

# NCEMSFS NEWS

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***"The strength of our organization is our collective knowledge from all of our successes and failures."***

## Message from the President

*Dr. George J. Koenig, Jr., NCEMSFS President*

The end of winter break is approaching and the start of the spring semester is upon us. The brief holiday pause provides us with a chance to reflect and time to re-energize. I encourage you to take a moment and review your organization's first semester progress. Recognize your accomplishments; identify areas for improvement; and critically analyze any failures. Were there any goals that you were unable to accomplish? If so, what were the barriers that prevented success and how will you overcome them?

The idea of applying self-assessment to organizations is not novel. It was popularized in manufacturing in the 1980s, with the development of a process called "six sigma." The term "six sigma" comes from statistics and is used in statistical quality control to evaluate process capability. Generally speaking, it is a defined process to achieve quality. The concept of using process measures to improve organizations is widely adopted in many industries. In EMS, we apply process measures to performance improvement and quality assurance of the care that we provide. However, as an industry we have been slow adopters to expand self-assessment to our governance.

No matter how well an organization is currently performing, one always needs to consider how it can improve further. The absence of continuous improvement creates organizational inertia. Performance is then superficially checked against targets with little attention to the real health of the organization. For example, if you started the year with a goal to recruit 30 new members, but only recruited 20 new members, how critical would you be of the recruitment process if all of your shifts are filled? On the surface, it would appear as if nothing was wrong. However, what are the downstream effects of having 10 less people in the training pipeline? What if you are unable to meet your recruitment goals for the following year as well? By focusing on periodic self-assessment, you can correct the situation before it becomes a problem.

Self-assessment is difficult. It requires the ability to accept criticism and look for solutions. Often the solutions are not intuitively obvious because your view has become distorted. Several years ago, I attended a leadership conference. The lecturer told a story of a manager who assembled his staff for a meeting because he wanted to obtain feedback on how he could do a better job. He covered the walls with paper and told his employees to write suggestions for improvement on the wall. He asked them to be honest, told them that it would be confidential, and asked them to come get him when they were done. In his mind, he expected this to be a simple exercise. Several hours later, they came to get him. The walls were covered with suggestions for improvement. He was stunned and taken aback by the comments. He could have ignored the comments on the wall, but instead he read every single one and sought to improve.

It is unlikely that any of us will ever have the opportunity to receive such honest feedback. This is why it is vitally important that we critically review our operations and seek outside input when needed. During your self-assessment, it is likely that you will identify an area where you lack expertise. NCEMSFS and its leadership are here to help you. The founding principle of NCEMSFS was to create a network so that all campus EMS groups could communicate to solve problems and discuss challenges. It is likely that your problem is not unique and that others have already solved it. The strength of our organization is our collective knowledge from all of our successes and failures. I hope that you join us on the weekend of Feb 28<sup>th</sup> – Mar 2<sup>nd</sup> in Boston so that we can continue the dialogue on how our organizations can grow stronger together.



## Are you a Campus EMS Brand Ambassador?

Dr. Scott C. Savett, NCEMSF Vice President

Campus-based EMS does not immediately leap to mind when somebody lists amenities offered by a college or university. When parents and prospective students go shopping for a school, they pay attention to the student-faculty ratio, four-year graduation rates, academic programs, the location and quality of residence halls, and the presence or absence of Greek life on campus. The physical campus itself may also weigh heavily on a decision, as some students crave the hubbub of an urban locale while others seek a more tranquil suburban or rural setting.

What parents and prospective students do not think about is the overall campus "safety net." What happens when someone becomes sick or injured? Who will care for them? The typical college-aged population is healthy and does not generally require much medical care, so the issue may not even cross their minds.

The reality is that for many first-year students, their college experience will be the first time they are in charge of their own destiny. They are free to do *what* they want, *when* they want, and *where* they want. But this freedom can come at a price. Chronic conditions such as diabetes or epilepsy that were well-controlled under their parents' roof could easily become out of control. On top of that, any EMS responder knows that experimentation with alcohol or drugs can quickly devolve into a potentially life-threatening condition.

When emergency medical services are needed on campus, dialing 9-1-1 from a mobile phone may seem like a good universal method for calling the cavalry. Unfortunately, the 9-1-1 public safety answering point (PSAP) reached from a cell phone may not be the most efficient way to muster resources on a college campus. The interface between a municipal PSAP and campus police or campus public safety is likely a weak point in the communication chain and a potential failure point when the call is handed off between agencies. Calling 9-1-1 will certainly put the ball in motion to get *somebody* on their way to the scene, but external (non-campus) responders may not be familiar with the campus layout and facilities or may not have the necessary access to academic buildings and residence halls.

Instead of relying on dialing 9-1-1 from a cell phone, it's important that the students, faculty, and staff on your campus know what EMS resources are available to them *before* an emergency presents itself. They should have a clear understanding of how to efficiently summon medical assistance. If your group doesn't already provide them, I'd strongly suggest distributing stickers or magnets with the campus medical emergency phone number. Professionally produced stickers or magnets can cost less than five cents each and could literally be a lifesaver.

Assuming folks on campus know how to properly summon you, they should also have at least a vague idea of who will be responding – and perhaps how they will be responding. Campus EMS response on foot, bicycles, or golf carts is much more typical than a campus-based ambulance (of the 250 groups under the NCEMSF umbrella, only 50 have an ambulance).

This is where the idea of a campus EMS "brand ambassador" comes into play. Does your campus-based EMS group have a high profile on campus? Does your group take the opportunity to connect with every incoming student at orientation? Is there a visible presence at activity fairs? What sort of outreach is done with the campus community (e.g., CPR courses, BP screenings, and workshops on relevant topics such as sports-related head injuries)?

What about a visible presence at more passive activities such as intramural sports, concerts, or other social functions? These lower profile events are just as important and can lead to meaningful casual interactions with the campus community – but only if the team members make an effort to not be wall flowers. For these events, it's too easy to stage in a corner of the venue and hide from the public. Being a brand ambassador means being more outgoing and proactively seeking interaction with the campus community at these events.

I was recently reminded of brand ambassadorship at the grand opening of an outpatient medical facility close to my home. Being part of a large regional health network, the new facility pulled out all the stops for welcoming the public.

Dozens of exhibitor tables were set up inside, lining the hallways with snacks, giveaways, informational posters, and (most importantly) smiling employees cheerfully greeting visitors.

The most enthusiastic brand ambassador I found that day was actually outside in the parking lot. A flight paramedic from the health network's aeromedical service was giving tours of his "office," a Eurocopter 135 helicopter that had been staged in the corner of the lot. In his crisp crimson flight suit and aviator glasses, this paramedic looked as if he'd been expertly cast for the part. More important than how he looked was how he interacted with the audience. He quickly established a good rapport with adults and kids alike, offering to show them anything on the aircraft or answer any questions they had. When a child getting a tour of the helicopter was simply awestruck and didn't have a specific question, the paramedic would ask them something like "Do you know how fast we can fly in this helicopter?" to spark interaction and break the ice. This flight paramedic, whom I had never met before, was the epitome of community outreach.



While campus EMS vehicles (ambulances, golf carts, Gators, or bicycles) aren't as expensive or showy as a helicopter, campus EMS personnel should be just as enthusiastic as the flight medic about what we do for our campus communities. Even if your squad's headquarters is tucked away in the basement of an academic building, your campus presence doesn't have to be contained within those four walls. I'd urge you to proactively seek out opportunities for positive interaction with your campus population. There is no "right" time to start such a program – anytime is a good time for making a positive impression on your campus.



## Regional Roundup (October to December 2013)

News from Around the NCEMSF Regions

### From the National Coordinator

The Regional Coordinator (RC) network facilitates communication between NCEMSF and its constituents. It is through the Regional Coordinators that NCEMSF is best able to accomplish its mission of advocating and supporting campus based EMS. The Regional Coordinators are equipped to assist each squad with the day-to-day issues it faces and to help publicize squad achievements. There are few issues that the NCEMSF leadership has not seen before and for which it is not equipped to offer advice and guidance.

This past month, two new RCs were appointed representing NCEMSF's largest regions - Massachusetts and New York. NCEMSF thanks Kathryn Ahnger-Pier (Kinzel) and Eric Pohl, our outgoing MA and NY RCs, for their years of dedication and service. Both plan to remain involved in the Foundation pursuing new projects and areas of interest.

Taking the role of MA RC is David Afienko from Massachusetts Maritime Academy where he was a founder and chief of MMA EMS. Dave currently works for a private ambulance service in the Boston Metro area and is working towards medical school.

The new NY RC is Matthew Ricci. Matt, an alum of UMass Lowell EMS with an extraordinary background in Emergency Management, currently works for JetBlue Airways in its Emergency Management Department. Among many other projects, Matt is responsible for JetBlue's Emergency Command Center.

Both Dave and Matt have been involved in the Foundation since beginning their collegiate EMS careers. Please join me in welcoming them to the NCEMSF leadership team!

Regional Coordinator vacancies exist in the Northern New England, Southeast and West regions. If interested in applying please contact Stephen Lanieri - [nc@ncemsf.org](mailto:nc@ncemsf.org).

### Central

*Creighton University EMS Education Department* hosted its seventh annual EMS Competition the weekend after National Collegiate EMS Week. This year, twelve teams competed.



Representatives of EMS agencies from across the country competed alongside Creighton EMS students in BLS and ALS categories. Participants were given fifteen minutes to respond to a realistic disaster scenario and were responsible for treating both mannequins and moulaged volunteers. This year, the ALS winner was Boca Raton Fire/Rescue Department, and the BLS winner was a team comprised of current Creighton paramedic students, including EMS club president Drew Schramm.

A device created in part by former *Rice EMS* Captain Michael Pandya and former Lieutenant Haruka Maruyama was featured in the United Nation's publication "Breakthrough Innovations that can Save Women and Children Now." The Bubble CPAP (bCPAP) is a low-cost alternative to existing neonatal CPAP devices. The device is currently being deployed to hospitals in Malawi, Africa, and work is underway to expand it to other countries as well. The development of the bCPAP is part of a larger project at Rice called "Beyond Traditional Borders," where a cross-disciplinary mix of students and faculty work to bring technological advancements to impoverished areas around the world. The teams regularly include EMTs from Rice EMS.

In addition to its EMT and AEMT classes, *Rice EMS* launched a new course for the Fall 2013 semester: an Undergraduate EMS Research Course. This course is a unique educational experience, designed for students in Rice EMS to be able to participate in a prehospital research project supervised by a Physician Faculty member from the Baylor College of Medicine. The course is being supervised by REMS' Associate Medical Directors Dr. Mike Gonzalez (Rice '93), and Dr. Shane Jenks, and EMS Director Lisa

Basgall. Students in the course receive three hours of 400-level natural science credit.

In late September, *University of Arizona Student EMS* expanded to providing coverage 24 hours a day, seven days a week. Prior to this, the group had provided coverage only on nights and weekends. According to Chief Brandon Murphy, "Implementation of 24hr response has not only benefited the campus community, but has also doubled our call volume and given our responders the chance to educate themselves on a wider range of emergencies." The organization is also switching to electronic charting and has placed an order for a gasoline-powered golf cart for campus responses.

A campus EMS group at the *University of Colorado - Boulder* separated from its parent organization, Student Emergency Medical Services (SEMS). The driving force behind this was that the group felt that, as a separate entity, it could better focus its energies on fulfilling its potential as an emergency response organization. As of February 2013, the group now operates under the name of the University of Colorado Emergency Medical Service (CU-EMS). With each group able to put emphasis on different services, CU-EMS and SEMS work in tandem to provide CPR and alcohol education as well as emergency response.

Currently, CU-EMS primarily works as medical stand-by for various events put on by the University, the Greek community, and surrounding communities, including the Denver Marathon. Those members who worked at the marathon had with many great

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stories, reporting a plethora of complaints ranging from the common muscle cramps and blisters, to more intense cases such as hypothermia and dehydration. Throughout the day twelve CU-EMS EMTs treated 51 moderately critical patients and assisted with countless other less critical patients. Being as large as the event was, the EMTs were able to work along side teams of veteran doctors, nurses, PAs, and paramedics. This aspect of the event led to benefits reaching far beyond just watching over the more than 14,000 runners.

CU-EMS also received news it was selected as one of fifteen finalists in 3M's "Dream for Good" contest (CU-EMS has subsequently learned it has been granted the award - Congratulations!) The premise of the contest is to have the nation choose whom they believe should be awarded a \$25,000 prize to be used to help fund a dream that each group proposed upon entering the contest. CU-EMS submitted its aspirations of managing a first response vehicle with which it could expand the variety of the services it can provide for the community.

Midatlantic

George Washington University EMeRG raised over \$8,000 in three days this past

semester to fund a dispatch computer system, IMobile, that would allow it to be completely integrated into Washington DC's dispatching system. IMobile allows EMeRG to be the first due at all GW owned buildings, so EMeRG is dispatched regardless of whether or not the student, staff, or faculty called the campus emergency number or 9-1-1.

University of Delaware Emergency Care Unit held a training class for members interested in becoming an ambulance driver. Members practiced maneuvering the ambulance in a cones course, as well as "spotting" techniques. This class is one part of the UDECU driver training program, which also includes attending Delaware State Emergency Vehicle Operator class and over twelve hours of supervised road training.

Midwest

Indiana Collegiate Emergency Medical Service (IC-EMS) of Indiana University has been working hard this semester to increase campus safety by offering low-cost CPR and First Aid classes to students, especially in IU's large Greek system. These Greek organizations are being trained to recognize emergencies and act as First Responders. IC-EMS has even teamed up with another campus organization to provide

participating Greek organizations with free First Aid Kits. They are also implementing a brand-new electronic reporting system provided to them by the Indiana Department of Public Health.

Pennsylvania

Villanova University of EMS and Desales University EMS participated in a large scale EMS exercise in Lehigh County, PA with local fire, police, EMS, EMA, and hospital staff. The exercise involved campus-based EMS and public safety response to an active shooter incident on the campus of DeSales University. A mobile field hospital was established and staffed with emergency medicine residents and attending physicians. Student nurses and Physician Assistant students from DeSales were placed in the triage and treatment areas to provide them with a realistic clinical experience in treating simulated critically ill patients during a large-scale field exercise. Local responders and hospital staff from Lehigh Valley Health Network provided clinical education to the student nurses and PA students.

**Do you have news about your squad you'd like to share? Contact your RC and look for it in the next issue of NCEMSF News. You can also update your NCEMSF Institutional profile...**

NCEMSF is pleased to announce an upgrade to the EMS Organization Database. Previously, the Database was a way for squads to list their location, information about their response capabilities, and the demographics of their school. Now, squads can also use the database to publicize their **social media profiles**.

To add social media links to your squad's profile, and to ensure that the information contained there is up-to-date, begin by logging in with your squad's **Institutional Profile**. Once logged in, you will see a link at the top of the window, above the banner, titled "**Institutional Database Profile**." On the page that follows, use **Option Two** to edit your EMS Organization Database profile.

In the profile edit page, social media links will be below the organization address and webpage fields. For each social media network, part of the URL is pre-filled. Please type (or copy-and-paste) only the missing part of the URL. For example, for the NCEMSF Twitter *(Continued on page 5)*

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*"The large scenarios and SAR were the highlights of this class because I was able to practice skills that I don't otherwise get to use on a daily basis in the ambulance, yet I have a great interest in them." —WUMP grad, Paonia, Colorado*

**FIND MORE INFORMATION AND A COMPLETE COURSE SCHEDULE AT [NOLS.EDU/WMI/COURSES](http://NOLS.EDU/WMI/COURSES), [WMI@NOLS.EDU](mailto:WMI@NOLS.EDU), OR (866) 831-9001.**

**How were Collegiate EMS Week and CPR Day celebrated on your campus???**

**Email stories, photos, videos, press releases and local press coverage to:**

**emsweek  
@ncemsf.org**

### About This Publication

NCEMSF NEWS is an official publication of the National Collegiate Emergency Medical Services Foundation (NCEMSF). This newsletter is published as a service to the Foundation's members and the national EMS community.

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## EMS Week 2013: Recap

NCEMSF EMS Week Coordinator

National Collegiate EMS Week, the week-long recognition and celebration of collegiate emergency medical services, was held November 11 through 17. National Collegiate CPR Day kicked off the week. The goal remained to have as many college students as possible educated in the basic principles of CPR on a single day across North America.

Collegiate EMS Week received recognition within the greater EMS community with articles appearing on EMSWorld.com, American College of Emergency Physicians EMS Week Publication, and various national discussion groups. Furthermore, many local news agencies and campus papers covered local events. Here are some of the events that took place.

*Hopkins Emergency Response Organization (HERO)* produced a video to get the word out about how easy Hands-only CPR is and set up CPR manikins on a popular quad. Their CPR video was shared by more than 270 people, and viewed over 2300 times! They made the video originally to go around the campus to spread CPR Awareness. However, the video was shared by others and traveled around the world! People were commenting to call 999 when they shared, while others said to call 112. Some wrote in Spanish, while others wrote in Chinese...they never thought that CPR Day at Hopkins would reach people across the globe. It's amazing how powerful social media is in public health. The video is available on NCEMSF's Facebook page.

Members of HERO stood by the manikins in the quad to teach anybody who was interested. It worked because 57 people stopped and tried chest compressions for themselves. They taught a wide range of people Hands-only CPR, from five year-olds to professors. Many were very interested in CPR because they saw it in the movies. Members assured them it was easy to help save someone's life.



*Rice University EMS* conducted two compression-only CPR classes (60+ participants), cardiac arrest demonstration, vital signs check, and recognize REMS day - all members wear a REMS t-shirt or polo.

*The College of New Jersey (TCNJ) Lions EMS* main event during EMS week was a CPR demonstration table in the Student Center for CPR day. Lions EMS also made and displayed a big banner in the Student Center to promote EMS Week and learning CPR.

*University of Arizona EMS* held a compression-only CPR class, vitals signs check and an opportunity for students to meet responders.

*University of Texas at Austin Longhorn EMS* held compression-only CPR classes. The Captain of Auxiliary Support, Taran Santiago, put out a tent on the mall and taught CCC CPR to students that walked by, answered any questions they had in general about EMS on campus, what the group does, and how to become a member.



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account, <http://twitter.com/> is pre-filled so we would only type in **NCEMSF**. Some social networks (including LinkedIn and Flickr) do not have standardized URL formats, and these networks may require copying-and-pasting a more complicated URL snippet. After you have added the social networks you want to include, save the profile by clicking **Submit** at the bottom of the page.

You will now be brought to the public view of your squad's profile. Below the contact information, you will see icons for the social media networks for which you provided links. Please be sure to **test the links** and correct any mis-formatted URLs. Should you have any questions you can submit a helpdesk ticket at [www.ncemsf.org/support](http://www.ncemsf.org/support).



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**Please visit the Membership section of the NCEMSF Web site to keep your contact information up-to-date. Renew your membership for the current academic year and update your contact information. Thank you for your ongoing support of campus based EMS and NCEMSF!**

**The NCEMSF Database of Collegiate EMS Providers is an excellent resource in the event of natural disaster or other public health emergency. Please keep your information up-to-date so that should the situation arise, we can contact you and collectively as campus based EMS answer the call to act!**



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