“Be nice, do your best – and most importantly keep it in perspective.”

— Meg Whitman

Message from the President
Dr. George J. Koenig, Jr., NCEMSF President

Today the weather is absolutely beautiful. It is a sunny 85 degrees. Spring is officially here!!

Spring marks not only the end of the winter but it also marks the end of the academic year. Spring marks change. Change for those that are graduating. Change for those that are staying. And change for those that are getting ready to start college life.

Spring marks change for your campus EMS organization. Who will be leading your organization next year? How will you replace the members that are graduating? How will you keep the interest of your current members? Amidst this change, what are your goals for next year? How will you accomplish them? Are they attainable? Where will you get funding? The questions are endless. But now is the time to start thinking about them and formulating answers.

Spring marks the ritual of imparting advice. Advice comes in many forms from the graduation speeches to the last words from your peers before they leave. Advice to provide you inspiration on taking your next step, advice on what class to take, or advice on where to live next year. Advice that you will probably take for granted and will not realize its true importance until it is too late.

Mary Schmich, a Chicago newspaper columnist, best summarized advice. “Advice is a form of nostalgia. Dispensing it is a way of fishing the past from the disposal, wiping it off, painting over the ugly parts and recycling it.” In other words, there is much to be learned from those that have traveled before you. Take the time to find out the history of your organization from those that are going to graduate. Learn what has worked and what has failed for your organization. Don’t repeat the same mistakes.

Spring marks for us another year as well. It is at this point in the year that we review our year’s accomplishments. Our annual conference was a tremendous success. This year we surpassed all of our expectations. There were 73 universities and close to 600 attendees present. Over the course of the weekend there were a total of 28 seminars to choose from. The content of our seminars and the high caliber of speakers that lecture continue to make our conference the best EMS conference in the nation.

This past year we also were able to increase our corporate sponsorships as well as improve member benefits. Please review the benefits available to you on our web page. We have also strengthened our regional coordinator system this year by instituting regular conference calls. We continue to improve our publication NCEMSF News to keep you better informed about the campus EMS community.

We continue to make changes to improve our organization to better serve you. During the next couple of months, I look forward to sharing with you our goals for next year as well as the selection of the 2006 conference host.

Enjoy the warm weather.

George J. Koenig Jr. M.S., D.O.
President NCEMSF

³
Campus Community at MIT
Dr. Scott C. Savett, NCEMSF Vice President

If all goes as planned, the Massachusetts Institute of Technology (MIT) will be the first college community in the nation to achieve the designation of “HeartSafe Community” by the American Heart Association (AHA). You’ve never heard of the HeartSafe Community designation? Neither had I until a recent visit with MIT-EMS.

HeartSafe is the logical extension of the “chain of survival” we’ve all learned about during AHA CPR courses. The chain of survival includes the recognition of a cardiac emergency, initiation of appropriate care, activation of EMS, paramedic response, and transport of the patient to an appropriate medical facility for continued care. HeartSafe focuses on the early stages of the chain of survival by encouraging wide-spread knowledge of CPR. It also emphasizes the use of strategically-placed AEDs by bystanders, lay-rescuers, and first-responders such as security personnel and police.

Communities qualify for HeartSafe designation by accumulating “heartbeats.” The number of heartbeats needed to qualify is directly related to the size of the community. There are mandatory criteria that are independent on community size, such as each EMS first-response vehicle being equipped with an AED. Additional heartbeats are earned for each CPR class taught, placement of AEDs in areas where people are likely to congregate, and paramedics being dispatched to all cardiac emergencies.

The HeartSafe program is currently being rolled out in Massachusetts as a joint effort between AHA and the Department of Public Health, Office of Emergency Medical Services (MDPH/OEMS). If things go well, the Massachusetts program could be the template for similar programs elsewhere. There’s no reason why the nearly 200 campuses with collegiate EMS can’t strive to achieve a similar level of commitment to AED and CPR awareness, whether it’s formally recognized by AHA or not.

The uniqueness of MIT-EMS doesn’t stop at their involvement in the Heartsafe program. Prior to my visit to MIT-EMS, I thought I had seen everything (including a sink) on an ambulance. If your squad has a vehicle, chances are its daily checklist includes verifying the operation of the equipment in the cab: emergency lights, siren, mobile two-way radio, and iPod. I’m pretty sure the iPod isn’t part of MIT-EMS’ equipment check, but it is an ensconced part of their Braun ambulance.

While the on-board iPod was entertaining to see, I was on MIT’s campus in March to get a better sense of this relatively new organization. With some of its members having attended their first Annual NCEMSF conference the previous month, the curiosity was mutual. They wanted to know what NCEMSF does in addition to holding conferences.

What struck me the most during my brief visit with MIT-EMS was the commitment of Institute staff to the continued success of the organization. MIT’s campus medical center has embraced MIT-EMS as a logical extension of its own services. Perhaps the most ardent advocate for MIT-EMS is Maryanne Kirkbride, the Clinical Director for Campus Life and official liaison between the campus medical center and the Institute. Ms. Kirkbride recognizes the value of MIT-EMS in three respects: financial savings compared to using an outside service for inter-facility transports to local hospitals; lowered Institute liability by having well-trained, quickly-responding EMS personnel familiar with the campus; and finally, a true community experience for EMTs (professional and sympathetic caregivers).

The fact that two disparate facets of MIT-EMS hearken back to “community” is not a coincidence. Despite its size, the feeling of community on MIT’s 10,000-student campus is rightfully strong.

Your Expiration is Near
Karolina A. Schabses, NCEMSF Membership Coordinator

As this academic year comes to a close, we would like to extend our thanks to all of those who have supported NCEMSF throughout the year. While our members provide the motivation and incentive to strive for more in collegiate EMS, our members also provide a more basic, but nonetheless important purpose – you give NCEMSF the financial support needed for the performance of our core functions. Your membership dues support our annual conference, publish our quarterly newsletters and assist in the organization of National Collegiate EMS week. Dues also allow us to maintain our Web site and advocate for services throughout the country. NCEMSF memberships follow the academic calendar and expire every May. Consider renewing your annual membership this June to enjoy a full year of membership benefits. Life memberships are a great way to simultaneously show your life-long commitment to collegiate EMS and avoid the bother of annual renewals. Go to http://www.ncemsf.org/membership/ for further details.

We would like to extend congratulations to all those receiving degrees this May. It won’t be long before you start receiving solicitations from your alma mater for alumni support and likewise, remember that alumni support is also essential to collegiate EMS. Stay involved and keep your contact information updated with us. We look forward to your continued involvement in collegiate EMS through our alumni programs as well.

Those of you not graduating but simply moving after classes end, please take the time to revisit your NCEMSF profile at: http://www.ncemsf.org/membership/update_profile.ems and let us know how to best contact you next year.
Dear Professor Squirrel,

At our squad meetings we seem to come up with a lot of great ideas for things like Collegiate EMS Week, training sessions, CQI, fund raisers, etc., but it seems like either nothing comes of them or one person ends up doing all of the work. How can we keep our group focused and our members involved?

Sincerely,
Spinning our Wheels

Dear Wheels,

What you need is a project management system. This is a way to prioritize what you want to do and keep on track. To do this you need to identify your priorities and what you want to accomplish, get organized, do some planning, execute the plan, and come to a conclusion.

So, first of all, during your meetings write down the ideas that people come up with and start to prioritize them. Identify what is needed and what is feasible. Even a project that may not seem doable has merit if it is really needed. Sometimes projects can be broken down into pieces and you can accomplish them one part at a time. Define the scope of the project. Once you have identified what you want to do, post your goals on a wall of your office where people can see them and be reminded of them. Assign leaders for each project and who these leaders report to. You may want periodic reports to your chief, president, or whoever in your organization has responsibility for the big picture. Schedule time at your meetings for reports from the project leaders so that the organization can see the progress. You might even document progress on your project wall charts.

Next build a team for each project. Make sure you have people with differing talents that can contribute to the success of your project. The team can then identify the stake holders, determine a communications plan, and develop a quality assurance plan. Each team member should have a copy of the scope so that everyone understands what the need is, what your objectives are, what the benefits are, and what the expected outcomes are. You should also identify who else might be affected by your project, the planned duration of work and target deadline, and estimated costs for a budget.

The next phase is the planning phase. Here your team should create a task list, assign people to the tasks, determine if any of the tasks are interdependent (i.e. one task needs to be complete before another can begin), set your timeline and plan work group meetings. You may want to post a checklist or time line chart, and list the people responsible for various tasks where everyone can see it.

In the execution phase, the leader will maintain, monitor, and control the elements of the project, and keep people posted with meeting minutes and updates to your checklist chart. The leader will monitor team progress by holding project meetings where progress can be measured against your timeline. The leader should also keep track of the budget and resources, make sure the group is staying within the defined scope, keep people informed, and ensure quality work is being done. The project leader may have to hold team members accountable. This can be done by having team members establish the ground rules at the very first project meeting. Some ground rules might be meeting attendance, sticking with the project through the end, asking for help when needed, respecting members’ academic schedules and commitments, not interrupting other team members, etc... Write down the expectations and assumptions of each team member and post them. When the team members help write the team rules, then they are invested in them.

Finally, reach a conclusion to your project. Ensure that all requirements and obligations are met. Make sure that any new processes that you have developed are tested and actually work before you roll them out. Let all stake holders know that you are finished. Conduct an after action review of what went well and what you might do better next time. Present your finished product to your organization at a formal meeting so that all know what has been accomplished and if there are now changes to your system or organization. Also present the results of your after action review.

The team should hold a celebration to mark the end of the project and recognize your own good work. This last part is really important, not only because you might want to leave some celebratory leftovers out for the squirrels, but because it brings closure to your project and shows team members that their work is important and valuable to the organization. Now, keep the good ideas coming from your members, and when you have a success, share it with the rest of NCEMS by posting to the listserv. Our member organizations are always looking for good ideas and we want to hear about your accomplishments and successes.

Speaking of accomplishments, I’m pleased to report that I finally found my way to an NCEMS conference. I had a great time, met a lot of wonderful people, and can’t wait to see you all again next February.

See you around campus!
Professor Squirrel

Professor Squirrel has been hanging out on campus begging for food from students and keeping an eye on campus EMS for many years. Send your questions to the Professor at professor@ncemsf.org. The Professor will answer the best ones in the NCEMSF newsletter and on the NCEMSF General-L list. Your name and school will be kept confidential.
Regional Round-Up
News From Around the NCEMSF Regions

From the National Coordinator
NCEMSF offers an excellent network of Regional Coordinators (RCs) who support all collegiate EMS schools in their respective geographic region. It is an important function that offers schools the resources in order to make improvements and to solve problems that arise.

RCs provide guidance, consistent communication, and resources to accomplish agency goals. The RC network offers great communication and leadership opportunities through conference calls to update other RCs on regional activities and to discuss issues that are facing schools all over the nation.

Currently, we are looking for a regional coordinator for the Midwest region, which includes Indiana, Michigan, and Ohio. If you think you would offer the communication and coordination skills necessary for the Regional Coordinator position, please contact me to learn more or apply. Now is the time to apply and begin your experience as an EMS leader.

Canada
NCEMSF is pleased to announce the appointment of Brianna Julien as the new Canadian Regional Coordinator. Brianna is the Supervisor of Queen’s First Aid of Queen’s University in Kingston, Ontario and was the Conference Director for the Canadian National Conference of Campus Emergency Responders (NCCER) in February. She also serves as a Board member of the Association of Campus Emergency Response Teams (ACERT) of Canada. Brianna is looking forward to the position and bridging the gap between Canadian and American collegiate EMS.

Central
NCEMSF is pleased to announce the appointment of Michael Kogan as the new Central Regional Coordinator. Mike has been a member of the Texas A&M Emergency Care Team (TAMECT) since 2003, and its president since April 2004. He also serves as a probate preceptor and first-aid instructor for TAMECT.

Massachusetts
Over the past several years, Boston College’s Eagle EMS has faced some difficult challenges which forced the organization to suspend operations. This year, Executive Director Tyler Gaffney and Director of Operations Craig Napolitano have worked with school administration and the police department to lead Eagle EMS back into service. They currently offer Thursday-Saturday coverage from 7 pm to 2 am as well as standbys for sporting events. Eagle EMS also offers school-wide CPR and EMT classes to help educate the community. The organization currently has around 45 EMTs and hopes to resume 24-hour coverage next year.

The Brandeis Emergency Medical Corps (BEMCo) has finally submitted the paperwork and after an inspection will be upgraded to Class V Ambulance in the State of Massachusetts. BEMCo will no longer be a Quick Response Service (QRS), but a certified Class V Ambulance subject to biannual inspections and other regulations imposed by the state. The biggest change for the organization will be the implementation of BLS drugs including albuterol, aspirin, and epinephrine auto-injectors.

Mid-Atlantic
The Virginia Tech Rescue Squad (VTRS) is hosting an awards and recognition banquet in April. The goals of the evening are many: primarily it is to provide closure to the past year and award those who have done outstanding work. It is also to inaugurate the new officers into their positions for the following year. Additionally, the banquet brings back the alumni of the organization and helps to foster dialog between those old and new. The alumni have an opportunity to see what is currently happening and what programs the squad is working on improving.

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New York
Two squads, SUNY Binghamton and SUNY Oneonta, have formed committees to explore the possibility of hosting a regional conference in the fall. The timing of this regional conference, as with past regional conferences, was specifically chosen to complement the annual NCEMSF conference in February. The committees will work together over the upcoming months in conjunction with the NCEMSF leadership to elucidate the details.

North Central
Under the direction of faculty advisor Greg Hayes, University of Minnesota EMS (UMEMS) made the astounding accomplishment of implementing a public access defibrillation program on campus. This program includes the maintenance and training of personnel to operate 99 AEDs on campus. This has been no easy task with recent vacancies in key positions. Despite running short-handed, UMEMS has also been staffing March Basketball, restructuring their new member academy, and updating their patient care protocols. The protocol revisions come with the recent change in medical direction and will include the addition of albuterol, epinephrine auto-injectors, aspirin, and MARK-1 kits. UMEMS will also be looking to add CombiTubes to the new protocols for the upcoming year. Congratulations to Supervisors Matthew Ernst, James Lambeg and Wade Schulz on these amazing accomplishments.

The North Central Region recently added two new organizations: Loyola University Chicago EMS and Iowa Western Community College EMS. Loyola University Chicago EMS is the first collegiate EMS group in metropolitan Chicago and is forming under the direction of Chief Nelle Sires. Previously established Iowa Western Community College EMS is looking to make the transition from an education organization to BLS first-response under the direction of Faculty Advisor and Program Chair Brian Monaghan.

Northern New England
NCEMSF is pleased to announce the appointment of Erin Primiano as the new Northern New England Regional Coordinator. Erin is the Public Relations Officer of University of Vermont Rescue Squad.

Pennsylvania
After pulling off a hugely successful 12th Annual NCEMSF Conference in conjunction with Ursinus College Student Emergency Response Volunteers (SERV), Villanova EMS (VEMS) looks towards the future with its
newly elected executive board for the 2005-2006 school year. Congratulations to the new VEMS e-board: Chris Weber, Captain; Kit DeAngelis, Training Lieutenant; Drew Waddelow, Equipment Lieutenant; Tiffany Corbo, Scheduling Lieutenant; Lee Grant, Treasurer; Melanie Rozek, Secretary; and Anne Breznsnyak, Advisor.

Southeast
The University of North Carolina at Chapel Hill is in the process of starting a full transport service through South Orange Rescue during peak call times for next fall in order to relieve strain on county resources and improve patient care. The details are still being solidified, but this is a big step for an organization that has faced some formidable hurdles during its startup.

At Duke University, Duke EMS is also hoping that they will be able to stock and run a transporting ambulance next year sometime. Duke EMS recently submitted an application for a Department of Homeland Security Assistance to Firefighters Grant (see Page 6). This grant would allow Duke EMS to stock a donated ambulance and provide broader transporting ability than their current ability, with hopes to release Durham County medics from unnecessary transports.

West
With the start of their services only in mid-March, University of San Diego EMS (USD EMS) is the newest collegiate EMS organization in the nation. Over $15,000 and months of hard work have already been invested to get USD EMS off the ground. They currently have a staff of 7 EMTs and 1 First Responder; 3 of which are Supervisors. USD EMS provides BLS non-transport QRS on Thursday, Friday and Saturday nights from 9pm to 3am. A team of two are dispatched via Public Safety radio and respond on an equipped golf cart. USD EMS' student directors, Dan Martinez and Laura Kimble, and their team are proud to be an integral part of the organization’s infancy. As they continue to grow and progress, USD EMS hopes to broaden their services and availability for the University of San Diego community.

The remainder of the spring semester has a lot in store for Santa Clara University EMS (SCU EMS). In addition to upcoming elections, SCU EMS will be staffing a spring Roots concert. Furthermore, twenty-five students are pursuing their EMT certifications at classes offered on campus. The organization is confident that the addition of quality candidates will aid in strengthening its program. SCU EMS has gained many new ideas from this year’s conference in Philadelphia. Its members are currently working on setting up a mock DUI; and continue to build a strong relationship with Santa Clara County. The President of SCU EMS, Terrence Horan, and his team are looking forward to training new leadership and preparing for another great year in the fall.

With an increase in budget to $8000, approval of funding for new radios, and a reorganized EMT office, Loyola Marymount University EMS (LMU EMS) has continued its progression and development this spring. LMU EMS began this semester with the addition of two new members, Kasey Wafer and Catie Bereznyay, bringing their membership to twenty-one. Eight members will be graduating in May, and several have recently advanced in rank to "Veteran-in-Training" and "Veteran." A week after the conference, LMU elected its new executive board and have been collectively planning their end-of-the-year banquet. Members plan to include LMU administration, Public Safety leadership and the Health Center staff. The new executive board is most proud of the organization’s very first monthly newsletter, which will be distributed university-wide beginning in April.

About Squad Elections
Some schools hold their elections between Fall and Spring semesters to encourage younger members to step up, but also more importantly to ensure that the outgoing officers and senior members of the squad will be around to assist the new officers for the spring semester. Other schools have chosen to hold elections a month prior to graduation to allow the overlap and training time of the new officers; while some schools hold elections at the last meeting and leave the new officers to fend for themselves.

One of the most common problems that collegiate EMS organizations face is the high turnover and the limited experience of the squad leadership. Organizations that have not already adjusted their election timeframe to allow for this overlap might want to consider seriously the impact of doing so on the squad’s overall productivity.

In Closing
Take advantage of the summer, which is when big things get done on campuses. Faculty and administrative personnel are still there, but the student population is just a fraction of what it normally is. This is when the roads get repaved and policies get made! Summer is not when officers should be slacking, but when they should be scheduling meetings with university officials to get the funding, policies, and equipment that their squad needs. Summer is also a great time to plan for the coming year by organizing recruiting meetings, training events, National Collegiate EMS Week in November, and budgeting for the Annual National conference in February.

Regional Coordinator Network

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<th>E-mail Address</th>
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<tr>
<td>National</td>
<td>Kelly Schirmer</td>
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<tr>
<td>Canada</td>
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<td>Central</td>
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<td>West</td>
<td>Mark Malonzo</td>
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So many start-ups have such great ideas. We learn a great deal about our organizations from these two animals. On the other hand, the turtle took his time joining a fraternity, etc… some sports, taking an extra class, etc. The rabbit got distracted en route, playing start and was miles ahead of the turtle. We all know the story of the tortoise and the hare. The rabbit got off to a running start and was miles ahead of the turtle. The rabbit got distracted en route, playing some sports, taking an extra class, joining a fraternity, etc…

On the other hand, the turtle took his time and was methodical about his progress. He began with the finish line in mind, and was methodical about his progress. We learn a great deal about our organizations from these two animals. So many start-ups have such great ideas and great motivation on day 1 and they slowly fade away by day 180 - or worse by day 1,500.

A rich history does not make an organization immune from dissolution. It hurt me to learn that both college-based squads to which I formerly belonged met similar disastrous fates. One was a young organization with only six years of history behind it, while the other counted more than 30 years of dedicated service before disbanding. There is a vaccine to this illness. First, you need to have a clear vision of the finish line. Once you have painted that picture in your mind’s eye, share it with others, seeding a legacy. Make others share your passion about the vision.

As spring flows through our campuses, it is so easy to forget the race we are running. It’s easier to frolic in the meadow than run a race, but I urge you to stay on course, steadfastly headed towards the finish line.
Filling the College Healthcare Gap
Joshua A. Marks, NCEMSF Secretary

"An Overnight Infirmary Is a Campus Luxury," proclaimed a March 16, 2005 New York Times headline. Kate Stone Lombardi, the article's author, notes that many colleges and universities, despite popular perception, never offered overnight facilities and most that once did, have shut them down. The reasons Lombardi cites are several, but most notable are cost and liability. College health care services face the same rising costs as the overall health care system and contend with shrinking educational budgets. Additionally, the majority of lawsuits in college health care have involved overnight infirmaries. Such infirmaries, traditionally manned solely by nurses, were typically unable to handle emergencies, obtain necessary laboratory analyses in a timely manner, and acquire radiographic studies. In short, many infirmaries were providing substandard, non-definitive care that had the potential of being unsafe.

Lombardi notes that most campuses continue to operate health clinics during normal business hours. In lieu of overnight infirmaries, however, they have established specific protocols for handling nighttime emergencies. Nighttime services, according to the article, range from overnight telephone healthcare hotlines staffed by nurses and/or physicians to arrangements with local hospitals that include direct admit privileges for campus health center staff, direct telephone access to emergency department personnel for students, and reduced insurance co-payments for student visits. Still, again according to the article, other schools have no contingency plan for overnight care and students who chose to utilize the hospital are treated as any other patient would be. College health administrators note "part of the role of college health services is to help students, often away from home for the first time, learn how to take care of themselves when they are ill." “If they [students] weren’t in college, they’d be out there dealing with their health care on their own.” The overall goal is to try to "strike a balance between providing nurturing and being sensitive to their needs as sick kids and their responsibilities and rights as young adults."

The New York Times article conspicuously makes no mention of the role of collegiate EMS in filling the overnight gap. Oddly enough almost every school cited in the article as never having or once having an overnight infirmary currently has an active campus squad that is an NCEMSF institutional member and was in attendance at the 2005 National Conference in Philadelphia. Collegiate EMS provides the coverage that so many campus health agencies are no longer directly providing. Some collegiate squads in fact are only in service during those key overnight hours. The majority, however, are in service 24/7 and maintain some sort of working relationship with their campus health service such as to provide for the best quality and continuity of care possible. Collegiate EMS, although growing and gaining notoriety, seems still not to be getting the necessary recognition nor credit it has earned, and deserves.

From a medical, as opposed to an operational, perspective collegiate squads closely associated with a campus health service contribute most significantly to the overall health and safety of the communities they serve (Operationally public safety, security, or the campus police department may be the best campus assets and allies collegiate EMS has). A closed health care system in which information is shared between collegiate EMS providers and health center staff such that follow up care is easily offered and provided (when constructed properly this does not violate HIPPA), in which protocols exist for the transport of patients meeting certain triage criteria to the health center as opposed to a local emergency department, and in which health center staff play an active role in providing hands on medical direction (both on and off line) and education to collegiate EMS providers is ideal for meeting the college healthcare mission and achieving the desired healthcare outcomes. Medicine today is, after all, judged most by outcomes. In addition, as so often stressed by the NCEMSF leadership, the benefit of collegiate EMS to the providers goes further towards fulfilling any overall university mission then almost any other campus activity.

Dr. George Koenig, Dr. Scott Savett, and I will be presenting these very issues at an upcoming regional meeting of the American College Health Association. Our goal is to educate campus health administrators, physicians, and nurses on the role of EMS on their campuses in providing emergency healthcare and to impress upon them their need to be actively involved as clinicians and educators. For years we have professed to students what they need to do to establish services and work with school officials, we are now taking our message to the administrators and higher level clinicians so as to fill the gaps, create a cohesive healthcare team, and close the college healthcare loop despite the fact that an overnight infirmaries have become campus luxuries.
Awards Presented at the 12th NCEMSF Conference

The following awards were presented on Saturday, February 26, 2005, at the 12th Annual NCEMSF Conference in Philadelphia, Pennsylvania:

- Collegiate EMS Provider of the Year – Seth Komansky (Franklin Pierce College)
- Collegiate EMS Advisor of the Year – Michele Helms (Santa Clara University)
- Collegiate EMS Organization of the Year – SUNY Geneseo First Response
- Collegiate EMS Web Site of the Year – Columbia University EMS (Webmaster Michael Hilton)
- Service Award – Eric MaryEa (NCEMSF Director-at-Large) & David Strauss (Duke University)
- Vomacka Speaker Award – Jill Nieman (Muhlenberg College)

Eight schools were recognized for the outstanding quality of their EMS organizations with the NCEMSF "Striving for Excellence in Campus EMS" certification. They were:

- Duke University EMS
- Montclair State University EMS
- Pennsylvania State University Ambulance Service
- Rice University EMS
- Tulane University EMS
- University of Delaware Emergency Care Unit
- Villanova University EMS
- Virginia Tech Rescue Squad

Please visit the NCEMSF Web site at http://www.ncemsf.org/about/ for complete descriptions of the awards and a listing of past awards winners the NCEMSF "Hall of Fame."

The 13th Annual NCEMSF Conference will be February 24-26, 2006 - location to be determined. Look for an announcement by June 1.