



CALIFORNIA STATE UNIVERSITY CHANNEL ISLANDS ADMINISTRATIVE POLICY MANUAL

Student Affairs

Approved By: Richard R. Rush
President

Policy Number: SA.19.001

Effective Date: 4/21/14

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Policy on Student Health Services

PURPOSE:

This policy governs the provision of student health services at California State University Channel Islands (CI).

BACKGROUND:

The California State University Executive Order 943 states: "Student Health Centers shall be established and maintained to facilitate the retention of students matriculated in state-supported programs of the university and to enhance the academic performance of students through accessible and high quality medical care, public health prevention programs, and educational programs and services."

POLICY:

Accountability:

Vice President for Student Affairs, AVPSA - Wellness and Athletics, Moorpark Family Medical Clinic, (MFMC), all medical providers are contracted through MFMC.

The Student Health Advisory Committee shall be advisory to the President or designee and SHS on the scope of service, delivery, funding, and other critical issues relating to student health services at CI.

Applicability:

This policy applies to enrolled CI students in state-supported programs (students paying the Category II Student Health Services fee).

Definition(s):

First aid - One-time treatment that typically does not require a physician, laboratory, X-ray, or pharmacy services.

"Regularly enrolled continuing student" - Defined as a student:

- A. Enrolled as a matriculated student in state-supported instruction during the current or preceding term;
- B. Paid all charges and fees due to the campus; and
- C. Registered, or is expected to register, for the succeeding term.



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Text:

Although basic health care is provided, treatment for major illnesses and injury (e.g., motor vehicle accidents), as well as certain conditions requiring a specialist or hospitalization, are beyond the scope of service. Students are referred to an outside provider for these illnesses or injuries and it is the student's responsibility to pay the costs associated with the referral. It is important for students to carry health insurance. Faculty and staff are not eligible for services at the Student Health Center. For emergencies, please see the Emergency Patient Care and Transportation Procedural Handbook. Services will be provided in accordance with the procedures listed below wherein a definition of services, range and extent of services, maintenance of confidentiality (as per HIPAA), maintenance of records, the application of service fees, and criteria for eligibility to receive services are addressed.

I. Required Basic Student Health Services

- A. The following basic health services shall be available at CSU Channel Islands (CI) Student Health Services subject to the limitations stated below. These basic services shall be available to all regularly enrolled continuing students who have paid the appropriate mandatory student health fee.
 1. Primary outpatient care consistent with the scope of service, and the skills and specialties of clinical staff;
 2. The provision of family planning services, consistent with current medical practice excluding surgical procedures;
 3. Public health prevention programs including immunizations for the prevention and control of communicable diseases including required immunizations and those immunizations required for participation in educational programs of the campus (e.g., nursing);
 4. Health education (e.g. nutrition, sexually transmitted infections, HIV, alcohol and substance abuse, eating disorders, preventive medicine);
 5. Evaluation and guidance for individual health problems;
 6. Clinical laboratory diagnostic services in support of basic services. Tests to be provided at no additional charge if performed at CI Student Health Services include the following: urinalysis and urine pregnancy tests;
 7. Medical liaison services with other community health agencies and services (e.g., county health departments, medical and nursing schools);
 8. Consultation with and referral to off-campus health care providers and hospitals; and



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9. Consultative services on campus health issues.

A common core of basic medical services for students attending CI shall be provided. The care of certain illnesses, injuries, and conditions may require hospitalization or referral to other community medical facilities for after hours, long-term, specialty, or other care requiring staff, facilities, and equipment which are either not available at SHS or beyond the scope of authorized services. The patient, not the University, is financially responsible to the provider for health services received off campus and for health services received on campus but beyond the scope of authorized services.

- B. **First Aid** – SHS shall provide first aid during normal operating hours to all persons while on the campus or at a campus activity, if a qualified health care provider is available and in attendance. First aid is defined as one-time treatment that typically does not require a physician, laboratory, X-ray, or pharmacy services.
- C. **Reciprocal Services** – Students eligible for basic services at other CSU campuses shall be eligible for basic services provided by CI at no additional charge.
- D. **Funding Basic Services**
 - 1. CI shall assess all students a mandatory student health services fee to provide basic services. Such fees shall not exceed substantially the cost of services provided. Additional fees for basic services may not be charged except for the cost of laboratory tests sent to reference laboratories and the actual acquisition cost of vaccines, medications, and devices/appliances. All proceeds of the mandatory student health fee and interest earned shall be used to support SHS operations.
 - 2. The campus President or designee may establish campus-based procedures for waiving mandatory student health services fees in exceptional circumstances.
 - 3. The establishment and changing of student health fees are subject to the California State University's student fee policy, described by separate executive order.
- E. **Continued Care** – The SHS director may authorize continued care to a patient who has become ineligible but has not completed prescribed treatment begun while an eligible student. Such care may continue to resolution of the current condition or until appropriate referral has been accomplished. In no case should care extend more than



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one academic term beyond the loss of eligibility. Continued care is subject to the payment of fees defined in Section III: "Provision of Student Health Services."

- F. **Denial of Care** – The SHS director may, in rare cases, deny care. SHS shall maintain a written policy that governs denial of care.

II. Augmented Services

Augmented services shall be those health services offered by the SHS that are elective or specialized in nature and not included in basic services. Only augmented services listed below or interim services deemed necessary to meet urgent campus health needs shall be authorized.

- A. **Authorizing Augmented Services** – The following augmented services may be authorized if the conditions stated below in Section II.B: "Conditions for Approval of Augmented Services" are met:

1. Specialty care appropriate to the health needs of students and when economically feasible;
2. Elective physical examinations (e.g., pre-employment, overseas travel, scuba diving certifications);
3. Elective immunizations (e.g., Hepatitis A, Meningococcal vaccine, or immunizations required for personal overseas travel);
4. Allergy testing and immunotherapy;
5. Physical therapy services;
6. Dental services;
7. Ophthalmology/Optometry services;
8. Athletic or sports medicine (e.g., required physical examinations);
9. Employee services beyond emergency first aid (See Policy Section X: "Employee Health Care Services");
10. Pharmacy services;
11. Clinical laboratory and X-ray services;
12. Other appropriate health services as consistent with CSU policy and approved in writing by the President or designee; and
13. Provision of augmented services to students from other CSU campuses who are eligible for reciprocal services.



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- B. **Conditions for Approval of Augmented Services** - The President or designee is delegated the authority to approve any augmented service listed above in Section II.A: subject to all of the following conditions:
1. The service provided is consistent with CI policy and in a manner that prevents diversion of resources or staff from the adequate provision of basic student health services;
 2. The SHS or contracted provider is equipped to provide the service;
 3. The medical qualifications and specializations of the staff are sufficient to provide the service;
 4. Justification of student need or demand for the service has been made;
 5. The method for providing the service is the most effective in terms of both treatment and cost; and
 6. Proposed services have been submitted for consideration to the student health advisory committee prior to review by the campus President or designee.
- C. **Funding Augmented Services** – SHS may provide augmented services without imposing additional student fees subject to the conditions stated above. If such services cannot be provided without additional funding support, CI may use the following methods for funding approved augmented services:
1. A fee for service charged for each use of an augmented service rendered to students.
 2. A fee charged to students at the beginning of the term that allows unlimited use of all augmented services provided by SHS at no additional charge.

Augmented health service fee charges shall be separate from mandatory student health services fees and shall be charged to students in amounts not to exceed the actual cost of providing the services and/or materials. All proceeds of augmented fees, both revenue and interest earned (if any), shall be used to support SHS operations. The establishment and changing of augmented health services fees are subject to the California State University's student fee policy that is described in separate Executive Order.



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D. Procedures for Deposit, Accounting, and Expenditure of Augmented Fees

1. Procedures for the collection of fees by the SHS shall be in compliance with policies established or approved by the CI accounting department.
2. Funds collected shall be deposited in a local trust account (Ed. Code, § 89721 (i)).

III. Provision of Student Health Services

- A. **Academic Year** – The SHS or contracted health care providers shall provide medical services Monday through Friday throughout the academic year, excluding campus closures and holidays, to serve all students matriculated in state-supported instruction.
- B. **Summer** – SHS may provide services during **summer periods** to regularly enrolled continuing students subject to resources and available funding.

Required immunizations may be provided to individuals admitted to the University who intend to enroll in classes in the following term.

- C. **Year-Round Operations (YRO)** – The term “summer period” used in this section means any one of the four quarters or one of the three semesters during the 12-month year provided that the student has been regularly enrolled at least two terms immediately prior to the term of nonattendance and there is an indication of intent to enroll during the following quarter. Students may count only one term per 12-month period as a “summer period.” At such time that CI becomes a campus that operates state-supported instruction in the summer; SHS shall continue to provide regularly enrolled summer students with basic services if health services and facility fees have been paid through summer enrollment.
- D. **Campus-Sponsored Programs** – SHS may serve participants in campus-sponsored programs (e.g., continuing education, “Summer Bridge,” on-campus youth programs). Medical services may be made available to such individuals by contract between the campus sponsored program and the SHCC. Services to regularly enrolled students shall not diminish.



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- E. **Continuing Education** – SHS may provide services to students enrolled in self-support programs by contracts for services between the continuing education program sponsors and the SHCC.
- F. **Distance Learning**- Students enrolled in a distance learning program must choose the campus from which to receive basic services and pay the corresponding mandatory student health fee.
- G. **Service Fees** - The following defines authorities to establish the fees for services, consistent with other executive orders:
1. Category III fees (fees paid to receive services) – The chancellor is delegated to establish category III fees for regularly enrolled continuing students, workshop, thesis, continuing education, “Summer Bridge,” and on-campus youth program participants during the summer, a fee to receive services may be charged on a fee per visit basis.
 2. Category I fees (fees paid to enroll in and attend the University) – The Board of Trustees establishes category I fees for students enrolled in continuing education programs and participants in workshops and institutes may be charged a mandatory fee that includes the average cost of staffing, supplies, services and the administrative and accounting costs necessary to provide basic student health services (such fee shall not be charged on a fee-per-academic-unit basis).
 3. Funds collected shall be deposited in a local trust account (Ed. Code, § 89721 (i)).

IV. Qualifications of Providers of Health Care at CI

CI health care providers are contracted through an outside vendor to provide health services for students. The contractor provides all health care providers, medical equipment, and supplies. CI provides office space, clinic space and administrative staff for the Student Health and Counseling Center.

- A. Only those who are qualified to provide health care shall be hired by contractor and shall be assigned duties consistent with their qualifications. The determination of qualifications will be guided by state law, National Practitioner Data Bank review,



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professional references, and accreditation agency guidelines. The SHS director or designee, and contractor are responsible for the credentialing and privileging of providers of health care at SHS. For all other campus entities providing health care, including athletic departments, academic programs, and auxiliary organizations, the President or designee is responsible for the credentialing and privileging of health care providers.

B. The **minimum qualifications** for health care providers include the following:

1. Possession of a valid and relevant California professional license. Unlicensed individuals providing health care (e.g., athletic trainers) must do so under the supervision of a physician or other appropriately licensed provider. Such arrangements for supervision must be approved by the SHS director or designee;
2. Possession of a valid Drug Enforcement Agent (DEA) certificate for those who prescribe controlled substances;
3. Current cardiopulmonary resuscitation (CPR) certification as appropriate to assigned duties; and
4. Current American Board of Medical Specialties (ABMS) or American Osteopathic Association (AOA) medical board certification appropriate for assigned duties for physicians hired after September 1, 1988. A physician can be given clinical privileges pending initial certification but must be board certified as soon possible, but not later than two years after the date of hire. If a physician loses certification thereafter, then the physician may be allowed to continue to provide health care for up to one year while recertification is obtained. If (s) he is not recertified within the one-year grace period then the physician's clinical privileges at SHS may be suspended immediately.

V. Educational Programs

SHS may participate in educational programs (e.g., residency programs, nursing programs) that involve the provision of health care. Participation in such programs requires the approval of the President or designee, a contract or a memorandum of understanding that has been approved by the CSU Office of General Counsel and oversight by the SHS director or designee.



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VI. Health Facility Safety and Cleanliness

The SHS and other health facilities have unique needs with regard to cleanliness, sanitation, and employee safety. It is imperative that the President or designee makes consistent and effective efforts to ensure the safe disposal of hazardous waste material and reduce the risk of the environmental spread of disease.

- A. To ensure the health and safety of employees, patients, and others, CI has a written plan that addresses the health and safety risks associated with health facility operation. The plan, consistent with federal and state guidelines, shall include at least the following items:
1. Provides appropriate consultation with custodial staff to address health facility sanitation and safety issues and provides for the assignment of identified and trained custodial personnel to ensure appropriate cleanliness of the health facility;
 2. Addresses the unique conditions that determine the frequency and adequacy of cleaning of specific health facility areas (e.g., laboratory, examining rooms, minor surgery rooms, waiting areas, halls, restrooms); and
 3. Provides orientation, continuing education, and training of custodians regarding the transmission and prevention of infectious diseases. Guidelines provided by federal and state agencies shall be followed.

VII. Medical Records

- A. Medical records shall be secured in compliance with state and federal laws.
- B. Only persons authorized by the health facility's director may gain access.
- C. Medical records, defined by California's Confidentiality of Medical Information Act (Civil Code § 56 et seq.), that are maintained in any other departments than SHS (e.g., nursing departments, athletic departments, speech pathology laboratories, disabled student services, environmental health and safety) shall follow the same guidelines and controls as medical records kept at SHS, including the following:
1. The medical record shall document any consent to treat, all exams, diagnoses, services, and follow up, indicating the date, name of the student, name of the



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provider(s), and a description of the service. The provider of the service shall sign the record;

2. When not in use, medical records shall be stored in either locked files or in a locked room;
3. Access to keys to medical files and/or record room shall be limited to those University employees authorized by the department to have such access;
4. In order to ensure that medical records are filed, stored, and utilized in a manner that provides maximum confidentiality, the appropriate CI department shall review biennially its record management procedures;
5. The campus should maintain electronic data backup in off-site locations; as per contract all medical records are maintained and property of MFMC
6. Confidentiality of all medical information shall be maintained in accordance with the California's Information Practices Act (Civil Code § 1798.1 et seq.), Confidentiality of Medical Information Act (Civil Code § 56 et seq.), and other state and federal laws.

VIII. External Reviews of the Student Health Services

- A. Because SHS at CI has contracted services through MFMC all licensure and reviews for medical providers are the responsibility of VCMC. The AVP of Wellness & Athletics or his/her designee and Human Resources conduct annual review of SHS administrative staff.

IX. Security of Health Facilities

In accordance with CI Operations Planning and Construction (OPC) policy on Access Management and Facility Security, the SHCC facility has an established method of monitoring all areas of campus that provide health services in order to ensure that patient confidentiality is maintained and that equipment and medical supplies are protected. In recognition of the unique security issues associated with health facility operations, the policy on Access Management and Facility Security address the following:

1. Keys and/or access cards to the facility are issued only to personnel approved by the health facility director and those service personnel as designated in the campus key control policy. The facility's director reviews the control lists of key holders and/or access cardholders annually;



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2. Access to the health facility during the hours the facility is closed are limited to personnel and other individuals authorized by the health facility director.

X. Medical Disaster Planning

- A. The President or designee shall be responsible for ensuring that CI emergency plans include provision for the training and assignment of SHS staff in disasters that may require emergency medical services.
- B. The SHS staff should review medical disaster plans of the campus emergency plan annually. The President or designee shall approve proposed revisions of such plans.

XI. Insurance and Liability Coverage

The President or designee shall be responsible for ensuring that the SHS and other on-campus medical providers (e.g., athletic departments, academic programs and auxiliary organizations) are adequately covered through risk management and insurance and liability coverage. CI should consult with the offices of Risk Management and General Counsel about appropriate coverage.

XII. Oversight Responsibilities

- A. To assist the CI President with oversight responsibilities, a CI Student Health Advisory committee shall be established. This advisory committee shall meet the requirements of the EO 943 and be responsible for the following activities:
 1. Develop a campus survey to identify needed services;
 2. Review and recommend satisfaction surveys to assess quality of services;
 3. Identify the provisions in the executive order that will be evaluated for compliance in the survey;
 4. Review annual campus reports completed during the year of the evaluation, to assess potential risks;
 5. Recommend corrective measures to minimize risks identified in the annual survey;
 6. Review, revise, and update the SHS policy to ensure compliance with changes in state and/or federal law; and



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7. Recommend policy changes to the CI President.

B. The President or designee shall report annually to the Chancellor's Office the following information:

1. Complete and submit the annual survey developed by the systemwide health services advisory committee;
2. Submit copies of the campus oversight policy established by the President for all University health services provided by all campus entities (e.g., student health centers, academic programs, and auxiliary organizations);
3. Submit a report that describes the CI health services advisory committee membership, recommendations, and outcome of recommendations.
4. Provide the name, title and contact information for the campus privacy officer, if the campus is a HIPAA covered entity.
5. Review and recommend satisfaction survey developed in collaboration with the AVP of Student Affairs/Dean of Students or his/her designee.

XIII. Mental Health Services

A. The provision of mental health services to CI students is governed by CSU Executive Order 1053. Mental health services is covered in a separate policy for CI.