



REPORT

From the office of the...

University Affairs Committee (AVP University Affairs)

TO: Members of the Student Representative Assembly
FROM: David Lee, AVP University Affairs
SUBJECT: Health Services Review Report
DATE: January 30 2018

Members of the Assembly,

This year, the UA committee has worked with SHEC to collaborate on a review of the health services offered at McMaster. The following document outlines our findings of the Health Services Review which ran from October 23 – November 10. Working on this project has provided great insight into the current landscape of healthcare at McMaster and it is my hope that it will inform meaningful changes moving forward. This data is incorporated into the Health and Wellness Policy paper. This review was made possible due to the efforts of the Education Team Research Assistant, Emily Nichol.

Suggested citation for this report:

Lee David, Nichol Emily. University Affairs Report: Health Services Review. (Hamilton: McMaster Students Union, 2018.)

Please let me know if you have any questions about the results.

Cheers,

David

Health Services Review

Report

INTRODUCTION

The McMaster Students Union (MSU) recognizes health as an important aspect of student life, contributing to overall academic success. When conducting advocacy efforts regarding student health, the MSU strongly believes in having voices of the student body heard, and reflected in relevant policy recommendations. To inform the MSU Health and Wellness Policy Paper completed in 2017, the Health Services Review was developed to gain student feedback on common health-related issues facing students as well as to gauge student satisfaction with services provided by McMaster University and the broader community. By asking questions pertaining to wait times, services offered (and not offered), referrals, and staff competence, the survey was able to provide valuable information regarding areas of strength as well as areas to consider for healthcare at McMaster.

DEMOGRAPHIC INFORMATION

Demographic information is important for any survey in order to understand the study sample and draw conclusions regarding certain demographics. Notably, in *Figure 1* it can be seen that 83% of survey respondents identified themselves as female, perhaps indicating trends in health habits and help-seeking attitudes and behaviour in which men are historically socialized to be independent and manage health concerns without external assistance.¹ In contrast, it is more accepting for women to seek out services/providers to improve their health.² This data highlights a need for strategies to be implemented which encourage men to be more involved with health services at McMaster, taking a pro-active stance on illness prevention. Additionally, 2% of respondents identified themselves as non-binary, and another 2% of respondents associated themselves with being transgender according to *Figure 2*.

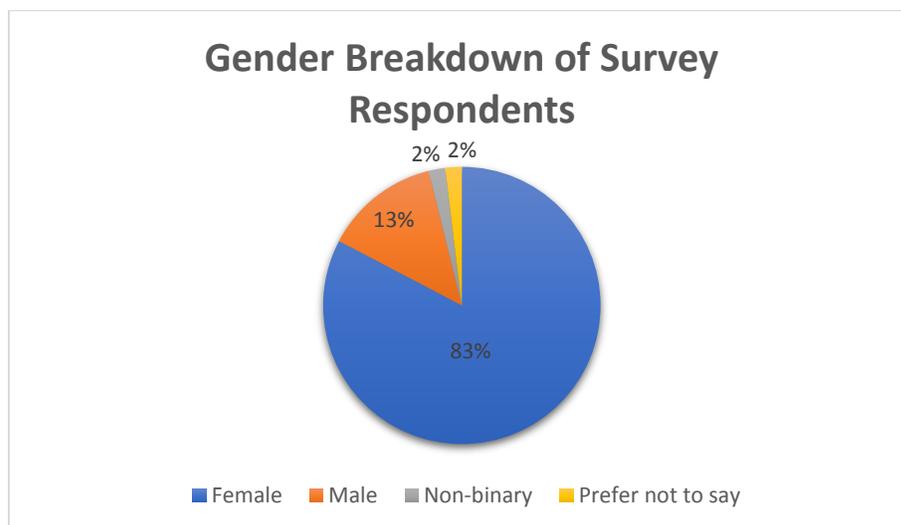


Figure 1: Gender Breakdown of Survey Respondents

¹ World Health Organization. "Gender and mental health." (2002).

² Ibid.

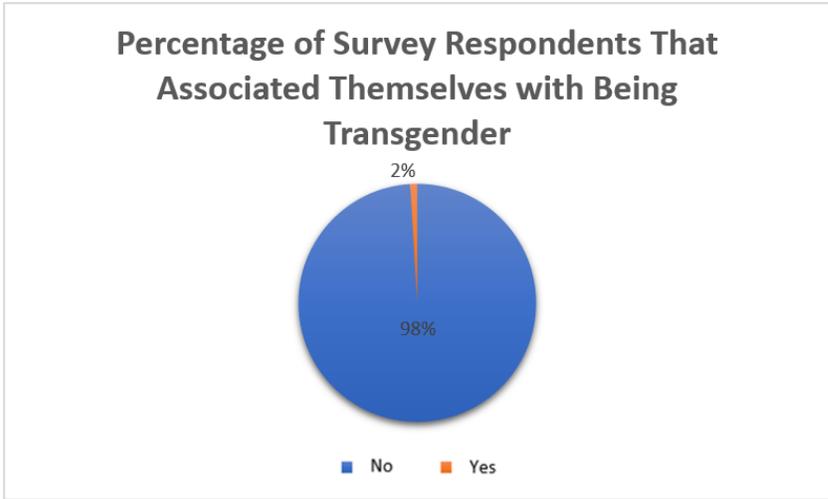


Figure 2: Survey Respondents That Associated Themselves with Being Transgender

The next two questions sought to identify faculty and year of study. Regarding faculty, most respondents were from Science, Health Science, and Social Science disciplines. According to Figure 4, 33% of respondents were in fourth year followed by 30% in second year. Only 4% of respondents were in first year, which could perhaps reflect limited access to the survey in which first years have not yet been exposed to or become acquainted with the social media platforms from which the survey was distributed. Alternatively, lack of responses from first years could be due to the fact that many have yet to visit the Student Wellness Centre (SWC) as the survey would have been administered in early November, just half-way through their first term.

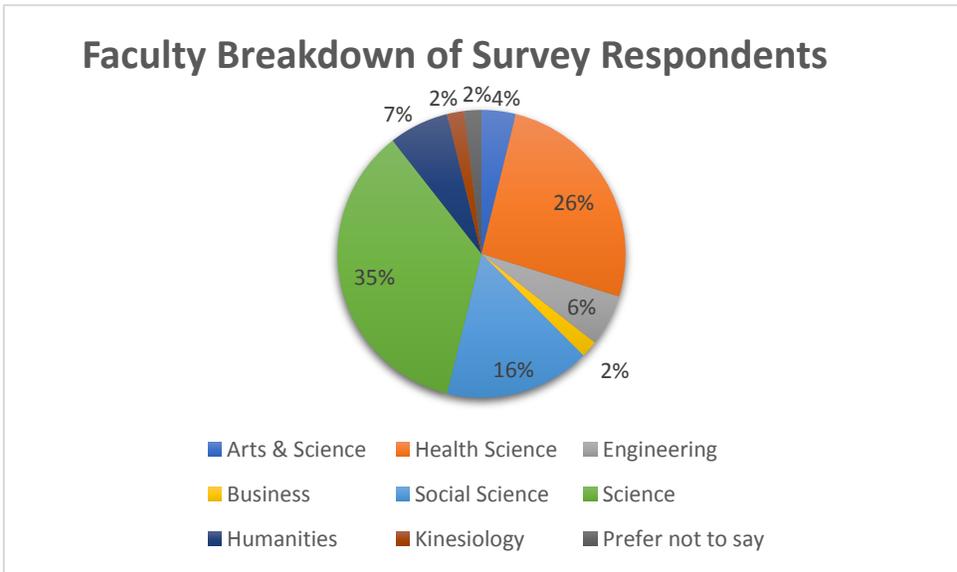


Figure 3: Faculty Breakdown of Survey Respondents

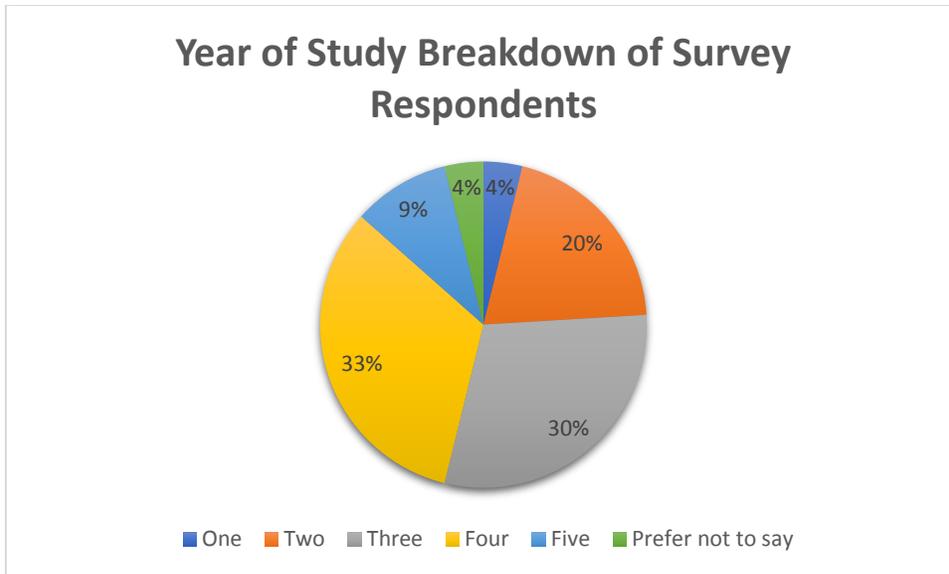


Figure 4: Year of Study Breakdown of Survey Respondents

SWC APPOINTMENTS

Timely access to health services is an important indicator of quality care. Since the SWC is the primary point of access for student-related health concerns, questions regarding wait times are important to judge efficiency. Generally, students only waited 3 days – 1 week to see a doctor (40%), and 35% of students were able to have an appointment within 2 days.

Appointment Wait Time	Number	Percentage
Same day	17	16%
1-2 days	20	19%
3 days – 1 week	42	40%
1-2 weeks	9	9%
More than 2 weeks	3	3%
I have never been to the SWC	13	13%

Table 1: Wait Time to Get an Appointment to See a Doctor at the SWC

Once an appointment had been made, *Table 2* demonstrates that 52% of students who had been to the SWC waited less than 10 minutes for an appointment, and 41% waited between 10-30 minutes. Only 7% of students waited more than 30 minutes, indicating that the SWC efficiently transitions between patients.

Check-In Wait Time	Number	Percentage
10 minutes or less	47	45%
Between 10-30 minutes	37	36%
Between 30-45 minutes	4	4%
Between 45-60 minutes	1	1%
More than 60 minutes	1	1%
I have never been to the SWC	14	13%

Table 2: Wait Time to See a Doctor Upon Check-In at the SWC

The following question was asked out of an interest in knowing whether current opening hours for the SWC are adequate. Currently, the SWC operates Monday to Thursday from 8:45am – 7:45pm, and Friday from 8:45am – 4:30pm. 36% of students responded that they had attempted to access the SWC during a time when it was closed, which may indicate the need for weekend hours and extended evening hours.

Attempted Access	Number	Percentage
Yes	37	36%
No	57	55%
I have never been to the SWC	10	10%

Table 3: Respondents Who Attempted to Physically Access the SWC at Times When It Was Closed

BLOOD TESTING

The SWC currently does not offer blood testing, though the responses to the following questions demonstrate that it is a common service for students. 52% of respondents who had been to the SWC had been advised by SWC practitioners to have blood testing; though, troublingly, 48% of those who received a recommendation did not complete the blood test. This section contained the option to elaborate, and most students specified checking iron levels, sexual health testing, and thyroid testing as their reason for needing blood work. Given these concerns, it is problematic that nearly half of respondents opted not to visit an off-campus provider, despite the potential health benefits that could be derived from receiving valuable information through blood testing.

Blood Testing Recommendation	Number	Percentage
Yes	49	47%
No	45	43%
I have never been to the SWC	10	10%

Table 4: Breakdown of Respondents Who Had Been Advised by the SWC to Have a Blood Test Conducted

Blood Testing Completion	Number	Percentage
Yes	47	52%
No	43	48%

Table 5: Percentage of Respondents Who Received Recommended Blood Test

REFERRALS

Integration with off-campus health and wellness services is important when the SWC is overwhelmed with patients and to supplement services that are not provided by the SWC. To gain a sense of students' experiences with the referral process and inform recommendations for better collaboration with off-campus providers, the following question was asked to know the prevalence of referrals and ease of access. Findings demonstrated that 49% of students who had been to the SWC have been referred to an off-campus service/provider, though 13% had difficulty navigating the system. To better understand concerns, this question included space for students to provide further details. Most notably, students not familiar with the area expressed

difficulty finding the location of the referral, or felt as though it was too far away to get to without a car, thereby reducing access. Other students felt confusion as to who the main point of contact would be in the future once a referral had been made (either the SWC or the off-campus service/provider). Such data demonstrates the need for SWC staff to provide students with the necessary information regarding transportation to reduce barriers to accessing care, which could perhaps also help students who choose to forgo bloodwork despite receiving a recommendation from their doctor at the SWC.

Referrals	Number	Percentage
Yes, and I easily understood the process	32	31%
Yes, found the process was difficult	12	12%
I have been to the SWC, but have never been referred to an off-campus health service/provider	46	44%
I have never been to the SWC	14	13%

Table 6: Referrals to an Off-Campus Health Service/Provider by the SWC

COUNSELLING

Counselling is a point of contention that the MSU has been concerned with since the rise of mental health issues has become apparent on campus in recent years. Questions regarding wait times and satisfaction with campus counselors are an important starting point for assessing issues regarding McMaster mental health services. While 54% of survey respondents had sought counseling services, 54% of those individuals expressed dissatisfaction. This section contained the option to elaborate, and several students voiced their concerns in detail. A common trend found wait times to be a major health care barrier making the process of seeking help a discouraging one, which can be reflected in *Table 8*, which shows that 63% of students seeking counselling experienced a wait time. Another common complaint involved lack of sensitivity among staff when expressing personal struggles.

Counselling Satisfaction	Number	Percentage
Yes; satisfied	21	20%
Yes; unsatisfied	30	29%
No; waiting to see a counselor	5	5%
No; have not sought counseling	48	46%

Table 7: Breakdown of Respondents Who Had Sought/Received Counselling and Their Overall Satisfaction

The second question regarding counseling was asked to evaluate wait times for counselling compared to other SWC services. While students had timely access to a doctor as noted above in *Table 1*, 63% experienced a wait time to see a counsellor. The process of seeking counselling – particularly for the first time – can be a daunting experience, and having to wait for an

appointment may further discourage students from reaching out, especially if they require immediate consultation. One student summed up their grievances, stating:

“I could get in about once a month, and it was often cancelled, once twice in a row so that I couldn't see them between November and February (i.e. during the stressful end of term, stressful exams, middle of winter, beginning of the next term, etc.). Also, I couldn't see anyone often enough there to do actual therapy other than talk therapy, which was only so helpful. I rarely have an appointment when I actually need it so I stopped going since I don't find it very helpful anymore.”

Such information indicates the need for a greater number of counsellors to be hired at the SWC to reflect student demand. Peak times as mentioned by the student above, including winter months in which Seasonal Affective Disorder (SAD) tends to evoke higher rates of depression,³ exam season, and transitioning into a new term call for greater support for students at the SWC.

Counseling Wait Time	Number	Percentage
Yes	66	63%
No	38	37%

Table 8: Wait Time Experienced by Students Seeking Counseling at the SWC

EQUITY

Further demographic information was asked to know the proportion of equity-seeking individuals utilizing health-care services at McMaster. It is important to note that for this question, students had the ability to check all that apply. 44% of respondents identified themselves as living with a mental illness, demonstrating the need for attention towards mental health services at McMaster. Given complaints mentioned above regarding counselling dissatisfaction, there is room for improvement here as a highly requested service. Diverse demographics and a high volume of students identifying with various equity-seeking groups indicates the need for diverse care models and sensitive practitioners.

Equity-Seeking Groups	Number	Percentage
Mental illness	46	44%
LGBTQ+	24	23%
Religious minority	17	16%
Racialized	24	23%
Physical disability	5	5%
Other	1	1%
Prefer not to say	7	7%
Not applicable	28	27%

Table 9: Breakdown of Respondents Who Identified with One of the Following Equity-Seeking Groups

STAFF

The following questions were asked to attain student feedback on the quality of care given by SWC staff. Such information is important to improve students' experiences and reduce potential

³ Lurie, Stephen J., Barbara Gawinski, Deborah Pierce, and Sally J. Rousseau. "Seasonal affective disorder." *American family physician* 74, no. 9 (2006).

additional stress associated with seeking help for mental health concerns. Of those who had visited the SWC for mental health purposes, 56% felt staff were well trained or very well trained, 24% felt staff were adequately trained, and 21% rated staff as below or well below their expectations. While it is positive that over half of students are satisfied with the mental health care they have received, as an institution recognized for prestigious health programs, McMaster should hold high standards for SWC staff who provide care to students, and consider implementing more rigorous mental health training as mental illness is a common concern for students.

SWC Staff Rating: Mental Health	Number	Percentage
Very well trained	15	14%
Well trained	23	22%
Adequately trained	16	15%
Below expectations	10	10%
Well below expectations	4	4%
Not applicable	36	35%

Table 10: SWC Staff Rating in Regard to Mental Health Services

Regarding provision of prescription medication, of those for whom the question applied, 64% of respondents felt staff were well trained or very well trained, and 22% felt that staff were adequately trained. 15% felt staff were not adequately trained, though further research would need to be conducted to determine reasoning for this.

SWC Staff Rating: Provision of Prescription Medication	Number	Percentage
Very well trained	32	31%
Well trained	15	14%
Adequately trained	16	15%
Below expectations	7	7%
Well below expectations	4	4%
Not applicable	30	29%

Table 11: SWC Staff Rating in Regard to Provision of Prescription Medication

CONCLUSION

Health and wellness is an important student issue greatly impacting academic success. The MSU is concerned with bettering student health services in accordance with the Health and Wellness Policy Paper which incorporates updated recommendations for improved health promotion, services, on-and-off campus integration, academic accommodations, and government legislation. Feedback from this survey has been paramount in having the diverse needs of the student body reflected in the MSU's advocacy efforts.

For health care to be of high quality, it must be safe, effective, efficient, equitable, and person-centred, and ultimately improve patient outcomes.⁴ Notably, the Health Services Review yielded positive results regarding wait times for students seeking medical attention from a doctor, demonstrating efficiency. Though, more than 1/3 of respondents had attempted to access the SWC when it was not open. More concerning, nearly half of students who had been advised to get a blood test neglected to do so, which could perhaps be attributed to lack of access given that when asked about referrals, students mentioned difficulty navigating off-campus services as some locations are confusing to find or inaccessible without a car. The most pressing concern for students identified in the survey pertains to mental health care and satisfaction with counselling services. Wait times act as the greatest barrier for students receiving adequate care, followed by insufficient training for staff resulting in reduced satisfaction for patients seeking help during trying times. Conversely, students appeared satisfied with doctor's provision of prescription medication.

Given these results, there are several areas of improvement to be addressed. As mental health concerns are prevalent, greater attention should be paid to the type of care the SWC offers students. The value of individual counselling is diminished when students must wait weeks for an appointment during times of heightened stress. Increased staff with greater levels of training including the benefits of cultural sensitivity and person-centred care in addition to specialised support for students facing unique and complex issues could better support student needs in this regard. Further, greater financial support for peer support services and enhanced integration with off-campus services could help to alleviate barriers caused by inability to access care.

Overall, data from the Health Services Review provides valuable insight into McMaster health care and the health of the university's students, providing benchmarks for where we currently are and guidelines for where we need to go to better the health and wellness of McMaster students. The MSU recognizes the many social determinants of health that result in varying health outcomes, and intends to reduce health inequities based on the information received from this survey through implementation of the Health and Wellness Policy Paper.

⁴ World Health Organization. "What is quality of care and why is it important?" (n.d.).