

**UNIVERSITY COLLEGE CORK
NATIONAL UNIVERSITY OF IRELAND, CORK**

QUALITY IMPROVEMENT/QUALITY ASSURANCE

PEER REVIEW GROUP REPORT

DEPARTMENT OF STUDENT HEALTH

ACADEMIC YEAR 2007/08

DATE: 2 MAY 2008

MEMBERS OF THE PEER REVIEW GROUP

Peer Review Group Members
Sr. Christine Hoy Senior Nurse Practitioner (currently seconded as Project Manager, Long Term Conditions Unit, Scottish Government), UK <i>(Chair)</i>
Dr. David McGrath Director of Health Service, Trinity College Dublin
Dr. Hilda O'Shea Medical Officer, Cork Institute of Technology
Dr. Helen Whelton Dental School & Hospital, University College Cork
Mr. Denis Staunton Director of Access, University College Cork <i>(Rapporteur)</i>

TIMETABLE OF THE SITE VISIT

The timetable for the site visit is attached as Appendix A.

METHODOLOGY

At the first meeting of the review team, Sr. Christine Hoy was appointed Chair and Mr. Denis Staunton was appointed Rapporteur by the Peer Review Group. It was agreed that individual members of the Peer Review Group would take responsibility for taking the lead on discussions of different aspects of the activities. Dr. McGrath focussed on the medical and clinical dimensions of the service, supported by Dr. Whelton and Dr. O'Shea. Sr. Hoy focussed on the nursing and physiotherapy aspects, while Mr. Staunton primarily focussed on interaction between the service and the wider community. All members took turns to address the issues arising under the administrative, staffing, training, planning and financial issues.

The Peer Review Group was facilitated in every way prior to and during the review visit.

SITE VISIT

The timing of visit to the facilities of the Student Health Department was well placed, and all the reviewers had the opportunity to observe the Department functioning as an active unit.

The timetable was appropriate to the needs of the review and was well planned. The schedule of meetings was intense, with all meetings with staff and students and other stakeholders bringing relevance to the discussions on the review. The visit to the facilities of the Department was very useful and well-placed in the schedule, following on the meetings with staff. The stakeholders that met with the Peer Review Group were, for the most part, self-selected. The Peer Review Group did recommend that additional people, not on the original draft timetable, be interviewed. This was facilitated where possible and all details are in the timetable (Appendix A).

PEER REVIEW GROUP REPORT

A first draft of the report was put together during the Peer Review Group visit. All members took part in the discussions and formulation of recommendations for the final report. The Rapporteur finalised the first draft, subsequent to the visit. This was then forwarded to all members of the panel who responded with appropriate comments, factual corrections and additional recommendations. These were incorporated into the final report, which was re-circulated for approval by all members of the Peer Review Group.

The final report was agreed by all members of the review team.

OVERALL ANALYSIS

SELF-EVALUATION REPORT

The Self-Evaluation Report was competently done and carried out in accordance with the guidelines as set out by the Quality Promotion Unit. It was clear and concise, outlining clearly the findings from the SWOT analysis. The factual information presented was informative and up to date. The section on analysis of stakeholders views both internal and external was thoughtful and reflective and contained a series of very useful ideas and recommendations. The Appendix section was informative, detailed and focused. Finally, the panel would like to compliment everyone involved in producing the Self-Evaluation Report and for taking such an effort to gain the views and ideas of the users of the service, staff, other relevant support services and departments within the university. The Peer Review Group was particularly impressed with the Department's protocols, guidelines and standard operating procedures which were considered excellent and an example of good practice. The

Peer Review Group recommend that the model presented in the Department of Student Health Report could be adopted by other similar service units across the University.

SWOT ANALYSIS

The Department of Student Health carried out a detailed SWOT analysis as part of the preparation for the Self-Evaluation Report. The analysis was facilitated by Mr. Des Lee of Futurscope Ltd. and the exercise was beneficial and useful in highlighting areas within the four SWOT analysis headings, Strengths, Weaknesses, Opportunities and Threats.

It was the view of the panel that this exercise was conducted in a very open, constructive and reflective manner and enabled all staff, irrespective of their status, tenure and position, to contribute equally to evaluating the current activities in the Department and to present their ideas for future developments.

The Peer Review Group considered the detailed SWOT analysis submitted by the Department and agreed with the departmental views with some amendments as follows:

Strengths

- Good team spirit-positive attitude, team approach
- Mutual support
- no conflict in roles
- Flexibility
- Good communication pathways despite large number of part-timers
- Regular team meetings- forum for discussion
- Education
- Availability of nurse triage
- Good skill mix
- Good location

Weaknesses

- Lack of sufficient funding and time for continuing education and skill upgrade
- Inability to provide appropriate services e.g. STI clinic despite external pressure for change
- Systems inadequate, particularly in area of reception and administration support for physiotherapy
- Poor management of workload

- Infrastructural deficiencies e.g. lack of toilet facilities, no staff room, insufficient consulting rooms at times
- Low profile and visibility across campus
- Lack of clarity of job descriptions re core activities and exact service offered to students (is it a GP service for all regardless of home address, an acute service for minor ailments, or back up service to their home GP, and is policy of having a Cork-based GP followed up and encouraged?)

Opportunities

- Advances in technology
 - Telemedicine
 - Self check in
 - Video conferencing
 - Correspondence with students re appointments
- Development of health promotion service re drugs/alcohol/obesity and possibility of appointment of health promotion officer
- Development of sexual health service
- Policy for staff training and development
- Development of strategies e.g. mental health strategy
- Collaboration with existing local primary and secondary medical services

Threats

- Changes in technology
 - Patient misinformation,
 - Risk of poor security
 - Poor standards of patient confidentiality
- Health implications with changing demographics-changing age/race/culture / disease profile and social and behaviour patterns
- Lack of funding to develop services required to respond effectively to evolving complex patient needs
- Issues surrounding implementation of HSE guidelines/ university strategies
- Inability to meet obligations set by national health agenda
- Change in political climate may threaten development
- Inability to meet expectation of students/parents/ staff of service

BENCHMARKING

The benchmarking exercise involved a visit to the University of Edinburgh and Herriot Watt University in Scotland, Trinity College Dublin and Dublin Institute of Technology. The panel commented very favourably on the summary of analysis of the service and the presentation of the data, which included indicators and comparisons across the three Irish institutions. The panel would have welcomed inclusion of a reference to financial benchmarking, but recognised the different financial models in use in the NHS and the widely differing arrangements in DIT and CIT.

FINDINGS OF THE PEER REVIEW GROUP

UNIT DETAILS

Background and History of Student Health Care in University College Cork

Provision of health care on campus for students first commenced in 1971, with the appointment of a full time Student Health Nurse, who provided clinics from the ground floor of our present premises, dealing with minor illness amongst the student population. From 1995 – 2006 the growth in the size of the student population increased from 10,448 in 1995 to over 15,784 in 2006, with a corresponding increase in the demand on the service from an attendance figure of 8,500 in 1995 to over 14,500 attendances in 2006.

With the expected expansion in student numbers from 17,000 to 22,000 over a five year period, a new Head of Department of Student Health was appointed in April 2006, charged with the responsibility of developing the service to address the needs of the ever changing University population. The past eighteen months have been a period of change and innovation to try to realise that vision.

The services currently provided by the Department of Student Health include the following:

- Primary care of acute and chronic illnesses
- Nurse-led dressing service
- Referral service to appropriate hospital specialists when required
- Ante natal care
- Screening and immunisation against infectious diseases
- Treatment room for surgical and medical emergency presentations on campus
- Women's health, contraceptive & cervical smear services
- Travel advice and extensive travel vaccination service

- Consultant psychiatrist service
- Physiotherapy treatment service.

The Department does not provide a home visiting service, but has an arrangement with a local General Practitioner to ensure that students can request a home visit from his practice, if not yet registered with another local practice. All students are required to be registered with a local general practitioner, as the Department of Student Health is supplementary to and not a replacement for their General Practitioner. Out of hours, students contact South Doc Out of Hour's Service for advice, consultation or home visits as required. The Department is not a Medical Card Practice, and does not see staff of the University. All services are free of charge to students, except minor charges for dispensing certain medication, administering vaccines, and physiotherapy treatment.

Emergencies on campus

Request to attend medical emergencies on campus are assessed by the Doctor or Nurse on Duty. The Student Health Department does not have the resources to be responsible for attending all emergencies on campus, and it would be medico-legally risky and clinically unsafe to attempt to do so. The staffing levels required to be able to commit to be responsible for emergencies occurring over such a wide geographical area to a possible population of up to 20,000 people would greatly exceed the existing budget of the Department. Most requests for attendances can be dealt with by arranging an ambulance or for the student to be brought to the Student Health Centre, where they are seen promptly in our treatment room, which has been upgraded to include resuscitation facilities. Occasionally the doctor will deem it appropriate to attend an emergency on campus, and has access to separate trauma and medical emergency kits.

The services at the Department of Student Health are delivered by a multi-disciplinary team, comprised of a mixture of part-time temporary and full-time permanent staff. In summary this is composed of

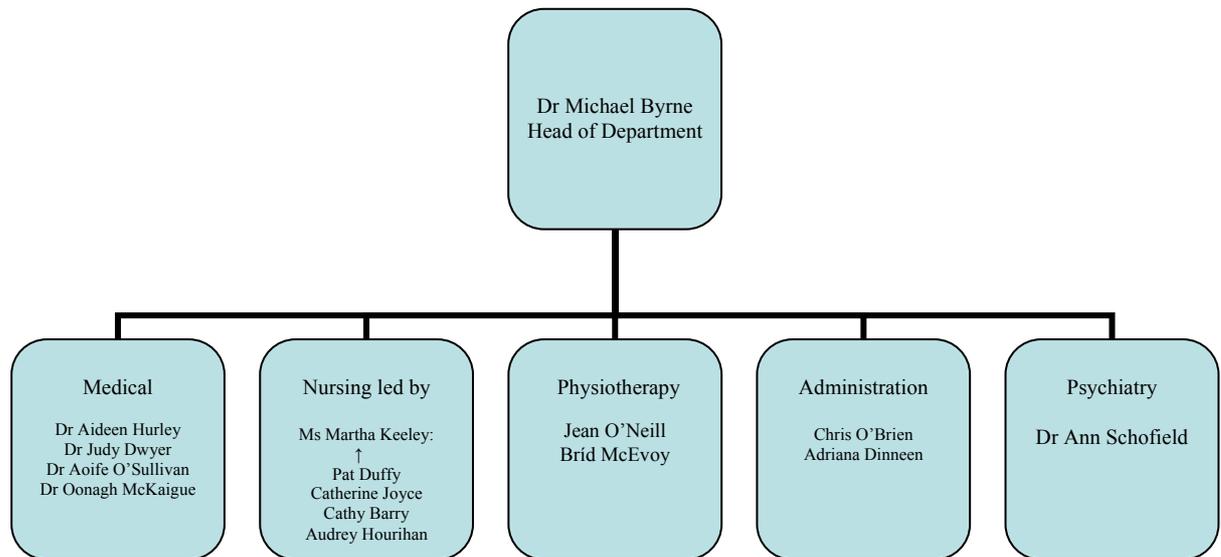
- 3.3 FTE Doctors including the Head of Department in term time reducing to 1 FTE in non-term time
- 2.0 FTE Nurses in term time reducing to 0.7 FTE in non-term time
- 0.2 FTE Consultant Psychiatrist (two sessions per week) in term time only
- 0.8 FTE Physiotherapists in term time only
- 2.0 FTE Reception/Admin Personnel in term time reducing to 1.0 FTE in non-term time

UNIT PLANNING AND ORGANISATION

The Management structure in the Department is represented by the Team Organisational Chart below.

The Department of Student Health is part of the Registrar's Department. Dr. Byrne reports to the Vice-President for the Student Experience, Mr. Con O'Brien. All team members report directly to Dr. Byrne. The Nursing team is led by Ms. Martha Keeley.

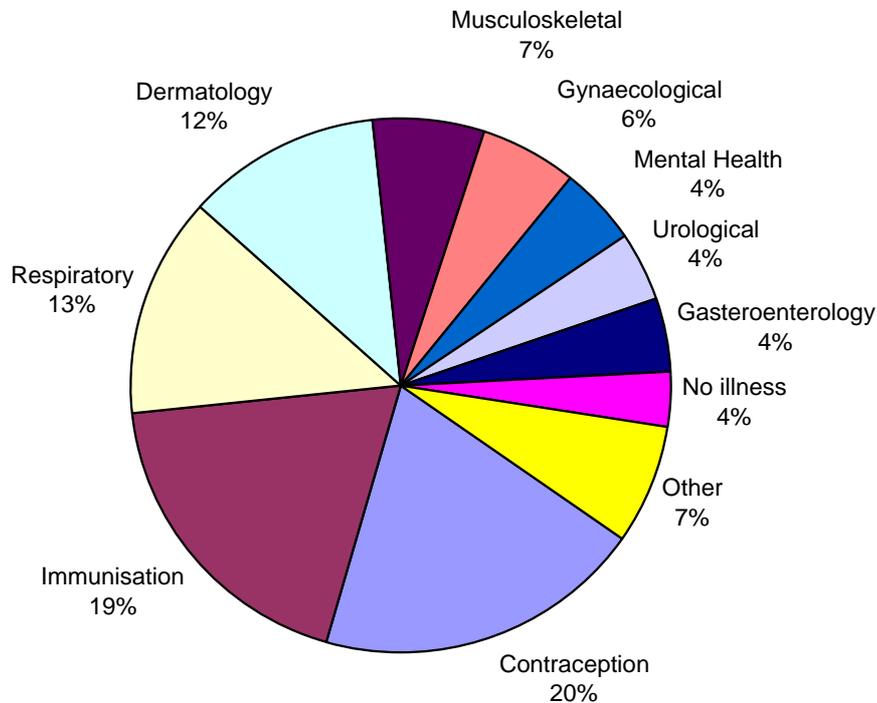
Team Organisational Chart



There is a Safety Committee responsible for drawing up the departmental safety statement and ad hoc committees are created as the need arises.

LIST OF CLIENT GROUPS FOR THE UNIT

The Unit provided information on their client groups 2006/07 represented in the following pie chart:



The client group needs show that Contraception, Immunisation, Skin and Respiratory conditions continue to predominate. This has been the consistent pattern over the past ten years and echoes the situation in most student health services. It is important to note that although Mental Health problems accounted for only 4% of the conditions coded, they often represent the greatest demand on the Department because of the complexities of the issues involved.

SERVICE STANDARDS

The Peer Review Group noted the standard operating procedures and guidelines submitted as part of the documentation accompanying the Self-Evaluation Report and commended the Department for the clarity and the accessible presentation format and the extent of the detail provided. The Department is currently developing service level agreements with the offices of each of the departments/schools in the College of Medicine & Health with regard to the provision of the programme for screening and infectious disease immunisation.

The Peer Review Group complimented the staff on the efficient introduction, maintenance and development of the current IT system.

STAFF DEVELOPMENT

The Peer Review Group noted that staff of the Department are predominantly young and all demonstrate commitment to the university. Continuing medical education is essential for all registered medical and nursing staff. There are examples of staff funding their own career development. The Peer Review Group also noted that staff maintain an adequate level of professional competence through programmes of self-funded continuing medical education and self-directed learning. Part-time staff appear to have no access to specialised training and development within UCC. The Peer Review Group was of the view that this needs to be funded in some way.

UNIT BUDGET

The Departmental budget is provided on an annual basis from within the overall budget of the Registrar's Department. It is comprised of two elements, a pay budget to cover the cost of salaries, and a non-pay budget to cover the cost of consumables and other running costs of the Department. The budget is allocated on a top-down basis with no input from the Department of Student Health and is calculated on historical spend. The Department of Student Health supplements the budget allocated, by charging fees to students for a limited number of supplementary non-core services, such as travel vaccinations, and from a small stipend granted to the Department annually from the Health Services Executive.

The Peer Review Group raised serious concerns around the current budget allocation model for the Department of Student Health and has made a series of recommendations outlining alternative models which it recommends that the University examine carefully.

GOVERNANCE

The Unit reports to the Registrar and Senior Vice-President, through the Vice-President for the Student Experience, as described earlier. The Peer Review Group were encouraged by the University Management Group's acknowledgement of the need to develop infrastructure to integrate, extend and coordinate student services and were impressed by the plan for a new purpose-built student centre with facilities for all student services.

SERVICES

Clinic Arrangements

Students access care for routine and non-urgent problems by pre-booking appointments, over the telephone or by attending Reception. The routine waiting time has reduced from over a

week in 2006 to two to three days in 2007 as a result of increased doctor sessions, and routine appointments may be available on the day.

In the event of non-availability of appointments, a student will be offered an initial assessment by a triage nurse, who can manage minor self limiting illnesses with general health advice, or will arrange an urgent appointment with the doctor that day or within a day or two as appropriate. Approximately 1/3 of attendances are unbooked.

Referrals

Appointments are occasionally requested on behalf of a student by a third party, for example requests by the Departments of Student Counselling & Development / Student Disability Support / International Office, academic staff or concerned parents and families. These appointments are only arranged with the consent of the student. Rules regarding confidentiality of medical and personal details are respected.

Infectious Disease Screening and Immunisation Clinic Arrangements

A comprehensive programme of screening and immunisation for students of the College of Medicine & Health is provided by the Department of Student Health. This is arranged by direct liaison with the academic departmental offices, and up to thirty students attend each clinic session.

Physiotherapy Clinic Arrangements

Students are usually referred to the Physiotherapy service after assessment by a student health doctor or on receipt of a letter from their own GP/Specialist. A walk-in service operates on a Monday, to deal with injuries which have occurred over the preceding week-end.

It was noted that the Physiotherapy suite occupies a significant amount of space in the Department. The lack of utilisation of the Physiotherapy suite for long periods of the working week is at odds with the space shortages and the service demands in the context of the space utilisation of the accommodation of the service.

Processes

The Peer Review Group expressed concern at the management of the current arrangements for ensuring that blood and other samples taken are sent for analysis at the appropriate time. The casual arrangements currently in place for collecting and dropping off materials was criticised and the *ad hoc* nature of the arrangements deemed inappropriate and unsuitable.

Identity and marketing of Department of Student Health

The Peer Review Group was concerned that there is ambiguity with respect to the promotion of the university as a centre of excellence not just with regard to academic programmes but

also with respect to student services and the overall positive student experience. It may appear to prospective students (especially international students) that the student health service is 'a general GP service' when in fact this is not the purpose of the service nor is that aspect reflected in the range of services offered to students

Sexual Health Clinic

The capability of the Department to be responsive to the increasing health needs of a more diverse student population is currently limited. The needs identified by both staff of the unit and other significant stakeholders of the university are a comprehensive consultant-led psychiatric service and sexual health service and health promotion. Given the high prevalence and increasing incidence of sexually transmitted infections the sexual health service is a high priority. There is currently a six-week wait for sexual health services.

The existence and adherence to the University alcohol policy was noted and commended. However the issue of alcohol and lifestyle needs to be examined within an overall student health promotion framework.

STAFFING

Details on staffing levels are provided under Unit details section above.

The service is provided by a dynamic and committed team of dedicated professionals. One of the strong characteristics of the staff profile is that the staff are part-time except for the Head + 2 clerical staff and are predominantly female. The Peer Review Group noted with concern the lack of a position of deputy head for the Department.

Doctors

The Peer Review Group noted the disparity of pay rates for the GP staff with other GPs benchmarked in other third level institutions in Ireland. For example, the rate of €190 per session compares with €250 per session in TCD and in CIT the equivalent rate is €285. The Peer Review Group recommends benchmarking with other Higher Education Institutions in the State.

Administrative Staff

In respect to the administrative support staff, there is a need to recognise that within the past year the complexity and role of one of the administrative posts has changed significantly. It is the view of the Peer Review Group that consideration should be given to the appropriate grading of that post in the light of the new responsibilities.

Nursing Staff

Changes in legislation and professional practice, for example non medical prescribing, offer the potential for nursing staff to expand the range of services offered. The opportunity for additional nurse training will provide a means to further improve student care.

The nursing team is enthusiastic and keen to expand their knowledge. They appear to work well as a team and integrate well with medical and administrative staff. The nursing service is very appreciated by both students and staff and recognised to be great contribution to the support of university students.

Nurses have responded extremely well to recent changes and look forward to the part they will play in developing an improved service. They all expressed an enthusiasm for working in the multidisciplinary team and are well prepared for further change which they recognise will bring benefit to students, the service and their own personal development.

Nurses provide a triage service although this is not audited. It is unclear how many students are autonomously assessed, diagnosed, treated and discharged by nurses. It is also unclear how many nurse telephone contacts there are with students and other health professionals.

Nurses appear to assist in immunisation clinics rather than operating clinics independently, although this would appear to be within their competence with additional training.

Only one nurse has certificated competence in cervical smear taking, with another in training, which she is self-funding. This seems unsatisfactory as there is no nursing smear service if the certified nurse is on leave or sick.

Nurses expressed discomfort with collection of fees and agreed with other team members that this was often awkward and unprofessional.

There does not appear to be strong links between the nursing department at the University and the nurses in the Department of Student Health. Nurses cover for each other for sick leave and holidays – there is no “bank supply” of nurses who can cover for emergency.

There is frustration at lack of authority to work independently and lack of opportunity to provide a health promotion service. Nurses expressed an interest in further training, in particular health promotion, sexual health, contraception, prescribing. Nurses do not obviously contribute practice guidelines / protocols.

ACCOMMODATION

The Peer Review Group considered that the staff of the Department have made the very best use of space available, which is bright, well maintained and kept very clean. Use of every square inch has been made.

The Peer Review Group experienced the student experience in reality. The Group observed the tension in the waiting room, which is an open space allowing little privacy for the students and appeared overcrowded. There is a lack of adequate air-conditioning and ventilation, inadequate accessibility for physically disabled students, a lack of soundproofing of the consulting rooms and a concern in relation to the proximity of toilet facilities to the waiting room.

The Peer Review Group was surprised at the general lack of security in the building and considered this needs to be investigated by the Health & Safety Office in UCC.

The Peer Review Group noted that the Department of Student Health and the Student Counselling & Development Service share the waiting room facilities. This creates problems of confidentiality and may represent a disincentive to use the services, in particular, the Student Counselling service.

COMMUNICATIONS

The Peer Review Group noted the excellent communications within the Department. The cohesiveness of the Student Health team was very obvious to the reviewers. The rapport amongst the staff was good and communications with the wider university environment and external agencies is considered appropriate and constantly improving. The recent appointment of a new head of the Department has injected new energy. This has resulted in establishing more regular communication and meetings with significant other student support services such as Chaplaincy, Counselling, Disability, Access and other connections are being brokered.

The Peer Review Group was confident that excellent communications are maintained within the Department and that there is a good dynamic team, responding appropriately and professionally to the increased demands on the service and the management of change.

However the lack of regular and managed communications between the Department and the four Colleges of the University was an issue of concern for the Peer Review Group. The Peer Review Group noted that the College of Science, Engineering & Food Science has a mentoring system for first years and are developing plans to put in place a postgraduate mentoring service. In terms of an overall University policy of health promotion, communications with Colleges and academic departments will play a crucial and pivotal role in this new dimension of the work envisaged by the Department of Student Health.

The Peer Review Group considered that the range and scope of the service provided are not always understood by students; this is reflected in the Department's SWOT analysis. This

weakness was identified by staff. The Peer Review Group considered that a communication in clear terms of the purpose of the Department of Student Health and, more precisely, which services carry a fee and which services are provided free of charge, is essential.

The web site needs to be updated and regularly maintained. The Peer Review Group recommended that additional communication technologies should be investigated and availed of where appropriate, e.g. texting of appointments, use of email, communication of services and associated charges, etc.

Former students are the best ambassadors for the service. It was evident to the reviewers that, through the Students Union, there is a good feedback with respect to the delivery of services. However the greater the awareness of the service and the effectiveness of the provision is likely to create a greater demand on the service with consequent impact on staff time and resources.

With respect to mental health, best practice recommends a case conferencing approach be adopted which utilises the skills and expertise of other support services such as Disability, Counselling, Chaplaincy, Access, academic tutors, etc. This ensures a focussed intervention at an appropriate time in the best interests of student welfare. On a wider policy level the Peer Review Group proposed that there be formal structural relationships between the key student services to meet regularly with respect to development of ongoing policies, procedures and practices.

The Peer Review Group noted the existence of a student death protocol, which is commended. However there was some concern that this may not be completely understood by other significant units/departments within the University and indeed that there may be more than one current policy.

FINANCE

The budget is allocated from the Registrar's Office and is not linked clearly to student numbers. The current financial model operates on a year-by-year basis and the Peer Review Group did not see a relationship between the budget and student numbers. The Peer Review Group noted a substantial overrun on last year's budget.

Although the unit generates some income, there is no cohesive system in place for collection of fees and the Peer Review Group shared the unease of the staff with the collection of cash and the mix of clinical and administration tasks. It was noted that this issue also affected the reception process.

The Department is currently subsidising the cost of a number of services, including student occupational vaccination programmes, physiotherapy and cryotherapy. While the basic service is free there is a lack of consistency in fee collection and in applying charges to those services which fall outside the core clinical remit.

The Peer Review Group noted with some concern that, with the current inadequacy of the reception area, no one staff person handles student fees. It was also noted that there are a number of wider policy-related issues with respect to financial generation for the service, such as, monies paid by HSE to the student support services, the fact that students are ineligible in their own right for medical cards as they are assessed on their parents income, and the possibility that the health services across the entire university sector in Ireland could work collaboratively to enter into negotiations with the major health insurance companies with respect to developing a comprehensive student health insurance scheme.

The Peer Review Group would encourage the development of a business plan, including the examination of the feasibility of fee generation through the enhancement of certain services, particularly with respect to vaccination policy; for example that the College of Medicine & Health could take responsibility for ensuring students are appropriately vaccinated for entry into clinical practice and collecting student fees.

With respect to future planning and financial viability of the services it was considered by the reviewers that yearly medical inflation needs to be factored in. For example, medical inflation is currently running at 10% and the budget increase is approximately 3%, with a consequent negative effect on the services provided.

UNIT CO-ORDINATING COMMITTEE & METHODOLOGY EMPLOYED IN PREPARATION OF THE SELF-ASSESSMENT REPORT

The Peer Review Group noted that all staff engaged with the process of self-evaluation and inspirational benchmarking in preparation for the writing of the self-evaluation report. The Peer Review Group commended the efforts of the Student Health Department in this regard. Evidence of this participatory approach was noted by the committee in the excellent summary of analysis and recommendations for future actions identified by all staff and included in the self-evaluation report. Extensive student and stakeholder surveys were conducted and evidence was included in the Self-Evaluation Report.

Overall Analysis

The Peer Review Group were very impressed with the commitment of the staff to the ongoing work of the Department. This is reflected in the very positive approach of the staff to

working as part of a team under the excellent leadership of the current Head. It was noted that during the past year many changes in policies and procedures were introduced, but at all times these were managed in a consultative participative approach which ensured a well-planned and easy transition to the continuing development of student health service provision in UCC. The group was particularly impressed with the high level of professional expertise available within the current staff team and the ongoing commitment to provision of an efficient and effective service to UCC students.

There has been significant change due to rapid explosion of student numbers. There are in excess of 16,000 students in UCC. The most recent University Strategic Framework (2006 – 2011) clearly has as one of its priorities the enhancement of the student experience which includes the provision of a comprehensive student health service.

Extract from UCC Strategic Framework 2006 – 2011, Section 6.3, page 13:

By 2011, the UCC experience for all students will be characterised by personal care and expert service. The range of student support, tutorial and mentoring services and overall facilities will have developed to be a high quality, efficient and effective resource responsive to changing student needs.

High levels of satisfaction were expressed among students and staff with the clinical experience, supported by evidence of surveys and interviews with the Peer Review Group. The service was found to be helpful, efficient and compassionate.

RECOMMENDATIONS FOR IMPROVEMENT

The Peer Review Group considered very carefully all recommendations made by the Department in the Self-Evaluation Report. These are incorporated as appropriate in the recommendations of the Peer Review Group given below.

The Peer Review Group recommends that:

Structures

1. the existing building to be reconfigured to ensure that the reception area is redesigned to enable improved patient confidentiality, office space for the office manager, self-check in service, introduction of electronic payment/fee collection system.
2. the Physiotherapy aspect of the service be relocated to the Mardyke Arena. This recommendation would facilitate the reconfiguration of the current building.

3. the client waiting room area be redesigned and redeveloped to create a more welcoming, inviting and user-friendly environment.
4. within the waiting room area there should be a clear display of the student services on offer and the charges associated with each of the services. It is recommended that this information should be displayed electronically.
5. the room which currently houses the photocopier be re-designated as a staff toilet and shower facility. That a smaller office photocopier be purchased in keeping with modern health and safety ventilation requirements.
6. the urine analysis equipment should be moved from the public toilet to a more suitable spot.
7. the kitchenette be reconfigured and a second fridge installed, thereby resolving the issue of having biological samples stored alongside food.
8. the two consultancy rooms with limited ventilation be provided with air conditioning, to avoid compromising confidentiality by opening windows onto external areas where students congregate.

Processes

9. an effective and equitable system for fee collection, which is removed from the health professionals administering services, be developed immediately.
10. the administration of the vaccination service, including fee collection, be handled by the relevant schools and that the Department of Student Health provide the clinical service.
11. the Department of Student Health assist the Schools in UCC in developing a protocol to prohibit students who have not had the prescribed vaccinations from registering for their programmes or progressing within the programmes.
12. charges for services be revised to cover costs, to ensure that service provision does not erode the budget of the Department of Student Health.
13. a self check-in system for students with appointments be instituted.
14. there be a ticketing system to process students through the system (i.e. students take a ticket on arrival at the clinic and sit and wait until called).
15. the pay of medical staff be benchmarked with other Higher Education Institutions in the State.
16. an audit be conducted of nursing services and telephone contacts.
17. all the team should contribute to the development of in-house protocols.
18. the University should have a single death policy.

Staff: Career pathways/training

19. a training needs analysis is required for all staff, informed by workload analysis and that all staff should participate in the Staff Performance & Development Reviews.
20. a Deputy Head be appointed.
21. identification of a budget for training and continuing medical education for all staff, with locum provision as appropriate. Staff should not self-fund continuing medical education.
22. consideration be given to the amendment of contracts to include provision for study leave.
23. up-skilling for nursing personnel be recognised as essential and be supported.
24. appropriate job descriptions be agreed with staff within the context of the recommendations outlined above.

Planning

25. a survey of student health needs be conducted by the Department to inform planning and prioritisation of services and training.
26. support for re-grading when new roles and responsibilities have emerged be provided.
27. the possibility of job-sharing for all staff positions be explored.
28. the timing of transport of biological materials to laboratories be investigated with a view to ensuring same-day collection for afternoon samples.
29. Revision of current courier services and delivery/collection of medical supplies.
30. consideration be given to the Department of Student Health taking over Ardpark to facilitate the immediate needs of the expanding health service and the change in student demographics.
31. the provision of a medical card for all students under 26 years of age be explored. It is recommended that this be explored in collaboration and partnership with all student health services in Higher Education Institutions in Ireland.
32. the University should expand the number of administrative staff to ensure adequate continuing support for existing service provision and the planned expansion.
33. the Department investigate nurse-prescribing training.

34. there be formal structural relationships between the key student services to meet regularly with respect to development of ongoing policies, procedures and practices.
35. the Department should develop a business plan, along with an annual review of medical inflation.

Communication

36. consideration be given to the establishment of a Case Forum to enable better identification of student needs. The forum would comprise of cognate professionals from Disability Support Service, Student Counselling & Development, Chaplaincy, Student Welfare Officer.
37. consideration be given to expanding the current level of cooperation with CIT Medical Services. For example the Department may consider a joint application for SIF funding, or the joint appointment of a psychiatrist, etc.
38. Heads of Colleges/Faculties/Schools be invited to visit the Department of Student Health to familiarise themselves with staff and the services offered.
39. the web site needs to be updated and regularly maintained.

Health & Well-being of Students

40. a planning group be established to input into the design of the planned new Student Services Building and that the Head of the Department of Student Health be a member of that team
41. in addition to the existing services, a Sexual Health Clinic be established, with staff appropriately trained, and appropriate funding be provided, given the high prevalence and increasing incidence in Ireland of Sexually Transmitted Diseases.
42. a full-time consultant-led psychiatric service be provided linked to the Counselling Service, Disability Support Service and possibly to other institutions (CIT). *See also recommendation 37.*
43. a mental health policy should be developed.
44. the alcohol policy be up-dated.
45. a full-time health promotion officer be appointed, in keeping with the strategies outlined in the University Strategic Framework 2006-2011 to enhance the quality of the student experience. A Health Promotion policy will promote best practice in regard to smoking cessation, alcohol and drug awareness.

46. the service would examine the feasibility of having a female doctor available during the summer months.
47. the service examine the possibility of increasing the number of staff qualified in cervical smear taking.

APPENDIX A

DEPARTMENT OF STUDENT HEALTH

PEER REVIEW GROUP SITE VISIT TIMETABLE

In Summary

- Monday 18 February: The Peer Review Group arrives at the Kingsley Hotel for a briefing from the Director of the Quality Promotion Unit, followed by a meal with the Departmental Co-ordinating Committee.
- Tuesday 19 February: The Peer Review Group considers the Self-Evaluation Report and meets with departmental staff, clients, UCC staff and student representatives. A working private dinner is held that evening for the Peer Review Group.
- Wednesday 20 February: The Peer Review Group meet with relevant officers of UCC. An exit presentation is given by the Peer Review Group to all members of the Department. A working private dinner is held that evening for the Peer Review Group. This is the final evening of the review.
- Thursday 21 February: External Peer Review Group members depart.

Monday 18 February 2008	
16.00 – 18.00	Initial meeting of the Peer Review Group Briefing by Director of Quality Promotion Unit, Dr. Norma Ryan. Peer Review Group appoints Chair and Rapporteur, and agrees final work schedule and assignment of tasks for the following 2 days. Views are exchanged and areas to be clarified or explored are identified.
19.00	Dinner for the Peer Review Group, the Head of Department and the Departmental Co-ordinating Committee. Departmental Co-ordinating Committee. <ul style="list-style-type: none">• Dr. Michael Byrne• Dr. Judy Dwyer• Dr. Oonagh McKaigue• Ms. Chris O'Brien• Ms. Martha Keeley• Ms. Bríd McEvoy
Tuesday 19 February 2008	
Venue: Room 255, O'Rahilly Building	
08.30 – 09.00	Convening of Peer Review Group and consideration of Self-Evaluation Report
09.00 – 09.30	Dr. Michael Byrne, Head, Department of Student Health

09.30 – 10.30	<u>Student Health staff</u> Dr. Michael Byrne Dr. Judy Dwyer Ms. Martha Keeley Ms. Chris O'Brien Dr. Aoife O'Sullivan Ms. Pat Duffy Ms. Jean O'Neill Ms. Cathy Barry Dr. Aideen Hurley Ms. Audrey Hourihan Ms. Catherine Joyce Ms. Adrianna Dinneen
10.30 – 11.00	Tea/coffee
11.00 – 13.00	<u>Private meetings with members of Student Health staff</u> 11.00 Dr. Judy Dwyer 11.15 Ms. Martha Keeley 11.30 Ms. Chris O'Brien 11.45 Dr. Aoife O'Sullivan 12.00 Ms. Pat Duffy 12.15 12.30 Ms. Cathy Barry 12.45 Dr. Aideen Hurley
13.00 – 14.00	Working private lunch for members of Peer Review Group
14.00 – 14.30	Visit to core facilities of Student Health, escorted by Dr. Michael Byrne, Head
14.30 – 15.00	<u>Meeting with clients</u> - reviewers to walk through reception area of Student Health and speak with clients on an <i>ad hoc</i> basis.
15.00 – 15.30	<u>Student Representatives</u> <ul style="list-style-type: none"> • Mr. Kris McElhinney (President, Students Union) • Mr. Diarmuid Angland (Education Officer, Students Union) • Mr. Aidan Healy (Welfare Officer, Students Union) • Ms. Sinead Bannon • Ms. Susan Spillane • Ms. Michelle Cremin
15.30 – 16.00	<u>UCC Staff Representatives</u> <ul style="list-style-type: none"> • Dr. Pádraig Whelan, Department of Zoology, Ecology and Plant Science (<i>via telephone call</i>) • Mr. Michael Hanna, Faculty Manager, Faculty of Medicine & Health • Fr. Joe Coghlan, Head, Chaplaincy • Ms. Mary Moloney, Director of Nursing, Dental School & Hospital
16.30 – 17.00	Mr. Con O'Brien, Vice-President for Student Experience
19.00	Meeting of Peer Review Group to identify remaining aspects to be clarified and to finalise tasks for the following day, followed by a working private dinner.
Wednesday 20 February 2008	
Venue: Room 231, O'Rahilly Building	
08.30 – 09.00	Convening of Peer Review Group
09.00 – 09.30	Professor Paul Giller, Registrar & Senior Vice-President
09.30 – 10.15	<u>Heads of Colleges</u> Professor David Cox, Head of College of Arts, Celtic Studies and Social Sciences

	<p>Professor Robert McConnell, Acting Head, College of Medicine & Health Professor Patrick Fitzpatrick, Head, College of Science, Engineering & Food Science Dr Edward Shinnick, representing Professor Denis Lucey, Acting Head, College of Business & Law</p>
10.15 – 11.00	<p><u>Staff of UCC</u> Mr. John Ring, Health & Safety Officer, UCC Ms. Christine O'Donovan, Head, Physical Education & Sport, UCC Ms. Marita Foster, International Education Officer, UCC</p>
11.15 – 11.30	<p>Ms. Carmel Cotter, Finance Office</p>
11.30 – 12.00	<p><u>Heads of Cognate Units</u> Mr. Paul Moriarty, Head, Student Counselling Ms. Mary O'Grady, Head, Disability Service</p>
12.00 – 12.20	<p>Dr. Rónán O'Dubhghaill, Director of Institutional Research</p>
12.20 – 12.40	<p>Dr. Maeve Lankford, Training and Development Manager</p>
12.40 – 13.10	<p>Dr. Michael Byrne, Head</p>
13.10 – 14.00	<p>Working lunch</p>
14.00 – 17.00	<p>Preparation of first draft of final report</p>
17.00 – 17.30	<p>Exit presentation made by Dr. D. McGrath to all staff of Department of Student Health, summarising the principal findings of the Peer Review Group.</p>
19.00	<p>Working private dinner for members of the Peer Review Group to complete drafting of report and finalise arrangements for completion and submission of final report.</p>