





Framework for a Comprehensive College Health Program

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Preface

As the seventh edition of the (now out of print) ACHA *Guidelines for a College Health Program*, this revised and renamed *Framework for a Comprehensive College Health Program* reflects the changes in the field of college health since the 1999 release date of the sixth edition.

This *Framework* is adaptable to a wide range of campuses and college health programs and is intended to serve as a companion document to ACHA's other publications, recommended practices, white papers, and position statements.

While the framework is universal, the manner in which an institution applies the elements, concepts, and services will depend upon each institution's resources, campus population, health needs, and existing community resources.

Introduction

Of the approximately 4,900 institutions of higher learning in the United States and its territories, nearly 2,000 offer on-campus medical and mental health services, and health promotion for students. By providing these services, institutions are making a major investment in the health of students.

College health programs are delivered through a wide variety of approaches. Programs range from providing nursing services only to having separate medical, health promotion, and mental health services to providing a full array of onsite integrated primary care, mental health, nutrition, laboratory, radiology, pharmacy, and health promotion programs. Some universities offer specialized services tailored to the student market, including travel, dentistry, optometry, physical therapy, and massage therapy. Others offer services for students, faculty, and staff in a unified comprehensive facility.

Many of the same services offered by a college health program are available in the surrounding community. The question becomes why colleges and universities invest in college health programs when many might argue such programs are not central to the mission of learning. The answer cannot be overemphasized when discussing the role of college health: college health plays a critical role in the retention, progression, and graduation of students by providing access to and/or coordination of quality, affordable, convenient health and wellness services and programs delivered by professionals who are attuned to the unique stressors and needs of college students.

A local urgent care provider can accurately diagnose a student acutely ill with influenza and prescribe appropriate medication. However, the college health physician or advanced practice clinician also addresses the impact of influenza on the student's class attendance and studies roommates, and sports participation, including intercollegiate athletic competition. A community psychiatrist can diagnose depression, assess suicidality, and prescribe appropriate medication. The college mental health professional also understands the myriad of ways in which stress, depression, anxiety, and sleep dysfunction can scuttle a promising academic career, while also considering the success and safety of the roommate, classmates, and the campus community. The college health professional blends an understanding of the needs of the individual student with the needs, objectives, and challenges of a specific campus community in a way that other providers cannot replicate.

Role of College Health

A college or university can **offer** a comprehensive college health **program** without **being** a comprehensive college health **service**. It is not always appropriate or possible for all needed services to be rendered by the college health service.

However, it is the role of the college health program to facilitate access to needed services. External resources can be leveraged in a carefully structured program and coordinated with the primary services provided by the institution. Under this mixed service delivery system, it is the role of the college health program to maximize the quality, affordability, and availability of essential health services.

The American College Health Association (ACHA) supports the following universal principles for a comprehensive college health program, regardless of the program's size or scope of services.

A comprehensive college health program:

- provides or facilitates access to a wide spectrum of services, which support the health of the individual student and the campus community in its broadest sense. The program has a commitment to integrating prevention, health promotion, and public health with medical and mental health care.
- is actively involved in the diverse communities on campus and ensures all students have convenient and equal access to timely, high quality, affordable services regardless of age; gender identity, including transgender; marital status; physical size; psychological/physical/learning disability; race/ethnicity; religious; spiritual or cultural identity; sex; sexual orientation; socioeconomic status; or veteran status.
- is the principle advocate for a healthy campus community. This may be realized by having the college health program leading the discussion and the development of health-promoting environments and health practices and policies on issues such as public safety; infection control; and prevention of high-risk alcohol use and other drug abuse, tobacco use, sexually transmitted illness, interpersonal violence, sexual assault and harassment, suicide, and discrimination of all types.

- provides high quality services and participates in assessment and quality improvement. For many programs, quality is demonstrated and maintained by compliance with national accreditation standards.
- educates students on navigating the health care system and aids with the transition from parent-guided care to self-care.
- provides students a significant voice in advising on the breadth and depth of the program's mission, goals, services, and programmatic evaluation.
- engages in issues related to the health, academic success, and retention of international students
- demonstrates that its services are delivered efficiently and effectively. This implies not only efforts to benchmark service, but also efforts to measure the impact of specific services on the health of the community and on the academic goals of the institution.
- requires that all staff maintain professional competencies, work within their scope of practice, and adhere to codes of professional practice and ethical principles including dignity, respect, student confidentiality, privacy, and informed consent.
- collaborates with community and campus partners to create a network of care and to leverage resources. Campus partners may include but are not limited to disability services, athletics, recreational sports, housing, and academic departments.
- provides expertise on health matters to the campus. This may be actualized in the college health program's role as the lead campus public health agent or as a member of a behavioral assessment team or institutional review board.
- provides educational and training opportunities to students by contributing to academic curricula; offering clinical rotations, volunteer leadership positions, or employment; and sponsoring peer health education or other groups.

The remainder of this document is organized into two sections:

- 1. Care and Services
- 2. Administration and Management

Each section describes recommended practices, activities, or essential elements for consideration when planning a comprehensive college health program.

Care and Services

Team-Based Collaborative Care

Team-based collaborative care is essential for delivering high quality, accessible, coordinated care. The core principles of team-based care include:

- interdisciplinary care (such as primary care, mental health, pharmacy, nursing, social work, nutrition, and health promotion)
- a student-centered holistic approach
- effective communication and intentional planning between all team members to facilitate coordinated care

Team-based collaborative care fosters a health care partnership that should facilitate access, continuity of care, communication, and adherence and ultimately optimize health outcomes for the student. The student is an integral member of the team, and the student's priorities must be respected and included in decisions affecting care, treatment, or health goals.

Medical Services

Medical services are central to a comprehensive college health program. The college health center may be the student's initial point of entry when seeking health care.

Primary care services are typically provided by physicians, advanced practice providers (such as physician assistants, nurse practitioners, or clinical nurse specialists) and nurses. If a physician is not on site, the college health program should have a written collaborative agreement with a physician for consultation and referral.

Primary care medical services include:

- basic first aid
- evaluation and treatment of acute and chronic illness and injuries
- triage capability to determine the appropriate level of care with the ability to refer for specialty consultation or to a higher level of care
- disease prevention, health maintenance, and patient education
- reproductive health care
- basic life support (BLS) capability, including the use of an automated external defibrillator

These medical services must align with the institutional mission and must meet the unique needs of the campus demographics.

Mental Health Services

Access to mental health services is critical for college students. Core services consist of:

- assessment, diagnosis, and treatment of problems common to the collegiate population, such as stress, anxiety, depression, trauma and posttraumatic reactions, sleep disruption, high risk alcohol use, abuse of substances, and difficulty with interpersonal relationships
- a triage/urgent care system for quick assessment of students who present at time of crisis
- capability to assess, manage, and follow up on after-hours mental health emergencies

Staff typically consists of mental health generalists and may include providers with particular areas of expertise in issues faced by students, such as sexual assault trauma, alcohol and other drug use, or eating disorders. Team-based collaboration with other partners in the provision of campus outreach, such as mental health promotion, education, mental health screenings, and postventions, is necessary for a comprehensive mental health service.

If the campus cannot provide a comprehensive mental health service or cannot meet the demand for such services on campus, the college health program should develop and maintain a referral network of community mental health care providers and hospitals. The college health program should clearly define its scope of services and utilize those established community networks to transition students whose needs are beyond the scope of on-campus mental health services.

Health Promotion

Student success at a college or university is enhanced by health promotion and disease prevention. The existence of health promotion programs is vital to a comprehensive college health program and must be prioritized equally with clinical and operational areas when space or resources are being determined.

Health promotion assesses priority health issues and monitors campus trends in health and health behavior over time. Health promotion professionals serve as leaders in building community capacity for healthier environments. They ensure that programs, systems, and processes are in place to support behaviors known to improve academic performance.

The practice of health promotion in higher education is founded in a prevention framework and guided by the ACHA *Standards of Practice for Health Promotion in Higher Education* (SPHPHE).¹

Institutions should also reference the Counsel for the Advancement of Standards in Higher Education (CAS) *Professional Standards for Higher Education*² and the International Okanagan Charter³ when planning, implementing, and evaluating health promotion offices and programs.

Ancillary Services

Essential ancillary services include diagnostic services, such as lab and radiology, and therapeutic services, such as pharmacy. If these services are not within the college health program's clinical scope of services, they should at least be readily accessible through coordination with community or university health system providers. Every

¹ The third edition serves as a guideline for the assessment and quality assurance of health promotion in higher education. See www.acha.org/Guidelines.

² CAS has developed 45 sets of functional area standards for higher education programs and services. The CAS *Professional Standards for Higher Education* book (August 2015, 9th edition) includes general standards for practice and functional area standards. See www.cas.edu/standards.

³ The Okanagan Charter, the outcome of the 2015 International Conference on Health Promoting Universities and Colleges, serves as a call to action for institutions of higher education to create healthier campuses and healthier communities. See www.acha.org/documents/general/Okanagan_Charter_Oct_6_2015.pdf.

linkage made by the college health program is a pathway to care that a student does not have to navigate alone when they are not well.

Access to After-Hours Care and Emergency Services

College health programs should provide guidance for access to after-hours care. A reliable mechanism of after-hours triage advice can be provided through:

- on-call university physicians, advanced practice providers, counselors, and/or nurses
- contracted after-hours medical and/or mental health advice services
- local university medical school/hospital partnerships

Information on accessing after-hours services and directory information for local emergency services and urgent care centers should be accessible through multiple sources (e.g., website, campus information desks, safety and security personnel, and residence hall staff).

Access to medical transport in emergencies is essential. Some college health programs include a campus-based emergency medical service. These programs augment a college health service's role in improving the health and safety of the campus community. Often comprised of trained student volunteers and frequently student-led, these emergency medical services range from early response and evaluation to full advanced life support capability. When emergency transport is community- or hospital-based, the college health center should establish collaborative agreements outlining each party's obligations and responsibilities.

Public Health and Safety

The openness of campuses, ease of international travel, increases in numbers of international students, resurgence of vaccine-preventable diseases, increase in gun violence, and the rise of students coming to college with preexisting mental health problems have shaped the public health and safety infrastructure and response on campuses today. College health programs serve as the lead campus agency for public health monitoring and intervention strategies for students and are often responsible for many or all of the following:

- coordination between local health authorities and campus administration
- education and promotion of health behaviors
- interpersonal violence prevention
- alcohol and substance misuse and abuse prevention
- infectious disease prevention, surveillance, control, and response
- state and/or college immunization requirement compliance
- emergency preparedness planning and disaster drill participation
- campus health and safety policy development
- health screening, evaluation, and medical clearance for research or selected academic programs

The role of college health professionals and programs in protecting the health of the campus cannot be understated. As part of a larger community health system, college health programs are pivotal in identifying the health and safety issues on campus, partnering with organizations and campus entities, and if needed, mounting or supporting an institutional response.

Specialty Services

The scope of specialty medical offerings in college health are as varied as the programs themselves and include dental, dermatology, sports medicine, travel medicine, physical therapy, vision care, nutrition services, employee and occupational health, and others. Like primary medical services, specialty offerings should be consistent with the mission and the needs of the campus. Availability within the community, projected patient volume, facility, and other resource requirements are just some considerations before initiating specialty services.⁴

Health Screening

Conducting age-specific screenings for potential health and mental health issues, such as stress, depression, alcohol abuse, tobacco use, obesity, high risk sexual behaviors, and eating disorders can be an effective way to engage students in becoming advocates of their own health and wellness. There is a significant benefit to intervening

⁴ In-patient or overnight services have become cost prohibitive for many college health programs but are still available on some campuses. Serving as an intermediate step before hospitalization, in-patient services are typically staffed by nurses, with physicians or advanced practice clinicians on call. College health programs with overnight services should have a clear scope of services and appropriate guidelines and policies outlining staff competencies, staffing levels, follow-up care, and transfer to a higher level of care.

in high-risk behaviors and mental health issues before they interfere with a student's ability to continue in school. Screenings may occur within the college health program service areas during campus awareness events or in other campus venues where college health staff interact with students.

Confidentiality

Confidentiality is foundational in the provision of college health and mental health care. College health employees, including staff, volunteers, and student learners, must preserve and protect the health information entrusted to them. Otherwise, students will lose confidence in the program and be less likely to openly discuss health concerns or even to seek care.

The college health service should have a readily available document for students and staff that contains information about confidentiality and its limits as delineated in the Health Insurance Portability and Accountability Act (HIPAA), Family Educational Rights and Privacy Act (FERPA), and applicable state standards. This document should address when medical or mental health information is shared internally or externally and the exceptions that will result in a breach of privacy when necessary to maintain the health and safety of the student and the community.

Students or their guardians should acknowledge this document prior to care if clinically feasible. Health services staff and university leadership should be regularly trained on the HIPAA and FERPA requirements and rules and their application to the specific college health program and campus.

Administration and Management

Leadership

College health programs require astute leaders to navigate the disparate worlds of health care and higher education. Current sociological trends, public health issues, health care finance reform, and advances in medicine have broad institutional implications. College health leaders are uniquely qualified to help institutions meet these emerging challenges while tending to the health of students. Leadership must be able to secure stable funding and provide guidance to mitigate the inevitable legal and risk management issues that arise in the provision and promotion of health care.

College health leadership should have expertise in:

- optimizing the scope of services based upon ongoing assessment of student needs
- managing budgets, personnel, and clinic operations in a health care setting
- leading teams of interdisciplinary professionals
- navigating university and local political arenas
- developing and supporting health policy initiatives
- overseeing risk management and performance improvement

College health leadership should report to senior university officials who can most effectively allocate resources and advocate for student health and wellness needs.

Funding

College health programs have widely varying funding models. Any funding model can succeed when the college health leadership understands how the revenue model supports the delivery of care and is able to effectively translate that understanding to patients, clients, families, university leadership, and other stakeholders. Common funding models include:

- full support of services through student health fees
- allocation of a portion of the university budget to health services
- collaboration with for-profit health businesses who bill students and insurers for their services
- grants or private financial support
- direct insurance billing to the student's college health insurance plan or other third party insurance plan
- additional fees for specialty services such as dentistry, optometry, or physical therapy
- a combination of any of all of the above

Understanding the funding model's impact on clinical and programmatic decision making is vital in building a sustainable system of care that fully supports the mission of the college health program.

Oualified Work Force

Qualified professional providers and staff are essential to provide quality care and meet the clinical, regulatory, and administrative challenges of the rapidly changing health care and higher education environment. State laws and regulations define the professional qualifications, the scope of practice, and ethical guidelines for individual disciplines.

Qualified providers maintain a professional license from the state where they practice. Qualified health care professionals must also maintain appropriate certifications, demonstrate competency to perform job responsibilities, and provide evidence of ongoing training and education. At a minimum, college health programs should support, to the extent possible, the continuing education of staff to meet the licensing, certification, and credentialing requirements needed to provide care and services.

Cultural Competence

The American College Health Association "supports all initiatives to create a healthy campus climate guided by the values of cultural inclusion, respect, equality, and equity. Such a climate is essential to college health."⁵

Building a culturally competent health program requires attention to health inequities and disparities and a process to improve equity, commitment, and staff education and training. Improving the delivery of health care, services, and programs to students with various identities reduces health disparities, improves access, optimizes health outcomes, and improves student retention. Offering this type of care requires all health care staff to create a "brave space" for conversations about how multiple identities related to age, visible and invisible disabilities, religion/spirituality, ethnic identity, socioeconomic status, sexual orientation, national identity, and gender identity impact the process of care. This requires a willingness on the part of all health care professionals to cultivate a cultural consciousness through humility and respect.

Advocacy

College health programs serve as the primary advocates for access to high quality, affordable health care for all student populations. This advocacy involves maintaining an acute awareness of health disparities within the campus community. ACHA recognizes that denial of civil rights or impingement upon those rights can contribute to diminished health outcomes and quality of life. Therefore, addressing issues of social justice, human dignity, respect for all, and health inequities should be the vanguard of a college health program's advocacy agenda.

Advocacy can also take place beyond the campus, at community and national levels. ACHA identifies national advocacy issues and posts resources and updates on its website at www.acha.org/Advocacy.

Marketing

Unique to the higher education environment, the target population of a college health program turns over by approximately 25% every year when students graduate and new students enter. Consequently, college health programs must continuously market their programs and services. College health programs should employ traditional marketing and communications strategies, such as identifying and segmenting the target audiences, maintaining a strong brand identity, conducting audience opinion research, and developing and evaluating key messages.

Strategic communications should increase students' awareness of and access to the scope of services offered. To maximize opportunities for message exposure, the program must develop a strong print and digital presence, maintain a highly visible website, and leverage social media engagement and emerging technologies.

Marketing goals should extend beyond awareness of services and include moving consumers along the continuum from awareness to engaging care to being vocal advocates for college health programs.

It is important to distinguish the marketing and communications function from health promotion services. Marketing medical and mental health services is not exclusively the role or responsibility of a health promotion program, but the role of every college health professional. While health promotion programs may utilize health communication strategies, their goal is generally to teach the individual or population to make decisions that enhance health, not to market programs and services. If a college health service does not have resources for dedicated marketing or communications staff, division and campus communication departments should be utilized.

Student Involvement

College health programs should seek student input and collaboration when making decisions that impact their health care and services. Student health advisory committees/boards serve as liaisons between the student body and the health service, representing one formal way to

⁵ ACHA Non-Discrimination Policy, adopted by the ACHA Board of Directors on May 30, 2000 and revised by the ACHA Board of Directors on June 7, 2008. See www.acha.org/ACHA/About/Position Statements/ACHA/About/Position Statements.aspx.

ensure student input is considered. College health programs should also consult with student leaders, forming a mutually beneficial partnership where students may expect to be heard and to have influence on their college health system.

College health programs also play a valuable role in student development by offering opportunities for involvement in volunteer leadership, experiential learning, and training or shadowing programs for future health professionals or as peer health educators or student employees. These students participate in planning and implementing programs and, in some institutions, participate in the delivery of health care. These experiences expose students to different career options, provide skill building opportunities, and prepare them for future professional leadership roles.

Facilities

The health program's facility (or facilities) creates the first impression of the overall quality of care. The facility must support effective communication and collaboration and efficient care and service delivery. Common features of a well-organized and constructed college health facility include but are not limited to the following:

- spaces that are welcoming and inviting but also ensure patient and client safety, security, privacy, and confidentiality
- adequate registration space to facilitate communication and preserve privacy
- silent alarms at front desks or other strategic locations to call campus police
- adequate office space for professional staff, including clinicians, mental health providers, administrators, health promotion and information technology employees
- large primary waiting area with sub-waiting areas strategically located to facilitate patient flow
- sound attenuation (e.g., added insulation, sound baffles, white noise machines, carpet in hallways) for patient confidentiality
- wide hallways to accommodate patient volume
- multifunctional space for conferences, meetings, trainings, or instructional purposes, ideally large enough to seat all employees
- adequate data connections, wireless access points,

- and hardware to accommodate the relevant volume of data
- closet/workroom adequately sized for creating and storing health promotion materials, supplies, resources, and giveaways
- custodial closets

Features specific to a medical facility may also include:

- triage rooms near the reception area to minimize movement throughout the facility, expedite transfer into a private space, and initiate the care process
- a minimum of two examination rooms assigned to each medical clinician, preferably in close proximity to the clinician's assigned office
- exam rooms with curtains or changing spaces to provide privacy for disrobed health exams
- nurse station(s) strategically positioned to efficiently manage patient flow throughout the clinic with close proximity and good sight lines to treatment and procedure rooms
- co-located lab and radiology that share a waiting area and reception desk
- a lab located adjacent to exam areas to provide convenient pass-through window options for specimen collection
- separate clean room(s) and soiled utility room(s)

Student Health Insurance Coverage

ACHA encourages institutions to require students to provide evidence of health insurance and to establish an appropriate, credible student health insurance program. The 2010 Affordable Care Act (ACA) brought new federal requirements (see www.hhs.gov/healthcare/about-the-law/index.html) with which student health plans must comply, including the elimination of preexisting condition exclusions and annual caps on coverage. Inclusion of coverage for preventive care with no out-of-pocket expense for the insured individual and the ability to remain on a parent's insurance plan until age 26 were significant gains for the college population.

Students enrolled in an institution's sponsored health plan rely on the plan as their primary source of health coverage. ACHA's guidelines *Standards for Health Insurance Coverage* (May 2013), including recommendations for an adequate and appropriate scope of coverage for a student insurance plan, can be found at www.acha.org/Guidelines.

ACHA's insurance webpage (<u>www.acha.org/ACA_FAQ</u>) also provides updates on ACA and other federal/state insurance plan requirements.

Practice Management and Health Information Technology

An appropriate practice management system (PMS) is essential to support the college health program's administrative functions such as scheduling, billing, payment tracking, and reporting. Selecting the appropriate PMS requires evaluation of workflows, staffing, billing practices, revenue management, funding sources, technology, support, and finances. Practice management systems integrated with the electronic health record (EHR) are increasingly replacing paper systems and will soon be the standard of care in college health.

Today's students and the current health care landscape demand that college health moves forward digitally. As health information technology (HIT) advances and becomes widely adopted and more affordable, successful college health programs must remain open to exploring and adopting technology-based approaches to treatment, education, prevention, and engagement that make the most sense for their population.

HIT, including the use of an integrated PMS and EHR, provides the capability to identify trends in utilization, provide clinical decision support, engage students, and support the college health program's data collection. College health programs should utilize HIT to better track and ultimately improve the health of their population.

Examples include tracking immunization status and medical and mental health conditions commonly confronted on college campuses such as influenza, depression, sexually transmitted infections, and high-risk drinking.

Accreditation

College health programs opting to participate in the accreditation process must evaluate their own programs against a set of predetermined criteria that reflect current industry standards. The Accreditation Association for Ambulatory Health Care, Inc. (AAAHC) and the Joint Commission are accrediting bodies for ambulatory health care. The college health program that is seeking accreditation undergoes an initial on-site survey followed by a reaccreditation survey every two to three years. Accreditation demonstrates the college health program's

willingness to benchmark itself against the highest national standards of safety and quality.

Though the value of accreditation is great, each college health program must consider the financial commitment and staff time required to achieve and maintain accreditation.

Assessment

The process of evaluating programs and services is compulsory in both higher education and health care. Embracing the use of data to drive change within the environment of higher education adds credibility and success to a college health program. Utilizing standards such as those provided by ACHA, the Council for the Advancement of Standards in Higher Education (CAS), AAAHC, and the Joint Commission can provide college health programs with resources and guidance to provide high quality and diverse programs to the campus community.

Assessment activities of college health programs:

- measure health service and institutional effectiveness
- assess the patient population and their health needs
- evaluate the campus environment
- identify and measure student learning outcomes
- guide financial and operational decision making
- improve organizational performance

Ongoing formal assessment and evaluation activities complement the quality improvement process by ensuring that policies, services, and initiatives are effective, datadriven, and aligned with the needs and priorities of the institution and its students. A robust assessment plan will be linked to the strategic plan of both the college health program and the institution. Collaborating with the campus assessment team may augment expertise in data collection, interpretation, and analysis.

Examples of assessment in college health include:

- quality improvement studies
- chart audits and peer reviews
- internal and external benchmarking
- formal surveys
- patient satisfaction and feedback
- environmental scans
- monitoring key performance indicators

College health programs should make every effort to collect data on the patient experience and provide multiple ways for patients to give feedback. Results of assessment activities are shared with internal and external stakeholders and used to make decisions and take action.

Assessment of student learning from programs or services delivered by the college health program are as necessary and mission-critical as operational and strategic assessment activities. Identifying and measuring student health outcomes will assist students in fulfilling their academic goals, and demonstrating the impact of the college health program on student development, learning, and student success will assist the college health program in demonstrating its value.

Conclusion

College health programs are incredibly diverse, and their role in meeting the unique needs of students in the institutions of higher education that they support can differ dramatically. They hold in common their central role in the health and success of the students attending those institutions. Whether a student is sidelined with the flu or dealing with an emerging depression while studying abroad, the college health program's readiness to support students' health and foster a healthy campus are critical. This Framework for a Comprehensive College Health Program offers a broad overview of what college health programs are and the potential they hold. The best of these programs offer a model for population-based health to the United States and to the world. They are truly one of the best investments stakeholders can make in the future health of our colleges and our society.

Resources

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ACHA Guidelines:

Standards of Practice for Health Promotion in Higher Education, Third Edition, May 2012 http://www.acha.org/Guidelines

International Okanagan Charter, January 2015 http://www.internationalhealthycampuses 2015.com/charter-renewal/

ACHA Guidelines:

Cultural Competency Statement, February 2011 http://www.acha.org/Guidelines

Arao, B., Clements, K., "From Safe Spaces to Brave Spaces a New Way to Frame Dialogue Around Diversity and Social Justice" in The Art of Effective Facilitation, ed. Lisa M. Landreman (Virginia: Stylus Publishing, LLC, 2013), 142.

ACHA Advocacy Webpage http://www.acha.org/Advocacy

ACHA Guidelines:

Standards for Student Health Insurance Coverage http://www.acha.org/Guidelines

ACHA Health Insurance Webpage http://www.acha.org/ACA FAQs

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