UNIVERSITY HEALTH SERVICE

Impact Report

2020
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The **mission** of the University Health Service is to promote and protect the health and well-being of students and the broader campus community in order to enable individuals to better achieve their educational and personal goals.

Our **vision** is a healthy and thriving campus community where students flourish.

We make an **impact** through our clinical services, programs, and partnerships.

UHS is a leader in public health initiatives and uses the U-M **multi-dimensional model of well-being** as a foundation for health and wellness initiatives.
The U-M University Health Service (UHS) supports the health and well-being of the campus community through a public health-informed approach that emphasizes prevention, education, and treatment. We are inspired to help students realize their potential, cope with the stresses of life, work productively, and connect meaningfully with others.

In 2020 there were many new obstacles to health and wellness. From the pandemic and mental health concerns, to structural racism and political turmoil, our campus was tested like no time in recent history.

Much like the 1918-1919 influenza pandemic, COVID-19 made an immediate impact on campus. The first U.S. case of the SARS-CoV-2 virus was identified on January 20, 2020. Two days later at UHS we saw our first patient with symptoms and travel history consistent with the virus. Within weeks, more cases were diagnosed and classes shifted to remote learning. As an essential service, UHS remained open, providing in-person care, telehealth and virtual wellness services.

Over the spring and summer we continued to innovate and refine our services. In July, we partnered with Athletics and Michigan Medicine to implement a COVID-19 testing program as a bridge to emerging NCAA guidelines. For patient safety and convenience we stood up an outdoor COVID testing tent and opened a satellite testing facility at the Power Center. Wolverine Wellness helped develop the Wolverine “Culture of Care” campaign and launched an online COVID-19 course for students.

With fall approaching, we also focused on our usual work of orienting new students and parents to the campus model of well-being and health services. We ramped up COVID-related education and communication to students, parents, patients, and campus partners.

It was all hands on deck when fall arrived. Partnering with the School of Public Health and Michigan Medicine, we helped expand campus testing options and contributed to the development of the campus COVID-19 dashboard. We worked closely with campus partners to connect students to case investigation, contact tracing, mental health support, and quarantine housing. And for the first time our impact extended beyond the Ann Arbor campus: we helped bring COVID testing to U-M Flint and U-M Dearborn, and piloted a telehealth program for U-M Flint students.

A thriving campus is one where well-being is core to the Michigan experience. In the pages that follow we hope to share our impact in 2020 across the spectrum of health and well-being. We are grateful for the partnerships that make this work possible, and join you in envisioning the collective impact we can make in 2021 and the years to come.

Sincerely,
UHS Leadership

Robert D. Ernst, M.D.
Associate Vice President of Student Life for Health and Wellness
UHS Executive Director

Mary Jo Desprez, M.A.
Wolverine Wellness Director

Dawn Rudnik, MT(ASCP)SM
Laboratory Manager
Diagnostic Services Manager

Lindsey Mortenson, M.D.
UHS Acting Executive Director
Medical Director
Psychiatry Chief

Frances A. Palms, R.N., M.B.A.
Administrative Director

Aimee Maslach, M.D.
Primary Care Chief
Quality Improvement Chair
Who We Are

UHS is a comprehensive college health clinic and wellness resource that has been continuously accredited by the Accreditation Association for Ambulatory Health Care (AAAHC) since 2003. Our work includes interventions across the spectrum of prevention, diagnosis, treatment and harm reduction.

Intersection of Prevention and Harm Reduction

More than 180 regular and temporary staff work at UHS. Regular staff include highly engaged clinicians, scholars, educators, and college health experts with partnerships across the campus, county, state, and nationally.

UHS has been located at 207 Fletcher St. since 1939. For many years UHS functioned as an infirmary, with as many as 65 inpatient beds at one point before undergoing various renovations and evolving into a contemporary outpatient medical practice and health services center.

The UHS staff who support our mission and vision are a diverse and talented group representing an array of roles, disciplines, and specialties, including:

- 22 Board Certified Physicians
- 17 Medical Assistants
- 14 Diagnostic Services (Laboratory, Radiology)
- 13 Call Center
- 12 Nurses (RNs, LPNs)
- 12 Wolverine Wellness
- 11 Advanced Practice Providers (NPs, PAs)
- 11 Health Information Management
- 8 Patient Account Representatives
- 7 Clericals
- 6 Eye Care
- 6 Billing Team
- 5 Physical Therapy
- 4 Administrative Assistants
- 4 Managed Care/Student Insurance Office
- 3 Pharmacy
- 3 Social Workers/Care Managers
- 2 Building Operations
- 2 IT Business Solutions
- 2 Health Data Analysts
- 1 Registered Dietician
- 23 Student-staff
Clinical Services
Clinical Services

UHS provides integrated, evidence-based clinical care that is comprehensive, accessible, and public-health informed. The social-ecological perspective informs our work: no single patient is the same and health concerns occur within a broader context that requires a nuanced approach to care. Patients present with a range of factors—where they grew up, what supports are available, their social identities—that can impact diagnosis, treatment planning and joint decision making.

Our patient population includes students (82%), faculty and staff (9%), and alumni and others with university affiliations (9%). In 2020, we completed clinical and diagnostic visits for 60,641 patients in these 14 clinics.

Completed appointments in 2020:

- Primary Care: 31,236
- Dermatology: 700
- Gynecology & Sexual Health: 5,883
- Sports Medicine: 640
- Psychiatry: 4,665
- Nutrition: 619
- Eye Care: 3,152
- Social Work/Care Management: 372*
- Allergy: 2,830
- Sleep Medicine: 170
- Physical Therapy: 2,781
- Eating & Body Image Concerns: 221
- Optical Shop: 1,360
- Travel: 24 (reduced due to COVID-19)

* For Social Work/Care Management, most care is virtual (e.g., patient portal, phone calls) and full scope of work is not captured through visit counts.
UHS also made an impact in 2020 through the following services:

• **Nurses assisted with procedures, tested for COVID-19, and administered our comprehensive vaccination program. In 2020, nurses addressed 81,311 portal messages and 2,690 after-hours calls.**

• **Medical Assistants provided support for day-to-day clinic operations such as taking vital signs, patient education, COVID-19 testing, medication prior authorizations, screening for mental health and alcohol use, chaperoning sensitive exams, assisting with procedures, and coordinating care.**

• **Interdisciplinary complex care teams provided services for eating disorders, transgender care, autism spectrum disorders, severe mental health concerns, musculoskeletal issues for runners, sexual assault, and suicide prevention.**

• **Flu vaccination** was a high priority in 2020 due to concern about a potential “twindemic” of COVID-19 and influenza. We partnered with the School of Nursing to administer >4,900 flu vaccines at UHS, and with Michigan Visiting Care to administer 1,376 flu vaccines in the Residence Halls. Nearly 5,000 additional flu vaccines were administered by Michigan Visiting Care through campus flu clinics in partnership with UHS and MHealthy. As a result, we exceeded vaccination goals set by both Healthy People 2030 and the American College Health Association Healthy Campus 2020. See also “Quality Improvement Study on Increasing Flu Vaccination Rates” (page 22).

• **UHS partnered with the Athletic Department to provide on- and off-the field clinical care for 900 Division I student-athletes on 29 teams.**

### Population Health

Population health is defined as the health outcomes of a group of individuals, including the distribution of outcomes within the group. Through benchmarking and data analytics, UHS strives to understand the patients we serve, and to generate population-based solutions. For more than a decade, U-M has participated in the annual National College Health Assessment (NCHA). The 2020 survey of students demonstrated that acute illnesses and injuries, mental health, and sexual and reproductive health are the most common barriers to academic success.

#### Impediments to Academic Success

**NCHA Spring 2020 Data**

<table>
<thead>
<tr>
<th>Impediment</th>
<th>National Results</th>
<th>U-M Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stress</td>
<td>26%</td>
<td>23%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>25%</td>
<td>23%</td>
</tr>
<tr>
<td>Depression</td>
<td>24%</td>
<td>30%</td>
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<tr>
<td>Sleep Difficulties</td>
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<td>Short-term Illness</td>
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<td>22%</td>
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<td>Headache/Migraine</td>
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<td>10%</td>
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<tr>
<td>Prolonged Period</td>
<td>18%</td>
<td>10%</td>
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<td>Minor Injury or Concussion</td>
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<td>5%</td>
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<tr>
<td>Eating Disorder</td>
<td>5%</td>
<td>10%</td>
</tr>
<tr>
<td>Minor Injury or Concussion</td>
<td>5%</td>
<td>5%</td>
</tr>
</tbody>
</table>

- National Results
- U-M Students
Other notable NCHA findings for U-M students include:

- 50% visited a medical provider in the past 12 months
- 17% received mental health services in the past 12 months
- For those with any chronic health condition, 32% reported a negative impact on academics

For all of these reasons, UHS is a medical “home away from home” for students with acute or chronic health conditions, and provides continuity of care and referrals to specialists as needed. We align our efforts and configure services around the core concerns of our patients.

**Improving access to care**

In 2020 we improved access to clinical services by rapidly increasing telehealth services. This was significant change in service delivery and was immediately embraced by both patients and providers.

In the early stages of the pandemic the majority of clinical visits were delivered by video or phone. By year’s end, UHS had completed >10,000 telehealth visits and telehealth accounted for 21% of all completed clinical visits in 2020.

As a result of the successful acceleration of telehealth services in the first half of the year, in Fall 2020 UHS piloted a telehealth program at UM-Flint, providing care to students living in Residence Halls.
The UHS Laboratory met the demands and challenges of 2020, whenever and wherever they emerged.

**Laboratory**

The UHS Laboratory is certified as a high complexity testing facility under the Clinical Laboratory Improvement Act (CLIA) and performed 23,617 non-COVID tests in 2020. The Laboratory performs in-house testing in the areas of bacteriology, virology, hematology, immunology, parasitology, and urinalysis.

Staff performed 21,000+ COVID-19 tests in 2020. Testing occurred at UHS and at pop-up and satellite testing sites. Michigan Medicine MLabs performs additional testing for UHS, and Michigan Medicine Pathology supervises some aspects of the UHS Laboratory. In partnership with Michigan Medicine, lab staff also brought new diagnostic equipment in-house and performed validation studies.

**Radiology**

UHS Radiology provides x-ray and ultrasound imaging. Studies are read and interpreted by UHS clinicians and Michigan Medicine radiologists. In 2020, 3,222 imaging studies were performed.

In response to COVID-19, Radiology installed new equipment, provided rapid ultrasounds for patients in respiratory isolation, and introduced new cleaning protocols to ensure patient safety and infection prevention.

**Pharmacy**

The UHS Pharmacy dispenses prescriptions, sells over-the-counter medications, and provides consultation and education regarding safe and effective use of medications. In 2020, staff filled 18,274 prescriptions.

The pharmacy is a licensed training site for the U-M College of Pharmacy and since 2017 has participated in a “medication take-back” program for the campus and community, resulting in the collection of more than 1,000 pounds of unwanted medications.

In 2020 the pharmacy offered curbside pick-up to sick, elderly or immunocompromised patients. This was a significant satisfier, especially for patients with concerns about COVID-19.
UHS COVID-19 Response Timeline 2020

January 20
First case of SARS-CoV2 identified in the U.S.

January 22
First patient with suspected infection evaluated at UHS

February 12
First lab-confirmed case at UHS

March 10
UHS launches telehealth in 18 clinics

March 12
U-M classes go remote

March 16
First “stay at home” order issued by the state of MI

August 18
Wolverine Wellness coordinates new online COVID-19 course for students

August 21
Launch of new online symptom & exposure questionnaire

August 20
Wolverine Wellness helps develop Wolverine “Culture of Care”

August 24
Satellite testing site opened at Power Center

August 24
Wolverine Wellness and Student Life partners coordinate distribution of Safety Kits to students

September 8
UHS Lab deploys new COVID-19 PCR test (Diasorin)

September 9
Campus COVID-19 surveillance testing program (CSTP) launches

September 16
First pop-up test site at South Quad

September 21
UHS and Division of Public Safety and Security deliver first test kits to students in quarantine housing

September 24
First delivery of test kits to an off-campus group

October 8
Online scheduling begins for COVID testing

October 13
Wolverine Wellness begins Wellness Coaching for COVID community and personal safety

October 17
Pilot begins for Michigan Patient Outreach Texting Application

November 17
UHS Lab deploys new COVID-19 PCR test (Cepheid)

December 14
First COVID-19 vaccine administered at Michigan Medicine

December 17
Pilot begins for Michigan Patient Outreach Texting Application

December 31
COVID-19 vaccination clinic opens at the football stadium

June 11
Outdoor testing at UHS for Athletics students and staff

July 15
New face covering policy for all U-M campuses & U-M president appoints COVID-19 Campus Health Response Committee (CHRC)

August 18
Wolverine Wellness coordinates new online COVID-19 course for students

August 20
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December 31
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Early Days of the Pandemic

Even before the first COVID-19 case was identified in the U.S., we began preparing a layered approach to COVID-19 risk mitigation: education, prevention, screening, testing, surveillance, and symptom monitoring.

In late January, we saw our first patient with symptoms and travel history consistent with the virus. On March 10, 2020 we received laboratory confirmation of our first official COVID-19 case in a U-M student who had recently traveled abroad. Two days later, the university canceled classes for two days and then transitioned from in-person classes to online instruction for the remainder of the Winter 2020 semester.

Early in the pandemic, COVID-19 testing was still under development at many labs and testing at the Michigan Department of Health and Human Services (MDHHS) lab was restricted to patients who met strict criteria, e.g., specific symptoms and travel to specific countries. In addition, turnaround time for test results was lengthy. More testing options soon became available through commercial laboratories and Michigan Medicine.

As one of the earliest campus testing sites with a relatively high test positivity, UHS played a critical role in the development of the campus COVID-19 dashboard and containment metrics, which ultimately informed many strategic decisions and pivots throughout the year.

“The UHS team reported on COVID-19 spread on campus since the very first days of the pandemic. Lab and data staff partnered with School of Public Health and ITS to provide daily updates to the broader community. UHS tracked all of the data needed to follow up on clusters on campus. With their important contributions, the campus dashboard has become a reliable and detailed source for COVID-19 information.”

- Emily Martin, PhD, Associate Professor, School of Public Health

COVID-19 Continuum of Care

As the pandemic evolved we continuously adapted to respond to the needs of campus and provide comprehensive clinical and public health interventions, including:

Prevention → Clinical Care → Support

Our response involved close collaboration and frequent just-in-time problem solving.

Andie Ransom, BSN, MSN, FNP-BC
Nurse Practitioner, Primary Care
COVID-19 Co-Lead
U-M alum (BSN ’09, MSN ’13)

“I saw the first potential COVID-19 patient at UHS on Jan 22. Looking back to those first few patients from where we are now is remarkable. I am really proud of our creativity and the multidisciplinary team we created to care for our patients.”

Connie Olson, RN
Registered Nurse
U.S. Veteran

“Working as a COVID-19 team nurse has placed me at the cutting edge of Michigan health care. Similar to my work in AIDS research, I’ve been able to serve on the frontlines of this pandemic. I enjoy being part of a constantly evolving system.”
“The COVID-19 pandemic has highlighted the importance of cross-campus collaboration and relationships. UHS has been an invaluable partner in assisting students with their unique needs and concerns, and ensuring coordinated support and response for student health, well-being, and success. The Dean of Students Office has appreciated the strong partnership with UHS this past year, and looks forward to continued collaboration in the future.”

- Sarah Daniels, Associate Dean of Students

To ensure a coordinated public health response reflecting the most up-to-date COVID-19 guidelines, partnerships across the institution and community were critical.

Key partnerships during COVID-19 in 2020 include:

- Central Procurement
- Chief Health Officer
- Dean of Students Office
- Division of Public Safety & Security
- Environment, Health & Safety
- Fraternity & Sorority Life
- Information and Technology Services
- Inter-Cooperative Council
- Michigan Housing
- Michigan Medicine, including Supply Chain Operations
- Occupational Health Services
- President’s Office
- Provost’s Office
- Public Affairs
- School of Public Health
- Student Life Budget and Finance
- Student Life Human Resources

Prevention

Through a layered and collaborative approach, UHS was engaged in a range of activities designed to prevent COVID-19 and mitigate risk on campus, including:

- Monitoring and communicating evolving public health guidelines
- Patient education
- Consultation with campus colleagues
- COVID-19 vaccination
- Data analytics
- Close coordination with campus and county partners for:
  - Quarantine and isolation recommendations
  - Testing
  - Case investigation and contact tracing

Heather B. Vance, M.D.
Staff Physician-Primary Care COVID Co-Lead
U-M alum (BSN ’06, Residency ’13)

“Learning about this newly discovered virus, how to prevent it, and how to better treat the disease it causes has brought brilliant minds together across the world towards a common goal. On a smaller scale, we have been working in conjunction with the local health department, Michigan Medicine laboratories, and other campus entities to create more testing opportunities, housing accommodations, education, and follow-up care.”

Melissa Roberts, AD
Certified Medical Assistant & Preceptor

“Keeping health care safe and accessible during the pandemic has been challenging and very rewarding. I am proud to be a part of UHS efforts to reduce the impact of COVID-19 on campus.”
COVID-19 Vaccination

Vaccines are one of the most effective interventions for the prevention of infectious illnesses. The speed of DNA sequencing for the SARS-CoV-2 virus and progression to clinical trials was an unprecedented accomplishment in 2020. Phase 1 clinical trials started in the U.S. only two months after the SARS-CoV-2 virus was sequenced, and Phase 2/3 trials began in July 2020. The year 2020 came to a promising end with the U.S. Federal Drug Administration (FDA) providing Emergency Use Authorization (EUA) for the following COVID-19 vaccines in individuals 18 years of age and older:

• December 11 – Pfizer-BioNTech
• December 18 – Moderna

On December 14, Michigan Medicine administered its first COVID-19 vaccine, and on December 31 a COVID-19 vaccination clinic opened at the U-M football stadium. The opening of the clinic was a tremendous effort by the university, with contributions by UHS staff.

Clinical Care

Our goal is to be an accessible and comprehensive resource for students. This is especially important for students who are living away from home and navigating health care on their own the first time.

In 2020, UHS made COVID-19 testing convenient and accessible through:

• Testing 7 days/week
• Online appointment scheduling for testing
• Test kits delivered to students in on-campus and off-campus quarantine
• On-demand testing for large groups with concerns about potential outbreaks
• Multiple testing sites, including:
  - UHS Primary Care Clinic
  - Power Center
  - Residence halls
  - U-M Quarantine & Isolation Housing
  - Co-ops
  - Fraternity and sorority houses

We contact all COVID-positive patients via phone and the patient portal. As an additional source of support and convenience for patients who prefer texting, in late 2020 we implemented text messaging support and symptom monitoring through the Michigan Patient Outreach Texting Application (MPOTA).

Support

The pandemic impacted all aspects of health and well-being. This was true whether or not a student was ever diagnosed with COVID-19. The impact of the pandemic was widespread, and was both physical and emotional. In 2020, we found new ways to connect with students and provide comprehensive support, linking students to additional resources for housing, mental health, and basic needs.

When a student receives care or testing at UHS, mental health needs are foremost on our minds. Throughout the pandemic, many students reported changes in eating and sleeping, fear of social isolation, grief over canceled plans and a changing college experience, and fear of relocating from their current living space. To address these concerns, UHS Social Workers offered one-on-one video and phone visits to discuss concerns related to COVID-19, answer questions, facilitate a support group for students in quarantine or isolation, suggest coping strategies and use collaborative problem solving to connect students to other resources on and off campus.
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Spotlight on Mental Health

Mental health concerns are a common reason for seeking care at UHS and continue to be a leading cause of distress and disruption in the lives of college students. The number of visits to UHS providers for mental health concerns have increased substantially in recent years. The reasons for this are multifactorial and reflect a national trend of more students arriving to college with pre-existing conditions, as well as decreased stigma and increased help-seeking.

Our approach to mental health care is holistic, comprehensive and collaborative. U-M students have a range of treatment and support options on-campus and in the community, and there is no wrong door for seeking help.

At UHS, students have access to an array of clinical and non-clinical mental health services:

- Primary Care Clinic
- Psychiatry Clinic
- Sleep Medicine Clinic
- Social Work/Care Management
- Nutrition Clinic
- Eating & Body Image Concerns Clinic
- Wellness Coaching
- Collegiate Recovery Program

“Conversations about mental health are an opportunity to support wellness in a broader sense, be that connection to on-campus resources, building a primary care relationship, or referral to specialty colleagues. I am grateful to work with an amazing multidisciplinary team with a singular mission—the health and well-being of our campus.”
In recent years students have accessed the UHS Psychiatry Clinic in growing numbers, and 2020 was no exception. This mirrors national trends in college-aged individuals and within higher education. In 2020, 1,169 students used the Psychiatry Clinic, representing 2.4% of the U-M student population. Anxiety and depression are the leading concerns for students using the clinic, and students also sought treatment for bipolar disorder, PTSD, substance use disorders, autism spectrum disorder, ADHD, eating disorders and other concerns.

A 2020 national survey by the American College Health Association and U-M Healthy Minds Network indicated that students were concerned COVID-19 might negatively impact access to college mental health services. In 2020, a total of 4,665 Psychiatry appointments were completed, which actually exceeded 2019 completed Psychiatry appointments, suggesting that our rapid shift to telehealth services facilitated access for many students.

The UHS Psychiatry team includes 5 psychiatrists and 2 advanced practice professional psychiatric specialists who provide compassionate, evidence-based care across the mental health continuum for both acute and chronic concerns.
Clinical staff meet regularly to consult about complex cases and explore the intersection of social identity, environment and mental health.

For students requiring multidisciplinary care, we coordinate with a student’s other health care providers and can facilitate referrals when needed to intensive outpatient programs, psychiatric emergency services, hospital and partial hospitalization programs.

To gain a better understanding of a patient’s history and their trajectory of care, and to better personalize care, the Psychiatry Clinic surveys patients using the following validated questionnaires:

- Adverse Childhood Experiences (ACE) questionnaire
- Alcohol Use Disorders Identification Test (AUDIT)
- Alcohol, Smoking and Substance Involvement Screening Test (ASSIST)
- Generalized Anxiety Disorder-7 (GAD-7) questionnaire
- Insomnia Severity Index (ISI)
- Patient Health Questionnaire (PHQ-9)
- Work and Social Adjustment Scale (WSAS)

In addition to clinical care, UHS staff were highly engaged in 2020 around student mental health, including:

- Serving on the U-M Rackham Graduate Student Mental Health Taskforce and the Student Mental Health Taskforce
- Providing leadership in the National College Health Association
- Contributing to college mental health literature and benchmarking

“The COVID-19 pandemic created numerous mental health challenges for students, who had unique disruptions to their routines, activities, and overall development. At UHS this was met with increased support and monitoring and collaborative care, particularly for higher risk cases requiring emergency services and complex care.”

- Victor Hong, M.D., Medical Director-U-M Psychiatric Emergency Services, Division I Sports Psychiatrist, Assistant Professor of Psychiatry

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“The U-M Mental Health Task Force engages stakeholders across campus. Our goals are to identify student mental health challenges, clarify existing resources, explore the culture of well-being on campus, and address any gaps. At UHS, I really appreciate that all students can access care. I also have the privilege of caring for students with diverse demographic and socioeconomic backgrounds.”

Sarah Jukaku, M.D., M.S.
Staff Physician-Psychiatrist
U-M alum (BA ’10)

“Mental health treatment requires a comprehensive approach. At UHS, we are fortunate to have staff who attend to all aspects of well-being, including primary doctors, psychiatrists, social workers, eating disorders specialists, sleep medicine, nutrition and wellness coaching.”

Jasmine Parvaz, M.D., PhD
Staff Physician-Primary Care

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Spotlight on Quality & Safety
Spotlight on Quality

UHS is committed to continuous quality improvement in order to provide safe, effective, and accessible care. Through our robust quality improvement program, we aim to improve outcomes and the patient experience via:

- Staff engagement
- Quality Assurance
- Quality Improvement Studies
- Process improvements
- Evidence-based practice
- Peer review
- Benchmarking
- Data analytics

**Patient satisfaction survey:** UHS sends an online patient satisfaction survey to all patients after each visit. We are proud of these high marks in 2020:

- 96% of patients were satisfied or very satisfied with UHS’ respect for their identity
- 95% of patients were satisfied or very satisfied with their comfort with their clinician
- 95% of patients were satisfied or very satisfied with their clinician’s demonstration of empathy

**Quality Improvement Study: Increasing Flu Vaccination Rates**

The flu vaccine prevents millions of people from getting ill and needing medical visits or hospitalization. Unfortunately, national flu vaccination rates are well below established goals.

Over the past 3 years, UHS implemented a cross-unit, multi-pronged approach to flu vaccination including:

- Patients can conveniently schedule flu vaccination appointments online, with plenty of appointment availability
- Staff offer the vaccine throughout the process of any clinic visit, from scheduling through check-out
- Staff receive weekly tips on ways to address vaccine hesitancy

As a result of these interventions, our vaccination rates have steadily increased. In 2020 we exceeded the highest national benchmark and increased our rate of vaccination by 13% compared to 2019. See page 8 for more on flu vaccination.
The Healthy Campus Goal comes from the American College Health Association and the Healthy People Goal comes from the US Office of Disease Prevention and Health Promotion.

*Vaccination data reflects up until February 19, 2021
Safety is a cornerstone of our mission to promote and protect the health and well-being of students and the broader campus community. Our goal at UHS is to provide a safe environment for patients to receive medical care.

Our multi-faceted approach to safety includes:

- Building and environmental modifications
- Policies and workflows to protect patients
- Multiple avenues for patient feedback
- Multiple internal committees focused on safety
- Benchmarking with college health peers and Michigan Medicine
- Staff training (e.g., high reliability and chaperone training)
- Patient education

UHS is a national leader in best practices for sensitive medical exams. Dr. Susan Ernst chaired a task force on this topic for the American College Health Association and co-authored a white paper based on policy, guidelines and competencies written and implemented at U-M UHS.

**ACHA Guidelines**

**Best Practices for Sensitive Exams**

The American College Health Association (ACHA) recommends every institution have a policy mandating sensitive medical exams in accordance with the performance of these exams. It is ACHA’s recommendation that, as part of institutional policy, a chaperone be provided for every sensitive medical examination and procedure.

The purpose of this guideline is to provide recommendations for a consistent and safe environment for care on college campuses. The recommendations on policy, development, and purpose for the patient-physician relationship, and education, primarily those performed by faculty and staff, provide a culture that protects the dignity and health of the patient.

**Introduction**

ACHA is committed to promoting best practices that provide optimal care for all students. As part of this continued effort, the guidelines that follow will intentionally outline practice, procedure, and policies for sensitive exams. ACHA recognizes institutions of higher education to our only adopt the following guidelines, but to also continue the entire spectrum of sensitive medical exams in our clinics and how we back support with the patients we serve.

Best practices indicate that we should approach our work through a trauma-informed lens. Trauma-informed approaches emphasize physical, psychological, and emotional safety for both patients and providers. This focuses on safety, control, and empowerment for diverse patient populations.

In addition to providing trauma-informed care, ACHA recommends being sensitive to the position of the provider and provider’s comfort levels.

To achieve inclusivity, we recommend intentional design and regular review of campus health center intake and medical history forms, cultural sensitivity by training for providers and other clinic staff, and patient educational materials and signs that promote physical, psychological, and emotional safety.

Despite recommendations regarding use of a chaperone for sensitive examinations from the American Medical Association (AMA), the American College of Obstetricians and Gynecologists (ACOG), the American Academy of Pediatrics (AAP), the American College Health Association (ACHA), and the American Medical Directors Association (AMDA), many organizations do not have a standard. There is a lack of policy, consistency in policy, and implementation of policy to date due to a lack of evidence regarding impact on patient experience or care outcomes. ACHA recommends that a chaperone be mandatory for all undergraduate physical, mental, and female exams, and that AMACHA has since 2011 mandated a chaperone for all sensitive exams during the medical years. The AAP and ACOG recommend on patient’s autonomy offering a chaperone for all sensitive exams, whereas the British CMA with the JAMA working to adapt to and standardize a policy for chaperoning exams to the patient’s care, not limited to sensitive exams.

To date, most college health organizations with a chaperone policy have adapted out of policy, and others have policies specifying that a chaperone is mandatory for exams involving providers when the patient is under 18 years of age. Many institutions have sets of standards for sensitive examinations that do not permit patients to opt out if there is a clinical emergency and a chaperone is not available.

Many of the research on chaperone policy centers on provider empathetic, dehumanization, and taxation of patients.
Administrative Services
Administrative Services

Administrative services are the backbone of UHS, providing support for our clinical and public health mission. In 2020 the following teams implemented many new workflows to support health and well-being in the building, on campus, for students and other UHS patients:

- Administrative Assistants
- Budget and Finance
- Building Operations
- Call Center
- Clerical Staff
- Health Information Management
- Human Resources
- Information Technology/Business Solutions
- Managed Care/Student Insurance Office
- Patient Account Representatives
- Patient Billing Office

Even with the shift to remote learning on campus, our staff remained in close contact with students and other UHS patients, completing:

73,027 incoming calls to the UHS Call Center

7,782 questions about insurance & outside appointments

A tent at the UHS entrance in Fall 2020 facilitated distribution of COVID-19 test kits, symptom screening, and social distancing.

Kathy Burcroff
Call Center Supervisor

“I love helping students navigate health care. Many are on their own for the first time and it is rewarding to provide education about how and when to schedule an appointment, explain what insurance coverage is for, and point them towards resources.”
Highlights

- **Administrative Assistants** were pinch hitters who took on new tasks that emerged due to COVID-19, including data collection, reporting and test kit distribution.

- **Budget and Finance** provided ongoing stewardship of budget amidst a shifting financial landscape and increased operational costs due to COVID-19.

- **Building Operations** implemented many changes for the safety of patients and staff, including: increased signage, de-densification, and monitoring of personal protective equipment inventory.

- **Call Center** addressed high call volumes, supported self-scheduling of COVID-19 tests, and improved the process for remote staff to handle urgent concerns by phone.

- **Health Information Management** enhanced registration practices for virtual visits and COVID-19 workflows. To support COVID-19 testing across campus and delivery of test results through the patient portal, the team registered 69,146 patients in MiChart in 2020, a 40% increase over last year.

LaTonia Smith, AD
Supervisor-Patient Registration

“We developed an incredible partnership this year with Michigan Medicine registration. We helped each other out on a moment’s notice, including pop-up COVID-19 testing sites. The teamwork was awesome!”

69,146 patients registered in MiChart electronic health record

↑ 40% over last year
• **Information Technology/Business Solutions** supported updates to the risk management tracking program, operationalized the technological transition to telehealth and remote services, and responded deftly to technology access concerns.

• **Clerical Staff, Patient Account Representatives & Patient Billing** partnered to adapt workflows for screening patients, revised billing processes and registration to accommodate new testing venues and telehealth visits, adjusted cash deposit methods and revised processes for patient consent signatures.

• **Managed Care/Student Insurance Office** made an impact in 2020 as follows:
  - Reintroduced U-M Tuition Refund Insurance, a low-cost, voluntary insurance that extends and enhances the university's withdrawal policy for students who need to withdraw due to a medical or mental health concern
  - Extended the Domestic Student Health Insurance Plan (DSHIP) eligibility to recent alumni with insurance gaps
  - Increased DSHIP enrollment: **7,270** enrolled in 2020, an increase of 81% from the prior year

![DSHIP Enrollment and Annual Premiums](chart.png)

**DSHIP Enrollment and Annual Premiums**

- 2013−14: $3,384
- 2014−15: $3,634
- 2015−16: $4,252
- 2016−17: $5,094
- 2017−18: $1,865
- 2018−19: $2,084
- 2019−20: $1,709
- 2020−21: $1,796

Laurie Burchett, B.S.
Manager, Managed Care/Student Insurance Office

“I have been so impressed by the determination of UHS staff to take such great care of our patients during the pandemic. I have worked at UHS since 1986 and continue to enjoy working with college students who are passionate about their ideals.”
Wolverine Wellness

Wolverine Wellness fosters personal and community well-being for U-M students, in college and beyond.

We support all aspects of student health and well-being and are guided by the U-M Model of Well-being, national benchmarks and data about college students, especially U-M students.

The pandemic had a significant impact on students this year. A survey of U-M first-year students by Student Life in December 2020 showed that they were most concerned about their mental/emotional and social well-being.

![Percentage of first-year students who reported being very concerned about these facets of their well-being (December 2020)](image)

In response to student needs, Wolverine Wellness adapted to help students navigate the effects of the pandemic, including isolation, lack of social opportunities, and the challenge of learning and maintaining focus in virtual environments.

Our work is organized in five focus areas as follows:

1. Strategic Leadership for Harm Reduction, Community Well-being and Health Promotion
2. Wellness Coaching & Motivational Interviewing Training
3. Student Engagement and Academic Partnerships
4. Communications
5. Recovery Support

Janet Jansen, MPH
Program Manager,
Parent-Family Communication

“The best part of my job is helping students explore all dimensions of wellness through the lens of life experiences and identity. It’s a non-judgment zone where one can learn more about who they are and who they want to be. My role is to provide resources and support as students discover the many ways to thrive. I don’t think our mistakes define us.”
1. Strategic Leadership for Harm Reduction, Community Well-being and Health Promotion

**Collective Impact:** U-M Student Life uses the Collective Impact model to address holistic well-being on campus. The core team advances the Common Agenda and divisional learning outcomes. This year we:

- Led the Student Life Health and Wellness planning work with multidisciplinary campus leaders, focusing on COVID-19 and coordinating response to emerging campus needs

- Developed an expanded Syllabus Statement for Student Well-Being that integrates health and well-being resources for faculty to include in course syllabi.

- Joined the U.S. Health Promoting Campuses Network to explore the adoption of the Okanagan Charter

**The Ann Arbor Campus-Community Coalition (A2C3)** celebrated 15 years of campus and community partnership to address harmful alcohol and other drug use in the community and build a caring network of resources and support. Wolverine Wellness provides leadership for A2C3, which includes representatives from more than 25 community sectors. This year we:

- Coordinated high-risk event prevention efforts, including co-hosting sober events throughout the year

- Launched a social media campaign to address social isolation, mental health concerns, increased risk of alcohol use and vaping, and parenting communication strategies during COVID-19

- Partnered with the Washtenaw County Health Department to work with local establishments and survey needs during COVID-19 restrictions

**Additional activities included:**

- Collaborated to develop and disseminate the Culture of Care Commitment

- Coordinated campus-wide COVID Safety Kit distribution

- Implemented an online COVID course for all graduate and undergraduate students

- Transitioned UHS Parent Orientation sessions to virtual format to ensure access

- Coordinated the Drug-Free Schools and Campuses Act Biennial Review and approved the revisions for the 2020 U-M Alcohol and Other Drug Policy

…”large-scale social change comes from better cross-sector coordination rather than from the isolated intervention of individual organizations.”

**Collective Impact - Stanford Social Innovation Review**
2. Wellness Coaching & Motivational Interviewing Training

Wellness Coaching is a holistic approach that helps students reach their potential and provides opportunities to learn skills that will last a lifetime. It offers a collaborative, non-judgmental partnership between student and coach. Students’ participation may be voluntary or required.

In fall 2020, 33 coaches offered sessions, our largest number to date. This includes 13 new graduate student coaches and 7 professional staff coaches.

In 2020 we completed 1,160 coaching sessions, responded to COVID-related needs and developed new offerings for:

- Alcohol and other drugs
- Sleep
- Eating and body image concerns
- Relationships and sexual health
- COVID-19 community and personal safety (mandated through the 15th District Court and the Office of Student Conflict Resolution).

At the end of March, we transitioned Wellness Coaching from in-person to completely online coaching and within three days developed necessary protocols and tools.

In the summer, we began offering Wellness Coaching groups for:

- Graduate/professional students
- Black graduate students
- Graduate women
- Intuitive eating
- Grad assistants
- Civic engagement
- First-year student transition
- Transfer students

Wellness coaches use motivational interviewing to facilitate conversations in which people decide to make changes based on their own values and interests. Six Wolverine Wellness staff are highly skilled members of the international Motivational Interviewing Network of Trainers. In 2020, we trained approximately 80 individuals in foundational motivational interviewing techniques through:

- Two 20-hour “Introduction to Motivational Interviewing” trainings
- Tailored trainings for:
  - Supporting student well-being
  - Wellness coaching for new coaches
  - Compassionate conversations during COVID
  - Student-staff in the Office of Student Conflict Resolution

Marsha Benz, MPH, M.A.
Team Lead for Wellness Coaching and Motivational Interviewing
U-M alum (MPH ’91)

“Students are at such an exciting time in their lives–finding their independence, figuring out who they are, experiencing joy on their own terms, stepping up to challenges and realizing their impact on others. It’s so much fun to be a part of their learning experience!”

“I found this experience to be a lot more pleasant and fulfilling than expected. I appreciated the focus on personal wellness rather than just the incident itself”

- Participant in Individual coaching (court-mandated)

“I liked chatting with other students about current events, managing anxiety, and perfectionism. I liked trading tips with others about these subjects.”

- Participant in group coaching
3. Student Engagement and Academic Partnerships

Student Engagement:
- Presented more than 70 virtual programs/workshops about a range of topics, including:
  - Coping skills for stress and anxiety
  - Setting boundaries in a pandemic
  - Building connections while remote
  - Mindfulness and compassion conversations
  - Well-being and civic engagement
- Partnered with the Center for Campus Involvement to create a new model of connecting to student organizations about leadership and well-being
- Developed a Health Equity Grant for student organizations, a funding and consultation source for student-led projects to promote well-being within campus communities who are traditionally underserved or marginalized by health and wellness programming efforts

Academic partnerships: In support of student well-being, and in partnership with academic units, we:
- Facilitate training sessions and workshops
- Design and teach well-being courses and modules
- Consult with faculty and staff about department culture

Wellness Course, ALA 240: Living Well in College and Beyond
- 148 students took the Wellness Course in 2020:
  - Winter 2020: 36 students, 2 two-credit sections taught
  - Spring 2020: 48 students, 3 one-credit sections taught using a curriculum adapted for virtual format
  - Fall 2020: 64 students, 4 two-credit sections taught including new Student Leader section
- 65% of enrolled students were motivated to take the course as a result of the pandemic
- In post-course teaching evaluations, the majority of students agreed that the format of the course allowed for more peer-to-peer connection as compared to other online courses

In 2020, much of this work was focused on helping staff and faculty support students in the pandemic. For example, staff served as guest lecturers in LSA Honors 240 to apply public health theories to students’ experience during COVID, and facilitated a module in the History 807 Seminar to address mental and physical well-being while in a remote environment.

“This course increased my well-being during the pandemic by providing a space that was accepting, along with a platform to freely express yourself and your feelings.”

- Student in Wellness Course ALA 240
4. Communications

Communication and virtual outreach were more important than ever in 2020. We shifted gears multiple times in 2020: in March as students left campus, in summer as we planned for their return, and in fall as we addressed the isolation and difficulty with focus that students reported.

Through our online work we:

- Maintained and promoted three active social media accounts, with 15,415 Facebook users reached, 243,000+ Twitter impressions, and 1,200 active Instagram followers in 2020
- Maintained and promoted two websites:
  - UHS: 1,252,371 users and 2,186,913 pageviews in 2020
  - Well-being for U-M Students: 23,363 users and 54,501 pageviews in 2020
- Developed and promoted social medial campaigns
- Collaborated with UHS clinical services and other partners across campus to coordinate and communicate regarding COVID-19, flu vaccination, and other health care services
- Contributed content to newsletters and other publications for students and parents
- Coordinated UHS community relations

Images for social media

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**Julian Weisensel, BFA Graphic Designer**

“The communications team must constantly seek new ways to engage students. Our process is a combination of testing new strategies, utilizing existing university channels, and leveraging students for content. The pandemic has been a fascinating challenge and a test of our endurance.”

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“I genuinely feel like it was the most beneficial experience I had in college. It’s really helped me learn how to handle responsibility in a professional environment and I think it’s been crucial in developing my work habits.”

- Communications student employee
5. Recovery Support

U-M Collegiate Recovery Program (CRP) provides holistic, tailored support to U-M students in recovery from alcohol or other drug problems. In a year when national data showed increased alcohol use and opioid overdoses, students affiliated with CRP continued to thrive. Highlights from 2020 include:

- 30 active and engaged students who participated in weekly events/supports
- Oriented new members, including several transfer students
- Awarded two new academic scholarships
- Offered all students daily engagement opportunities to support their well-being
- Seamlessly transitioned from in-person to remote support when COVID-19 arrived
- Expanded options for support and connection, increasing frequency from twice weekly to daily and providing more structure and consistency
- More than 100 people attended the Spring 2020 remote graduation celebration for students in recovery
- Participants report feeling valued by the university, supported by each other and the university, and part of the campus community

Wolverine Wellness also made an impact through:

- Surveying students with the National College Health Assessment
- Offering rapid HIV testing in collaboration with community-based organization, Unified: HIV Health and Beyond
- Partnering with Tobacco Consultation Service through MHealthy to support student cessation of tobacco, e-cigarette and marijuana use
- Facilitating mindfulness meditation sessions, in-person and remotely
- Providing safer sex supplies and sleep kits
- Hosting visits with Hawkeye the therapy dog

Hawkeye the therapy dog

“CRP came into my life when I was feeling lonely and isolated within my graduate program and within my recovery community. I was finding it hard to identify a place where I could talk about the stresses of school and how that was impacting my sobriety. I now have a safe place where I can get support, build strong relationships, and learn new ways to navigate graduate school while maintaining my recovery.”

- Member of Collegiate Recovery Program

Matt Statman, MSW
Program Manager
Collegiate Recovery Program
U-M alum (MSW ’10)

“This past year was memorable, especially orienting new students and building relationships remotely. After several months it was great to meet them for the first time in person for public health informed outdoor activities. The students I work with are resilient, smart and fun. Witnessing their growth is a privilege.”
Engagement
Engagement

Campus and Community Collaborations
Partnership is mission critical. In addition to partnerships to address COVID-19 (see page 14), UHS works collaboratively in many multi-disciplinary teams across campus and the local community, including:

- Ann Arbor Campus-Community Coalition
- Autism Spectrum Committee
- Clinical Care Management Team
- Collaborative Research Teams
- COVID-19 Case Management
- Dean of Students Behavioral Intervention Team
- Eating Issues Network
- Health Advisory Team
- High-Risk Planning Team
- International Travel Oversight Committee
- Health & Wellness Collective Impact
- Law Enforcement Collaborative
- Michigan Visiting Care
- Runners Clinic & Virtual Running Program
- Sexual Assault Nurse Examiner program
- Sexual Assault Response Team
- Suicide Prevention Taskforce
- Trans Care Team
- Well-being Network

The student voice and experience is essential for making an impact. UHS provides shadowing and internship opportunities for students, connects to student clubs and organizations, employs approximately 25-30 student-staff every year, and sponsors these committees:

- **Student Health Insurance Committee (SHIC)** is a group of students, faculty and staff that meets two to three times per year to evaluate and provide an affordable yet comprehensive health insurance plan for U-M students on the Ann Arbor, Flint and Dearborn campuses.

- **Student Health Advisory Council (SHAC)** is a group of undergraduate and graduate students that meets monthly to share their student perspectives and advise the UHS Executive Director about health and well-being concerns. 2020-2021 members include:

Kailynn Barton, Alex Borian, Sania Farooq, Emily Guo, Phillip Hartley, Payton Harvey, Diarratou Kaba, Amina Khan, James Lyman, Divya Manikandan (Coordinator), Laura McAndrew (Staff Advisor), Taylor Murrell, Ravi Patel, Sheeba Pawar, Katherine Rogers, Maithelee Sathe, Mia Schatz, Areesha Shahab (Coordinator), Jin Ho Son, Daria Stelmak, Payton Watt (Coordinator)
Research

UHS is leading and/or participating in the following active research projects and programs that have received approval from the Institutional Review Board (IRB). All research at UHS is reviewed and approved by the Medical Executive Committee.

- Expansion and Scale Up of Expedited Partner Therapy in school-based clinics for adolescents, funded by U-M Office of Research Community Health Services Grant
- Understanding Health Status and Barriers to Health Care for Transgender and Nonbinary University Students, funded by U-M Institute for Research on Women and Gender
- Understanding Student Experiences with Inappropriate, Disrespectful, and Coercive Health Care and Physical Exams: A Mixed Methods Study, funded by U-M Institute for Research on Women and Gender
- InheRET™: Clinical implementation of an electronic screening tool for genetic susceptibility for cancer, funded by National Institutes of Health (NIH) Small Business Technology Transfer Program
- Providing Mental Health Precision Treatment study, in partnership with the U-M Michigan Medicine Department of Psychiatry

In addition, UHS is the sole campus provider of the Yellow Fever Vaccine through an IRB-approved Expanded Access Program.
Publications


Extramural Presentations


Intramural Presentations

In addition to the many presentations and trainings that Wolverine Wellness staff and student-staff provide to the campus community, staff made the following presentations:


National, Regional, and Campus Leadership

Mary Jo Desprez, M.A.
> Co-chair, U-M Student Life Health and Wellness Collective Impact Core Team
> Co-chair, Ann Arbor Campus-Community Coalition
> Member, U-M Advancing Public Safety Task Force
> Representative, US Health Promoting Campuses Network
> Member, American College Health Association (ACHA) Healthy Campus Task Force
> Member, U-M Rackham Graduate Student Mental Health Task Force
> Member, U-M Student Mental Health Committee

Susan Ernst, M.D.
> Co-Chair, ACHA Task Force, Sensitive Exams Policy Development
> Chair, ACHA Task Force, Electronic Toolkit for Implementing Sensitive Exam Best Practices
> Leader Special Interest Group North American Society for Pediatric and Adolescent Gynecology
> Leader, U-M Campus Sexual Assault Response Team
> Faculty, U-M Center for Disability Health and Wellness
> Faculty, Leadership in Education for Neurodevelopmental Disabilities Grant Program
> Advisor, American Academy of Developmental Medicine and Dentistry, U-M Medical School
Robert Ernst, M.D.
  > Chair, U-M Campus Health Response Committee
  > Chair, U-M Pharmacy Benefit Advisory Committee
  > Member, U-M COVID-19 Vaccine Therapeutics Taskforce

Christina Gerazonis, MPH
  > Representative, 4 East Region, Student Affairs Administrators in Higher Education (NASPA), Alcohol and Other Drug Knowledge Community

Sarah Jukaku, M.D., M.S.
  > Member, U-M Student Mental Health Task Force

Aimee Maslach, M.D.
  > Member, U-M COVID-19 Campus Health Response Committee (CHRC), Clinical Subcommittee

Lindsey Mortenson, M.D.
  > Secretary, ACHA Mental Health Section
  > Chair-elect, ACHA Emerging Public Health Threats and Emergency Response Coalition
  > Member, U-M Rackham Graduate Student Mental Health Task Force
  > Member, U-M CHRC

Joy Pehlke, M.Ed.
  > Member, U-M Rackham Graduate Student Mental Health Task Force

Sami Rifat, M.D.
  > Co-chair, Biomarker/Clinical Core, Big 10 COVID-19 Cardiovascular Registry
  > Member, Big 10 COVID-19 Cardiovascular Registry Steering Committee
  > Member, NCAA/A5/Big 10 Sports Medicine Committee, COVID-19 Return to Sport Committee
  > Chair, Physician Coverage Sub-committee, Big 10 Sports Medicine Committee
  > State of Michigan Legislative Contact, American Medical Society for Sports Medicine
  > Practice and Policy Committee, American Medical Society for Sports Medicine
  > Research Committee, American Medical Society for Sports Medicine

Monique Steel, RN, MSN
  > Section Chair, ACHA-Advanced Practice Clinician Section

Awards

Matt Statman, LMSW
  > Association of Recovery In Higher Education (ARHE) Lifetime Achievement Award