

Meeting the Goals of Title IX Federal Mandates for Survivors of Abuse



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Element 1: Purpose

University Health Centers are required to follow Title IX regulations. This translates to making sure that students on campus who have survived a sexual assault must have specific university resources offered to them. Failure to comply with these regulations is poor patient care and associated with federal fines.

Element 2: Performance Goal

The performance goal for Portland University Health Services is: for all students (**100%**) seen for an initial sexual assault evaluation need:

1. to be offered counseling and legal resources
2. this offer must be clearly **documented** in the patient/client chart
3. All notes associated with the assault should be marked **sensitive**

Element 3: Data Collection Plan

- On 7/10/2019 all charts from the previous academic year with a diagnosis of Initial Sexual Assault Evaluation (**T74.21XA**) were collected for a systematic review.
- Diagnosis of initial assault was reviewed.
- Notes were checked for thoroughness and clarity.
- Any related prescriptions were checked to look at alignment with nursing standing orders and patient allergies.
- The charts were checked to see if they had been marked **sensitive**.

Element 4: Evidence of Data Collection

- The medical director of Health Services reviewed the cohort of charts to see if there was clear documentation that the Title IX information had been offered at the **initial assault encounter**.
- **Sixteen** of these encounters were seen by a Health Services provider; the remainder were Counseling Services staff for intake/sessions.
- **Fourteen** had documentation that the patient had been given the appropriate Title IX handouts
- **Two** had been referrals to the Women's Resource Center.
- Unfortunately, **none** of the charts or encounters were marked **sensitive**.

Element 5: Data Analysis

This information was shared at the first September 2019, all Health Service staff meeting to:

- We reviewed which charts were pulled - ICD -10 diagnosis T74.21XA, initial assault evaluation.
- We examined the contents of Title IX packets and why our patients could benefit from the contents.
- We discussed why charts of specific patients must be marked sensitive: medical records can't audit every chart before release but they can ask the providers if they see that a chart contains sensitive information and specifically ask about those charts or notes.

Element 6: Baseline Comparison to Performance Goal

2019	Observed Chart Review	Performance Goals
Title IX Info Offered*	87.5% (14/16)	100%
Sensitive Chart Designation	0% (0/16)	100%

* Chart information was not standardized and appeared in a variety of places in the chart.

The **collective staff identified some barriers** to compliance with the goals:

- Assault evaluations can be stressful for providers. All patient care providers were willing to make sure title IX information was offered if we gave a **charting template** to make sure that this was part of the visit.
- Providers asked that the **Title IX information was made available as an electronic document** that could be pushed through the secure patient portal so the student would have easy access and that assault information wouldn't be discovered by anyone other than the patient.
- The staff didn't know that they could mark encounters **sensitive** We needed a **training and a specific SOP** for designating special charts.

Element 7: Corrective Action

- A **EHR template** for sexual assault was developed to contain key parts of the history, physical exam and treatment plan. This entire note reads as a **checklist** with the same order and same options for each patient. This template reduces guessing and each chart is consistent with room for additional documentation for each patient.
- A **Title IX PDF** was created with all of the updated Title IX information for Portland State University. This information is sent to students at the end for their visit through the **student portal** and is **confidential**. Students can also opt to get a printed copy of Title IX resources at the end of their visits. The referral information will be **reviewed yearly** in the first week of July or when new information becomes available.
- At a team meeting nursing staff **demonstrated how to mark chart notes sensitive**. Staff Created **SOP** with screen shots to designate sensitive charts with screenshots was also created for the HS employee resource file.

Element 8: Re-Measurement

2020	Observed Chart Review	Performance Goals
Title IX Info Offered*	100% (6/6)	100%
Sensitive Chart Designation	100% (6/6)	100%

*July 1, 2019- June 30, 2020 Campus enrollment numbers were reduced due to Covid-19 infection.

Element 9 : Additional Corrective Action

PSU Health Services met our performance goal for the academic year 2020: the chart findings were easy to locate with the templates, the Title IX information was uniformly offered and sent to each patient, and all of the charts were appropriately marked "sensitive". This will need to be rechecked in following years as this Covid-19 related year has been irregular and it's unclear if everyone has really adopted the desired processes.

Element 10: Communicating Findings

- The comparison of chart audit findings were shared with the Health Services staff at a Zoom staff.
- The baseline and post-intervention data were shared with the SHAC Leadership Team.
- The Title IX report was forwarded to Portland State University's Associate Vice President, Global Diversity & Inclusion, Title IX Coordinator on September 3, 2020

Acknowledgements

While Quality Improvement can feel like a solo endeavor **the greatest problem solving resources are our staff members**. A huge thank you to the Portland State University Health Services patients and staff.

