock at the Wolfsonian-FIU Annex has an area that tends to retain water. It is now being sprayed for mosquitoes. First spraying applied Wednesday, Aug. 17. 4. Where vehicles have created divots and ditches in the grass that retain water, we are re-sodding to eliminate the standing water. <p>FMD and FIU's Office of Research and Economic Development (ORED) collaborated to identify locations where tubs are used by researchers/academics. The result was clarification that while these tubs contained standing water, the tubs/research do not promote mosquito larvae. In some cases, they include mosquito eating fish.</p> <p>Staff from FMD and Aramark attended training on mosquito abatement offered by Miami-Dade County.</p>	August 8, 2016

	<p>A Miami-Dade County Contractor treated storm drains at MMC with Spinosad. They identified a large metal container in front of Building A at the University Apartments and garbage cans full of water between Chili's and the bookstore as containing mosquito larvae. Both areas were treated and reported to Facilities for continued monitoring.</p> <ul style="list-style-type: none"> County requested dates and locations for any large scale outdoor events. 	September 26, 2016
Athletics	<p>FIU Health is collaborating with the Athletic Department to be available at game openers with educational materials and samples of insect repellent.</p> <ul style="list-style-type: none"> The athletic training room has a Zika station with bottles of repellent containing effective ingredients. Signage on training room doors encourages student athletes in need of repellent to please visit the station to spray themselves. During practices, training staff have bottles of repellent and sunscreen for the student athletes. All visiting teams attending outdoor competitions have been instructed through the competition letter to bring mosquito repellent with them. (FIU Athletic training staff maintain a supply of repellent as necessary.) 	<p>Beginning August 24, 2016</p> <p>Ongoing</p>
Student Affairs Health Promotion Services	<ul style="list-style-type: none"> FIU Health and Health Promotion Services (HPS) sponsored in-service training to educate all staff about Zika. The in-service included recommended protocols on probable cases and intra-office communication of Zika updates. The Healthy Living Program (HLP) developed a brief slide on Zika education to be incorporated in sexual health presentations. For all other presentations, a HLP staff member briefly shares Zika information when he/she is covering the services offered at the Student Health Center. FIU Health and/or HLP will offer Zika education workshops to educate the University community about ways to minimize the possibility for Zika transmission. External Relations submitted a Zika article for the FIU Parent Newsletter. (August edition) HLP and FIU Health work with External Relations to create appropriate messaging. Messages are tailored to the current situation for the area and will be sent as necessary. HLP staff discussed Zika prevention during the Residential Life RA training. During the presentation, RAs were asked to share the information with their residents. 	<p>August 31, 2106</p> <p>Ongoing</p> <p>TBD</p> <p>August 22, 2016</p> <p>Ongoing</p> <p>August 11, 2016</p>

	<ul style="list-style-type: none"> • The HLP staff compiled prevention materials for RA bulletin boards. They provided RA's with the materials to post in the dormitories. • HLP Staff provided the FIU Pharmacy with Zika prevention handouts they can provide with every purchase. • The HLP staff posted educational Zika messaging on all of its social media platforms. • The FIU News article on Zika was submitted to SH 101 for the September Article. • HLP and SHS coordinated staff attendance at the annual Housing Knock-Knock event. Staff provided information about Zika transmission and prevention. • HLP works with FIU Farmer's Market leadership to provide information during the Farmer's Market on Zika transmission and prevention. • HPS posts Zika messaging throughout the electronic message boards at SHC. In addition, HPS information is posted throughout the different electronic boards at both MMC and BBC • HLP distributed Zika prevention information during week of welcome. • In collaboration with FIU Campus Life, HPS distributed insect repellent during various health promotion events and initial opening athletic events. • Information and a sample of repellent towelettes were given to approximately 1000 students who participate in intramural athletics. 	<p>August 22, 2016</p> <p>Ongoing</p> <p>Ongoing</p> <p>August 19, 2016</p> <p>September 5, 2016</p> <p>Ongoing</p> <p>Ongoing</p> <p>August 22, 2016, ongoing</p>
FIU Health/Student Health	<ul style="list-style-type: none"> • Available for health care, information, and evaluations regarding Zika concerns. • Courier service now utilized to take samples from FIU (FIU Health, Student Health at BBC and MMC, NHELP) to Dept. of Health (DoH) on patients who the DoH has approved for testing. • Zika research: Dr. Dorothy Contiguglia-Akcan, Primary Care and Travel Medicine Specialist is designing a screening questionnaire for risk factors or symptoms of Zika infection to better identify patients to receive DoH testing. She has proposed a descriptive study assessing FIU students for prevalence of risk factors for Zika infection. • Global Health Consortium: Discussions among Dr. Contiguglia-Akcan, Dr. Carlos Espinal, Director of FIU Global Health Consortium (http://ghc.fiu.edu/), and Dr. William Darrow, Professor from Stempel College of Public Health and Social Work have focused on creating a public health issues work group with a current emphasis on Zika and applications for sponsored research. 	<p>Ongoing</p> <p>October 13, 2016, ongoing</p>

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Board of Trustees Health Affairs Committee Agenda Item 3.4: FIU Student Health Update

BACKGROUND INFORMATION

On July 1, 2015 the FIU Academic Health Center Health Care Network Faculty Group Practice, Inc. (HCN) and the FIU Division of Student Affairs (DSA) entered into a one-year agreement for the management and related support services of Student Health Services (SHS). The agreement was to be governed by a Joint Governance Committee (JGC) for Student Health.

During the 2015-2016 Academic Year (AY), the Board of Trustees Health Affairs Committee (BOT-HAC) received on-going reports about the integration of clinical services to the HCN - as reported to you by Dr. Eneida O. Roldan.

Highlights of the clinical integration of services include:

- On July 1, 2015, the clinical services of SHS went under the management of HCN clinical services including the following -
 - General Care (well-care and preventive care services); Behavioral Health and Psychiatry (*expanded after November 2015*); Women's Health Services and procedures under this service (*expanded after November 2015*); Dermatology (*expanded in February 2016*); Laboratory services; Immunizations/Vaccinations; Sexually Transmitted Infection (STI) testing and treatment; and Pharmacy services.
- Personnel under the management of FIU Health Care Network includes the following -
 - HCN management team, Student Health Clinics (SHC) administration directors, and SHC administration support staff
 - Providers of direct clinical care services include: Physicians (primary care, psychiatrists, gynecology, dermatology), Nurses, Certified Medical Assistants, and Pharmacists
- On November 3, 2015, under the leadership and management of HCN, a realignment of operations was completed. In November, renovations to the Student Health Center began (in the exterior and in areas delivering clinical services).
- Effective July 1, 2016, HCN and DSA entered into a three-year renewal agreement. This new agreement clarified some funding and operational expectations for both units, and re-established the JGC.

EXECUTIVE SUMMARY

National trends are evaluated yearly to ensure that we are offering our students the services they need. The American College Health Association's National College Health Assessment offers great highlights on students across the U.S. (NOTE: [Spring 2016 report](#) is the most current report available. The summary below contains highlights only. Please click on link above to access the complete report.)

Summary of findings

- 51.2% of college students surveyed described their health as **very good** or **excellent**.
- 84.3% of college students surveyed described their health as **good, very good** or **excellent**.
- 53.5% of college students reported being diagnosed or treated by a professional with one or more of the following conditions within the last 12 months:
 - Allergies - 18.8%
 - Asthma - 8.9%
 - Back pain - 12.5%
 - Broken bone/fracture/sprain - 6.0%
 - Bronchitis - 6.1%
 - Chlamydia - 1.4%
 - Diabetes - 1.2%
 - Ear infection - 6.6%
 - Endometriosis - 0.9%
 - Genital herpes - 0.7%
 - Genital warts/HPV - 0.9%
 - Gonorrhea - 0.4%
 - Hepatitis B or C - 0.3%
 - High blood pressure - 3.2%
 - High cholesterol - 2.9%
 - HIV infection - 0.2%
 - Irritable Bowel Syndrome - 3.0%
 - Migraine headache - 8.4%
 - Mononucleosis - 1.5%
 - Pelvic Inflammatory Disease - 0.2%
 - Repetitive stress injury - 1.9%
 - Sinus infection - 15.2%
 - Strep throat - 9.8%
 - Tuberculosis - 0.3%
 - Urinary tract infection - 10.0%
- Proportion of college students who have reported the following disabilities or medical conditions:
 - Attention Deficit and Hyperactivity Disorder (ADHD) - 7.0%
 - Chronic illness (cancer, diabetes, auto-immune disorders) - 5.1%
 - Deaf/hard of hearing - 1.9%
 - Learning disability - 4.3%
 - Mobility/dexterity disability - 1.0%
 - Partially sighted/Blind - 2.3%
 - Psychiatric condition - 7.5%

- Speech or language disorder - 0.9%
- Other disability - 2.5%

Academic impacts

- Within the last 12 months, students reported the following factors affecting their individual academic performance, defined as: received a lower grade on an exam or important project; received a lower grade in the course; received an incomplete or dropped the course; or experienced a significant disruption in thesis, dissertation, research or practicum work.
 - Anxiety - 23.2%
 - Cold/flu/sore throat - 14.5%
 - Concern for a troubled friend or family member - 11.0%
 - Depression - 15.4%
 - Internet use/computer games - 11.0%
 - Relationship difficulties - 9.4%
 - Sleep difficulties - 20.7%
 - Stress - 31.8%
 - Work - 14.3%

Violence, abusive relationship and personal safety

- Within the last 12 months, college students reported experiencing:
 - A physical fight - 4.1%
 - A physical assault (not sexual assault) - 2.9%
 - A verbal threat - 16.3%
 - Sexual touching without their consent - 7.8%
 - Sexual penetration attempt without their consent - 3.2%
 - Sexual penetration without their consent - 2.0%
 - Stalking - 5.1%
 - An emotionally abusive intimate relationship - 8.4%
 - A psychically abusive intimate relationship - 1.9%
 - A sexually abusive intimate relationship - 1.9%

Alcohol, tobacco and other drug use

- Any use within the last 30 days:
 - Alcohol - 63.6%
 - Marijuana - 18.6%
 - Cigarette - 9.2%

Sexual behavior

- College students reported having the following number of sexual partners (oral, vaginal or anal intercourse) within the last 12 months:
 - None - 32.5%
 - One - 43.6%
 - Two - 9.1%
 - Three - 5.5%
 - Four or More - 9.4%

- Of those reported having intercourse, 53.2% report using contraceptive use the last time they had vaginal intercourse.
- Reported means of birth control used among college students or their partner to prevent pregnancy:
 - Birth control pills - 56.3%
 - Male condom - 61.5%
 - Withdrawal - 29.7%
- 16.4% of sexually active college students reported using (or reported their partner used) emergency contraception ("morning after pill") within the last 12 months

Nutrition and exercise

- 59.6% of college students reported eating 1-2 servings of fruits and vegetables per day
- 27.9% of college students reported eating 3-4 servings of fruits and vegetables per day
- 22.1% do no moderate-intensity cardio or aerobic exercise for at least 30 minutes
- 58.0% do moderate-intensity cardio or aerobic exercise for at least 30 minutes 1-4 days per week
- 19.8% do moderate-intensity cardio or aerobic exercise for at least 30 minutes 5-7 days per week

Mental health

- 49.8% of college students reported they felt things were hopeless any time within the last 12 months
- 85.1% reported feeling overwhelmed by all they had to do
- 81.7% felt exhausted (not from physical activity)
- 59.3% felt very lonely
- 65.0% felt very sad
- 36.7% felt so depressed that it was difficult to function
- 58.4% felt overwhelming anxiety
- 39.6% felt overwhelming anger
- 9.8% seriously considered suicide
- 1.5% attempted suicide
- 6.7% intentionally cut, bruised or otherwise injured themselves

Many of the statistics in this report are in line with trends at FIU and across the State University System (SUS).

Over the last few BOT-HAC meetings, the Committee members have raised several questions about FIU's Student Health Fee and related services in its entirety, inclusive of structure, utilization, budgets, and outreach efforts (refer to prior BOT-HAC minutes for details). The Committee's observations have led us to observe a pattern of concerns that we hope to address with these materials.

Key questions addressed will be:

- 1) *What health services are available to students at FIU?*
 - a. Refer to pages 6-11
 - b. Documentation includes information on fee coverage and pricing.
- 2) *How many FIU students are eligible for the aforementioned health services?*
 - a. Refer to pages 12-13
 - b. Documentation includes data on FIU fee billing.
- 3) *How does our health fee compare across the State University System (SUS)?*
 - a. Refer to pages 14-15
 - b. Documentation includes data on SUS fee comparisons.
- 4) *How do our services compare to what is offered by other SUS institutions?*
 - a. Refer to pages 16-20
 - b. Documentation includes service-by-service comparison of each university
- 5) *How is the student health fee allocated?*
 - a. Refer to pages 21-36
 - b. Documentation includes information on fee distribution as well as budget allocation charts for 2015-2016 and 2016-2017
- 6) *Do our students have enough access to the aforementioned services?*
 - a. Refer to pages 37-44
 - b. Documentation includes information on hours of operations as well as utilization charts for 2015-2016
- 7) *How does the university address alcohol and substance abuse?*
 - a. Refer to pages 45-46
 - b. Documentation includes background on our programs/services as well as data on incidents for the last two years
- 8) *What is the plan to market student health resources, improve services and increase capacity?*
 - a. Refer to pages 47-54
 - b. Documentation include information on the 2017-2018 system-wide LBR as well as the 2016-2017 marketing plan for FIU Student Health Services

Two addendums have also been provided as references: Definition of Acronyms (page 55-58) and Definition of Key Terms (pages 56-57).

Q1. WHAT HEALTH SERVICES ARE AVAILABLE TO STUDENTS AT FIU?

What is the Health Fee?

The Student Health Fee is a mandatory fee that is charged to all students each semester, except those enrolled in a fully-online degree programs, high school dual enrolled, employees using tuition waivers, and students enrolled in programs outside of the U.S. such as Tianjin, Jamaica, etc.

Currently, the health fee is \$93.69 per semester.

What is the Health Fee Used For?

The health fee allows the University to provide high quality, affordable clinical, preventative care and mental health services at convenient on-campus locations by various departments. These departments include:

- Student Health Clinics (SHC)
- Healthy Living Program (HLP)
- Counseling and Psychological Services (CAPS)
- Victim Empowerment Program (VEP)
- Disability Resource Center (DRC)

What Services Does the Health Fee Pay For?

Services funded through the health fee include access to:

- primary health care
- health education
- limited specialty care
- class presentations
- health fairs
- services for students with disabilities
- counseling for issues such as anxiety or depression, and
- support services for victims of emotional or physical abuse.

These services are offered for free or at a lower cost due to funding from the health fee.

Where do I go if...

I feel sick



I feel sad or anxious



I need a vaccine



I need medication



I can't sleep



I feel stressed



I need insurance



I want to improve my diet
or change my weight



I need HIV/STI testing or information



I need assistance in the classroom or
ADA services because of a disability



I have been sexually assaulted or
need help with cyber harassment,
stalking or relationship abuse



Clinic

See a health care provider who can help diagnose and treat injuries or illness. You can also receive vaccines such as flu shots, MMR, Hepatitis B and other vaccines. All consultations and records are confidential.



Counseling

Get free and confidential counseling that will help you to feel better and improve your mood.



Disability Resource Center

Meet with an Access Consultant to discuss what assistance you need to be successful in your courses, such as American Sign Language (ASL) interpreters, captioning services, qualified readers and scribes, electronic text book access, extended time on exams and note takers.



Health Compliance

Find information about health insurance and immunization holds or requirements.



Healthy Living Program

Learn ways to stay healthy and make healthier choices. You can also access alternative treatments like acupuncture, massage, stress management and aromatherapy. Also find free condoms and other family planning materials.



Nutrition

Plan to gain more energy, lose weight or manage disordered eating with a consultation to learn about eating habits, nutrition, portion sizes and more.



Pharmacy

Buy over the counter products and medications such as pain relievers, insect repellent, sunscreen, cold and allergy. Also fills prescriptions from your medical provider.



Victim Empowerment Program

Get confidential support for you or a friend who is experiencing threatened or actual violence, ranging from stalking to revenge porn and sexual assault. VEP helps students create healthy relationships and heal from past trauma.

Do I have to pay for services?

Your Health Fee, which is \$93.69 each semester, covers the cost for an office visit with a healthcare provider at Student Health Services. If the provider determines that you need tests or additional procedures, you will need to pay out-of-pocket for these unless you are enrolled with the FIU student health insurance plan. At FIU, the health fee helps offset these services so you may pay a lower cost. These tests and additional procedures include vaccines, lab tests (blood work, urinalysis, etc.), STD testing, medication and other specialty visits. Most services at Health Promotion Services and CAPS are free of charge. However, nominal fees apply for specialty services such as acupuncture, massage and psychological assessments. For more detailed information, please visit: go.fiu.edu/healthfee or talk to your provider during your office visit.

Where are these services offered?

The majority of student health services are provided within the Student Health Center located at the Modesto A. Maidique Campus (MMC) and the Student Health Services building at the Biscayne Bay Campus (BBC).

Some services are provided at other locations on campus. For example: the DRC is located within the Graham University Center at MMC, and some CAPS and VEP services are provided within the Wolfe University Center at BBC.



Student Health Center at MMC



Student Health Services at BBC

Fee Schedule

The following outline, which will also be produced as a flyer and promoted to the student body starting Spring 2017, are services and procedures that are covered by the health fee or offered at a reduced cost. (Services with supplemental fees are billed to the student or their University-sponsored insurance plan.)

Immunization/Vaccinations

Flu Vaccine	Covered by Health Fee
Gardasil 9 (HPV)	\$ 150.00 per injection
Hepatitis A	\$ 46.00 per injection
Hepatitis B	\$ 70.00 per injection
Meningitis	\$ 105.00
MMR – Measles, Mumps, Rubella	\$ 60.00 per injection
TDAP	\$ 45.00
TD (Tetanus)	\$ 40.00
Twinrix (Hep A&B)	\$ 100.00 per injection
Varicella Vaccine	\$ 90.00 per injection

Titers

Hepatitis B Antibody IGG	\$ 10.50
MMR Panel (Measles, Mumps, & Rubella)	\$ 37.50
Varicella (Chicken Pox)	\$ 16.50
Allergy-Single Injection	\$ 8.00
TB Skin Test (PPD)	\$ 15.00
Vitamin B-12	\$ 10.00

General Care

Consultation with Healthcare Provider	Covered by Health Fee
Preventative Health Physical	Covered by Health Fee
Study Abroad Physical	\$ 25.00
Academic Physical (Pre-Matriculation)	\$ 25.00
Walk-on Athletic Physical	\$ 106.00
Missed Appointment Fee	\$ 10.00/\$25.00

Women's Health Services

Annual Well-Woman Exam (Age 21 & over includes Pap Smear, Gonorrhea/Chlamydia test, Breast Exam)	\$ 73.00
Colposcopy	\$ 140.00
Depo Provera (Birth Control Shot)	\$ 60.00
HPV Screening	\$ 52.50
Pap Smear	\$ 33.00

Athletic Trainer Appointments

Initial Evaluation Appointment	Covered by health fee
Follow Up Appointment	\$ 10.00

Disability Resource Center

Scribe services	Covered by Health Fee
Reader services	Covered by Health Fee
ASL interpreter services	Covered by Health Fee
CART services	Covered by Health Fee
Test proctoring services	Covered by Health Fee
Text conversion services	Covered by Health Fee
Consultation with Access Consultant	Covered by Health Fee
Adaptive equipment/furniture	Covered by Health Fee

Procedures

Ear Lavage	\$ 12.50
Electrocardiogram (ECG)	\$ 45.00
Incision & and Drainage (Abscess)	\$ 33.00
Nebulizer Treatment	\$ 20.00
Wart Treatment	\$ 15.00

Sexually Transmitted Infection Testing

Hepatitis B	\$ 18.00
Hepatitis C	\$ 18.75
Herpes Types I & II	\$ 24.00
HIV	\$ 21.00
Gonorrhea/Chlamydia	\$ 40.00
Syphilis	\$ 6.50

Additional Tests Available

Blood Draw Fee	\$ 7.50
CBC with Diff	\$ 10.50
Comprehensive Metabolic Panel	\$ 10.00
HCG-Pregnancy	\$ 10.00
Hemoglobin A1C	\$ 12.75
Influenza	\$ 20.00
Lipid Profile	\$ 17.25
Mononucleosis	\$ 10.00
Strep	\$ 15.00
Thyroid Panel	\$ 27.00
Urinalysis Dipstick-UTI	\$ 10.00

Counseling and Psychological Services

Career Assessment	\$ 32.00
<i>(Analysis of career goals with considerations for personality strengths)</i>	
Couples Counseling	Covered by Health Fee
Group Counseling	Covered by Health Fee
Individual Counseling	Covered by Health Fee
Neuropsychological Testing	\$ 300.00
Psychoeducational Testing	\$ 300.00
Victim Advocacy Services	Covered by Health Fee

Healthy Living Program

Acupuncture	\$ 25.00 per session
Acutonics/ Auricular Acupuncture	Covered by Health Fee
Aromatherapy	Covered by Health Fee
Chair Massage	Covered by Health Fee
Condoms and Safer Sex Materials	Covered by Health Fee
Dietitian	Covered by Health Fee
Other Consultations	Covered by Health Fee
<i>(Stress Management, Sleep, Nutrition Coaching, Sexual Health, Asthma, HIV Counseling and Testing, Tobacco Dependence)</i>	
Thai Massage (30 min.)	\$ 30.00
Traditional Massage 30 min./60 min.	\$ 25.00/\$50.00

Q2. HOW MANY FIU STUDENTS ARE ELIGIBLE FOR THE AFOREMENTIONED HEALTH SERVICES?

All students that are charged the fee are eligible to receive student health services. However, health education and victim empowerment services are available to all students whether or not they are assessed the fee.

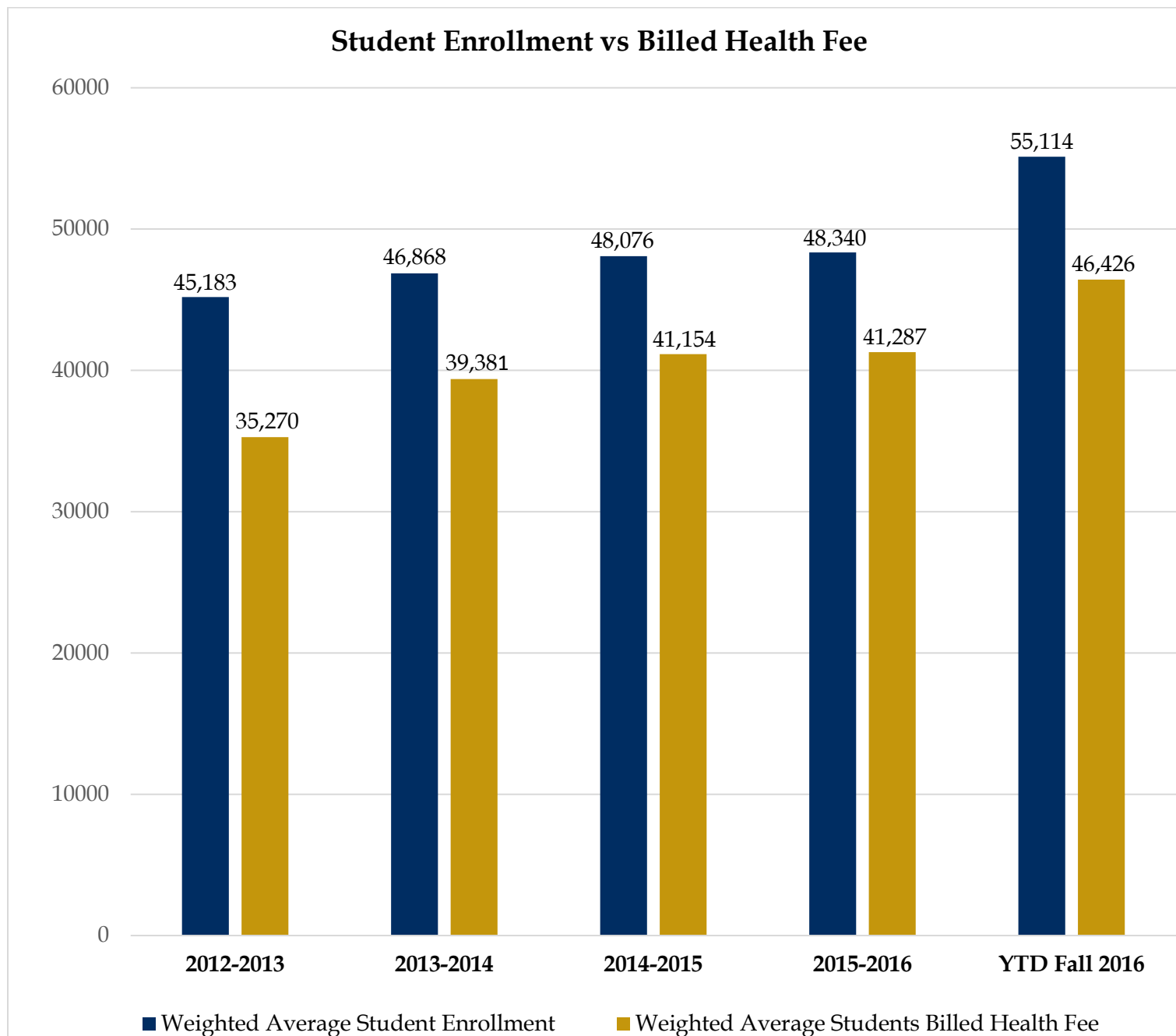
Students who are *not* eligible to receive health services are those enrolled in:

- a fully-online degree program
- high school dual enrolled,
- employees using tuition waivers
- students enrolled in programs outside of the U.S. such as Tianjin, Jamaica etc.

These students are not charged the fee as they are the population least likely to visit any of the two campuses that have student health facilities. **Hence, it is important to note that any future enrollment increases in FIU Online 2.0 (i.e., fully-online students) will not contribute to health fee revenues.**

The following bar graph illustrates the number of enrolled students since the 2012-2013 AY who have been billed their health fee versus the University's total enrollment. Since the health fee is collected by headcount on a semester basis, it was necessary to weigh the semesters (0.375 for Fall; 0.375 for Spring; 0.25 for Summer) to reflect annual numbers.

- 2012-13 weighted average - 35,270 (or 78% of total student enrollment)
 - Fall 2012 - 39,976
 - Spring 2013 - 38,212
 - Summer 2013 - 23,799
- 2013-14 weighted average - 39,381 (or 84% of total student enrollment)
 - Fall 2013 - 41,746
 - Spring 2014 - 43,130
 - Summer 2014 - 30,211
- 2014-15 weighted average - 41,154 (or 86% of total student enrollment)
 - Fall 2014 - 45,563
 - Spring 2015 - 43,719
 - Summer 2015 - 30,691
- 2015-16 weighted average - 41,287 (or 85% of total student enrollment)
 - Fall 2015 - 45,860
 - Spring 2016 - 43,694
 - Summer 2016 - 30,815
- YTD Fall 2016 - 46,426 (currently at 84% of total student population)



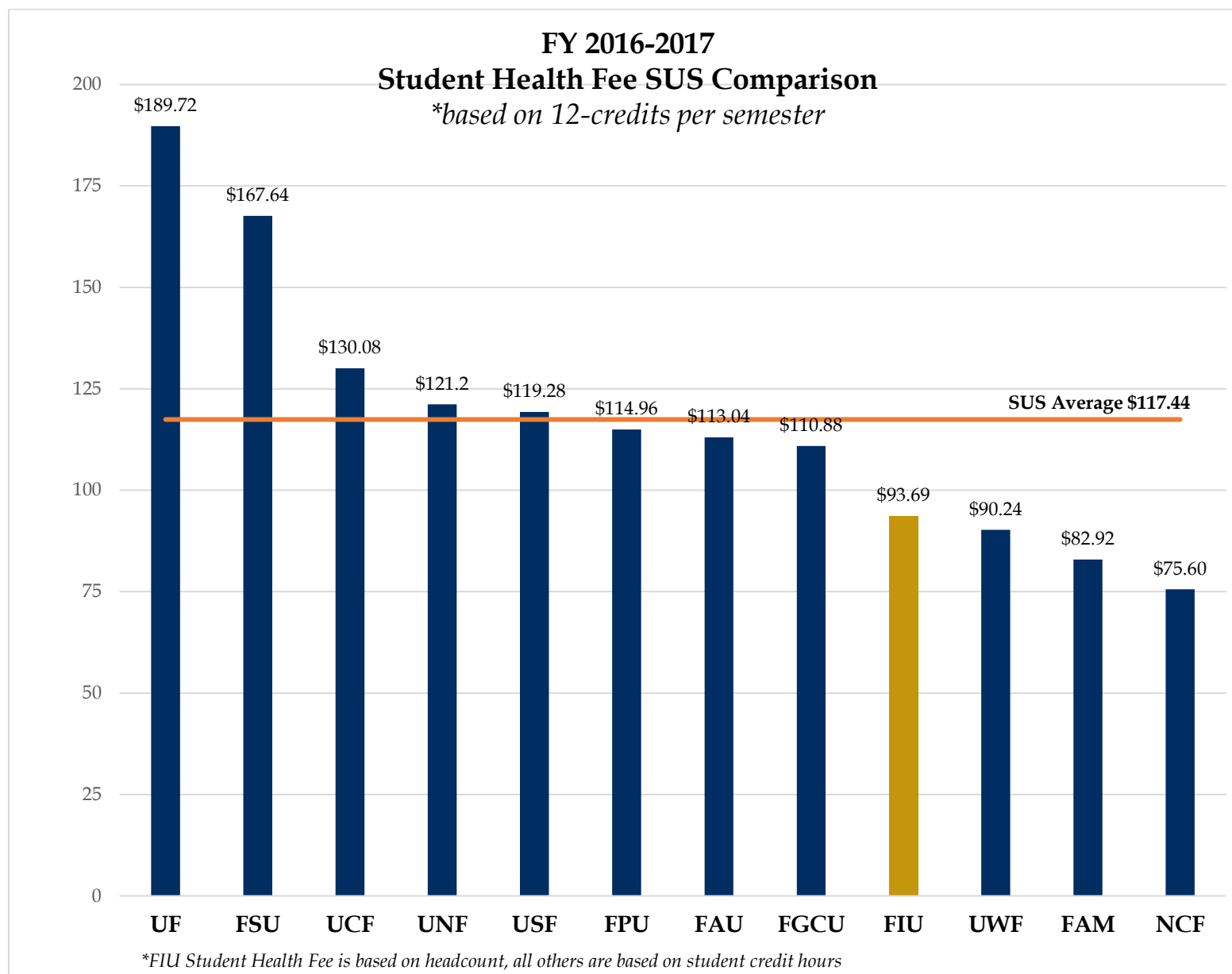
Q3. HOW DOES OUR HEALTH FEE COMPARE ACROSS THE STATE UNIVERSITY SYSTEM (SUS)?

For the 2016-17 academic year, FIU ranks 9th amongst the 12 SUS institutions. (Please refer to the next page for the comparative bar graph.)

When reviewing the graph, there are several important points to highlight:

- FIU is the only university that bases its fees by student headcount; whereas, the rest of the 11 institutions base it off credit hours. Therefore, the graph was normalized based on the cost for a student taking 12 credits per semester.
 - Since FIU has a large commuter population and its students take an average of less than 12 credit hours per semester, the total revenues received using a headcount methodology are more in line with the effort needed to service the total number of students at FIU.
- The FIU health fee is lower than most schools because the university alternates fee increases among the three student fees (Activity and Service Fee, Health Fee, and Athletics Fee) in a rotating, three-year cycle. This means that the Health Fee would only be eligible for an increase every three years. In addition, per [Florida statute 1009.24](#), the combination of the fees is subject to a cap of 40% of tuition and increases are limited to 5% of the sum of the triad fees.
 - UF, for example, has the highest health fee because it has consistently (with the exception of FY 2016-17 and 2010-11) increased at the 5% cap for the last 10 years. Other institutions have not always gone to the allowed maximum 5%, and in some cases have not increased fees for the past few years.
 - Also, only in 2010-11, the legislature allowed universities to exceed the 5% cap. Of the 4 universities with the highest health fee, UF had the highest increase at 25%.
- When understanding access and resources among the various institutions it is important to note that, of the 12 universities, three require students to provide proof of health insurance coverage: UF, FSU and FAMU. Those students who do not have health insurance are required to purchase the university-sponsored student health insurance plan.

Data Source -- Florida Board of Governors, Tuition and Required Fees, 2016-2017



Q4. HOW DO OUR SERVICES COMPARE TO WHAT IS OFFERED BY OTHER SUS INSTITUTIONS?

An SUS comparison was provided to the Committee within the September 1, 2016 BOT-HAC materials based on the [2014 Sunbelt Survey](#). These annual college health surveys, self-reported by participating institutions, have been sponsored since 1990 by the Sunbelt Health Directors under the auspices of the Southern College Health Association. Unfortunately, their 2015 survey has yet to be released; therefore, the 2014 data (prior to student health integration) is the most recent data set we have.

It is important to note, though, that the Sunbelt Survey only tracks a portion of all student health services as provided by FIU (i.e., clinical services). The additional accrediting bodies used to track national and institutional data include the International Association of Counseling Services (IACS) and the American Psychological Association (APA).

The services listed within the September Board materials were therefore incomplete since the charts did not include DSA-related services. Additionally, they were only quick snapshots of clinical services and some schools within the SUS were not included. The following chart, based on each university's health services' websites and individual inquiries, was created to illustrate a more comprehensive school-by-school and service-by-service comparison.

Note: The Student Health Fee provides students access to general medical office consultations. As noted earlier, discounted fees are charged for services not covered by the health fee and are lower than cost of care from most community providers. Most university health fees cover services such as diagnosis, referrals, and consultations.

Data Source -- Websites of each university's student health centers as well as individual calls. Some services may be offered within respective health fee, but not publicly advertised.

STUDENT HEALTH SERVICES	FIU	UF	FSU	USF	UCF	UNF	FAMU	FAU	FGCU	NCF	UWF	FPU
Clinical												
Allergy Injections/Clinic	✓	✓	✓	✓	✓	✓	✓					
Athletic Physicals (or Pre-Athletic Physicals)	✓						✓					
Chronic Medical Conditions (BP, Diabetes, Asthma)	✓				✓		✓					
Dental Care					✓			✓				
Dermatology (For FIU: Expanded services for SHC effective Feb. 2015)	✓			✓								
Diabetes Care					✓							
EKG's	✓	✓					✓		✓			
General Care (Basic Family Practice / Preventive & Well Care)	✓	✓	✓ (BFP)	✓	✓	✓	✓	✓	✓	✓	✓	✓
Gynecology (For FIU: Expanded services for SHC effective Nov. 2015)	✓			✓		✓	✓	✓	✓	✓	✓	
Health Screenings	✓								✓			
HIV and STI Testing	✓		✓	✓		✓	✓	✓	✓		✓	
Laboratory Services	✓	✓	✓	✓	✓	✓	✓		✓		✓	
Men's Health Services				✓				✓				

STUDENT HEALTH SERVICES	FIU	UF	FSU	USF	UCF	UNF	FAMU	FAU	FGCU	NCF	UWF	FPU
Clinical (Cont.)												
Minor Surgical Procedures						✓			✓			
Non-emergency acute care / Illness Urgent Care			✓	✓							✓	
Occupational Medicine		✓										
Pharmacy	✓	✓		✓	✓		✓	✓				
Physical Therapy		✓	✓		✓							
Pregnancy Testing/Family Planning	✓				✓	✓	✓		✓	✓		
Preventive Medicine	✓								✓			
Radiology		✓	✓		✓							
Referrals for Specialist Care	✓					✓			✓			
TB Skin Testing	✓					✓			✓		✓	
Travel Health (Immunizations)				✓	✓							
Vaccinations/Immunizations	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	
Women's Health Clinic/Services/PAP's	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	
X-Rays						✓	✓					

STUDENT HEALTH SERVICES	FIU	UF	FSU	USF	UCF	UNF	FAMU	FAU	FGCU	NCF	UWF	FPU
Healthy Living												
Acupuncture	✓											
Aromatherapy	✓											
Health and Wellness Programs	✓		✓							✓	✓	
Massage Therapy	✓				✓							
Nutrition Services/ Assessments	✓	✓	✓	✓	✓			✓	✓		✓	
Sexual Health	✓	✓		✓								
Tobacco Cessation	✓			✓						✓		
Relaxation (Station)	✓ (Pilot)				✓					✓		
Mental Health Services												
Alcohol and Other Drug Prevention	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Alcohol and Narcotics Therapy					✓							
Counseling / Psychology	✓ (SHC + CAPS)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Eating Disorder Management	✓ (SHC + CAPS)				✓							
Psychiatry (For FIU: Expanded services for SHC effective Nov. 2015)	✓ (SHC + CAPS)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	

STUDENT HEALTH SERVICES	FIU	UF	FSU	USF	UCF	UNF	FAMU	FAU	FGCU	NCF	UWF	FPU
Mental Health Services (Cont.)												
Travel Counseling		✓		✓	✓							
Health and Wellness Counseling	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
STUDENT HEALTH SERVICES	FIU	UF	FSU	USF	UCF	UNF	FAMU	FAU	FGCU	NCF	UWF	FPU
Recreational Sports Wellness												
Athletic trainers/wellness	✓											
Sports Concussion / Medicine		✓			✓							
Other												
LGBTQ+ Care and Resources (For FIU: program offered under MPAS, not health fee)		✓		✓			✓					
Disability Care Center												✓

Note: This chart reflects health services offered to students who pay the university health fee. Some services may be provided at an additional charge to the student.

Q5. HOW IS THE STUDENT HEALTH FEE ALLOCATED?

Students pay \$93.69 per semester for the Student Health Fee. The fee, broken out into five major service units, provides mostly free services to address problems or issues that affect students' ability to excel academically.

Student Health Clinics (SHC)

- Athletic physicals
- Doctors' visits to diagnose illness or injury
- On-campus pharmacy with discounted pricing
- Women's health, including gynecology, pregnancy and STI testing and insertion of long acting contraception
- Specialized services including psychiatry, behavioral health and dermatology
- Vaccines

Healthy Living Program (HLP)

- Complementary medicine services, including acupuncture, aromatherapy, massage therapy
- Nutrition counseling
- Free access to safer sex materials, including condoms
- HIV counseling and testing
- Health education and presentations for University departments and student clubs about sexual health, substance use, balanced lifestyles and stress management
- Healthy Living consultations to address sexual health, nutrition education, tobacco dependence, asthma management, stress management, sleep, and substance use and abuse
- Oversees management of student involvement, including peer educators, internship and volunteer opportunities
- Management of Student Health 101 publication, a monthly virtual magazine sent to all FIU students

Counseling and Psychological Services (CAPS)

- Individual, couples and group therapy with students with licensed psychologists and clinical social workers
- Body acceptance program, in partnership with SHC, for students with body image concerns
- Consultations and referrals for students who have been referred to CAPS
- Testing for psychoeducational, neuropsychological, ADHD and personality evaluations for students referred for academic difficulties
- Stress management program (Balanced Mind)
- Psychiatric services for those receiving psychotherapy at CAPS

Victim Empowerment Program (VEP)

- 24-hour support from victim advocates
- Crisis counseling for individuals who have been victimized
- Accompaniment to court, meetings, hearings and other events involving the criminal justice system or the FIU Student Conduct process
- Interaction with instructors, legal representatives, family members, or other service providers upon request
- Educational programming, social work internships, training for students in the peer educator program

Disability Resource Center (DRC)

- Students registered with the DRC can request academic accommodations, including:
 - Note taker
 - Extended time for exams
 - American Sign Language interpreter
 - Use of assisted technology
 - Braille test conversion
 - Electronic text book access
 - Captioning services
 - Qualified readers
- Access Consultants meet with students to discuss services, benefits of accommodations, available resources and academic guidance.

Students registered with DRC also gain access to the Adaptive Technology Lab to support academic coursework. The Lab is equipped with PC and Macintosh computers with mainstream and assistive technology, study tables, scanners, wireless capabilities and printing.

All five of these service areas are allocated respective budgets, which are distributed amongst HCN and DSA.

The following three graphs and nine pie charts will illustrate different views of how the health fee budget is allocated.

- Graph 1 – Student Health Services Operations (FY 2013-14 through 2015-16)
- Graph 2 – Student Health Fee Budget vs Actual for 2015-2016
- Graph 3 - Distribution of Student Health Fee for 2016-2017
- Pie Chart 1 – Budget Allocation of Health Fee Revenues (by Services) for 2016-2017
- Pie Chart 2 – Student Health Fee Expense Budget for 2016-2017
- Pie Chart 3 – Student Health Fee Expense Budget (Student Affairs)
- Pie Chart 4 – Student Health Fee Expense Budget (Student Health Clinics)
- Pie Chart 5 – Student Health Fee Salaries and Benefits (By Position) for 2016-2017
- Pie Chart 6 – Student Health Fee Salaries and Benefits (By Service Area) for 2016-2017
- Pie Chart 7 – Student Health Fee OPS Budget for 2016-2017
- Pie Chart 8 – Student Health Fee Operating Expense Budget (By Service Area) for 2016-2017
- Pie Chart 9 – Student Health Fee Operating Expense Budget (By Natural Classification) for 2016-2017

Per the agreement between HCN and DSA, it is important to note the following about the budget:

- The Building Improvement and Capital budget is calculated as 2% of net revenues and is allocated prior to dissemination of funds to the respective units.
- Salaries and benefits for the Building and IT managers are split 50/50 between both units.

Graph 1: Student Health Services Operations (FY 2013-14 through 2015-16)

Student Health Services Operations				
<i>(In millions)</i>	Actual FY 15-16	Actual FY 14-15	Actual FY 13-14	Notes
Health Fee	\$10,904	\$10,933	\$10,477	
Other Auxiliary Services	1,161	1,172	1,272	
Total Revenues	\$12,065	\$12,105	\$11,749	(1)
Salaries and Benefits	6,545	6,268	5,901	
Other Personnel Services (OPS)	728	1,142	1,303	
Expenses	3,496	3,445	2,980	
Other Capital Outlay (OCO)	25	19	33	
Total Operating Expenses	\$10,794	\$10,874	\$10,218	(2)
Net Transfers	(210)	(2,307)	(599)	(3)
Net Change in Net Assets	\$1,061	(\$1,076)	\$932	
Ending Net Assets	\$6,946	\$5,885	\$6,961	(4)

Notes:

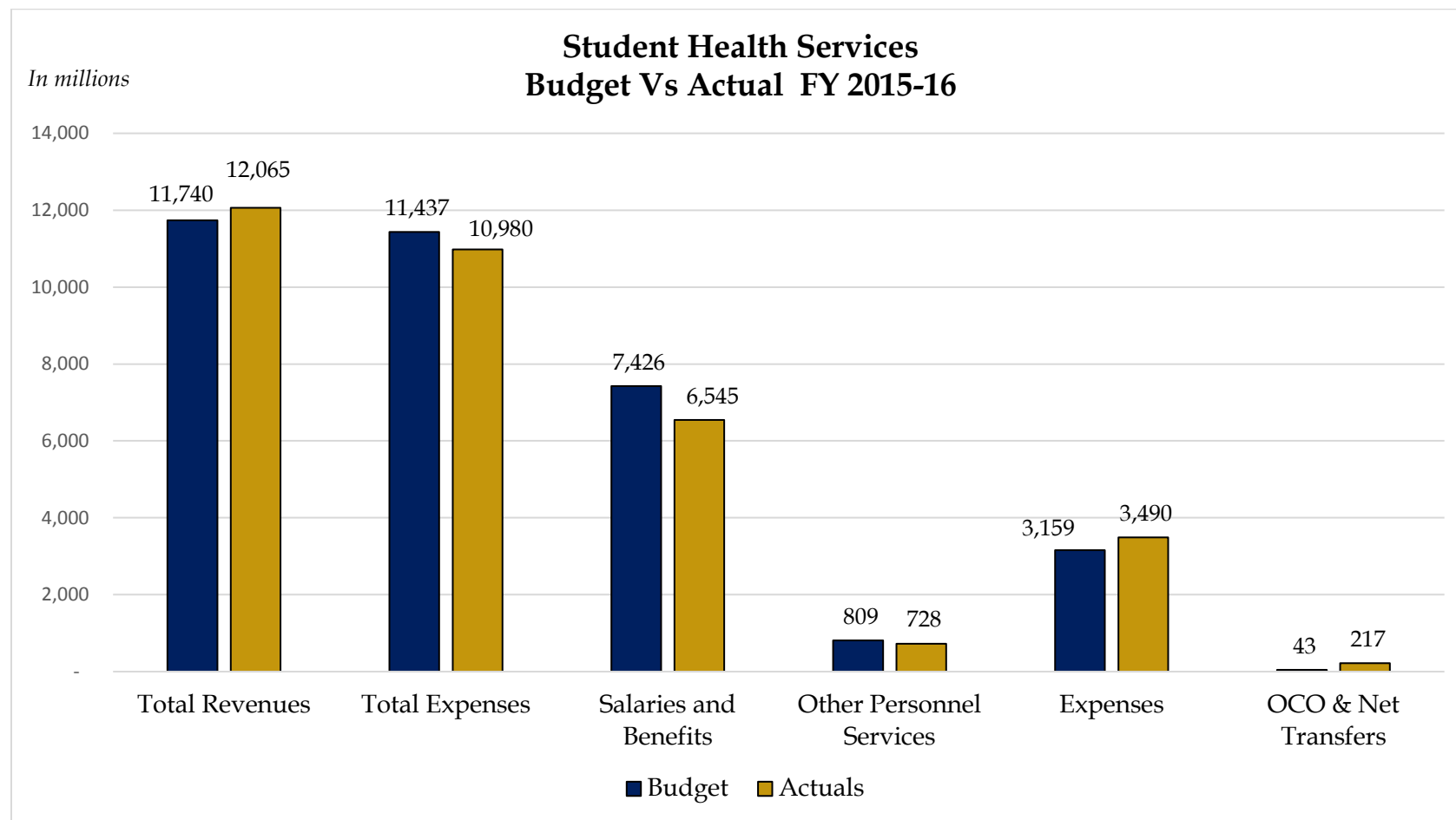
(1) Revenues over the past three years have remained fairly consistent due to the change in enrollment mix of students.

(2) Operating expenses increased from 2013-14 to 2014-15. The actual transition in 2015-16 brought a small decrease in expenses as the plan was developed and implemented. Overall, the increases were offset by a reduction in OPS expenses because of hires in staff (required by the university after an OPS employee is employed consistently more than one year).

(3) Net transfers were primarily attributed to the construction projects associated with the Student Health facilities both at MMC and BBC.

(4) The ending net asset balance pertaining to Student Health Services are a result of excess revenues over expenses throughout the years that are placed as reserves for future commitments, such as deferred maintenance and long term capital expenditures as well as reserves for continuance of operations in the event of an emergency and non-recurring expenses in any given year.

Graph 2: Student Health Fee Budget vs Actual for 2015-2016



Student Health Services					
FY 2015-16 Budget Vs Actual					
<i>(In millions)</i>	Budget	Actual	Var Fav / (Unfav)	%	Notes
Health Fee	\$ 10,617	\$ 10,904	287	2.7%	
Other Auxiliary Services	1,123	1,161	38	3.4%	(1)
Total Revenues	\$ 11,740	\$ 12,065	\$ 325	2.8%	
Salaries and Benefits	7,426	6,545	881	11.9%	
Other Personnel Services (OPS)	809	728	81	10.0%	
Expenses	3,159	3,496	(337)	-10.7%	
Other Capital Outlay (OCO)	43	25	18	41.9%	
Total Operating Expenses	\$ 11,437	\$ 10,794	\$ 643	5.6%	(2)
Net Transfers	-	(210)	(210)	-100.0%	(3)
Net Change in Net Assets	\$ 303	\$ 1,061	\$ 758	250.2%	(4)
Ending Net Assets	\$ 6,946				

Notes:

(1) Student Health Services generates additional revenues from the pharmacy, non-covered clinical services such labs and procedures, and a small portion for counseling and healthy living activities.

(2) The re-alignment implemented during the second quarter of FY 2015-16 contributed to the savings that Student Health Clinics realized by year end, offset by unbudgeted repairs and maintenance, greater professional services, and telephone expenses.

(3) Net Transfers represent funds transferred to and from Student Affairs and Student Health Clinics, as well as \$220k to Facilities for the clinic construction project to bring the renovation to completion.

(4) The favorable change in net assets was a result of incremental health fee revenue from the increased enrollments during the fiscal year which will be available for non-recurring expenses during fiscal year 16-17 as well as salary savings offset by higher operating expenses.

FY 2015-16 Budget Vs Actual by Division									
(In millions)	Student Affairs				Notes	Student Health Clinics			
	FY 2015-16 Budget Vs Actual					FY 2015-16 Budget Vs Actual			
	Budget	Actual	Var Fav / (Unfav)	%		Budget	Actual	Var Fav / (Unfav)	%
Health Fee	\$ 5,709	\$ 6,170	\$ 461	8.1%	(6)	\$ 4,908	\$ 4,734	\$ (174)	-3.5%
Other Auxiliary Services	10	33	23	230.0%		1,113	1,128	15	1.3%
Total Revenues	\$ 5,719	\$ 6,203	\$ 484	8.5%		\$ 6,021	\$ 5,862	\$ (159)	-2.6%
Salaries and Benefits	3,829	3,585	244	6.4%		3,597	2,960	637	17.7%
Other Personnel Services (OPS)	556	499	57	10.3%		253	229	24	9.5%
Expenses	906	1,372	(466)	-51.4%	(7)	1,762	1,517	245	13.9%
Management Fee to HCN	-	-	-	-		491	607	(116)	-23.6%
Other Capital Outlay (OCO)	30	25	5	16.7%		13	-	13	-
Total Operating Expenses	\$ 5,321	\$ 5,481	\$ (160)	-3.0%		\$ 6,116	\$ 5,313	\$ 803	13.1%
Net Transfers	-	98	98	-100.0%	(3)	-	(308)	(308)	-100.0%
Net Change in Net Assets	\$ 398	\$ 820	\$ 422	106.0%		\$ (95)	\$ 241	\$ 336	-353.7%

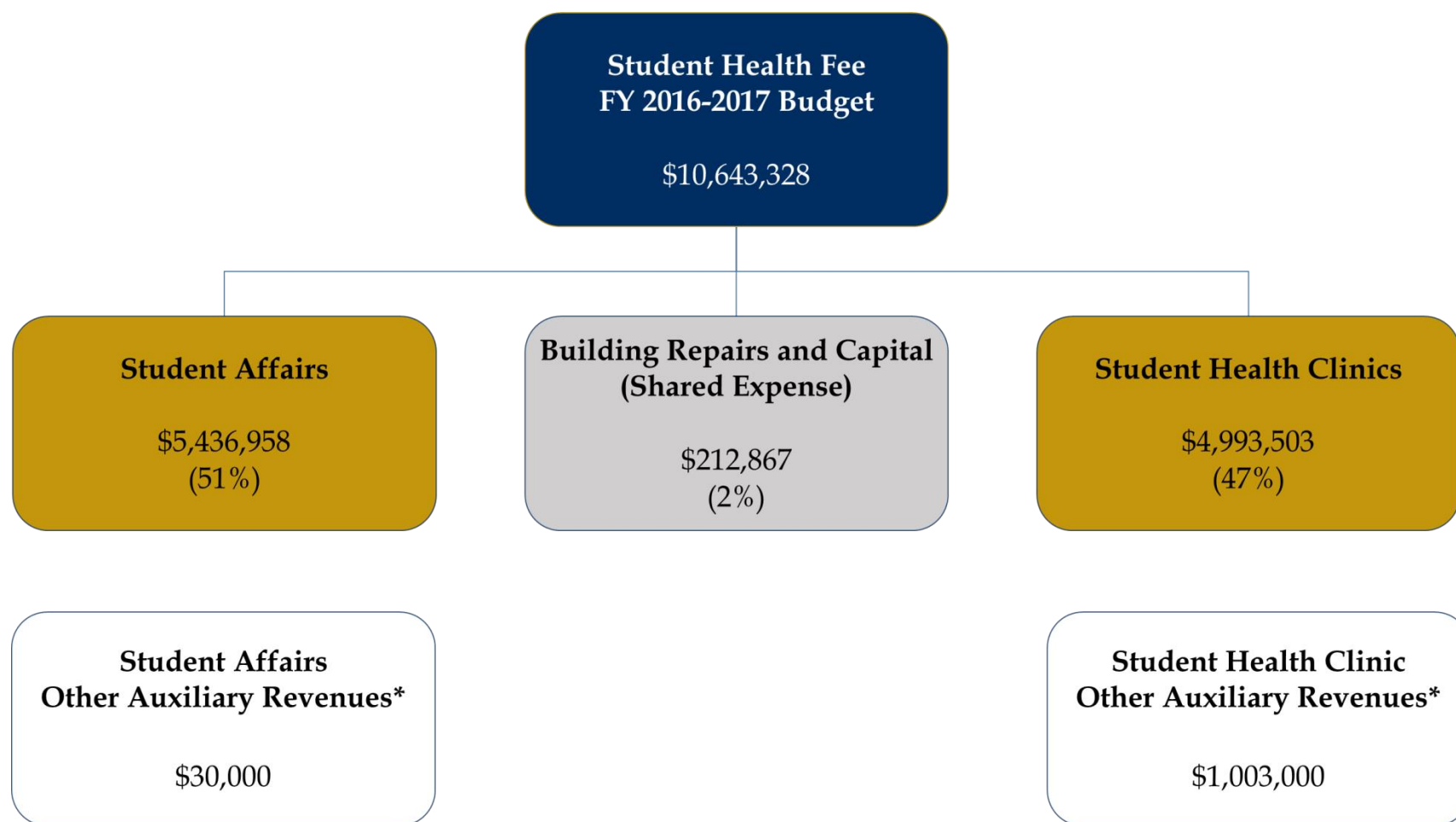
Notes:

(5) The Student Health Fee and the management of all buildings is centrally managed by Student Affairs. All revenues are deposited in a central Student Affairs account prior to distribution to the various units.

(6) Favorable variance in health fee revenues are a result of higher than anticipated Summer 2016 enrollment. The excess funds are allocated toward non-recurring expenses in subsequent years. Since the excess funds represent a favorable balance for one year, they can only be used for one-time expenditures in future years (as opposed to things such as salary which are recurring).

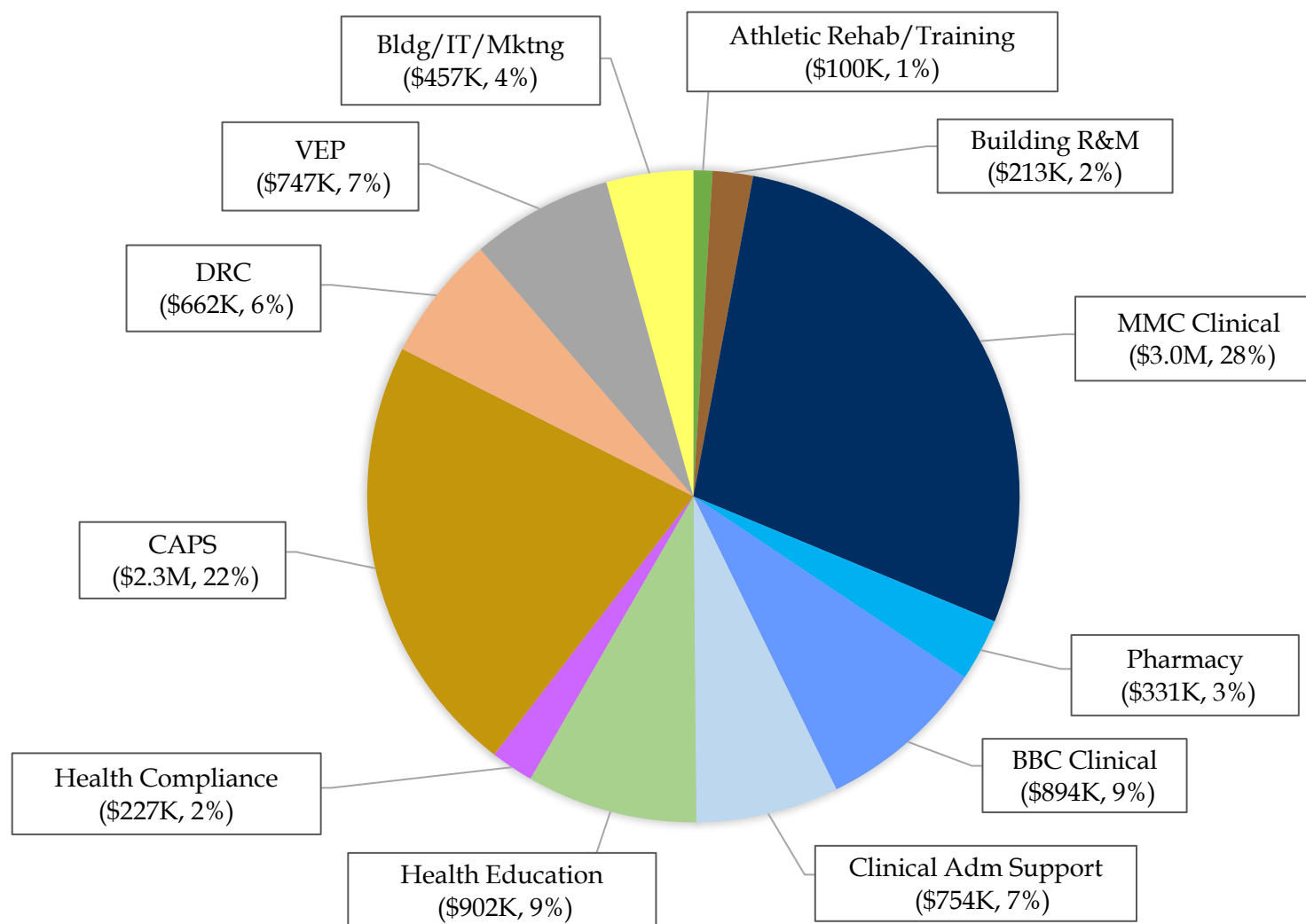
(7) The unfavorable variance in expenses for Student Affairs are a result of building repairs and maintenance expenses, professional services, equipment and supplies.

Graph 3: Distribution of Student Health Fee for 2016-2017

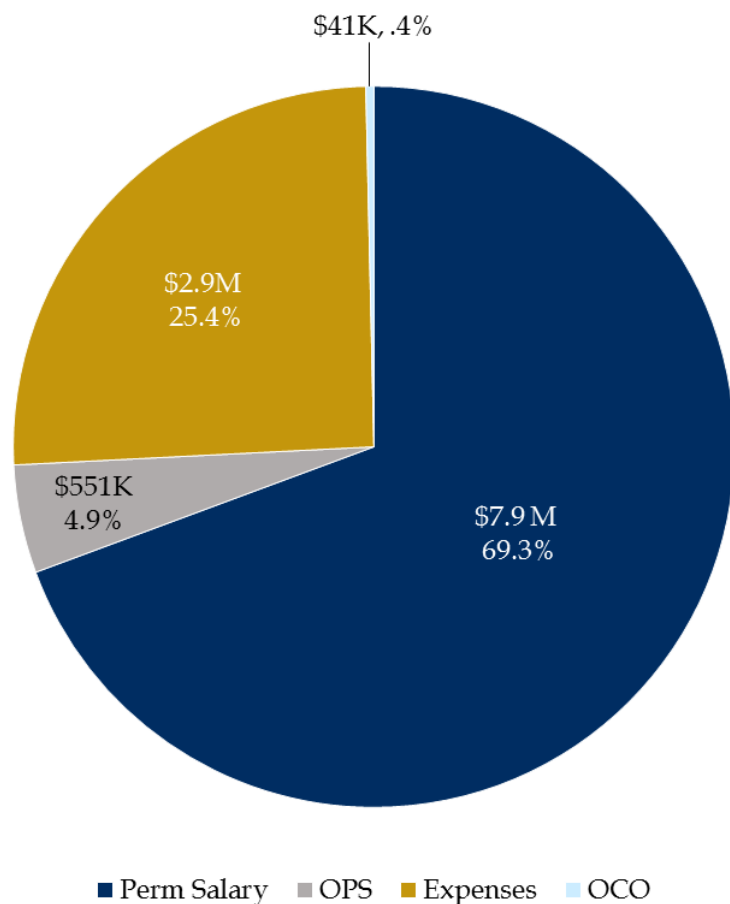


** In addition to the health fee revenues, Student Health Services (i.e., both DSA and SHC services) is estimated to generate an additional \$1M in revenues from pharmacy and non-covered services by the student health fee (i.e., labs, procedures, counseling, reimbursements from health insurance, healthy living, etc.) for the 2016-2017 fiscal year.*

PIE CHART 1
Budget Allocation of Student Health Fee Revenues (By Services)
FY 2016-2017 -- \$10.6M



PIE CHART 2
Student Health Fee Expense Budget
FY 16-17 -- \$11.3M

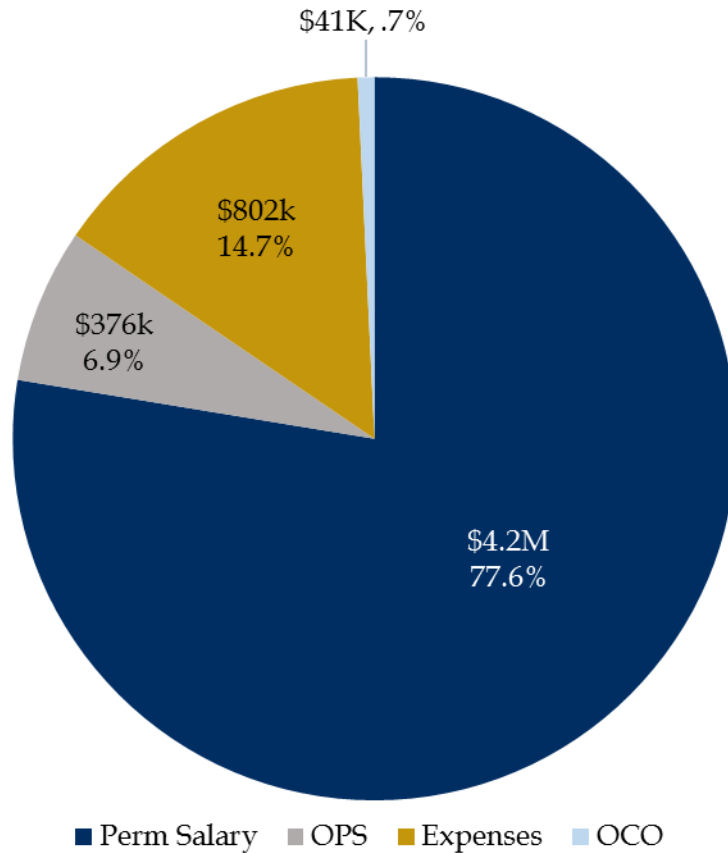


Summary of Full-Time Equivalents (FTEs)
FY 2016-2017 "Perm Salary" Budgeted Positions

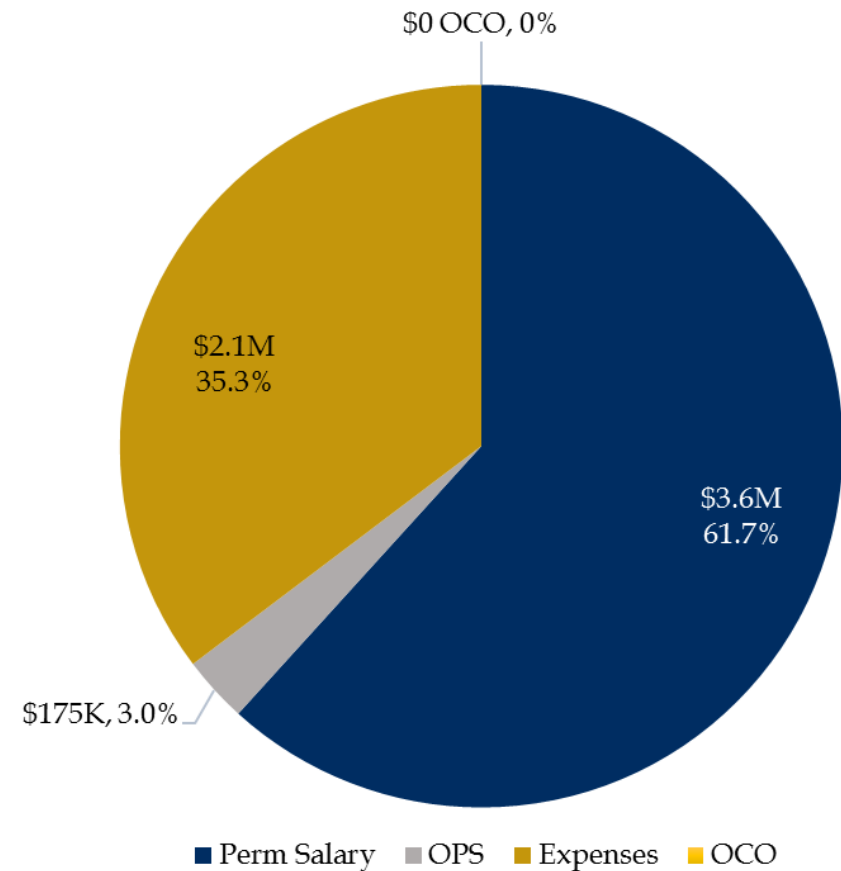
	FILLED	UN-FILLED	GRAND TOTAL
Student Affairs	53.52	3.5	57.02
Building/IT/Mktng	3.19	1	4.19
Counseling	20	2	22
Disability Services	7		7
Health Compliance	4		4
Health Education	11.88	0.5	11.88
Athletic Rehab / Training	1		1.5
Victim Empowerment	6.45		6.45
Student Health Clinics	35.7	4.35	40.05
Pharmacy	3.5		3.5
Administration	7	1.05	8.05
MMC and BBC Clinics	25.2	3.3	28.5
GRAND TOTAL	89.22	7.85	97.07

Note: This chart, unlike Pie Chart 1, includes the budgeted expenses associated with the aforementioned estimated \$1M in earned revenues primarily benefiting SHC (as noted within health fee distribution graph).

PIE CHART 3
Student Affairs Expense Budget
FY 16-17 -- \$5.4M



PIE CHART 4
Student Health Clinics Expense Budget
FY 16-17 -- \$5.9M

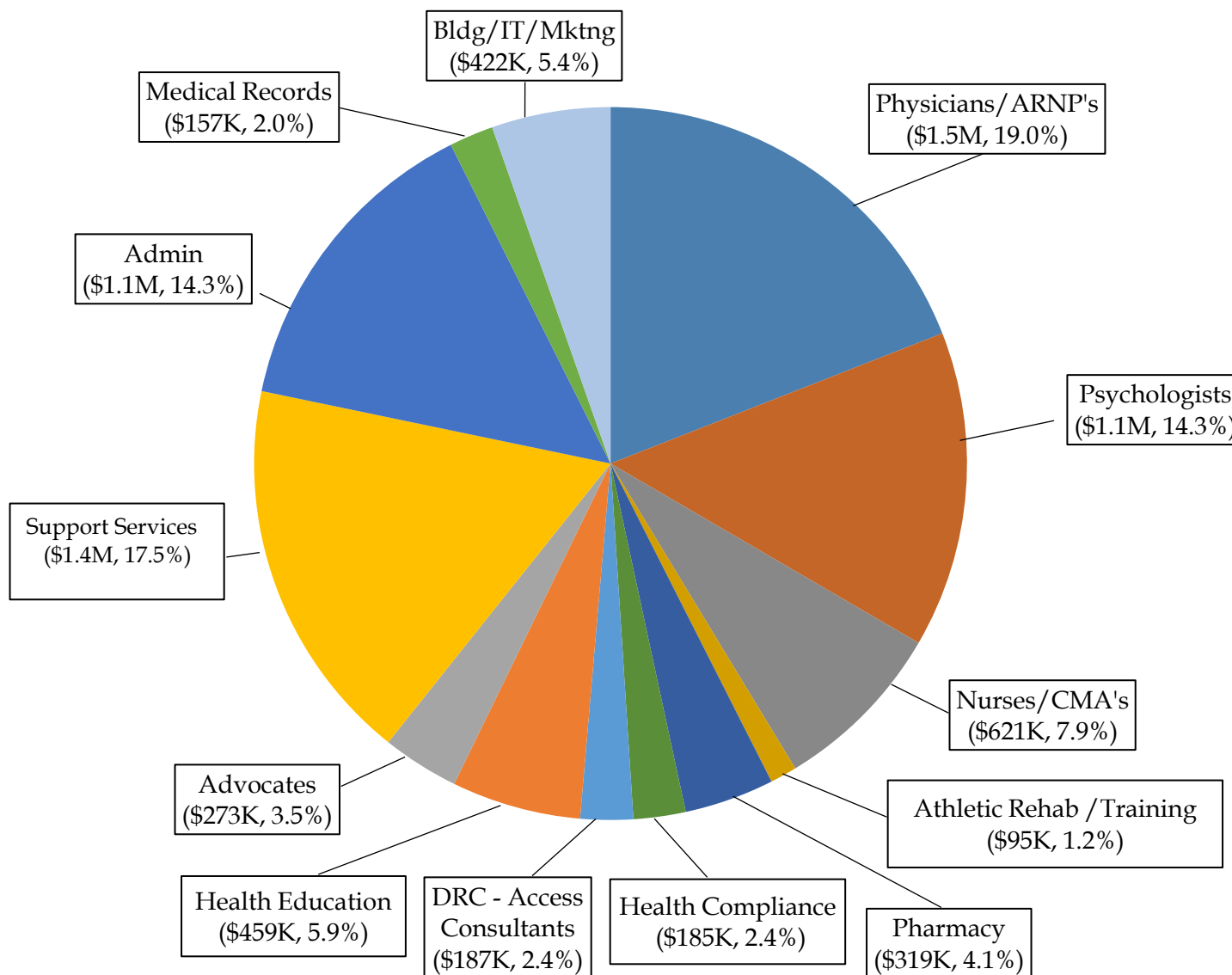


Note: These charts, unlike Pie Chart 1, include the budgeted expenses associated with the aforementioned estimated \$1M in earned revenues primarily benefiting SHC (as noted within health fee distribution graph).

PIE CHART 5

Student Health Fee Salaries and Benefits Budget (By Position): FY 2016-17

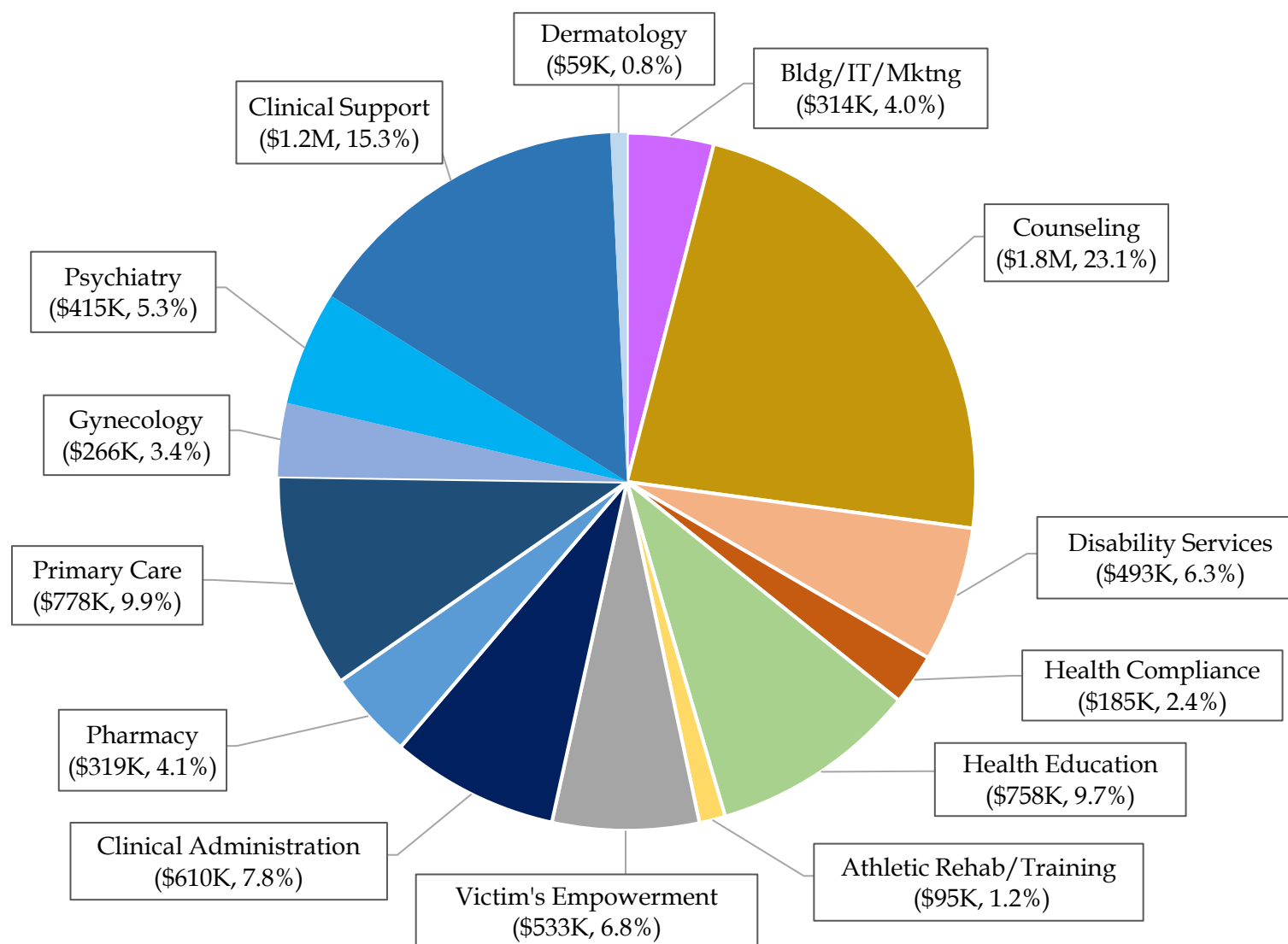
***** Breakout of the "Perm Salary" numbers (\$7.9M) in Pie Chart 2 *****

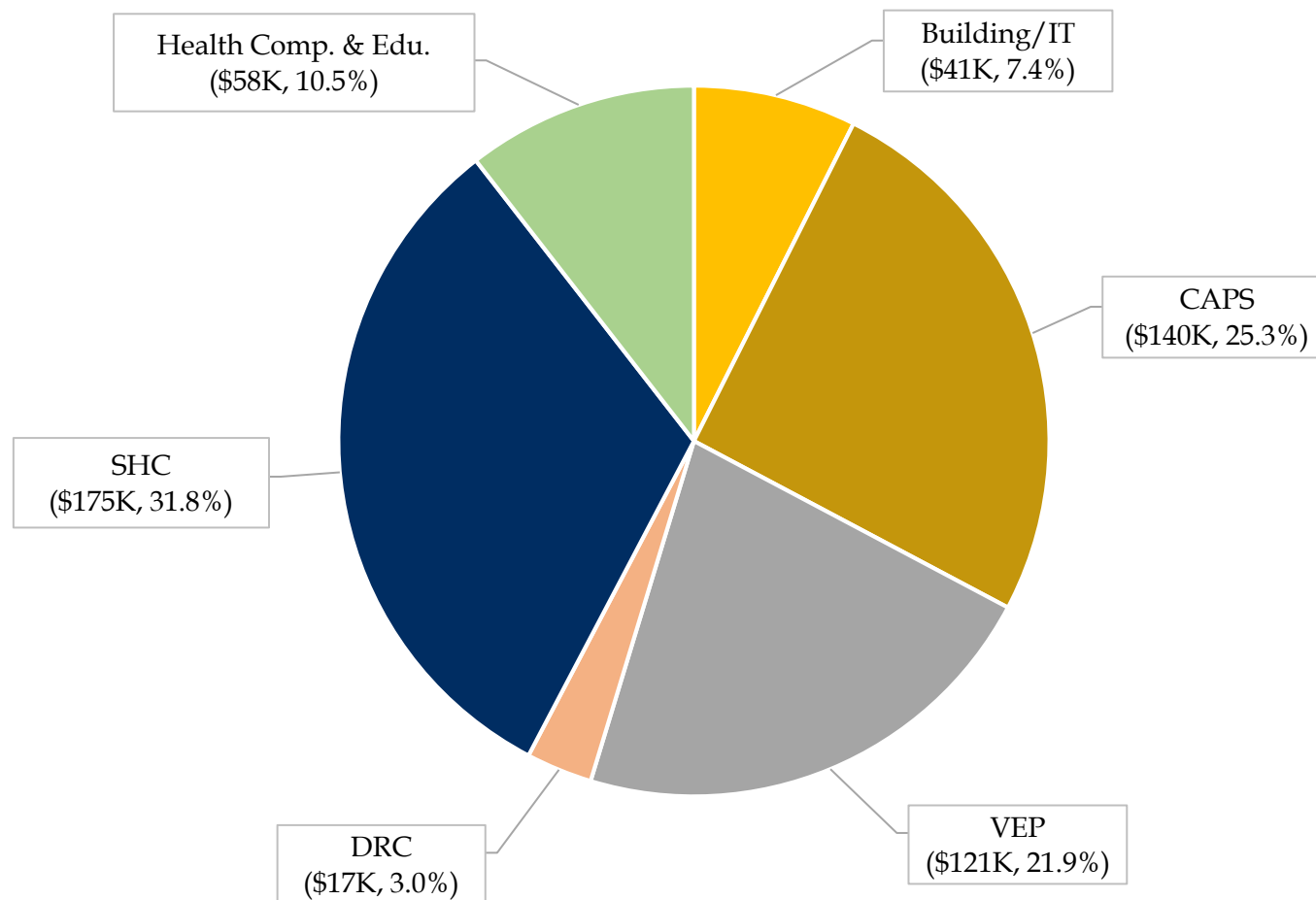


PIE CHART 6

Student Health Fee Salaries and Benefits Budget (By Service Area): FY 2016-17

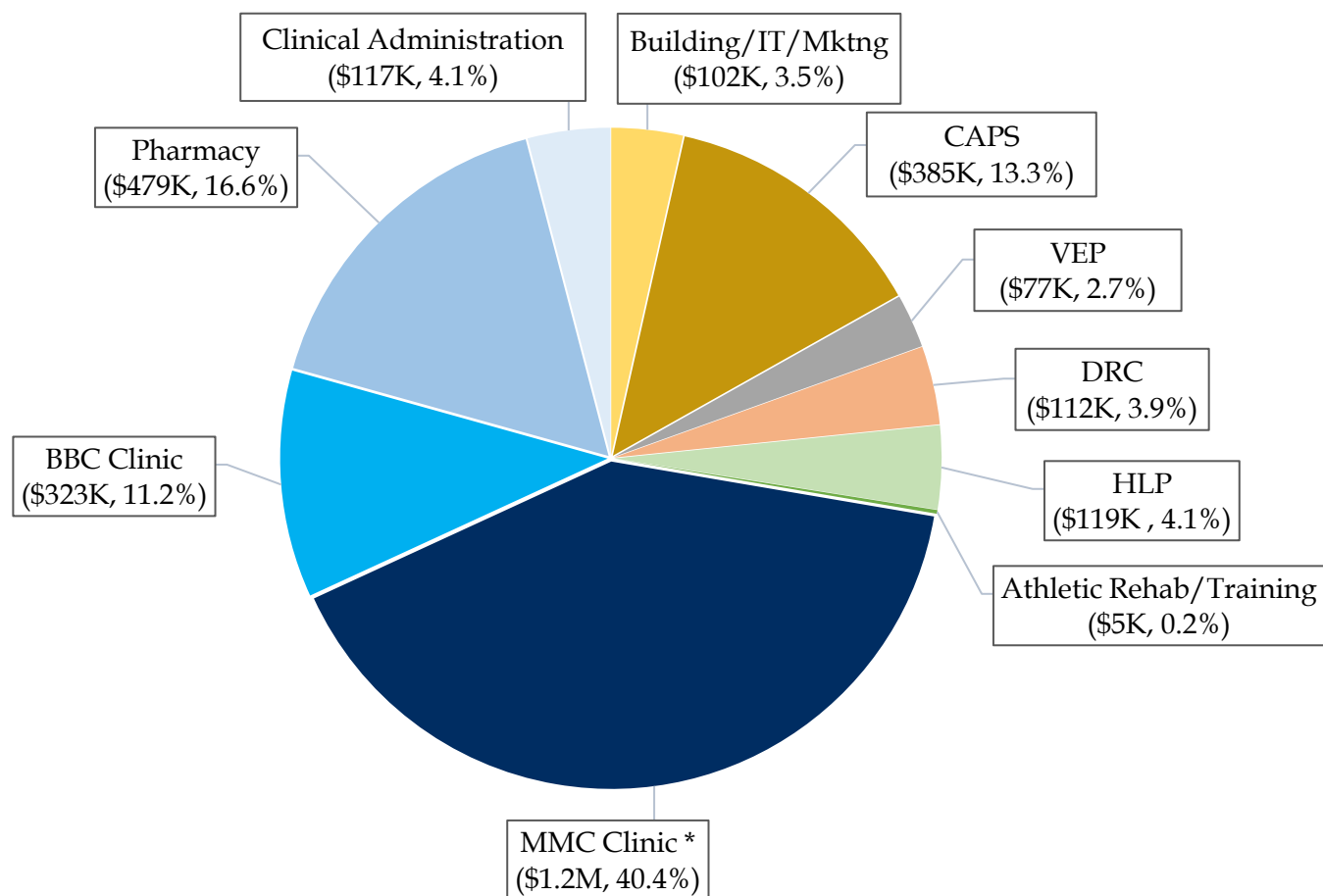
***** Breakout of the "Perm Salary" numbers (\$7.9M) in Pie Chart 2 *****



PIE CHART 7**Student Health Fee OPS Budget: FY 2016-17******* Breakout of the numbers -- \$551K -- in Pie Chart 2 *****

Note: Some psychologists and psychiatrists are paid via OPS budget.

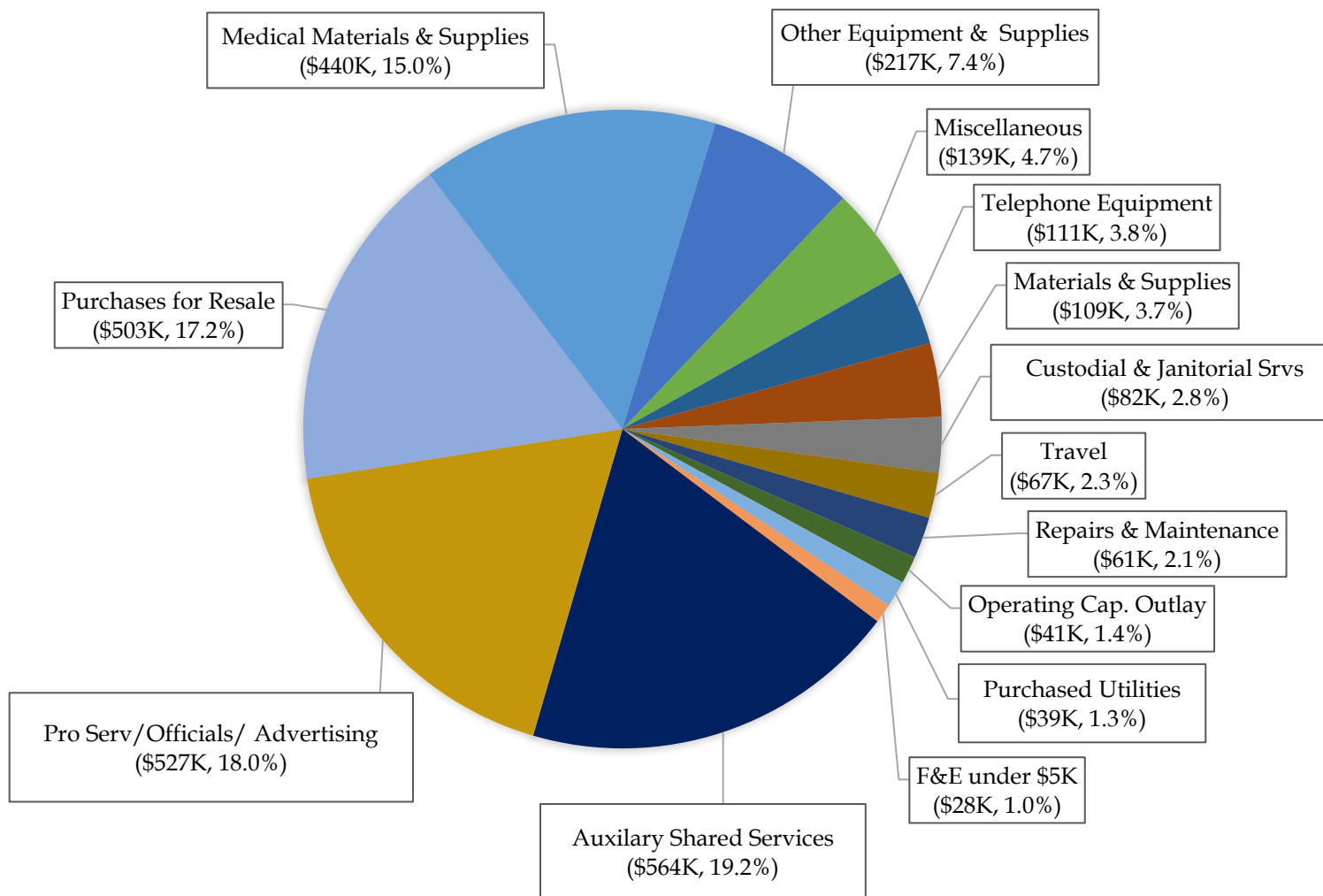
PIE CHART 8
Student Health Fee Operating Expenses Budget (By Service Area): FY 2016-17
**** Breakout of the numbers -- \$2.9M -- in Pie Chart 2 ****



* MMC Clinic expenses include the equivalent of 10% of all revenues as a management fee to Health Care Network for providing services (approx. \$499K).

PIE CHART 9
Student Health Fee Operating Expenses Budget (By Natural Classification): FY 2016-17

***** Breakout of the numbers (\$2.9M) in Pie Chart 2 *****



Q6. DO OUR STUDENTS HAVE ENOUGH ACCESS TO THE AFOREMENTIONED SERVICES?

As commonly defined by the student health centers across the SUS, *access* refers to the availability of and eligibility for resources and services covered and/or supplemented by the health fee. In other words, is a student who pays the health fee able to obtain clinical, counseling, psychological, disability, victim advocacy, and/or wellness services for free or at a highly reduced rate? The answer to that question is yes.

Utilization, on the other hand, is the usage amount of said resources and services by those who pay the health fee. The term “penetration rate”, which is the percentage of discrete students who use health services, is also used to refer to utilization. Increase in utilization of health services by those students that pay the fee is of the utmost importance, as we understand it, to this Committee. The following charts will illustrate FIU’s utilization rates, services and hours of operations by service area.

- Chart 1 – Hours of Operation (MMC and BBC)
- Chart 2 – Utilization / Patient Visits

Chart 1: Hours of Operation

As noted earlier, the Student Health Fee is split up into five main service units. These departments include: Student Health Clinics (SHC), Counseling and Psychological Services (CAPS), Healthy Living Program (HLP), Victim Empowerment Program (VEP) and Disability Resource Center (DRC). Their respective hours of operations at both Modesto A. Maidique Campus (MMC) and Biscayne Bay Campus (BBC), with the exception of HLP since their services are mostly provided at events and programs, are listed below.

Notes:

- (1) For clinical services, specialist health care providers (e.g., gynecology, dermatology, etc.) are by appointment only. Availability varies by specialty and day.
- (2) All offices are open during the summer, but at slightly reduced hours.
- (3) There are no weekend appointments available for any service area.
- (4) SHC, CAPS and VEP do take emergency appointments for any "student in crisis." Additionally, for CAPS and VEP, students can call a 24-hour hotline at 305-348-3000 and/or submit concerns via the PanthersCare portal.

Hours of Operations (Fall & Spring)

Modesto A. Maidique Campus

MONDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
SHC (Pharmacy)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)													
VEP (Walk-in)													
DRC													

TUESDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
SHC (Pharmacy)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)													
VEP (Walk-in)													
DRC													
WEDNESDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
SHC (Pharmacy)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)													
VEP (Walk-in)													
DRC													
THURSDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
SHC (Pharmacy)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)													
VEP (Walk-in)													
DRC													

FRIDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
SHC (Pharmacy)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)													
VEP (Walk-in)													
DRC													

Hours of Operations (Fall & Spring)
Biscayne Bay Campus

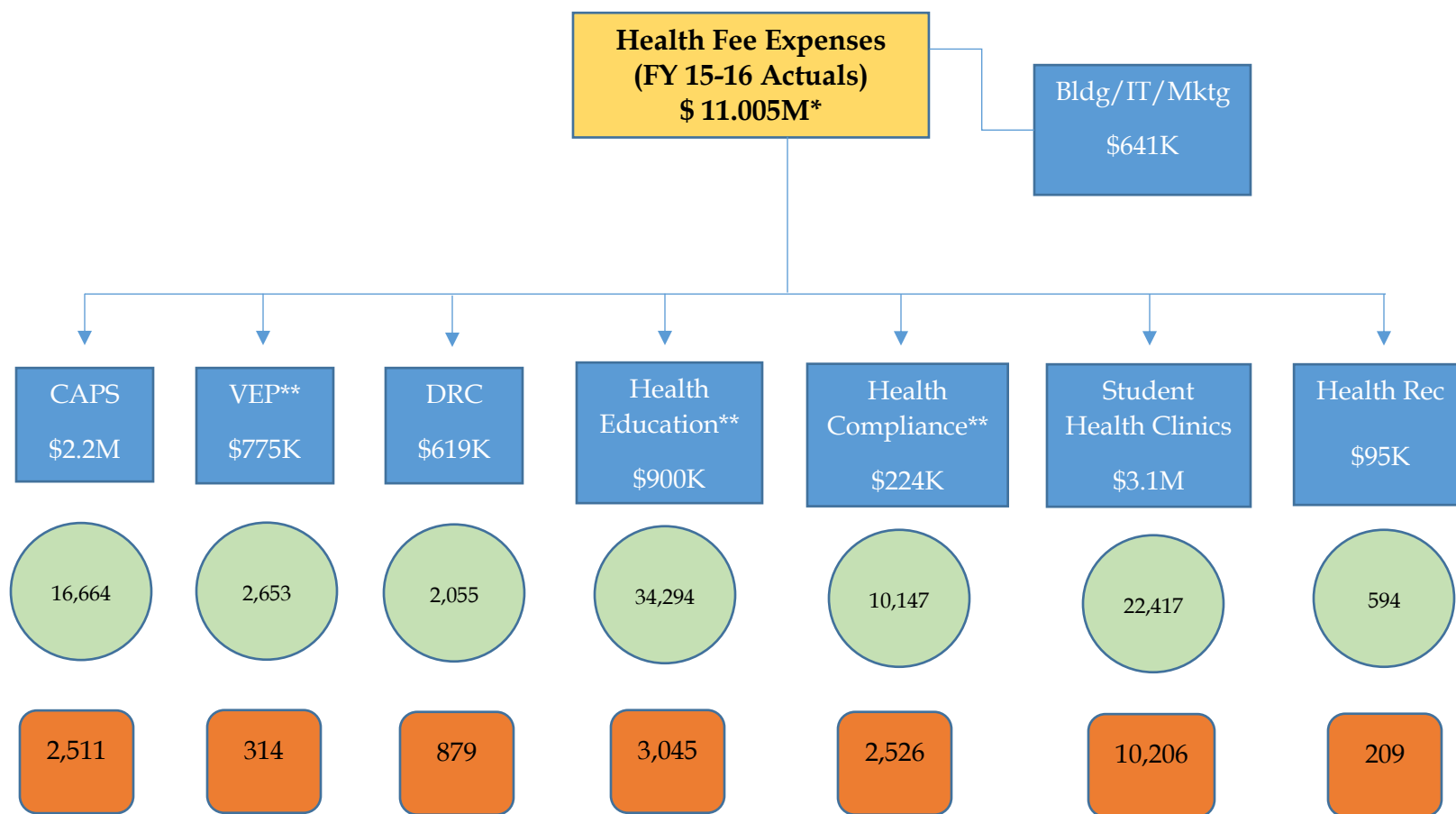
MONDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)	<i>By Appointment Only</i>												
VEP (Walk-in)													
DRC													

TUESDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)	By Appointment Only												
VEP (Walk-in)													
DRC													
WEDNESDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)	By Appointment Only												
VEP (Walk-in)													
DRC													
THURSDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)	By Appointment Only												
VEP (Walk-in)													
DRC													

FRIDAY													
	8am	9am	10am	11am	12pm	1pm	2pm	3pm	4pm	5pm	530pm	6pm	630pm
SHC (Clinics)													
CAPS (By Appt)													
CAPS (Walk-in)													
VEP (By Appt)	By Appointment Only												
VEP (Walk-in)													
DRC													

Chart 2: Discrete Students by Unit

Data Source -- Electronic Medical Records (EMR) [Titanium (used by CAPS and VEP) and PyraMed (used by SHC, HLP, and athletic rehab/training)] and FIU OneCard (used by DRC and HLP)

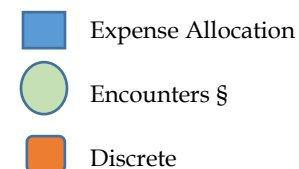


*Reflects total expenses incurred from fee for services operations.

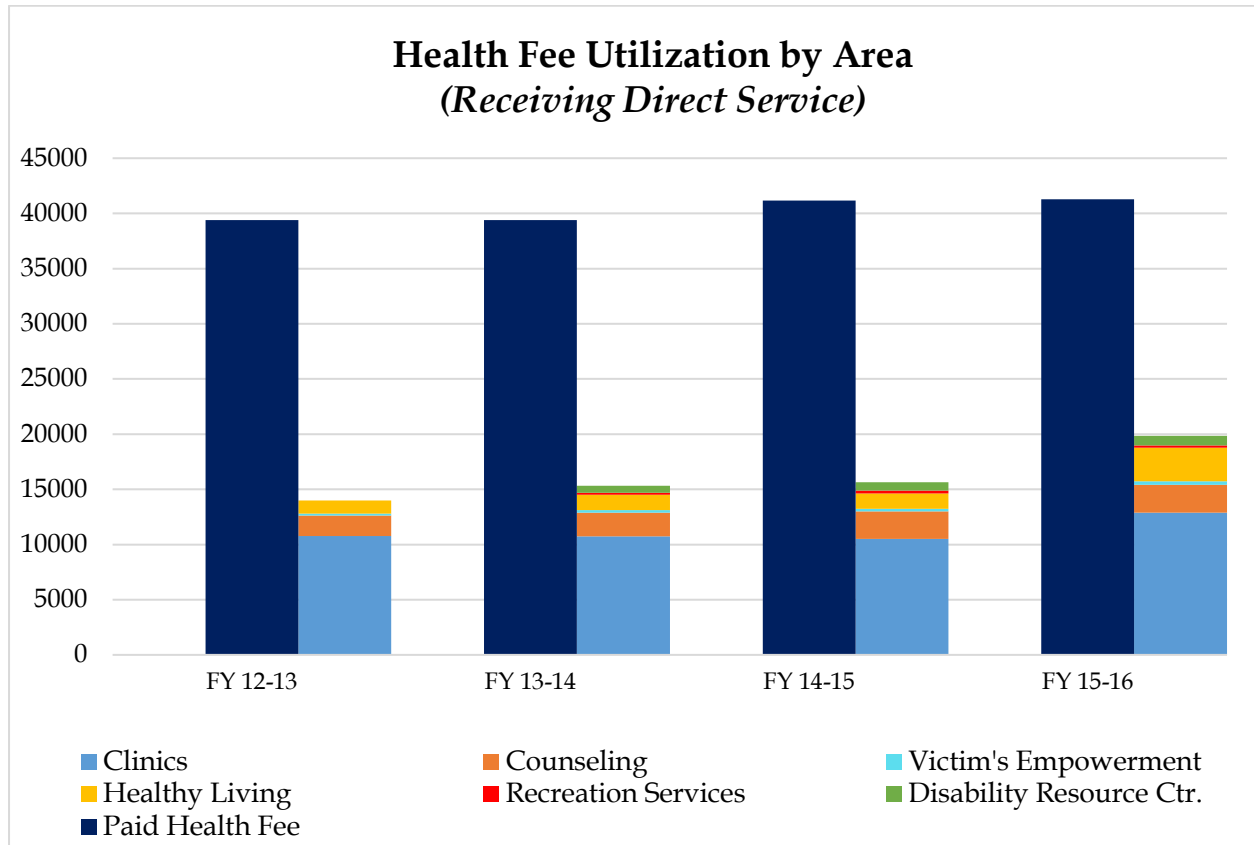
**Services are rendered to all University students, irrespective of health fee payment

Chart only reflects Student encounters. Actual expenses also include:

Student Health Administration:	\$1.0M
Pharmacy	\$ 800K
MMC Employee Health Serv.	\$ 20K
BBC Medical Operations	\$ 15K
Fee for Service Operations	\$ 360K
Net Transfers Out	\$ 210K



Data Source -- Electronic Medical Records (EMR) [Titanium (used by CAPS and VEP) and PyraMed (used by SHC, HLP, and athletic rehab/training)] and FIU OneCard (used by DRC and HLP)



Health Fee Utilization by Area (Discrete Student Usage by Area)										
	FY 12-13	% ^	FY 13-14	% ^	FY 14-15	% ^	FY 15-16	% ^	FY 16-17*	% ^
Charged Health Fee	35,270		39,381		41,154		41,287		46,426	
Clinics	11,235	32%	10,863	28%	11,033	27%	10,206	25%	5,163	11%
Counseling	1,859	5%	2,125	5%	2,485	6%	2,511	6%	1,585	3%
Victim Empowerment	180	1%	238	1%	246	1%	314	1%	243	1%
Healthy Living	1,184	3%	1,399	4%	1,394	3%	3,045	7%	6,304	14%
Athletic Rehab / Training	0	0%	158	0%	250	1%	209	1%	93	0%
Disability Resource Ctr.**	n/a	-	637	2%	761	2%	879	2%	315	1%

^ Penetration Rate (discrete student usage for area noted in that row, divided by students charged health fee that year)

* Fiscal year to date (July 1, 2016 through 11-15-16)

** Data not available for fiscal year 2012-13 for Disability Resource Center

Q7. HOW DOES THE UNIVERSITY ADDRESS ALCOHOL AND SUBSTANCE ABUSE?

The Alcohol and Drug Abuse Prevention Taskforce, convened by Division of Student Affairs' VP Lunsford, is active and collaboratively working to develop and deliver innovative programming for FIU students to reduce binge drinking, alcohol and drug abuse, as well as the associated consequences of these high risk behaviors. The Task Force members have expertise in alcohol and drug abuse prevention and intervention in higher education settings. As a result of the Task Force, nationally recognized faculty experts from the Robert Stempel College of Public Health & Social Work and the Nicole Wertheim College of Nursing & Health Sciences are engaged in collaborative projects with professional staff from across the University.

For example, FIU-BRIDGE and CAPS staff have created a "Know Your Numbers" public information campaign to educate students about what 'drink responsibly' really means. The content and graphic materials were just used in an outreach program at BBC and MMC that engaged more than 500 students. Evaluation of the outreach program's effectiveness is underway.

At FIU, like at other colleges and universities around the country there are students who are engaging in underage drinking, binge drinking and use of illegal drugs, particularly marijuana. Sadly, this is part of the culture of higher education in the U.S. (similar-aged peers who are not in college report fewer rates of the above noted behaviors of concern).

FIU Alcohol & Other Drug Data (2014-2015)

292 alcohol-related interventions involving 267 unique students

- 289 conduct (169 findings of "responsible")
- 3 Informational

357 drug-related interventions involving 223 unique students

- 252 conduct (160 findings of "responsible")
- 1 educational conversation
- 4 interim suspensions

FIU Alcohol & Other Drug Data (2015-2016)

296 alcohol-related interventions involving 268 unique students

- 290 conduct (145 findings of “responsible”)
- 4 informational
- 1 interim suspension
- 1 medical amnesty

191 drug-related interventions involving 183 unique students

- 184 conduct (168 findings of “responsible”)
- 1 educational conversation
- 3 informational
- 3 interim suspensions

REPEAT OFFENSES

Percentage of Repeat Offenders	2014-15	2015-16
Alcohol-related	8.42%	5.43%
Drug-related	6.83%	1.33%

Based upon data obtained from SAMSA-funded research currently underway (FIU-BRIDGE), our students have a lower incidence of underage drinking and binge drinking. The factors that support these lower rates are the following:

- so many of our students live at home with their parents;
- students are very focused and motivated to complete their education;
- the residential population is relatively small; and
- FIU is an institution that doesn’t have a binge drinking culture.

Although this is good news, there are significant and growing concerns about binge drinking at tailgating events, students’ chronic use of marijuana*, and the apparent arrival of lethal drug combinations (heroin/fentanyl) in the South Florida community. Alcohol and drug abuse pose a significant risk for FIU students and more can be done.

** Marijuana use has been linked to skipped classes, lower grades, and late graduation, Partnership for Drug-Free Kids publication, 2/12/16).*

**Q8. WHAT IS THE PLAN TO MARKET STUDENT HEALTH RESOURCES,
IMPROVE SERVICES AND INCREASE CAPACITY?**

There are two key initiatives that the University will focus on in the 2016-17 AY:

- (1) Seek additional funding for mental health counseling services via the system-wide Legislative Budget Request
- (2) Roll-out joint marketing plan for Student Health at FIU

You will find a summary of both in the upcoming pages.

Legislative Budget Request (LBR)

Source: http://flbog.edu/documents_meetings/0201_1018_7627_11.5.1.3%20BUD%2007b%20-%20LBR.pdf

At the September 2016 Board of Governors meeting, the 2017-18 LBRs were presented for the State University System. Relevant to student health is a system-wide initiative for mental health counseling services.

The total LBR is for \$14,449,575 (\$12,528,253 of recurring and \$1,921,322 of non-recurring). **If approved, FIU's allocation would be \$961,576.** This would be for nine additional FTEs totaling \$823,990, along with related expenses (e.g., hiring expenses, overhead, technology) equaling \$47,586 recurring and \$90,000 non-recurring.

The following summary is an excerpt from the Board of Governors' September 2016 board materials:

The SUS Mental Health Counseling Services Legislative Budget Request is designed to increase campus counseling services in order to address the critical need for student mental and behavioral health coverage in a State University System that is steadily expanding in size, scope, and complexity.

Universities are directly responsible for providing a safe educational, working, and living environment for students, faculty, staff, and visitors. SUS leaders have identified a number of current campus security challenges and focused on two issues: (1) law enforcement staffing needs in an expanding State University System, and (2) the increasing need for well-trained, professional counseling services to address the mental and behavioral health of university students.

The SUS Counseling Centers provide a wide variety of clinical services, including individual and group counseling and psychiatric services and assessment. Professional staff provide substance abuse treatment and prevention efforts and consult with many campus constituencies to provide prevention and outreach services. University counseling services are integral to graduation and retention rates in that counselors directly assist students in their mental and behavioral health needs so they can reach their academic potential.

While the SUS centers are now fully imbedded in the overall health and wellness of their campuses, the centers are struggling to keep up with the demand for their services. Students are coming into counseling earlier, in larger numbers, and with more crisis issues than ever before. The SUS centers have experienced a 67% increase in student client sessions in the past six years for issues of anxiety, depression, academic stress, and relationship issues. Further, SUS centers recorded nearly 4,200 emergency or crisis visits during 2013-2014.

The LBR is designed to raise the staffing levels of the SUS Counseling Centers to the minimum staffing ratios that are recommended by the profession's accreditation association, the International Association of Counseling Services (IACS). IACS standards state that minimum staffing ratios should strive to be "in the range of one FTE professional staff member to every 1,000 to 1,500 students, depending on services offered and other campus mental health agencies." Currently, ten of the 12 SUS counseling centers (not New College and Florida Polytechnic) are operating above the IACS standard for minimum staffing of one professional staff member per 1,000 students, and eight of the 12 centers are operating above the high end of the range recommended by IACS of one staff member per 1,500 students.

The SUS counseling centers are busy operations and their professional services are critical to a university's well-being and, more importantly, to student retention and success. The American College Health Association recently reported that over 50 percent of college students say that they have experienced "overwhelming anxiety" in the last year and 32 percent say they have felt so depressed "that it was difficult to function." Research has shown that students seeking university counseling services are more likely to maintain and improve their academic performance and persist to graduation. Student client surveys at state universities consistently verify that counseling services are enabling students to address their personal problems and remain enrolled to pursue a degree. As students are enrolling in state universities with a greater and more urgent need for mental health services, there is an increasing challenge for university counseling centers to provide immediate and appropriate professional services that will forestall serious behavioral incidents and reinforce academic progress and success.

The operations of campus counseling services maintain strong support for the Board of Governors performance funding model as the model provides a financial incentive for universities to prioritize student health and safety and to provide access to the academic and personal assistance needed by students to attain a degree and be successful in a career. Each state university recognizes that its reputation for academic quality and student success is dependent on its ability to provide a healthy and safe environment for those learning, working, and living on its campus.

Marketing Plan (Current Status)

Educating Students About Health Fee-Funded Services

All departments market individual campaigns and services throughout the year with tabling, flyers, social media campaigns and other outreach efforts. Below is a snapshot of most popular drivers to each department.

Outreach Efforts

According to statistics provided by CAPS and VEP, Orientation and friends were the two highest reported references that drove students to CAPS or VEP, accounting for about 26% of clients. Next in line were flyers or brochures, SHC referrals, Student Health 101, classroom presentations, professors and websites, making up 33% of how clients heard about CAPS or VEP.

In a survey distributed by the Student Health Advisory Council in December 2014, 94% of 302 respondents indicated that they knew of the Student Health Center on campus and 62% reported that they had used services at the SHC. Of those who did not use services at SHC, the number one reason for non-use was “I have not had the need to use it.” The survey also asked if students were aware that they paid a mandatory health fee every semester, of which 83% replied “yes” and 16% responded “no.”

The Disability Resource Center relies heavily on other departments to make referrals for students. They routinely provide brochures and branded bookmarks to Orientation, table at large events, and conduct training for peer advisors, Panther Camp facilitators, FIU tour guides, housing and residential life staff. In addition, they attend and present at faculty department meetings and First Year Student Experience classes in order to engage with faculty, who can refer students who appear to be struggling academically.

Websites

(Note: Google Analytics were used to determine web traffic. Statistics cover the range between 1.10.16 – 10.21.16)

The “Wellness” hub page of Student Affairs sites received a total of 932,562 pageviews. This page provides visitors a directory of services related to fitness and health departments, including CAPS, Recreation Centers, Student Health and VEP. A screenshot of the page can be found at the end of this report.

The “Student Health” site comes in next, with a total of 320,671 pageviews to its pages, and 120,810 pageviews to its homepage alone. The “Services and Fees” page is in second place with 64,474 pageviews. The analytics reveal that average time spent on the pages are 1:30, indicating that students are reading the information presented.

Counseling and Psychological Services has 55,128 pageviews and Victim Empowerment Program has 36,129 pageviews. The Disability Resource Center received a total of 21,586 pageviews. Its most popular page, after the homepage (14,194 pageviews) is the “Request Accommodations” page (i.e., request for academic assistance such as note takers, longer test times, animal companion, etc.), with 1,812 views.

Marketing Plan (AY 2016-2017)

The goal of all departments within Student Health Services is to provide FIU students with affordable health care and support services that promote healthy lifestyles which will allow students to achieve academic success. The following proposal outlines an integrated marketing communications plan that will promote and enhance students' awareness of services provided by Student Health Clinics, Healthy Living Program, Counseling and Psychological Services, and Victim Empowerment Program. (Disability Resource Center is not included within this plan, since their services are to such a targeted population of students.) The plan also includes multiple surveys that will provide feedback regarding students' knowledge of on-campus health services and effectiveness of outreach efforts.

(Note: Each department will continue to individually market services and promotions throughout the year. This marketing plan seeks to provide widespread promotion of on-campus services that benefit students' general health and wellness, and drive students to see the Student Health Center as a "One Stop" for all health needs.)

Target Audience:

- Students

Goals:

- Promote and increase students' knowledge and utilization of health-related services available on-campus
- Educate students about the health fee and what services cost
- Understand if students are aware of on-campus services and ascertain why students may or may not use these services regularly

Key Messages:

- The Student Health Fee funds affordable health care on-campus, exclusively for students
- Drive students to the Student Health Center to learn ways to improve or maintain their health
- Most services at the Student Health Center are free for students, including general medicine visits and seeing a doctor for a common cold, and can address common student needs, such as stress, anxiety, STIs, vaccines and relationship help

Existing Communications:

- Digital
 1. Websites
 2. Social media accounts
 3. FIU Mobile App
 4. Emails via Vice President for Student Affairs, including Student Health 101

- Direct
 1. Marketing during large University events, MMC, BBC and Engineering Center (EC):
 - a. Orientation (Freshman, Transfer, Parent, Graduate)
 - b. Week of Welcome
 - c. Freshman Convocation
 - d. Open House
 - e. Recharge for Finals/Midnight Breakfast
 - f. Homecoming Week
 2. Promotional items/tabling
 3. First Year Experience courses and chapters in textbook

Roll-Out Timeline:

PHASE 1: October - December 2016

- Launch student survey (minimum sample size: 600) to create a baseline of understanding for awareness and usage of services offered within student health fee funded departments.
 - Create incentives for students to participate in the survey (eg. Ten \$10-\$15 gift cards to raffle for participants or one \$100 gift card)
- Add all student health fee funded departments to FIU Mobile App to increase exposure to students.
- Update all student health fee funded departments on FIU Phonebook to ensure all locations and phone numbers are accurate.
- Update student health fee funded department websites to ensure accuracy, consistency and transparency regarding costs for services.
- Update campus maps in print, on websites and in FIU Mobile App to reflect “SHC – Student Health Center” for both MMC and BBC locations.
- My.fiu.edu Student Health Portal
 - Improve landing page visuals and functionality
 - Expand online appointment scheduling to include more services currently, only Well-Woman appointments can be made online)
- Print and distribute Student Health at FIU brochures and inserts to students at major on-campus events.
- Utilize digital message boards around campus for topical news items and seasonal campaigns - e.g., flu season.
- Approach The Beacon to highlight clinical services available to students for upcoming Beacon Magazine issue.
- Utilize the FIU Calendar to post events and promotional offers for services (e.g., free flu shots, educational workshops, etc.)
- Consider reinstating SHAC student advisory council to provide feedback and act as ambassadors on behalf of Student Health Services.
- Identify a minimum of 10 students who are willing to share their stories of how using student health fee funded services solved a problem and/or improved their health and/or positioned them to be academically successful.

PHASE 2: Spring semester (Jan. 2017 – April 2017)

- Deliver survey results to Student Health Joint Governance Committee along with recommendations on what services have the most potential to increase utilization rates.
- Conduct user testing on student health fee funded websites and analyze current Google Analytics to assess content and organization of sites.
- Based on survey results, create content for a social media campaign to highlight services and programs of student health fee funded departments.
 - Consider additional campaigns and giveaways, similar to #HealthyCampus Week promotions.
 - Also consider Facebook and Instagram ads to increase exposure to social media audiences.
- Produce three short multimedia videos featuring various health fee funded services for use on social media and department websites
- Partner with Student Government Association to expand annual Health Fair, where all Student Health Fee funded departments would be present.
- Place student success stories in FIU News once every 4-6 weeks to highlight services available.
- Produce collateral materials that promote health fee funded services.
 - Retractable banners, floor stickers, etc.

PHASE 3: Summer semester (May 2017– July 2017)

- Based on website user testing results, implement enhancement of websites to address content, design or organization of sites.
- Launch survey to determine health behaviors of students; assess current offerings and determine if services should shift to address health behaviors of the community
- Initiate regular stream of social media posts on the main FIU channels (Instagram, Facebook, Twitter, SnapChat)

Key Performance Metrics:

- A survey will be distributed to the same students who answered the baseline survey to measure if our messaging and tools of delivery have promoted and increased the audience's knowledge about Student Health Fee funded departments, programs and services.
- Departments will report utilization rates for services at the Student Health Center compared to previous year.
- Measure website visits and FIU Mobile App usage against previous year to determine growth.
- Track readership of FIU News and social media posts to determine interest by readers/users.

Screenshot of Wellness hub on Student Affairs website.

(To view full site, go to <http://studentaffairs.fiu.edu/wellness/index.php>)

FIU Student Affairs [Share A Concern](#) [Q](#)

HOME GET INVOLVED LIFE AT FIU WELLNESS STUDENT SUCCESS

Healthy Campus Week: Promoting Healthy Habits and Lifestyles

Wellness

Challenge your mind outside of the classroom. Think you can climb a telephone pole or take on a triathlon? Give it a try! And while you're at it, find your moment of zen.

Counseling and Psychological Services

FIU Bike Shop

Panthers Care

Wellness & Recreation Centers

Ropes Course

Student Health

Victim Empowerment Program

Events

September 14
PantherFit @The Pit
 Skip the Cafe Bustelo and join us at the GC Pit for a quick pick-me-up! PantherFit [...]

September 22
Improving the Health and Well-being of Drug Users Through Photography
 Lens Project / Proyecto Lentes A [...]

October 12
Party in Pink Zumba Master Class
 Come shake those hips with all of our Zumba instructors and a live DJ [...]

News

Students alleviate anxiety, depression with online therapy
 Vanessa G.* was on her way to pick up a family member from work when she began to feel sick. [...]

4 key ingredients for cultivating healthy relationships
 From the dorm room to the workplace, relationships are a part of our daily lives. Sometimes, the relationships we have [...]

Zika now in Florida: What you need to know
 Fourteen people in Miami-Dade and Broward counties have been infected with the Zika virus by local mosquitoes, health officials announced [...]

Get on the dance floor for your physical, mental health
 In celebration of National Dance Day July 30, FIU News talked to people around campus who have a passion for dancing [...]

DEFINITION OF ACRONYMS

AY	Academic Year
BBC	Biscayne Bay Campus
BOG	Board of Governors
CAPS	Counseling and Psychological Services
DSA	Division of Student Affairs
DRC	Disability Resource Center
EMR	Electronic Medical Records
FY	Fiscal Year
HAC	Health Affairs Committee
HCN	Health Care Network
HLP	Healthy Living Program
JGC	Joint Governance Committee
LBR	Legislative Budget Request
MMC	Modesto A. Maidique Campus
MPAS	Multicultural Programs and Services
OCO	Operating Capital Outlay
OPS	Other Personal Services
SHC	Student Health Clinics (sometimes also used to reference the Student Health Center)
SHS	Student Health Services
STI	Sexually Transmitted Infection
SUS	State University System
VEP	Victim Empowerment Program

DEFINITION OF KEY TERMS

*Access	Availability of and eligibility for resources and services covered and/or supplemented by the health fee
^Discrete Student	Student who used health services at least once. Thus, if student A used the SHS 30 times, student B used it five times, and student C used it once, that would be three discrete students.
^Health care providers	Responsible for the <i>patient visits</i> (defined below) and are individuals with education in medicine, nursing, dentistry or other allied health professions and may include physicians, psychiatrists, dentists, nurse practitioners, physician's assistants, medical students, interns, nurses, mental health professionals, social workers and dieticians.
*Health Fee	A mandatory fee of \$93.69 per semester that is charged to all students (except those enrolled in fully online degree programs) as part of their tuition each semester.
*OCO	Expenditure category which includes equipment, fixtures, and other tangible personal property of a non-consumable and nonexpendable nature, the value or cost of which is \$5,000 or more to agree with the revised regulation.
*OPS	Expenditure category which includes the compensation for services rendered by a person who is not a regular of full-time employee filling an established position. This definition includes, but is not limited to, services or temporary employees, student or graduate assistants, persons on fellowships, part-time academic employees, board members, and consultants and other services specifically budgeted by each agency, or by the judicial branch, in this category.
*Student Health Center	The physical space located near the College of Law that houses the clinics, pharmacy, CAPS, VEP, SHC administrative offices, etc.
*Student Health Clinics	The operation and services offered through the HCN umbrella

*Student Health Services	All services offered by both DSA and HCN. Also referred to as “Student Health at FIU.”
^Patient Visit	A direct face-to-face encounter with a <i>health care provider</i> (see definition above), AND (a) With one or more of the following component: history taking, health screening, physical examination, medical decision making, counseling, and or risk factor reduction intervention, or administration of medical treatments or therapies (b) That results in documentation in the individual’s record (c) These visits should be capable of being coded with ICD-9 or equivalent diagnostic codes (d) Multiple services provided at the time of the visit, including those by several health care providers, should count as a single visit.
^Utilization	The usage of said resources and services by those who pay the health fee. The term “penetration rate” is also used, which is the percentage of <i>discrete students</i> (defined above) who use health services.

* As defined by FIU and/or [BOG](#)

^ As defined by the [Sunbelt Patients Statistics Survey](#)

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School of Integrated Science and Humanity
Report to the Board of Trustees Health Affairs Committee
December 2016

The School of Integrated Science and Humanity (SISH) in the College of Arts, Sciences & Education provides a multi-disciplinary home for the study of health-themed sciences such as biochemistry, biophysics, neuroscience, and cognitive and behavioral sciences. The following provides an update of recent health-related initiatives of the School.

BIOMOLECULAR SCIENCES INSTITUTE (BSI)

Director: Dr. Yuk-Ching Tse-Dinh

BSI member Yuan Liu, Associate Professor of Chemistry and Biochemistry, has recently published an article entitled "Crosstalk between MSH2-MSH3 and pol β promotes trinucleotide repeat expansion during base excision repair" in the August 22, 2016 issue of *Nature Communications*. In the article, Dr. Liu and her research team announced the discovery of cross-talk between DNA base excision and mismatch repair pathways. This cross-talk promotes the repeat expansion of trinucleotides, which is the cause of more than 40 neurodegenerative diseases including Huntington's disease. She has found that DNA polymerase beta, a central component of DNA base excision repair, physically interacts with the mismatch repair proteins MSH2-MSH3, and this allows the polymerase to increase the number of trinucleotide repeats. The DNA repair cross-talk discovery is highly significant for finding novel therapeutic approaches that may prevent the development of neurodegenerative diseases resulting from trinucleotide repeat expansion.

CENTER FOR CHILDREN AND FAMILIES (CCF)

Director: Dr. William Pelham

The Center for Children and Families (CCF) is a multidisciplinary team of researchers and service providers committed to improving the lives of children with mental health problems and their families. The CCF is the leading provider of evidence-based services for children with ADHD in Miami, and since its establishment in 2010, it has served approximately 10,000 families across clinical and research programs. The CCF was selected as one of four FIU Preeminent Programs as part of FIU's *BeyondPossible2020* strategic plan. The preeminent program at FIU is defined as a collaborative endeavor that demonstrates extraordinary success in providing unique learning opportunities, pioneering research and engagement while expanding FIU's financial base. The clinic served close to 250 children struggling with a variety of mental health conditions during the first quarter of FY '17. The CCF continues to offer important training opportunities to our faculty, students, staff, and community professionals. The 2016-2017 Speaker Series season began in September 2016 with a workshop by the nationally recognized expert Pat Levitt, titled "Brain Development and Public Policy: Translating What We Discover into What They Do." The two sessions held thus far have had a

combined attendance of 113 individuals. We will be offering an additional 10 speaker series opportunities during the remainder of FY '17. During the first quarter of FY '17, the CCF online evidence-based training website, <http://effectivechildtherapy.fiu.edu/>, had 7,386 visits and 1,927 enrollments in our workshops and/or keynotes. During this quarter, CCF faculty obtained a new NIMH R56 award with a one year value of \$713,466. Once future years are authorized, the total grant value will be \$3.59m over five years. Additionally, a member of the CCF faculty secured \$50,000 from the Children's Trust for a Pilot Study developed around his Healthy-Lifestyle interventions for children and their parents.

CENTER FOR IMAGING SCIENCE (CIS)

Director: Dr. Angela Laird

In August 2016, FIU acquired a 3.0 Tesla Siemens MAGNETOM Prisma to support magnetic resonance imaging research; this MRI was installed in the renovated health clinic area of PG-5 and became operational for research studies in October 2016. Given FIU's acquisition of this large and powerful MRI system, the Cognitive Neuroscience and Imaging Center has been re-branded as the Center for Imaging Science (CIS). Later this month, the CIS will launch three new NIH-funded studies, with the new MRI providing neuroimaging data for the Adolescent Brain Cognitive Development (ABCD) Study (PIs: Raul Gonzalez and Angela Laird), liver elastography data for the Miami Adult Studies on HIV (MASH) Study (PI Marianna Baum), and neuroimaging data for a newly funded study to examine the bio-signatures of executive function and emotion regulation in children with attention deficit/hyperactivity disorder (PIs: Paulo Graziano and Anthony Dick).



**FIU Herbert Wertheim College of Medicine
Report to the Board of Trustees Health Affairs Committee
December 2016**

Beyond Flexner Conference

The Herbert Wertheim College of Medicine (HWCOM) and the George Washington University School of Medicine & Health Sciences co-hosted this third annual conference that brought together more than 500 health care professionals, nonprofit executives, policymakers, and health educators to explore how to integrate a social mission into the teaching, learning, and practice of healthcare. Beyond Flexner is a national movement focused on health equity and training health professionals as agents of more equitable healthcare, including education in social determinants of health, community engagement, disparity reduction, diversity promotion and value-based health care. was selected to co-host the conference based on our distinction as a national pioneer that integrates social elements and interdisciplinary training into the education of the next generation of healthcare practitioners.

2016 Wertheim Conference

HWCOM held its fifth annual Herbert and Nicole Wertheim Community Healthcare Conference September 20 in Opa-Locka to provide an interactive hands-on experience for K-12 students that allowed them to learn about different health care professions. This year we had more than a thousand participants from various schools, organizations, and the community doubling last year's attendance. Participants from the Beyond Flexner medical conference also attended.

Graduation of First FIU Family Medicine Residency Program at West Kendall Baptist Hospital

West Kendall Baptist Hospital and the HWCOM celebrated the graduation of the four inaugural residents of the Family Medicine program and introduced the 2016-2017 incoming cohort. The graduation represents the fulfillment of both organizations' long standing commitment to develop home grown clinicians to address the shortage of primary care physicians in South Florida.

Awards and Recognitions:

ASPIRE Award

The Association for Medical Education in Europe (AMEE) has recognized the HWCOT's unique approach to medical education, which focuses on social accountability and the social determinants of health, by selecting it as one of its ASPIRE-to-Excellence Award in Social Responsibility recipients. AMEE is the leading international association for medical education with 90 members on five continents.

Jeffrey Boyd, Ph.D., Chair, Department of Human and Molecular Genetics

Honored by the Ovarian Cancer Research Fund with the 2016 Rosalind Franklin Excellence in Ovarian Cancer Research Award.

Josya-Gony Charles, M.D.

Named a Top Black Educator by Legacy Magazine, a news/business publication serving Florida's black professional community with insightful articles and information on business, careers, politics, lifestyle, culture and social commentary.

Marin Gillis, Ph.D., Professor, Department of Humanities, Health, and Society

Selected as chair of the Cambridge Consortium for Bioethics Education USA Working Group. The purpose of the Groups is to encourage people and institutions to work together on developing bioethics education in their countries.

Leonard Gralnik, M.D.

Inducted into the HWCOT Chapter of Gold Humanism Honor Society for his excellence in clinical care, ethical leadership, compassion, and dedication to service.

Pedro Jose Greer, Jr., M.D., Associate Dean for Community Engagement

Chosen as a Top Latino Leader by The National Diversity Council for Latino Workplace Equity. The Council seeks to both promote workplace equity for Latinos and recognize those Latinos who have overcome barriers to rise to the top of their organizations.

Eneida O. Roldan, M.D., M.P.H., M.B.A.

Named Master Fellow of the Obesity Medicine Association (OMA). OMA is comprised of clinical leaders in obesity medicine who work to advance the prevention, treatment, and reversal of the disease of obesity.

Rebecca Toonkel, M.D., Assistant Professor, Department of Humanities, Health, and Society

FIU Faculty Award for Excellence in Teaching

Ebony Whisenant, M.D.

Named a Top Black Educator by Legacy Magazine



Report to the Board of Trustees Health Affairs Committee December 2016

The College sustains research leadership in South Florida and globally in health disparities and improving health equity, chronic diseases, health economics, healthy aging, and the population health consequences to environmental exposure. The following summaries recent achievements.

Research

In the first quarter of FY 16/17 (July 1-September 30), FIU Stempel College faculty were awarded a record \$4.95M in new external grants. This represents approximately 70% of all funds secured by Stempel faculty in prior years.

Dr. Kim Tieu joined FIU to study Parkinson's disease

In August 2016, Dr. Kim Tieu, a renowned Parkinson's Disease (PD) researcher joined the Department of Environmental and Occupational Health at the FIU Stempel College. And with his arrival, FIU received a \$500,000 grant funded by the National Institute of Environmental Health Sciences over the next two years. Entitled "Toxicant-induced synaptic dysfunction and neurotoxicity in Parkinson Disease," this grant is critical because in the United States alone, about one million people suffer from PD and 50-60,000 new cases of PD are diagnosed each year. The causes of PD in most of these cases remain unknown; however, environmental factors have been implicated. The focus of this grant is two-fold: first, to elucidate the mechanisms by which exogenous environmental relevant toxicants induce neurotoxicity through perturbed mitochondrial function; and second, to identify potential novel therapeutic strategies for PD.

CRUSADA director awarded grant to study alcohol use trajectories for Latino immigrants

Dr. Mario De La Rosa, Professor in the School of Social Work and director of the Center for Research of U.S. Latino HIV/ AIDS and Drug Abuse (CRUSADA), and Dr. Mariana Sanchez, postdoctoral associate at CRUSADA, were awarded a five-year \$1.75M grant to study the alcohol use trajectories of Latino immigrants during their first decade in the U.S. Funded by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and National Institutes of Health (NIH), the study will expand on a previous investigation to examine how changes in social determinants interact with cultural factors to impact pre- to post-immigration alcohol use trajectories of early adult recent Latino immigrants during their first decade in the U.S. The specific aims of this study are to examine how changes in pre- to post-immigration social determinants impact the alcohol use trajectories of early adult Latino immigrants; to identify the impact of cultural factors on the alcohol use trajectories of early adult Latino immigrants; to determine the moderating role of cultural factors on the relationship between changes in pre- to post-immigration social determinants and alcohol use trajectories among Latino immigrants during early adulthood.

CRUSADA team to study Zika prevention among Latina farmworkers

The National Institute on Minority Health and Health Disparity (NIMHD) awarded a \$198K supplemental grant to FIU's CRUSADA to study Zika infection among farm working Latinas in South Florida. The study is led by Dr. Patria Rojas and Dr. Mario De La Rosa from CRUSADA and the FIU Stempel College. The research team also includes co-investigators and CRUSADA postdoctoral research associates, Dr. Mariano Kanamori and Dr. Mariana Sanchez. This exploratory study will assess the risk level of immigrant workers in the agricultural field and their knowledge of Zika and examine effective intervention and outreach strategies that target vulnerability and leverage key protective factors associated with Zika infection risk behaviors among Latina farm workers. It aims to increase awareness of the Zika virus which represents a public health threat for South Florida's farm worker community given that geographically, Miami Dade serves as a hub for individuals traveling to and from Latin American's Zika affected countries and has subtropical climate that remains a hospitable environment all year long for mosquitos potentially carrying the virus.

Dr. Shanna Burke, Assistant Professor in the School of Social Work, was awarded a grant from the *Dan Marino Foundation* (\$130K; 2016–2019) entitled "*Virtual Interactive Training Agents*" to investigate the effectiveness of software in improving participants' interview skills and self-efficacy.

Dr. Alejandro Arrieta, Assistant Professor in the Department of Health Policy and Management received a grant from the *American Medical Association* (\$95K; 2016–2017) entitled "*ROI Calculator for reimbursement of self-measured blood pressure monitoring.*"

Dr. Jessy Devieux, Associate Professor in the Department of Health Promotion and Disease Prevention received an award from the *NIH* (\$1.5M, 2016–2021) to study "*Effects of experimentally-induced reductions in alcohol consumption on brain cognitive, and clinical outcomes and motivation for changing drinking in older persons with HIV infection.*"

Dr. Mariana Baum, Professor in the Department of Dietetics and Nutrition received an award from the *NIAID* (\$800K, 2016–2021) to study "*OMICs to define impact of cocaine on immunity and HIV persistence in treated HIV infection.*"

Dr. Eric Wagner, Professor in the School of Social Work and director of the FIU-Bridge Center secured funds from the *Aetna Foundation* (\$100K, 2016–2018) to "*Expanding Yoga to Low Income, Racial/Ethnic Minority High School Students.*"

Graduate Education

A new Ph.D. track in Public Health with a major in Health Systems Research has been approved and Ph.D. students are recruited to the program. This would be the only one of its kind in the Florida State University System. The University of South Florida has a Ph.D. in Public Health with a track in health services research, and the University of Florida has a Ph.D. in Health Services Research. Health systems research is distinct from health services research in that health services research focuses on healthcare delivery, whereas health systems research focuses on public health, health policy, and healthcare delivery. Healthcare spending accounts for almost 20 percent of national income, and organizations, states, and the federal government

are constantly searching for ways to improve the efficacy of healthcare delivery. With issues of cost containment, value-based care, and building more resilient health systems, there is growing demand for scientists trained in the areas of health policy, health economics, and health systems research.

Faculty Awards / Recognitions

Dean appointed to Miami-Dade County HIV/AIDS Task Force

Dr. Tomas R. Guilarte, dean of the FIU Stempel College, has been appointed to the Miami-Dade County HIV/AIDS "Getting to Zero" Task Force. This Task Force, chaired by Florida Senator Rene Garcia, is a collaboration between the Office of the Mayor of Miami-Dade County, the Miami-Dade HIV/AIDS Partnership, the Florida Department of Health in Miami-Dade and key stakeholders who will work to develop a multipronged approach and action plan to address the county's AIDS epidemic by reducing the reported AIDS case rate, reducing the percentage of newly diagnosed HIV cases ages 13-19, increasing the percentage of newly identified HIV-infected persons linked to care within 90 days of diagnosis, increasing the number of persons who are receiving appropriate preventive care and treatment services and reducing new reported HIV cases. With more than \$7M in funding awarded over the last three years to FIU Stempel College for research on HIV/AIDS, Dr. Guilarte and his faculty can provide significant knowledge to the Task Force.

Dr. Saltman appointed to 2016-2017 Health Council of South Florida Board of Directors

School of Social Work faculty member David B. Saltman, L.C.S.W., C.S.W.S., has been appointed to the 2016-2017 Health Council of South Florida Board of Directors. His appointment comes as a recognition of his qualifications and commitment to healthcare in our community.

Dr. Saltman is a licensed clinical social worker and certified clinical social work supervisor. He is also a visiting instructor specialized in aging at the School of Social Work. He has served as a gero-social work education consultant with the Council on Social Work Education, and has 46 years of experience in clinical practice as a licensed psychotherapist. In addition, he has been an organization and strategic planning consultant, Chair of the Miami-Dade Mayor's Initiative on Aging, served previously on the Board of Directors of the Health Council of South Florida, and as CEO of Jewish Community Services of South Florida, for 28 years.

Dr. Shanna Burke's research shows that lack of sleep and untreated depression may increase the risk of Alzheimer's disease.

Dr. Burke, Assistant Professor in the School of Social Work, with coworkers presented their findings in *Associations between depression, sleep disturbance, and apolipoprotein E in the development of Alzheimer's disease: dementia*, which was recently highlighted as "Paper of the Month" in the journal *International Psychogeriatrics*. Dr. Burke specializes in investigating genetic and psychosocial risk factors associated with the development of neurodegenerative diseases. Her research analyzes clinical, neuropathological, and genetic data collected by sites across the United States. She teaches courses on research methodology, assessment and intervention, and gerontology at FIU.

Students Awards / Recognitions

FIU Stempel College student interviewed by CNN

School of Social Work student Daniel Alvarez was interviewed by CNN for his work on human trafficking and the importance of student involvement on the issue. Mr. Alvarez, who is pursuing a Master of Social Work degree, played a significant role in the organization of a conference entitled "Organizing for Change: Students Taking Action Against Human Trafficking." This conference, which took place at the University of Miami in September, was organized by The Women's Fund of Miami-Dade in partnership with other organizations, including University of Miami Women's and Gender Studies and Project Freedom: Medical Students Against Human Trafficking.

Postdoctoral fellow receives first place award

Dr. Kalynda Gonzales, a postdoctoral fellow at the FIU Stempel College, received the 1st Place Award for the postdoctoral fellow competition at the 28th International Neurotoxicology Conference that took place September 25-28 at the Icahn School of Medicine at Mount Sinai in New York City. The topic of the conference was "Manganese Health Effects on Neurodevelopmental and Neurodegenerative Diseases." Dr. Gonzales's winning research presentation was entitled "Loss of striatal cholinergic interneurons in the presence of intact nigral dopaminergic neurons in early manganese-induced parkinsonism." This work represents the first description of a putative pathophysiological mechanism of Mn-induced parkinsonism. Dean Guilarte brought Dr. Gonzales to FIU with him when he joined the College in January 2015.

Community Events

Dean Guilarte speaks about Zika at Miami Beach City Commission meeting

Dean Guilarte spoke during the September meeting of the Miami Beach City Commission, which was set to address the Zika outbreak and the decision to spray Naled, a controversial pesticide over the city. The *Miami New Times* article, "Miami Beach's Naled Debate Devolves Into Circus at City Hall," reflects clearly the atmosphere during that meeting opposing city and health officials, residents, and academic experts favoring or adamantly against spraying. The article also demonstrates that Dean Guilarte's presence was a positive one: "Guilarte, who specializes in studying nerve-affecting chemicals like Naled, gave one of the few even-handed, rational critiques offered all day. Zika, he said, *does* cause microcephaly. If the government says there is simply no other option to fight the virus, the city should reluctantly use Naled. But, he added, 'Naled is a neurotoxin.' As such, he urged all governments to commit resources to developing nontoxic ways to fight the *Aedes aegypti* mosquito. That comment was met with cheers. But Guilarte's speech was one of the few calm moments of the day."

Dean Guilarte was not the only FIU Stempel College representative addressing Zika. Dr. Consuelo Beck-Sague, Assistant Professor in the Department of Health Promotion and Disease Prevention, appeared on several television programs, including CNN and WPBT2 South Florida PBS. Dr. Tim Page, Associate Professor in the Department of Health Policy and Management, is

leading an assessment of the economic impact of Zika on businesses in the Wynwood area. Finally, two public health doctoral students who are working full-time in the department of epidemiology at the Florida Department of Health in Miami-Dade County have been engaged in the investigations of travel-related Zika cases and the mosquito control efforts regarding these cases, the community outreach and surveillance in areas identified with possible local Zika transmission.

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NICOLE WERTHEIM COLLEGE OF NURSING AND HEALTH SCIENCES
Report to the FIU Board of Trustees Health Affairs Committee
December 2016

FIU Nicole Wertheim College of Nursing and Health Sciences Launches its Precision Medicine Lecture Series this Fall Semester

The Nicole Wertheim College of Nursing and Health Sciences (NWCNHS) launched its Precision Medicine Lecture Series on Tuesday, September 13, 2016. The College organizes the Precision Medicine Taskforce, which is an interdisciplinary team that focuses on the concept of prevention and treatment approaches that takes into account individual variability. This taskforce's mission is to ensure that the University aligns itself with congressional initiatives led by the White House, as well as the National Institutes of Health (NIH) in the area of precision medicine. The taskforce has organized a Precision Medicine Lecture Series to provide a platform for many of the University's distinguished scholars to discuss related initiatives and to bring together the FIU community to hear their prominent efforts in the field of precision medicine. The lecture series is supported by the Wertheim Innovations in Research Fund. The following academicians are participants of the NWCNHS Fall 2016 Precision Medicine Lecture Series:

- William E. Pelham, Jr., Ph.D., ABPP
Dr. Pelham is the Director of the Center for Children and Families (CCF) at FIU, a nationally recognized interdisciplinary clinical center committed to improving the lives of children and families struggling with mental health concerns. In addition, he is the chairperson of the Department of Psychology. Dr. Pelham studies ADHD in children and adolescents. His interests include treatment development and evaluation, including behavioral treatments, pharmacotherapy, and the combination of the two. Most recently, the treatment research has focused on dosing and sequencing in behavioral, pharmacological, and combined interventions. In addition, Dr. Pelham studies the outcomes in adolescence and adulthood of ADHD children, focusing on multiple domains including substance use.
- Tomas R. Guilarte, Ph.D.
Dr. Guilarte is the Dean of the Robert Stempel College of Public Health and Social Work (RSCPHSW). A leading scientist, educator and academic leader, his research has focused on mechanism-based neurotoxicology and neuroscience

using behavioral, cellular and molecular approaches, ranging from studies using primary culture of neural cells to the application of brain imaging technologies. He is recognized worldwide for revealing the effects of low-level lead exposure on the central nervous system during development, and subsequently developing therapies to reverse these neurodegenerative effects.

- Changwon Yoo, Ph.D.
Dr. Yoo is Chair of the Biostatistics Department (RSCPHSW). His research concentrates in developing and disseminating innovative statistical methods for Big Data Analytics. Dr. Yoo's analyses draw from statistical machine learning, genomics, and neuroscience and seeks to identify and build statistical methods using big data such as genomics, proteomics, neuroimaging, and clinical data. Better treatments and prevention of diseases rely on understanding pathophysiology of diseases. Dr. Yoo leads highly collaborative research because understanding pathophysiology of diseases inevitably involves analyzing complex and big data.

FIU Nicole Wertheim College of Nursing and Health Sciences Received a Total of \$377,000 in Significant Contributions for this Academic Year

The College has received a series of significant contributions for the academic year thus far to launch and sustain innovative academic programs; invest in capital needs and improvements; and sustain scholarships for deserving students who have financial barriers to pursuing a degree. Contributions for the current academic year to date:

- Citrus Health Network: \$145,000
- Diane Faulconer: \$50,000 - to support graduate nursing student scholarships
- Health Foundation of South Florida: \$32,000 - to support BSN student scholarships
- Hugoton Foundation: \$150,000 - to enhance the Wallace Gilroy Endowed Nursing Research Fund (additional gift)

FIU Nicole Wertheim College of Nursing and Health Sciences Welcomes New Faculty this Fall Semester

The College is welcoming more than 10 new faculty members across its six departments this fall semester. These educators, many of whom are returning to their alma mater, represent the College's mission to prepare the next generation of diverse health care professionals through interdisciplinary research and instruction. Please see a list of new faculty members below:

- **Athletic Training Faculty**
 - Shane Vaughan, MSAT-Clinical Instructor
- **Communication Sciences and Disorders Faculty**
 - Alliete Rodriguez Alfano, PhD, CCC-SLP, LSLS Cert. AVT-Visiting Assistant Professor
 - Angela M. Medina, PhD, CCC-SLP-Assistant Professor
- **Health Services Administration Faculty**
 - Frank Wensheng Fan, PhD, EDI Certificate
- **Nursing Faculty**
 - Therese Boyd, EdD, ARNP, AGPCNP-BC-Clinical Assistant Professor
 - Mark Fonseca, RN, ARNP-Visiting Clinical Instructor
 - Ann B. Miller, DNP, CRNA, ARNP-Clinical Associate Professor
 - Rosa Roche, PhD, ARNP-Clinical Assistant Professor
- **Occupational Therapy Faculty**
 - Ingris Treminio, DOT-Visiting Clinical Assistant Professor
- **Physical Therapy Faculty**
 - Erasmo L. Alvarez, PT, DPT-Clinical Assistant Professor
 - Nicole Rendos, PhD, LAT, ATC, CSCS-Post-doctoral Associate

Two NWCNHS Faculty Named 2016 Legacy Black Educator of South Florida

Legacy Magazine has named NWCNHS faculty Drs. Yhovana Gordon and Chanadra Young Whiting as South Florida's Top Black Educators of 2016. The editors of the magazine selected a total of 54 educational leaders within the community who have contributed to the progress of education and who inspire all to keep education as the essential tool for human growth and overall success.

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**STATE UNIVERSITY SYSTEM OF FLORIDA
BOARD OF GOVERNORS
Health Initiatives Committee
September 21, 2016**

SUBJECT: Minutes of Health Initiatives Committee Meeting held June 23

PROPOSED COMMITTEE ACTION

Consider for approval the minutes of the Health Initiatives Committee meeting held on June 23, 2016 at University of Central Florida

AUTHORITY FOR BOARD OF GOVERNORS ACTION

Article IX, Section 7, Florida Constitution

BACKGROUND INFORMATION

Committee members will review and consider for approval the minutes of the meeting held on June 23, 2016.

Supporting Documentation Included: Minutes, June 23, 2016

Facilitators/Presenters: Governor Ed Morton

MINUTES
STATE UNIVERSITY SYSTEM OF FLORIDA
BOARD OF GOVERNORS
HEALTH INITIATIVES COMMITTEE
UNIVERSITY OF CENTRAL FLORIDA
ORLANDO, FLORIDA
JUNE 23, 2016

*Video or audio archives of the meetings of the Board of Governors
and its Committees are accessible at <http://www.flbog.edu>*

1. Call to Order

Chair Ed Morton convened the meeting at 8:35 a.m. on June 23, 2016 with the following members present and answering roll call: Governor Beard, Governor Doyle, Governor Robinson, and Governor Valverde.

2. Meeting Minutes

Governor Valverde moved that the Committee approve the minutes of the January 21, 2016 committee meeting and the February 11 committee workshop, as presented. Governor Doyle seconded the motion and members concurred.

3. Update on the Strategic Plan Priorities: Request for Proposals and LBR Process

Governor Morton introduced the staff presentation with an overview of the critical role that healthcare plays in the state of Florida. He noted that half of all research funding to the state's universities goes towards health-related research and that approximately six to seven employment gaps in the state are in health-related fields. Governor Morton stated that health care is a critical area for job growth in the state and that it also improves quality of life. Governor Morton reminded the Committee that their environmental scan identified two challenges that are being addressed through the Board's strategic plan – that is increasing the number of physicians and nurses to serve Florida's growing population.

Dr. Christy England-Siegerdt, Associate Vice Chancellor for Academic Policy and Research, presented an overview of the Committee's planning process that led to the development of the Board's strategic plan for health followed by an overview of two programs developed to support the two highest priority strategies outlined in the plan.

Dr. England-Siegerdt noted that the impetus for proposing the Graduate Medical Education (GME) Expansion Program was the shortage of residency positions available in Florida, which is a critical component for attracting future physicians. She noted that

Florida needs 3,350 additional residency positions to be at the national average of residents per 100,000 population and that Florida retains 78% of Florida medical school students who are able to stay in Florida for their residency, which is the fourth highest retention rate in the country. Dr. England-Siegerdt stated that the proposed program will provide much-needed start-up funds to support the creation of new GME programs or to expand existing GME programs because most of the existing funds for GME are not available to universities for the purpose of starting or expanding programs. She noted that if even \$50 million dollars were available to support a GME expansion program, approximately 500 new first-year resident positions could be created which translates into 2,000 total new positions when the GME programs reach full capacity after approximately four years. She also stated that it is important to keep in mind some residency programs are more expensive than others and as previously noted, residency programs also vary in length. She then noted that all GME programs would be required to address a documented specialty or geographic need and performance of the funded programs would be monitored for six years to give ample time for start-up or expansion and then to assess the sustainability of the new residency positions. Dr. England-Siegerdt also noted that the proposed program was developed in close collaboration with the deans of the SUS medical schools and the Council of Florida Medical Schools and builds on the information provided to the Committee during its February workshop.

Dr. England-Siegerdt then described the proposed nursing faculty incentive program. She stated that one of the biggest challenges to expanding the capacity of the SUS nursing programs is recruiting and retaining qualified nursing faculty. She noted that the proposed program, if funded at \$15 million, would provide funds to scale existing best practices and support the implementation of innovative strategies for recruiting and retaining nursing faculty across the system. Dr. England-Siegerdt stated that projects that include a commitment of additional university support for nursing faculty salaries should be given priority. She also noted the program should be evaluated on the number of new faculty hired and the number of faculty retained. Participating nursing schools should also project and track additional program capacity in specific nursing programs that will result from increased numbers of nursing faculty.

Governor Robinson noted that in addition to recruiting additional nursing faculty, there will be a large number of nursing faculty positions vacant due to retirement that will need to be filled as well. She also noted that it is becoming increasingly difficult to identify and successfully hire qualified nursing faculty due to the large numbers of nursing faculty retiring and due to low salaries paid to nursing faculty. The Committee also discussed the difficulties associated with securing adequate clinical space required to train more nurses.

Dr. England-Siegerdt informed the Committee that legislative budget requests for both proposed programs would be presented for its approval at the September Board meeting.

4. Closing Remarks and Adjournment

Chair Morton adjourned the meeting at 9:10 a.m.

Ed Morton, Chair

Christy England-Siegerdt, Ph.D.,
Associate Vice Chancellor, Academic and Student Affairs

**STATE UNIVERSITY SYSTEM OF FLORIDA
BOARD OF GOVERNORS
Health Initiatives Committee
September 21, 2016**

SUBJECT: Graduate Medical Education (GME) Expansion Legislative Budget Request

PROPOSED COMMITTEE ACTION

Consideration for approval of the Graduate Medical Education (GME) Expansion Legislative Budget Request

AUTHORITY FOR BOARD OF GOVERNORS ACTION

Article IX, Section 7, Florida Constitution

BACKGROUND INFORMATION

The Health Initiatives Committee will consider for approval a legislative budget request to fund residency positions in Florida. The Graduate Medical Education Expansion Program was developed as a response to the findings from a year-long environmental scan of health topics undertaken by the Health Initiatives Committee of the Board of Governors. A gap analysis of Florida's future workforce needs, conducted as part of the environmental scan, found that Florida will face a shortage of nearly 3,700 physicians annually by 2025. The barrier to meeting the demand for physicians in Florida is based upon a lack of available residencies, which is a required and critical part of every physician's training.

Closing the gaps in the physician workforce requires a strategic expansion of graduate medical education (GME) in Florida. This legislative budget request is for \$80,000,000 in nonrecurring funds to support the creation of approximately 800 first-year residency positions. Residency positions created through this program will result in the training of an additional 3,000 physicians within the next three to seven years.

Supporting Documentation Included:

Legislative Budget Request Form I

Facilitators / Presenters:

Dr. Christy England

**State University System
Education and General
2017-2018 Legislative Budget Request
Form I**

University(s):	6 SUS institutions with medical schools: Florida State University, University of Florida, University of Central Florida, University of South Florida, Florida Atlantic University, and Florida International University
Issue Title:	Graduate Medical Education (GME) Expansion Program
Priority Number	
Recurring Funds Requested:	
Non-Recurring Funds Requested:	\$80,000,000
Total Funds Requested:	\$80,000,000
Please check the issue type below:	
Shared Services/System-Wide Issue for Fiscal Year 2017-2018	<input checked="" type="checkbox"/>
New Issue for Fiscal Year 2017-2018	<input checked="" type="checkbox"/>

- I. Description** – 1. Describe the service or program to be provided and how this issue aligns with the goals and objectives of the strategic priorities and the 2016 Work Plan established by your institution (include whether this is a new or expanded service/program). If expanded, what has been accomplished with the current service/program? 2. Describe any projected impact on academic programs, student enrollments, and student services.

The Graduate Medical Education Expansion Program was developed as a response to the findings from a year-long environmental scan of health topics undertaken by the Health Initiatives Committee of the Board of Governors. A scan of Florida's healthcare workforce, healthcare delivery and health-related research as they relate to the State University System informed the Committee's development of a Health Strategic Plan. The priorities and strategies established in the Strategic Plan, which serve as the foundational work of this initiative, was guided by a collaboration between the Board of Governors and an advisory group to the Health Initiatives Committee consisting of representatives of the Florida Council of Medical School Deans, the Florida Department of Health, the Florida Medical Association, the Florida Center for Nursing, the Florida

Hospital Association, and the SUS Vice Presidents for Research. The Health Strategic Plan was unanimously approved by the Board of Governors in March 2016.

The first goal of the Health Strategic Plan is to meet the health workforce needs of Florida. The gap analysis of Florida's future workforce needs, conducted as part of the environmental scan, found that Florida will definitely face a shortage of physicians. The barrier to meeting the demand for physicians in Florida is based upon a lack of available residencies, which is a required and critical part of every physician's training. Closing the gaps in the physician workforce requires a strategic expansion of graduate medical education (GME) in Florida.

By the year 2020, it is projected that Florida will have approximately 500 more medical school graduates per year than the number of first year graduate medical education positions currently available. Unless the number of Florida GME positions is increased concomitantly, many Florida medical school graduates who want to complete GME training in Florida will be forced to leave the state -- and statistics show that most of them will never return to Florida to practice. Further, the supply of physicians in Florida has not kept pace with the growth in the state's population. Florida is far below the average number of residents in training per 100,000 population, with only 19.9 GME positions per 100,000 population compared to 36.9 nationally. Florida needs approximately 3,350 more allopathic residency positions just to meet the national average ratio of medical residents per 100,000 state population according to the Association of American Medical Colleges (AAMC).

A supply and demand analysis conducted in 2014 by IHS Global on behalf of the Safety Net Hospital Alliance of Florida found that shortfalls exist in specific medical specialties, including the primary care specialties, and for specific regions the gaps will not be filled completely and that gaps will remain in 2025. The report cites a shortfall of 4,620 physicians in 2013 that only decreases to a gap of 3,690 in 2025 if current workforce participation patterns and the number of new entrants to the workforce remain unchanged. Florida medical schools cannot meet the current or future needs and demands of the state.

To address this shortfall of physicians, the SUS Board of Governors has set a goal of increasing the number of first-year residency positions in Florida by 500-800 positions. When new or expanded GME programs are operating at full capacity and supported by sustainable funds, it is expected that support for this first-year position goal will be leveraged to add a total of roughly 3,000 residency positions to graduate medical education in Florida. These 3,000 positions represent multiple years within residency programs, which range from 3-7 years in length depending on the physician specialty area.

# of First-year Residents	Cost for Start-Up / Expansion	# Residents at Full Capacity
800	\$80 million	3,200
500	\$50 million	2,000

The State University System is seeking \$80 million in state support for an initiative that will competitively award funds to Florida's medical schools to cover start-up and expansion costs that cannot be covered by federal and state graduate medical education programs. The medical schools are expected to demonstrate how one-time funds will lead to the development or expansion of residency programs, which will ultimately qualify for sustainable funds from other sources and also expand the overall GME capacity in Florida. The program is intended to meet the state's needs for more physicians by supporting Florida's medical schools leadership role in GME development.

With SUS medical schools serving as the sponsoring institutions for more than half of the current resident positions in Florida, they are leaders in developing innovative GME programs and incur significant costs developing, maintaining, and coordinating GME programs in affiliation with their hospital partners or communities. However, Medicare GME funding and Medicaid GME funding is primarily available to hospitals, and not directly available to the medical schools. Federal and state funds to support new residency positions are also only available to hospitals and some federally qualified health centers, and cannot be accessed by medical schools. Despite the recent, significant investments being made in GME, no funds are available to offset the substantial resources that medical schools incur in establishing and expanding GME programs.

Florida's medical schools will prepare project proposals to support the creation or expansion of graduate medical education residency programs in areas of well-documented, greatest need. All medical schools in Florida are eligible, as long as they partner with a medical school associated with a university that is a member of the State University System of Florida. The SUS medical schools may also develop projects by themselves. Eligible projects must address documented statewide, regional, or local needs. New or expanded residency programs will prepare physicians to practice in needed specialties, underserved areas, or in high-need settings in a manner that addresses current and projected needs for Florida's physician workforce. Projects that demonstrate the greatest potential for addressing multiple needs will be given priority.

The receipt of non-recurring funds will allow the State University System medical schools to leverage on-going partnerships and encourage the development of new partnerships between Florida's medical schools and GME providers so that they may ultimately secure sustainable funding for any newly developed program(s) or position(s). Examples of support include new allocations of Medicare funding for GME by establishing new programs in Medicare-naïve training sites, funding from the U.S. Department of Veterans Affairs, private funding, and funding opportunities of the Florida Statewide Medicaid Residency Program.

The majority of projects supported by these non-recurring funds will include some of the following types of activities, all of which are directly related to the creation of new residency programs or the expansion of existing programs:

- developing or expanding partnerships with providers of graduate medical education and/or developing consortia of providers,
- hiring and/or training additional faculty or staff to establish or expand the program,
- developing a curriculum for new programs or enhancing curricula in ways that allow for program expansion,
- addressing tasks related to accreditation application and coordination, and
- promoting the program to recruit residents.

The Graduate Medical Education Expansion Program should provide support for program start-up costs and the initial direct medical expenses, including first-year salary support for new residents, to ensure the viability of new programs until they receive accreditation and secure additional funding from other sources. Funded projects will have three years to spend the one-time funds and will report on project outcomes for six years. Projects that receive support from this program will be evaluated on the number of new residency positions created, how the new positions fill an unmet need in the state, and the likelihood that the program can be sustained. Where innovative training and quality-improvement projects can also be tied to a proposed increase in the number of residency positions, these projects will receive preference.

II. Return on Investment - *Describe the outcome(s) anticipated, dashboard indicator(s) to be improved, or return on investment. Be specific. For example, if this issue focuses on improving retention rates, indicate the current retention rate and the expected increase in the retention rate. Similarly, if it focuses on expanding access to academic programs or student services, indicate the current and expected outcomes.*

The following categories of benefits are expected from implementation of the competitive program:

1) Efficient Retention and Recruitment for the Physician Pipeline

- Florida currently makes significant investments in undergraduate medical education and the training of medical students. An increased investment in graduate medical education would allow more of these medical school graduates to remain in Florida and continue their training to become Florida physicians. Other large states have set a ratio goal of maintaining 1:1 residency slots for every medical school graduate. Florida currently has more medical school graduates than available first-year allopathic residency positions, with a ratio of 0.9 allopathic residency positions per medical school graduate. By investing in a robust and high-quality physician education pipeline, Florida can address physician shortages through increased retention and recruitment opportunities and eliminate the current bottleneck of GME training.

- An increased number of high-quality residency positions would make Florida more attractive for retaining the best medical school graduates in Florida and competing for top graduates nationally.

2) Better Healthcare Aims

- By addressing physician shortages through an expanded GME pipeline, Florida's health care services can keep up with additional demands due to population growth and Florida's unique demographics.
- The program is designed to address documented, unmet needs in shortage specialties and regions. This strategic investment will increase the likelihood that physicians will fill current gaps in care across Florida.
- Florida's public and private medical schools are leaders in developing innovative curricula and incorporating changing models of healthcare delivery into physician training. There is a beneficial role for medical schools to work with their GME partners to develop quality curricula and increase the chances of successful accreditation of innovative programs. Better-prepared doctors will provide higher quality care in a healthcare landscape that continues to change.

3) Economic Development and Workforce Aims

- Florida can expect additional economic development through long-term gains in healthcare innovation and the training of high-wage professionals who stay in Florida to practice. An economic impact study conducted for the American Medical Association showed that in 2012, Florida's 43,000 physicians generated an estimated \$76.4 billion in direct and indirect sales revenues and approximately \$2.3 billion in state and local tax revenue. They also supported, directly or indirectly, more than a half a million jobs that provided \$40 billion in wages and benefits for Floridians. Florida physicians lead those in Texas, New York, Virginia, and Georgia on all of the above metrics with the exception of state and local taxes.
- The design of the program focuses on physician shortages in areas of documented need and reports on outcomes, thereby coordinating wider GME needs in Florida rather than solely responding to individual hospital or provider needs. This approach also increases accountability for the state investment and provides a basis for statewide physician workforce efforts.

III. Facilities *(If this issue requires an expansion or construction of a facility, please complete the following table.):*

	Facility Project Title	Fiscal Year	Amount Requested	Priority Number
1.	N/A			
2.				

**STATE UNIVERSITY SYSTEM OF FLORIDA
BOARD OF GOVERNORS
Health Initiatives Committee
September 21, 2016**

SUBJECT: Nursing Faculty Recruitment and Retention Program Legislative Budget Request

PROPOSED COMMITTEE ACTION

For information and consideration of the Nursing Faculty Recruitment and Retention Program Legislative Budget Request

AUTHORITY FOR BOARD OF GOVERNORS ACTION

Article IX, Section 7, Florida Constitution

BACKGROUND INFORMATION

The Health Initiatives Committee will consider for approval a legislative budget request to fund the Nursing Faculty Recruitment and Retention Program. The Program was developed as a response to the findings from a year-long environmental scan of health topics undertaken by the Health Initiatives Committee of the Board of Governors. In conducting a gap analysis of Florida's future workforce needs, the Committee found that Florida will definitely face a shortage of nurses. Currently the SUS nursing programs only contribute 11% of all new nurses licensed annually. The Committee also learned that the number one limitation to meeting the demand for nurses in Florida is a shortage of nursing faculty.

Recruiting and retaining faculty in the short-term and building up the nursing faculty pipeline in the long-term are critical steps in meeting student demand for SUS nursing programs and employer demand for nurses with advanced education. This legislative budget request is for \$15,000,000 in nonrecurring funds to support the recruitment and retention of nursing faculty.

Supporting Documentation Included:	Legislative Budget Request Form I
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Facilitators / Presenters:	Dr. Christy England
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**State University System
Education and General
2017-2018 Legislative Budget Request
Form I**

University(s):	10 SUS institutions with nursing schools: University of West Florida, University of North Florida, Florida A&M University, Florida State University, University of Florida, University of Central Florida, University of South Florida, Florida Gulf Coast University, Florida Atlantic University, and Florida International University
Issue Title:	Nursing Faculty Recruitment and Retention Program
Priority Number	
Recurring Funds Requested:	
Non-Recurring Funds Requested:	\$15,000,000
Total Funds Requested:	\$15,000,000
Please check the issue type below:	
Shared Services/System-Wide Issue for Fiscal Year 2017-2018	<input checked="" type="checkbox"/>
New Issue for Fiscal Year 2017-2018	<input checked="" type="checkbox"/>

- I. Description** – 1. Describe the service or program to be provided and how this issue aligns with the goals and objectives of the strategic priorities and the 2016 Work Plan established by your institution (include whether this is a new or expanded service/program). If expanded, what has been accomplished with the current service/program? 2. Describe any projected impact on academic programs, student enrollments, and student services.

The Nursing Faculty Recruitment and Retention Program was developed as a response to the findings from a year-long environmental scan of health topics undertaken by the Health Initiatives Committee of the Board of Governors. A scan of Florida's healthcare workforce, healthcare delivery and health-related research as they relate to the State University System (SUS) informed the Committee's development of a Health Strategic Plan. The Health Strategic Plan was unanimously approved by the Board of Governors in March 2016.

The priorities and strategies established in the Strategic Plan, which serve as the foundational work of this program, was guided by a collaboration between the Board of Governors and an advisory group to the Health Initiatives Committee consisting of representatives of the Florida Council of Medical School Deans, the Florida Department of Health, the Florida Medical Association, the Florida Center for Nursing, the Florida Hospital Association, and the SUS Vice Presidents for Research. The Deans and Directors of the SUS nursing programs also provided input on the barriers they face in increasing the capacity of the bachelors, masters, and doctoral nursing programs.

The first goal of the Health Strategic Plan is to meet the health workforce needs of Florida. In conducting a gap analysis of Florida's future workforce needs, the Committee found that Florida will definitely face a shortage of nurses. Currently the SUS nursing programs only contribute 11% of all new nurses licensed annually. The Committee also learned that the number one limitation to meeting the demand for nurses in Florida is a shortage of nursing faculty.

A strategic increase in the number of nursing faculty for the SUS would achieve two aims. First, it would move Florida forward on the percent of registered nurses with bachelor's degrees, as recommended in the 2010 Institute of Medicine report *The Future of Nursing: Leading Change, Advancing Health*. The report suggests 80% of registered nurses nationally should hold a baccalaureate degree by 2020. Currently, only 46% of working registered nurses in Florida hold a baccalaureate degree or higher. Despite the addition of RN-BSN completion programs across the state, Florida will not be able to reach the 80% goal by 2020 without expanding program capacity -- which requires more nursing faculty. Second, an increase in the number of faculty would also allow programs to increase capacity in the masters and doctoral programs. These programs prepare Ph.D. students to become faculty and fill leadership roles in clinical settings and prepare Advanced Practice Nurses who can teach as clinical faculty.

Recruiting and retaining faculty in the short-term and building up the nursing faculty pipeline in the long-term are critical steps in meeting student demand for SUS nursing programs and employer demand for nurses with advanced education. Faculty shortages are of particular concern with a national nursing faculty vacancy rate of 7.1% according to the most recent survey conducted by the American Association of Colleges of Nursing. This vacancy rate translates into 1,328 faculty vacancies across 741 nursing colleges and schools nationally (AACN, 2015). Nursing school who need to hire additional full-time faculty cited the following barriers: insufficient funds to hire new faculty (65.4%), unwillingness of administration to commit to additional full-time positions (53.1%), inability to recruit qualified faculty due to competition in other job markets (36.2%), and a critical shortage of qualified applicants (22.3%). AACN also reported that 90.7% of faculty vacancies require or prefer doctoral degree, however there is a critical shortage of nurses prepared at this level.

The SUS is seeking \$15 million in state support for a program that will award funds to cover innovative strategies that target the recruitment and/or retention of nursing faculty. The nursing schools are expected to demonstrate how one-time funds will increase the number of nursing faculty in Florida, and how that will in turn lead to increases in SUS

nursing program capacity. Program funds will be used to cover direct expenses incurred in the recruitment or retention of nursing faculty.

Proposed activities may include:

a) one-time funds used for non-recurring strategies associated with the recruitment and hiring process such as sign-on bonuses, loan forgiveness, start-up packages for research, or partnership development for joint appointments and/or

b) multi-year, but short-term, funding for retention strategies (such as providing release time for mentoring, awarding pre- and post-doctoral researcher salaries, employing adjuncts to fill voids for low teaching loads, or creating professional development opportunities).

The SUS nursing schools will prepare project proposals that support the recruitment and/or retention of nursing faculty through innovative programs showing a clear return on investment and capacity-building for educating additional nurses in Florida. Each of the SUS nursing schools may apply for a grant by themselves or they may partner with other SUS nursing schools if a greater return on investment is expected. Funded projects will have three years to spend the one-time funds and will report on project outcomes for six years.

Projects that receive support from this program will be evaluated on the number of new faculty hired and the number of faculty retained. Participating nursing schools will also project and track additional program capacity in specific nursing programs that will result from increased numbers of nursing faculty. Projects that include a commitment of additional university support for nursing faculty salaries should be given priority.

II. Return on Investment - *Describe the outcome(s) anticipated, dashboard indicator(s) to be improved, or return on investment. Be specific. For example, if this issue focuses on improving retention rates, indicate the current retention rate and the expected increase in the retention rate. Similarly, if it focuses on expanding access to academic programs or student services, indicate the current and expected outcomes.*

The following categories of benefits are expected from implementation of the competitive program:

1) Efficient Retention and Recruitment for the Nursing Faculty Pipeline

- Investment in the program is expected to increase the nurse faculty pipeline in both the short and long-term. The pipeline can be increased in the long-term if schools put new faculty efforts towards growth in Ph.D. programs or ARNP tracks that emphasize teaching.
- The program allows the SUS nursing schools to be competitive in a tight national market for nursing faculty.
- Where faculty salaries are increased with university funds under this program, the nursing schools are more likely to successfully recruit practicing clinical nurses with valuable skills who can educate the next generation of nurses and nursing faculty.

2) Better Healthcare Aims

- Increasing the education level of nurses has been demonstrated to improve health outcomes for patients. Several recent studies show that a 10% increase in the number of nurses with a BSN result in a 7-10% decrease in patient mortality.
- Research efforts of new and retained faculty will contribute to better teaching and better care in the field. Programs that put new faculty resources into graduate programs may enhance the research training of students as well. These students will go on to apply research skills in leadership positions within healthcare.

3) Economic Development and Workforce Aims

- Nurses with advanced education make higher salaries.
- A financial boost to the faculty recruitment and retention efforts of the SUS nursing programs will contribute to sustainable capacity growth across the System. The investment will create programs that can employ new faculty resources to meet student demand for high-quality and affordable nursing programs.
- The ultimate outcome expected from the investment is meeting the workforce demand and reducing shortages of nurses at all levels by expanding SUS program capacity.

III. Facilities *(If this issue requires an expansion or construction of a facility, please complete the following table.):*

	Facility Project Title	Fiscal Year	Amount Requested	Priority Number
1.	N/A			
2.				