

President's Message

Greetings,

Happy New Year



I am honored to be serving as your President in 2004. I first served as President of NECHA in 1990-91.

NECHA and ACHA have played a major role in my professional life for the past 25 years. I attended my first NECHA meeting in 1979 and my first ACHA meeting in 1984. My involvement in these organizations has helped me realize my true passion, college health, and I encourage you all to become more involved.

As we begin a new year, I'd like to look back to the beginnings of college health and to where we are now. I have been reading *The History and Practice of College Health*, by H. Spence Turner and Janet L. Hurley, which provides an excellent history of ACHA. Since 1861, when Amherst College was the first to create a "Department of Health and Hygiene", college health services have had some unusual responsibilities, including setting up and conducting physical education programs, isolating and caring for students with now eradicated communicable diseases (i.e. typhoid in the early 20th century), and overseeing sanitation in "dorms, lodgings, pool, washrooms and eating places".

Founded in 1920, the American College Health Association (ACHA) will hold its 84th Annual Meeting in New Orleans this coming June. In 1927, NECHA became the second ACHA affiliate; however, the early history of our organization is sketchy. The first conference brochure in our records is from a meeting at UNH in 1968. Who were the original founders of NECHA? What inspired them to establish the organization that benefits us all today? Where and when was the first meeting held? What topics were discussed? Perhaps one of you may be inspired to find the answers to these questions.

Although it seems like ancient history now, ten years ago, we were dealing with the challenges that health care reform would pose for the field of college health. The implementation of CLIA and OSHA regulations, accreditation, college health nurse certification and outsourcing were significant issues of that time.

One major change in college health that I have personally seen, since my first term as president, is the increasingly vital role of the Internet. In June of 1992, the NECHA newsletter included lengthy instructions on "Cruising the Internet," as well as an introduction to *The College Student Health Bulletin Board*, which began with 12 members. Two years later, more than 500 college health professionals were communicating with each other daily. In 2002, the SHS Listserve had 1600 individual members representing over 400 institutions and has become the major source of information, discussion and debate on college health issues.

For information on membership, conferences and meetings, publications and guidelines, and other programs and services for college health professionals, please visit the ACHA Web site at www.acha.org. It also includes a link to the NECHA Web site or you can access us directly at www.nechaonline.com.

I would like to thank you for electing me as your president and invite you to contact me or any of the members of the board with your ideas, comments, recommendations, and especially your interest in becoming involved in NECHA.

Carole Worsh, APRN-BC, ANP
2003-04 NECHA President
Director, Health Services
Pine Manor College
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*Submissions are welcome
for the NECHA News Spring/Summer issue.
Deadline for submissions is April 1—no foolin'!
For more information contact Julie Basol,
jnb@gmavt.net*

In This Issue:

Page 2 – Upcoming Conferences

**Page 3 – Back on the Coast! 2004
Annual Meeting Update**

**Page 5 – NECHA AIM – Renew your
membership for 2004!**

Page 7 – Here's What's Happening with ACHA



2003 Combined Annual Meeting Recap – Thank you, NECHA!

Linda Dudman,
NYSCHA Conference Planner

Thank you to everyone who helped make the 2003 Combined Annual Meeting a success. Seeing so many people enjoying themselves and feeling the energy and enthusiasm at the Meeting was wonderful. Many attendees commented on the number and variety of programs and the excellent speakers. We took great care to identify topics and speakers to meet the interests of the many disciplines in college health. Everyone loved our keynote speaker, Sid Hurlburt. Sid started the Annual Meeting off well with his outstanding keynote presentation.

Approximately 240 people attended the Meeting, with a fairly even distribution of attendees from New York State and New England. Over half of the attendees applied for continuing education credits. We were pleased with the very positive response from exhibitors.

Certificates for continuing education credits were mailed the first week in January. Questions about CE certificates should be directed to me at: ldudman@uhs.rochester.edu or 585 273-5770. Certificates of attendance were not mailed to attendees who did not apply for CE credits. If you need a certificate of attendance, please contact me.

I would like to take this opportunity to thank Carole Worsh who represented NECHA on the Planning Committee. It was a pleasure working with Carole throughout the year. She enhanced our planning process with her numerous suggestions and contacts. I would also like to thank Peter Nobes for his support. In addition to presenting, Peter loaned a laptop and LCD projector from UVM (and made sure they were set up and

working) for the duration of the Annual Meeting. Anyone who has needed to rent this equipment knows the savings this involved. I would also like to thank everyone from New England who presented at the Annual Meeting. Your support, interest, enthusiasm, and expertise is very much appreciated.

I thoroughly enjoyed the opportunity to work together with NECHA to offer the Combined Annual Meeting. I look forward to joining you in Burlington in 2005.



Congratulations to the State Basket Winners!

Connecticut:	Kathy Macione
Maine:	Mary Olson
Massachusetts:	Julia Duffy
New Hampshire:	Gail Langley
Rhode Island:	Lauren Madden
Vermont:	Peggy Mantey

TB 101 Scores a 10!

TB101 for college and university health services personnel was held on November 18, 2003 at the College of the Holy Cross. Sponsored by NECHA, the Medical Advisory Committee for the Elimination of Tuberculosis (MACET), the Massachusetts Division of TB Prevention and Control, and the Massachusetts Department of Public Health, the free seminar brought together public health experts on the topic of tuberculosis and about 100 college health professionals from across New England.

In August, the Medical Advisory Committee for the Elimination of Tuberculosis (MACET) and its college health subcommittee published a guide for college and university health services entitled, *Detection and Treatment of Latent Tuberculosis Infection in Massachusetts College and University Students*. The development of this guide was undertaken in response to requests from college health services for clarification and guidance in managing TB infection and disease.

The MACET College Health Subcommittee consisted of experts in tuberculosis and public health, and representatives from university and college health services. Health service administrators were key advisors to ensure a practical approach that would improve the ability to detect and treat latent TB infection and disease.

The guide focuses on risk assessment and offers health service providers detailed guidance on targeted testing for LTBI and treatment of persons found to be infected based on risk. Recommendations follow current published guidelines for the American Thoracic Society (ATS), the federal Centers for Disease Control and Prevention (CDC), and the Infectious Diseases Society of America (IDSA).

In the guide there are four components: 1) the tuberculosis risk assessment; 2) targeted testing for TB infection; 3) performing the clinical evaluation on students found to be infected; and 4) treatment of latent TB infection. Each chapter is divided into four sections: a) scientific rationale; b) operational guidance; c) sample forms; d) program evaluation. The guide will be kept up-to-date by MACET.

You can download the guide at the MDPH Web site: www.state.ma.us/dph/cdc/tb/index.htm or contact the Division of Tuberculosis Prevention and Control at 617 983-6970.

Other news of note is the repeal of Massachusetts General Law, chapter 71, section 55B. This law required school personnel and volunteers in schools who had student contact to have pre-employment TB skin testing. This law was obsolete—not in conformity with recommendations from ATS/CDC/IDSA, and it was ineffective for detecting new cases of TB. The repeal was effective July 2003.

Upcoming Conferences

**SLEEP & COLLEGE STUDENTS:
PROBLEMS & SOLUTIONS**

**NEWPORT HYATT REGENCY
NEWPORT, RHODE ISLAND**

MAY 7-8, 2004

Presented by Brown Medical School, this course is directed to student health service providers. Attendees will learn about normal sleep, how sleep issues impact on mood and performance, and how to recognize and treat sleep and circadian rhythm problems in students.

This program has been approved for AMA PRA credit.

For more information:
CME Office, Brown Medical School
cme@brown.edu or 401 863-3337.

NECHA ANNUAL MEETING



Save the dates and set sail to Portsmouth, New Hampshire for NECHA's 2004 Annual Meeting. Back on the coast, we are very pleased to convene November 3 – 5 at the Sheraton Harborside Hotel. With all the New England politicians on the national scene this year, we'll have lots to discuss and banter between sessions!

Second round Call-for-Proposals are due **Wednesday, February 18**. To submit a proposal, simply download and complete the proper forms from our Web site. The theme, *Navigate Your Way in College Health*, can speak volumes about the many presentations that apply to this year's theme.

Random ideas: 1) Innovative new programs conceived at your health center, copied from another; 2) Leadership successes on campus; 3) Town/gown collaborations; 4) Student-run programs; 5) Cutting-edge clinical advances in college health, and more!

The 2004 Program Planning Committee brings a wealth of expertise to the table and is eager to hear your ideas too. The Committee will meet early March to review the proposals and begin to fill in the programming gaps. Don't delay – give Program Chair Charley Bradley a call today to knock around a few ideas. Or contact any Committee member to run your ideas past them:

2004 PROGRAM PLANNING COMMITTEE

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Seeking Local Arrangements Committee Members

Affectionately known as the LA Committee, we're seeking volunteers to help attendees feel right at home in Portsmouth. Contact Julie if you would like to help decide on banquet entertainment, after-Meeting activities, early morning yoga class or midnight run to L.L. Bean!

Watch for the LA Report in future newsletters as the local arrangement planning begins!

**Share Your Expertise - Submit a CFP
by Wednesday, February 18. Download the forms
at
www.nechaonline.com**

Connecticut

Michael Kurland, MSPH

As far as I know, Connecticut is one of the only states in the nation that requires ALL students who live in UNIVERSITY HOUSING to be vaccinated against bacterial meningitis.

Several states require submission of a waiver if a student chooses to not receive a vaccination, however, the only valid reasons Connecticut state law allows for non-vaccination are religious or medical exemptions.

At the recent Combined Annual Meeting, I attended a session on meningitis vaccination and the implementation of New York state's new law. We discussed the difficulties of enforcing the law. Attending the session was a reporter from the *Chronicle of Higher Education* who later contacted me regarding our experience with Connecticut's relatively new state law. At UConn, we partnered with our Residence Life staff in this enforcement endeavor. We had about a year to vaccinate all existing students, so we set up several clinics and publicized the new law and availability of our clinics.

During that year, we vaccinated several thousand students. In order to accommodate incoming students, we set up vaccination clinics on move-in day. What is our rate of success? To date, ~97% of our residential students have been vaccinated. What problems have we encountered? Record keeping is tedious. Many students have faced great difficulty obtaining vaccinations from their primary care providers due to lack of publicity of the state law to medical care providers as well as the inability of private practitioners to obtain/stock an adequate amount of vaccine due to cost and shortages.

Thus far, we have not had a problem with the cost of the vaccine. (student pays for the vaccination, currently \$100) While it is a relatively expensive vaccine, the major insurers in Connecticut pay for the vaccine and our student health insurance plan also covers it. Additionally, if a student reports that they are unable to afford the vaccine, if they pass a "means test", we then receive free vaccine from the National Organization for Rare Disorders (orphan@rarediseases.org). Please contact me if you have any questions about the law or how we are implementing enforcement.

Maine

Jeff Benson, MD

Maine college health leaders have been working with the Maine Bureau of Health to help craft meningococcal vaccine legislation for the state's college students. It's been an interesting-and laudatory-experience in collaboration. The Maine legislature had been approached by the parents of a young man who had tragically died from meningococemia (incidentally, not a college student). They hoped to sponsor legislation similar to that already enacted in a number of New England states. BOH officials invited college health leaders to the initial legislative hearings and subsequently met with a larger group of college health professionals from around the state to discuss the issue. The end result will likely be a legislative initiative that is informed, sensible, and helpful.

Incoming college students will be sent a health update newsletter written by BOH and college health providers, that will discuss meningococcal risks and the possible benefits of vaccination. This legislative mandate then, will ensure that we are "officially" doing what we all agree we should be doing (and what we are already doing on a school-by-school basis.) In the future, this venue will also allow for discussion of other college health issues of concern. Hopefully, it signals the start of important collaborative work between the Bureau of Health and the Maine College Health Association.

Massachusetts

Vanessa Britto, MD

Hollywood came to Wellesley not long ago and left behind some interesting reflections. Although the recently released movie *Mona Lisa Smile*, starring Julia Roberts and Julie Giles, uses the backdrop of Wellesley College in 1953, it could have been set on any number of beautiful college campuses in New England. The central issues playing themselves out at Wellesley College of yesteryear were not unique but were experienced in selective colleges up and down the eastern seaboard. Since I am in no way, shape, or form a film critic, my "take home message" was not nearly as deep as that of Gene Siskel. Nonetheless, I did find myself thinking about some of the stark contrasts between students who walk through the doors of our health service now versus those that conspired with "school nurses" to "break the law of Massachusetts" in order to get cervical

diaphragms, as occurred in the movie.

Fifty years later, as we work hard to optimize the health of students, we have to consider who are today's students. Equally importantly, in order for us to stay relevant in the minds of students and truly weave our health services into the fabric of our campuses, we have to realistically think about what students of the future will rightly expect from us. For example, one of my colleagues recently stated that it is our responsibility to think about the growing role technology will play in students' lives and acknowledge how we might embrace rather than fight it. Similarly, it is our responsibility to consider how we will be progressive and visionary in the services we offer students as we integrate complementary and alternative therapies into our practices when appropriate.

What will be the family dynamic of students entering college in 2020 when surrogate parenthood may be relatively commonplace or when the ethnicity of birth parents is quite divergent from that of the parents raising the child? In what ways, if any, will the biopsychosocial developmental models of the college age population be turned upside down or inside out? What about our preparedness for an emerging infectious disease process that might step off an international plane flight at the end of winter break? For whom and for what should we be ready? What should we be thinking about? Well, one thing is certain...5-10-20 years from now we must be able to confidently say to students, "No, this is *not* your grandmother's health service!"

New Hampshire

Laura Rubinstein, BA

As part of last fall's Mental Health Awareness Week, the Dartmouth College Health Service's Health Resources Department worked with the Student Health Advisory Committee to put on a depression-screening day.

The program was entitled *How are you feeling?: Test your moods here?* In all the advertising the title was followed by this text - We know that when a student is suffering it affects friends, teammates, hall-mates and all members of their smaller communities. We hope that this screening will not only identify students who would benefit from support, but enable students to better recognize signs and symptoms of this debilitating illness in others.

(continued on pg. 6)

2004 NECHA Awards – Nominate a Worthy Colleague Now!

Nominations for the 2004 NECHA President's Award and Louise Gazzara Award are being sought. Recognition among peers and colleagues can be the highest form of flattery and a testament to professionalism and good ol' hard work! Past-president, Peter Nobes is chairing the committee this year and is accepting nominations through Thursday, April 1.

The Awards Committee will meet over the summer and recipients will be chosen in the early fall. Awards will be given at the 2004 Annual Meeting in Portsmouth. Both recipients will have their registration fees waived for the Combined Meeting in 2005. For more information on awards, visit our Web site at www.nechaonline.com.

FAQs on NECHA AIM Membership

Q: I am already an ACHA individual member – why should my college belong as a NECHA AIM?

A: NECHA AIM membership benefits the entire staff, allowing all attendees from a member school to receive member registration rates at NECHA-sponsored events, formerly reserved for individual ACHA members only. In addition, 2004 AIM schools will also receive a resource book, filled with easy access colleagues throughout New England.

Q: How long does my membership continue?

A: Memberships are based on the calendar year.

Q: Can my institution sign up when my fiscal year begins in July?

A: Indeed! However, 2004 memberships must be completed in order to receive member registration rates at this year's Annual Meeting.

Q: What will I pay for CEUs at the upcoming NECHA Annual Meeting?

A: Fees for CEUs will continue to be linked to ACHA individual membership status. All monies paid for CEUs at the Annual Meeting are, in turn, sent to ACHA.

2004 NECHA AIM SCHOOLS TO RECEIVE FREE RESOURCE BOOK

RENEW OR INITIALIZE YOUR MEMBERSHIP TODAY!

ENTERING ITS THIRD YEAR, NECHA AFFILIATE INSTITUTIONAL MEMBERSHIP (AIM) HAS BENEFITED MANY, MANY SCHOOLS THROUGHOUT NEW ENGLAND WITH 80 MEMBERS IN 2003!

FROM LOWER FEES AT THE REGION'S ANNUAL MEETINGS TO FREE WORKSHOPS, MEMBER SCHOOLS ARE SAVING HUNDREDS BY SIMPLY BELONGING. IN 2004, NECHA AIM SCHOOLS WILL RECEIVE TWO FREE RESOURCE BOOKS TO HAVE EASY ACCESS TO OTHER COLLEAGUES FROM NEW ENGLAND. ADDITIONAL BOOKS ARE AVAILABLE FOR A NOMINAL FEE.

QUESTIONS? CONTACT JULIE BASOL OR VISIT OUR WEB SITE TO LEARN MORE.

THE MEMBERSHIP FORM IS ALSO AVAILABLE ON LINE AT

WWW.NECHAONLINE.COM



Membership Application 2004 Affiliate Institutional Membership (AIM)

Applying for a NECHA membership is easy! NECHA Fed ID # 23-7132676

1. Complete all required information on this form
2. Return this completed form with your payment to :

New England College Health Association

741 Hand Road

No. Ferrisburgh, VT 05473

Ph: 802 425-3936 F: 802 425-5507

e-mail: jnb@gmavt.net

_____ Date of Application

\$50/institution

Institution: _____

Contact Person: _____

Preferred Degree: _____

Position / Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail Address: _____

Secondary Contact: _____ Phone: _____

• # of staff members at my health center: ____ full time; ____ part time; ____ per diem

• My health service reports to (department): _____

By focusing on helping friends the goal was to decrease the stigma of attending the screening. Additionally, programming credit was offered through Greek Life and residential education for participants, and free t-shirts were distributed.

Is she here for a free t-shirt, programming credit for her sorority, or because she's suffering from depression? It was a mystery to onlookers and the hope was that it created a safe space for students to get help. Over 200 students were screened; each filled out the five minute survey from Screening for Mental Health Inc., (www.mentalhealthscreening.org), and met with a counselor briefly to review the results. Twenty-six students were referred for urgent appointments.

Giving t-shirts to 200 students can be costly, but when compared to the cost of a speaker or other promotional avenues, we can't think of a better use of resources. If you have any questions about this event please don't hesitate to contact me at laura.rubinstein@dartmouth.edu.

Rhode Island

Lynn Wachtel, MSN, FNP

Fred Procopio, MD joins the University of Rhode Island Health Services as its Medical Director, effective February 9. Born in New Haven, Connecticut, Dr. Procopio received his undergraduate education at Brown University. He graduated from The University of Vermont College of Medicine, completed his Pediatric Internship at Yale-New Haven Medical Center, and Pediatric Residency at the Medical Center Hospital of Vermont. He has been in the active practice of full-scope pediatric care in Vermont and Rhode Island. He joined Harvard Pilgrim Health Care of New England, the successor to Rhode Island Group Health Association, and was the Chief of Pediatrics at the Warwick Center for several years.

Dr. Procopio then founded Bald Hill Pediatrics where he was associated until his move to URI. Named a TOP DOC by the Rhode Island Monthly magazine in 2002, he holds appointments to the staffs of Rhode Island and Women's and Infants Hospitals as well as a faculty appointment at Brown Medical School. Dr. Procopio has served in numerous civic capacities dealing with health and health policy, including School Physician for the East Greenwich School Department and as an active participant in Phase I of the SHAPE (Statewide Health Assessment Planning and Evaluation) Study. URI and the New England

College Health Community are happy to welcome Dr. Procopio.

The Nursing Supervisor position at URI remains open to applicants.

Rhode Island College Health Services was sorry to say goodbye to Jennifer Duhamel, RN who is now working at DHS as a public health nurse consultant. Her position as Supervising Registered Nurse has been filled by Matthew McGinn. Matt previously worked as a Supervising RN for RICLAS (Rhode Island Community Living and Supports), a branch of the Division of Developmental Disabilities providing care at 22 group homes and two special care facilities in Rhode Island. He lives in Bristol with his family and wife, Patti, a nurse at Women and Infant's Hospital. We welcomed Matt to RIC with a good case of the flu only a week after he started working! (Sorry about that Matt!)

Speaking of the flu, Rhode Island College accepted free doses of FluMist vaccine from Wyeth Vaccines and distributed over 250 doses two days before the end of the semester. Great planning and prep work by the health services staff helped make everything run smoothly.

Vermont

Peter Nobes, PA

Vermont's campus health services are hoping that the unusually early arrival of influenza means the worst is over as we start the new year. The campus epidemics we experienced in November and December challenged our service delivery and enormously stressed students as they prepared for final exams. As the recommendations for influenza immunization now include advising flu vaccine for those without underlying health problems, hopefully our campuses will expand their programs (assuming vaccine supplies in 2004-05 will be adequate) during fall flu vaccine clinics.

Susan Jacques, Director of Health Services at Saint Michael's College, has been able to negotiate a collaborative agreement with Physical Therapy Center of Vermont to begin offering PT services to students on her campus. They have been augmenting their traditional health service with other supportive programs such as nutritional counseling by forging ties with community providers in the greater Burlington area.

The winter break gives centers a chance to not only catch up from busy fall semester schedules, but also accomplish some valuable training. The University of Vermont's College of Medicine,

with support from the Health Resources and Service Administration, Fletcher Allen Health Care, State of Vermont and local communities, created the Vermont Area Health Education Center (AHEC) in 1996, bringing valuable training to all parts of the state. For the second year in a row UVM's Center for Health & Wellbeing has benefited by AHEC trainers presenting an excellent training in smoking cessation. The educational team from AHEC offers many training opportunities for Vermont providers. Check out their Web site at www.med.uvm.edu/ahec.

Another important training at UVM included viewing *Southern Comfort*, a documentary dealing with medical and social issues of the transgendered community. Information about sensitively incorporating transgendered health services into a traditional student health clinic was presented by Davis Smith and Joyce Walter at the recent Combined Meeting in Saratoga. Their experience (and paperwork) has been an asset when looking at this service. Free to Be, the University of Vermont's GLBT alliance is presenting a second annual translating identity conference Saturday, February 28 on the UVM campus. For more information about the conference, check out www.uvm.edu~free2b.



The NECHA Board of Directors met in Portsmouth for their January 16 meeting. President Carole Worsh presided over the meeting at the Sheraton Harborside, the site of our 2004 Annual Meeting.

Board members from throughout New England braved the cold to recap 2003 and set out to plan for the coming year. We discussed continued promotion of NECHA AIM membership, fostering New England involvement on the national level, and furthering student involvement.

Tasks were assigned to many and committees were formed for awards and a grant program. Charley Bradley provided an update of the 2004 Annual Meeting and called upon the Board to offer suggestions for possible keynoters and concurrent session workshops.

Report from the Region V Rep

Kathy MacLachlan, MS, ANP, RN-CS

Our next ACHA BOD meeting will take place in Baltimore on February 7-8, 2004. It seems that several issues have come to the table at once and, in approaching this meeting, I want to be very sure that I will voice the majority opinion or be able to represent each side in terms reflective of our membership. Please take some time to investigate and think about the following:

1) Association of Reproductive Health Professionals-Preserving Core Values in Science:

The concerns of this organization involve both the effects of sectarian beliefs and political influence on health policy, as well as the use of funds for research based on ideology rather than evidence. ARHP proposes the following:

- National public health policy be based on evidence-based principles & practice
- Public health funding & policy not be subject to political or ideological censorship
- Public health recommendations & decisions be forthcoming from recognized experts without ideological or political concerns

In short, ARHP is asking ACHA to sign-on as an organizational supporter. The ACHA Board reviewed this request at its 5/27/03 meeting and decided to put the issue to the membership before reconsideration. The subject appeared on the ACHA Web site during the summer and member feedback will be considered in final decision making. More input is welcome and requested. For more information, the ARHP Web site can be accessed by at www.arhp.org.

2) Women's Capitol Corporation (WCC) – OTC Emergency Contraception:

The WCC has asked ACHA to support its efforts to move Plan B from prescription to OTC status. Obviously, this request invokes many issues related to personal beliefs, sex education the health education of our college students. The decision to offer support will not be taken lightly; however, with the frequency of requests for the "ECP" on most of our campuses, this is not an issue that is about to "go away".

3) Creating a Separate ACHA Section for Advanced Practice Clinicians:

This issue is not new to ACHA and the Nursing Section. It has been suggested in previous years and denied due to lack of difference in Mission Statement from those of the existing Nursing and Clinical Medicine Sections. Given the significant

increased use of nurse practitioners and physician assistants as Primary Care providers, the need to readdress the issue has surfaced. The reasons for the need are many, but of utmost importance is the lack of continuity in scope of practice in this country. Those of us practicing as NPs in New York State (and I use this example only because I am an NP and well versed in the confines of my own practice) are able to assess, diagnose and fully treat (including the prescribing of controlled substances) patients within a collaborative practice agreement with a physician.

In many states, NP and PA practice involves little more than that of a registered nurse, or may encompass the ability to assess, diagnose and not treat the patient. Our hope in establishing an Advanced Practice Section is that we can play a role in a nationwide uniform scope of practice through advocacy. I would also offer that, while I may have expanded my "scope of practice" by seeking education to advance my expertise, I will always consider myself a **nurse first** and would feel comfortable as a member of the Nursing Section for as long as I'm involved in ACHA. That would work for me and other NP colleagues but...where are the PA's supposed to feel at home and where are their issues going to be addressed? The practice concerns of NPs and PAs are very similar and, college health does provide a common meeting place for both.

This summarizes the pressing issues for February 7 & 8. My role as Region V representative is to put forth *your opinions*. Help me offer an informed response to the above questions by being in touch on any or all of the issues. You can email me at: kmmaclac@syr.edu -work; kathymac@twcny.rr.com. Please help me arrive in Baltimore in February as a person ready to accurately represent the Northeast US.

Meet the Board



Lynn Wachtel, MS, RNP

Please join us in welcoming Lynn Wachtel, MS, RNP to the NECHA Board of Directors. Lynn was chosen for ACHA's New Professional Award in 2003. As Director of Health Services, Lynn has made a

vital difference at Rhode Island College and has been applauded by her peers from RISD, Salve Regina, Bryant, and URI. She served on the panel of presenters at

NECHA's HIPAA Spring Summit last year in Northampton.

Along with other board members, Lynn braved the recent cold snap for a meeting in Portsmouth; then headed on to brave the Vermont slopes in Okemo. What a trooper she is! We look forward to working with Lynn and getting to know her better in the coming year.

POSITION WANTED

Jeffrey Roger Brown, MD has contacted NECHA as a networking gesture for possible employment. A 1999 graduate of Brown University's Medical School, Dr. Brown is seeking practice opportunities in primary care sports medicine/family medicine in Rhode Island, southern Massachusetts, or eastern Connecticut area. A college-based student health position would be ideal. Contact Julie Basol, NECHA Administrator, for a copy of his CV. Dr. Brown can be reached directly at 401 861-1191.

POSITION OFFERING

Middlebury College

Bring your expertise to work with an experienced and dynamic team of health care professionals in our brand new health center. Middlebury College seeks an R.N. or N.P. with administrative and health education experience to work with the Director in providing leadership for the delivery of health care to our interesting and diverse student body. Challenge yourself with this unique and interesting full-time position while becoming part of our College community! Excellent benefits are available. Please see our Web site for position details. This position is immediately available.

Please submit a resume and 1-page statement describing your philosophy/ approach to providing both leadership to health care professionals and implementing health education to college students to:

Middlebury College

Human Resources

Service Building

Middlebury, VT 05753

Email: hr@middlebury.edu. Fax: 802-443-2058. Visit us on the Web at www.middlebury.edu/offices/hr/ or phone our 24-hour JOB LINE: 802-443-5011.

Middlebury College is an Equal Opportunity Employer. Applications from women and members of minority groups are especially encouraged.

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