

University of Oregon  
HEALTH CENTER

**Student Health Advisory Committee Meeting**

March 17, 2006

<b>Student Members:</b>	<b>Alternate</b>	<b>Interested Students</b>	<b>ExOfficio Members:</b>
* Chiem, Jennifer	Horn-Kelter, Petra	* Beseda, Addie	<b>E</b> Kerr, Shelly
* Kuzma, Urva	* Ronco, Noelle	Bentley, Dan	<b>E</b> DeHaven-Murdoch, Daralyn
<b>E</b> Scholl, Ben	Wilson, Kathryn	* Mann, Todd	* Leith, Ramah
* Soetan, Folake		Nethercott, Ashley	* Megerssa, Becky
* Stiffler, Lesley	<b>Faculty:</b>	Parker, Jenny	* Ryan, Tom
* Straight, Leslie	* Munroe, Dennis	Takahashi, Chika	* Staight, Paula
* Teeter, Kelly	* Meaux, Tenaya	Thrower, Ashley	* Stoop, Helen
* Wintermute, Ben	<b>E</b> Spradling, Karen	* Kehdi, Norma	
* Wu, Angela		Laws, Michael	

Guests: Debbie Alley, Annie Dochnahl

The meeting was called to order at 3:00 p.m.

1. **Approval of Minutes** – The minutes of the previous meeting were approved as distributed.
2. **Student Insurance** –Debbie Alley returned today to hear SHAC’s ideas for changes they would like to see in the student insurance plan for next year. For the domestic plan we are looking at an 8% increase which would be the least amount of increase over the last 8 years. Do we want to leave the plan as is for this year and next fall look at changes that should be made for the following year? We do not want to wait to long to lock this 8% increase in or it might increase.

Is there any way there can be two separate plans, to separate out the pools of people; one for bigger items and one for. You would keep diluting the pool and those with a lot of claims would have a much larger.

Talked about adding birth control and it looks pretty good that FPEP will be extended. Adding birth control would increase the plan by \$60 per year which was estimated based on the 2005-06 proposal. Adding a prescription maximum of \$1,000 would decrease the premium \$75.00 per year. We need to help students make students aware of the service where some drug companies assist patients with prescriptions, especially those who have some chronic condition requiring high cost prescriptions.

Helen Stoop suggested that we look more to 50% coverage rather than a cap on the maximum be if a person needs a prescription at least they will have the percentage paid over their time with the insurance plan. Ben Wintermute feels that we should do this as this would decrease the cost of the increase in the premium for the addition of birth control coverage. This increases the amount of out of pocket for students. Debbie stated that the average cost per student is \$200 a year for prescriptions with some getting the cheaper and a few with the very expensive. Consensus was not to change the percentage of prescription coverage.

Students feel that birth control prescriptions should be covered by the insurance in case FPEP did not get renewal for next year. However, it looks optimistic that FPEP will be extended after November 2006. It would be easy to provide the numbers of how many prescriptions for birth control pills are purchased through the Health Center. Cost kind of evens out for those who use birth control either have to pay the \$5 extra per month for insurance or for the birth control pills. What is insurance for, unexpected risk or fixed known costs?

Would SHAC like to go with the plan as it is now and then take more time to make decisions for the following year? Debbie asked that if we are serious about any changes she would like to use the next two weeks to get the true cost effects from the insurance company. Changes in the student insurance plan will affect approximately 550 people enrolled on the domestic plan.

Consensus is to leave the plan as is for this year. Debbie will firm up the information with the insurance company and get the information back to the SHAC members.

3. **Health Center Web Site** – Annie has through her teaching the opportunity to go into the journalism classes and use the students to get input on changes at the Health Center. She presented today, “Insights for the Health Center 2006,” what she learned through a survey she did with journalism students and what they found.

This time she had the journalism students look at how the “Well Now” could be improved, however, during this process she received insights that came out of the meeting to make communications regarding the Health Center stronger.

There were 5 groups doing the survey with a random sample of 100 students each. The purpose of the “Well Now” is to educate students. Here is what Annie learned from this survey regarding the “Well Now.”

Target: What do we know about our target? Students are academically and socially consumed.

Findings: Only 3-11% of people asked were aware of the publication. If students don’t read it why not?

General lack of awareness, perceived distrust, confusing title, and limited availability. Distrust was a red flag to Annie.

Recommendations:

- Do Weekly “tidbits” articles.
- Advertise in advance if it is only published once a month.
- Distribute more widely such as at events and in goody bags, kind of like the take it to the street stuff.
- Have an online version as part of our website.
- Change the name and use a better visual layout. Two of the groups mocked up what they thought it should look like. Their image is not quite like what we usually would think of. The overall suggestion was to move more staid “Well Now” into a more sexier publication. Annie commended them for having the courage to put together these drafts. One suggestion for a name change was to the “Student Body.”

Discussion also extended away from the “Well Now” publication as the students wanted to discuss more widely about Health Center communications. Other things that came out of this survey were:

- Even though students use the University Health Center and have had good experiences, they do not find it reliable for health information. Why? Bad experience of self or peer. If one person reports a bad experience a 100 times and that is perpetuated then it is easy to believe that it happened a 100 times. Another point they made is that if we wanted to show students that the Health Center is a reliable resource try to get them early in their life as a UO student because the earlier a relationship is established the stronger it is, it builds on itself.
- The “Well Now” can not fix the problems of the University Health Center. What do you mean? There are communication problems between the Health Center brochures, web page, “Well Now, and Health Center ads in the Emerald. These things do not line up. Communications need to be consistent. The Health Center needs some kind of “brand” tag line or one image concept that an organization embodies. We are a multiple entity that doesn’t have a single presiding message.
- Continuity is needed between all communications.
  - Brochures
  - Ads
  - Patient Information sheets
  - WebsiteContinuity has been tried to some degree but that was at a time when the Publications Department quashed individual departmental logos. We have tried to be consistent in different ways, with a couple different attempts.
- Web sites are where students go for information. The average age of a person who read a newspaper is 50 years old.
  - Needs a search feature not just for our web site, but links to other web sites.
  - Add a “Diagnose Yourself” page. Something where a student can say, here are my symptoms, do I have what I think I have and should I come in to be seen.
  - Add an advice section where students can get questions answered.
  - Have a health blog where different topics arise and students can weigh in on their thoughts.

All communications should interface with the web site. The students constantly brought up Web MD. Tag line on there is, “better information, better health.” To Annie what that implies is that the information in and

of itself is of health even if students do not see the information as being the most glamorous or the most high-paced. The presentation comes before the credibility of the Health Center.

Enter Allen Hall Advertising – This is a student-run advertising agency. <http://jcomm.uoregon.edu/~aha/> They have a meth campaign on this web site that is being looked at currently by people in the white house. You can use this link to look at this campaign to get an impression on the professionalism of these people.

Annie met with this group about a communications make-over with deliverables such as a brand or logo and templates for Health Center brochures, Oregon Daily Emerald ads, and patient information sheets with a timeline to coincide with the opening of the new Health Center facility. When Annie inquired about cost they stated that they would need budget information before they could give her a figure.

Is this a feasible project for them to take on for the Health Center with a timeline to run with the grand opening of the new facility within the framework if they could do it? Annie spoke to the Health Center Executive staff on Wednesday and the next step is a meeting with Allen Hall Advertising representatives, Tom Ryan, and Annie to get cost estimates from the group.

Tenaya Meaux suggested Tom and Annie go to this meeting with a ready set of guidelines. Time equals money, the shorter period of time it takes to come up with solution the less the cost. Having an idea of the amount you want to spend on this project and the details of what we want ready for the discussion will help. How do you want it to feel, look, what words that should be incorporated.

If we agree they would draft of the initial client contract. Ideally would use the imagery that comes out of the 1% for Art portion of the Health Center construction project

If this work happens over the summer Ben Wintermute would like to be involved. Thanks Ben.

Questions/Comments/ Ideas for Early Support and Guidance.

- Continuity is the most important for everything to flow together towards the Health Center.
- Branding is something that gives immediate association to the Health Center. It shortens the time to a minimum between when you look at something and realize what it is and should combine different elements of design, color, same type faces. It would be the layout, logo, as much as possible without it looking “cookie cutter” things.

Ramah stated that peer health will have a trial run of wellness articles in the Emerald every Wednesday starting in Fall term with a different topic article written by one of the peers. It was suggested that the wellness Wednesday articles could be put into the web site as well.

Allen Hall Advertising said that part of the scope of the project would not include the web site, but we could make the parts mentioned above available for whoever would be doing the changes there. The timeframe is too short for Allen Hall to work on the web site.

If you have any ideas, please go see Annie Dochnahl in the Health Education trailer or send your comments to dochnahl@uoregon.edu

4. **SHAC Recruitment** – Some excellent group pictures were taken today when there was a break in the weather outside.
5. **Updates:**
  - a. **In-service Date & Further Information Received** – The date for the in-service is set for Tuesday, May 16 from 8:00 to 9:00 a.m. Folake Soetan sent another email to the Kyna at the Nontraditional Student Union but has not heard anything back. Leslie Straight will produce a flyer to take to the nontraditional student government to perhaps get them more interested. Work needs to be started on the format for the meeting. There are six weeks from the start of spring term to get this in-service set up.
  - b. **Health Information Survey** – Please bring the surveys that have been filled out by your peers and classmates back so we can get the data compiled.

6. **Adjournment** – The meeting was adjourned at 4:00 p.m.

Kim Barker, Recorder

**\*\*Next Meeting\*\***  
**April 7**  
**Health Center Medical Library**  
**(Alias the Ramey Room, Carson Hall)**