Greetings!

As I write my last column for this newsletter, I’m struck at how fast my tenure in this position has gone. It seems that just yesterday, I was learning the “proverbial ropes” of the presidency and now in a couple of weeks, the reigns will be turned over. I want to take this opportunity to thank the New England College Health Association for electing me as president and to let you know that it has been honor for me to serve you. In my final edition of the President’s Column, I’d like to provide you with updates about the work that is going on at the national and regional levels as well as important dates to remember.

**NECHA 2008 ANNUAL MEETING**

October 29-31, 2008…please circle those days on your calendars and plan to join us for the 2008 Annual Meeting of the New England College Health Association! Convening in Connecticut at the Mystic Marriott Hotel and Spa, the program schedule is complete and the quality of programming is exceptional again this year. Administrative Director Julie Basol has some exciting things in store for us. If you have not already registered for the Meeting, we encourage you to do so soon. And if your budget allows, please consider bringing a student with you. Their presence at our meetings helps remind us of the importance of student voices to address concerns and needs of the population we serve.

**AMERICAN COLLEGE HEALTH ASSOCIATION:**

- **Incorporation:**
  At the Annual Meeting in Orlando, we learned that all affiliate organizations of ACHA are now incorporated under their umbrella. The decision was unanimously supported by all affiliates. Incorporation under ACHA provides affiliates with protection from liabilities. At the Annual Meeting, each affiliate president was presented with the article of incorporation by ACHA Executive Director Doyle Randol.

- **2009 Annual Meeting:**
  ACHA is currently receiving program proposals for the 2009 Meeting in San Francisco. It is often pointed out to me in my conversation with colleagues that few of the presentations at the national meeting are by NECHA members. If you’ve presented at NECHA before, please think about submitting a program proposal for ACHA. Each year, NECHA receives positive feedback about the programming at our annual meeting from the national office. It would be great to see NECHA members presenting in greater numbers at the national meeting. For more information about guidelines for submission and deadlines, go to www.acha.org.

- **Awards:**
  Nominations for the 2009 ACHA awards begins October 1, 2008. In New England, we have many colleagues across the region making outstanding contributions to both college health and their campuses. If you know of a person, please consider nominating him/her for an award. Last year, two people from NECHA were honored at the ACHA Award Banquet in Florida:
  - **David Kraft, MD,** retired psychiatrist from UMass-Amherst received the Edward Hitchcock Award
  - **Laurie Parlin, MEd,** a health educator from The Boston Conservatory received the New Affiliate Professional Award

In addition to the ACHA awards, two NECHA members, both past presidents, become ACHA Fellows:
  - **Peter Nobes, PA,** from The University of Vermont
  - **Chad Henderson, MBA,** current ACHA President and Director of Health Services at the University of Rhode Island

If you are considering someone for the New Affiliate Professional Award, be aware that ACHA has made a significant change to the requirement. In past years, nominees were expected to have worked in college health for at least three years but now the time has been extended to five years. So, if there is a colleague that you wanted to nominate but did not because they exceeded the years of service criterion, now is your time to submit that name for consideration. Please monitor the ACHA Web site for more information on awards at www.ACHA.org.

**NECHA BOARD OF DIRECTORS**

This summer, President-Elect Ellen Reynolds and Treasurer Lynn Wachtel took the lead on creating a financial planning document for NECHA. At the ACHA Annual Meeting, the national office encouraged each affiliate to create a financial plan with the intent of maintaining good fiscal health. In August, members of the board had a conference call with a financial planner from Smith Barney and the meeting was very productive. NECHA is currently taking steps to have them manage our funds. More details to come during our business meeting (Thursday, October 30 at 8:00am) at this fall’s Annual Meeting.

There’s lots of activity happening on both the national and regional levels. Please watch the dates, deadlines, and information throughout the newsletter and our Web site: www.NECHAonline.org.

In closing, I’d like to again acknowledge the privilege it has been for me to serve you. I look forward to working with the next president to ensure that NECHA remains fiscally and programmatically healthy. Best wishes as you ease into the new school year; I hope to see you in Mystic!

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**NECHA News**

is published 3x/yr with its Fall, Winter, and Spring/Summer issues. Contributions of college health interest are welcomed! For details, contact Julie@NECHAonline.org. Winter issue deadline: January 1

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Bryant Ford, PhD NECHA President
New England College Health Association
Bryant.Ford@Dartmouth.edu 603 646-9442
It’s hard to believe that New England’s foliage is beginning to turn and there’s a definite touch of fall in the air. I guess that also means that we’re taking part in orientations, reviewing our intake procedures and welcoming students back into our clinics and counseling centers for services. I hope that you all have some pleasant and restorative vacation time over the summer, as I did.

Since our last newsletter, a near record number of people registered and attended the ACHA Annual Meeting in Orlando. I was happy to see many of you there, as well as many colleagues from around the country. This year’s Mental Health Section meeting was attended by many more than ever before. As has been the trend over the last few years, the mental health topics and presentations have increased in quality and quantity there, which has made that meeting interesting and more desirable.

The same trend has been happening at our NECHA Annual Meeting and I’m thrilled that we will be offering, for the first time, a pre-meeting workshop specifically designed for college and university mental health professionals. We hope this will become an annual tradition so as to improve the depth and quality of mental health programming at our affiliate meeting, which has already been a gem for several years.

The Pre-Meeting workshop will be held the morning of Wednesday, October 29, before the official opening of the meeting in the afternoon. The workshop will be on the topic of Multiple Roles, which we, as college mental health professionals, assume in our work in a college setting. It will be led by M. Gerard Fromm, PhD, Director of the Erickson Institute of the Austen Riggs Center and me. We will use a combination of didactic presentations and small group exercises to highlight the issues, problems and dilemmas that multiple roles create in our work. There is no additional cost for this workshop, plus, it will give you even more CEU’s - including those on Ethics!

The rest of the Meeting also looks to be very educational and stimulating, so don’t miss it!

As mentioned in the last newsletter, ACHA hosted a planning meeting this past February for a College Mental Health Leadership Summit of all of the national organizations that are working with mental health services in colleges and universities. Well attended, a great deal of enthusiasm was generated by ACHA President Leslie Sacher’s initial directive; to see “what we can achieve together that we can’t achieve separately.” Representatives came from most of the major stake holders (ACHA, APA’s (psychology and psychiatry), AUCCCD, ACPA, ACCA, NASPA, and NASW). We plan to meet again this fall to begin working on a plan and organizational structure that allows this consortium to be effective and representative.

I will be serving on the ACHA College Mental Health Summit Task Force, along with Leslie Sacher, Keith Anderson (RPI) and Chris Brownson (UTexas-Austin). This is an exciting and timely development, as the mental health needs of college students are increasingly in the awareness of our country and culture. Hopefully, this collaboration will develop into a cohesive and important voice for college and university mental health services and professionals.

On another related topic...I hope that you all are aware that in July, Senator Dick Durbin of Illinois presented new legislation, ‘The Mental Health on Campus Improvement Act’ (Senate bill 3311). This bill proposes setting standards for staffing at counseling centers, grants to achieve those standards, programs to reduce stigma and increase accessibility of mental health services on campus, and the setting up of an interagency working group to promote policy development and legislation for improving mental health on campuses.

Please be assured that we at NECHA and the Mental Health Section of ACHA will continue to be involved and work to promote the best interests of college and university mental health professionals on these and other matters.

As I review all that is happening on the ‘Psych Services’ front, it seems even more clear that we live in a time where working as a college mental health professional means a lot more that providing good therapy in the privacy of our offices. It is my hope that we can become ever more effective in our multiple roles of providing consultation, administration, outreach, education, counseling, medication treatment, and therapy. All the while, we strive to still preserve the integrity of the important work we do in the lives of the young people that come to us on their journeys.

I would welcome any thoughts, ideas or suggestions that you might have on any of these topics...or others. Enough for now...have a good semester; I hope to see you in Mystic.

John Miner, MD
Co-Director, Psychological Counseling Services
Williams College
NECHA Member-at-Large
ACHA Mental Health Section Chair

Industry Trends in Student Health Insurance
Patricia Masterson
Senior Marketing -Associate
Aetna Student Health

The New Government Accountability Report (GAO) report, along with American College Health Association (ACHA), note that 1.7 million traditional-aged college students, or 20-percent, are uninsured. This indicates that school and health services administrators have to be more attentive than ever to their student medical plans to ensure that their plans provide adequate coverage.

The GAO reported that 30 percent of colleges nationwide required students to have health insurance in academic year 2007/2008 and that some states have health insurance requirements for students. Student insurance plans are also customized to coordinate in a variety of ways with on-campus student health centers. The report referenced ACHA numbers indicating that 71 percent of four-year private, non-profit school students, 82 percent of four-year private school students and 29 percent of two-year public school students are insured.

“The GAO has taken the first step in looking at college health, and the information contained in its report is useful,” said Brian St. Hilaire, Senior Director, Market Relations, Aetna Student Health (ASH). “We have found that the average age of students who receive health insurance in our 170 client schools is 26, while the GAO report focused on the 18 to 23 year-old age bracket. There are also many issues that schools face, such as students who come from one state to study in another state and may be uninsured or underinsured. Applying these thoughts may increase the uninsured statistics in the GAO reports and what it bears on college health concerns.”

According to the GAO report, uninsured college students incurred from $120 to $255 million in uncompensated care for non-injury-related medical events in 2005.

What’s the Answer?
In Aetna’s Transforming Health Care in America initiative, the company supports health care coverage requirements for university and college enrollment similar to Massachusetts’ Quality Student Health Insurance (QSHIP). ASH and members of Aetna’s legislative group provided some of the details for the GAO report.

“Uninsured students often miss classes and/or leave college when faced with a health crisis and do not follow through with medical references even if a serious or life threatening condition exists,” said Leta Edelson, Manager of the Student Health Insurance Office of Stony Brook University (SBU), at a recent seminar hosted by ASH.

Many schools like Stony Brook University are evaluating these statistics and leaning towards insurance requirements for their students. Stony Brook’s university-administered voluntary plan began in 1988. By 1999, the voluntary health insurance plan no longer met the basic health insurance needs of their students. Enrollment decreased each year, premiums increased regularly, and 30 percent of the students had no health insurance.
........ New Location Too!

NECHA 2008 Annual Meeting

THE COLLEGE HEALTH MYSTIQUE

October 29-31
Mystic Marriott Hotel & Spa

Download the brochure at
www.NECHAonline.org

!! Continuing Education Approved !!

The countdown leading up to NECHA’s 2008 Annual Meeting has begun. THE COLLEGE HEALTH MYSTIQUE offers an fabulous Program line up and more special surprises than ever before! The Meeting has been approved for continuing education credits (even more than stated in the brochure!) by six accrediting bodies:

CME: 19; Contact Hours for Nurses: 19; PsyCE: 17
CHES: 19; NASW: 18.5; NBCC: 19

Special thanks to the 2008 Planning Committee for their hard work in pulling this year’s program together! Register early for the best rates, and check out the Web site for the full description of each session, along with accompanying behavioral objectives. We hope to see you at the Mystic Marriott & Spa for a good time and great meeting!

Ellen M. Reynolds, MS
Chair, 2008 NECHA Annual Meeting

Presiders Wanted Here’s an opportunity to be involved. We are looking for assistance for 40+ sessions. Being a presider is an easy way to get involved and make a contribution to the Annual Meeting. Presiders introduce speakers and collect evaluation forms at the end of the session. No experience necessary! To volunteer:

♦ Choose a session(s) you plan to attend and would like to preside over.
♦ Make note on your registration form or contact: Julie@NECHAonline.org.
♦ We’ll contact you with further details prior to the meeting.
♦ A presider packet will be ready for you at the Meeting’s registration table.

Check the Web site for last minute schedule changes!

Night at the Aquarium Networking Reception

Thursday evening, 6:00-8:00pm
College health professionals are cordially invited to attend a memorable reception at the nearby Mystic Aquarium.
Back by popular demand - the US Coast Guard a cappella cadets will perform once again. Join us!
Sponsored by:
Harvard Pilgrim Health Care and UnitedHealthcare Student Resources
Transportation Provided

~ Special Thanks to the Supporters of the Annual Meeting! ~

ACM Medical Laboratory
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Pharmedix
Point and Click Solutions, Inc.
The Renfrew Center
UnitedHealthcare Student Resources
University Health Plans, Inc.
& more to come!
The Florida Health Insurance Advisory Board’s 2008 legislative recommendation requires any incoming freshmen who are full-time college students to carry health insurance last year. “We went hard waiver to mainstream,” Madden, Vice President, ASH, when speaking at a recent NAFSA conference. “First, there is a lot of focus about having a basic medical evacuation service. Secondly, a medical evacuation benefit of $10,000 doesn’t necessarily include a travel assistance service which is critical for managing emergency situations. It only takes one high visible student accident, legal matter or difficult medical situation before a university starts discussing the concept. “Many of the parents and students we listened to during the focus group didn’t know what they were buying,” said Cathy Mix, Director, Client Services, ASH. “The group confirmed what we advise clients to do - explain the value of health insurance to parents, go over the benefits and show them how their health insurance plan coordinates with the student health center.”

“Of our roles with schools is to explain student needs,” Mix said. “This includes what the available products are, where to get access to information, what resources schools can give to their students.”

Also, some parents and students do not realize that their employer plans may not be the best option when traveling abroad, according to Barbara Madden, Vice President, ASH, when speaking at a recent NAFSA conference. “First, there is a lot of focus about having a basic medical evacuation service. Secondly, a medical evacuation benefit of $10,000 doesn’t necessarily include a travel assistance service which is critical for managing emergency situations. It only takes one high visible student accident, legal matter or difficult medical situation before a university starts discussing the concept of mandating insurance for study abroad students.”

For health care professionals, one way of measuring competencies is to be board certified. In December 2005 we had 542 College Health Nurses certified via ANCC examination. American Nurses Credentialing Center (ANCC) states certification is based on knowledge, skills and ability developed through experience in a specialty area of practice. When a nurse or any health professional is board certified, health care providers are telling the public (our students) that they have met a pre-defined level of educational preparation for practice as well as demonstrated competencies in their practice.

Ever since the last ANCC College Health Nurses board certifying examination was offered in 2005, ACHA and nursing leaders have been discussing options to positively recognize our College Health Nurses.

Within the last 12 months Doreen Perez, Past President of ACHA and current Board Liaison with ANCC, Dorothy Kozlowski (Immediate Past President) and Carol Kozel (Nursing Section) have been attending training sessions with ANCC to develop College Health Nursing competencies that will demonstrate specialty recognition. The ANCC College Health Portfolio Recognition will soon be a reality for our college health nurses.

We have been discussing the benefits of portfolio recognition with not only our nurses but nurses within Parish health and Forensic nursing. We all feel the benefits to nurses are far reaching. First it allows for recognition of qualification in college health as well as adding credibility to the college health nurses role in the workplace. An indicator of lifelong learning, this recognition allows for self assessment and goal setting.

At the 2008 ACHA Annual meeting in Orlando, Doreen Perez, Dorothy Kozlowski and Carol Kozel presented a session titled, “ACHA/ANCC Partners in College Health Nursing: The Recognition Process”. It was very informative and, for nurses who could not attend the meeting or presentation, you will want to watch for an update in early fall 2008 which will be on the ACHA website. Please note that nurses are not required to be members of ACHA in order to go through the Portfolio Recognition process, however, it is anticipated that there will be a discounted fee available to ACHA members.

In addition, portfolio recognition may be a process even those of us who are ANCC certified in College Health Nursing will consider undergoing. Watch the ACHA website for more information. If you have any questions, please feel free to contact me via email at: Charley.Bradley@dartmouth.edu.

Written by: Doreen Perez MS RN-BC
Edited comments by: Charley Bradley, RN-BC

Admin Files, cont. from page 2

The school researched institutions with mandatory insurance: SUNY Buffalo and Binghamton, University of Connecticut, University of Massachusetts and SBU Schools of Medicine and Nursing. Recently, Stony Brook instituted a required health insurance policy on campus and an insurance requirement enrollment model (individual students providing proof of their adequate health insurance coverage on a semester basis to the university). With that change, enrollments have increased each year, their premiums have become stable, and the health insurance benefits have increased.

Drake University is going through the same process. They started requiring students to carry health insurance last year. “We went hard waiver to maintain a healthier student body, ensure equal access to health care, reduce the reluctance of students to seek medical treatment, enhance student retention, and lower attrition rates,” said Donna Blunck, Insurance Coordinator, at Drake University, who also spoke at the ASH Insurance Coordinator seminar.

Both school administrators followed a systematic process to implement an insurance requirement program. They did research and early planning, followed by school-wide involvement.

More than ever, states are stepping into discussions on college and university student health insurance coverage. New York, Maryland, Arizona, Pennsylvania and Florida are examples of states that are evaluating the merits of insurance requirements. Proposed statutes in New York would require students who do not provide proof or certification of health insurance coverage to be required to enroll in the school’s accident and sickness insurance coverage.

The Florida Health Insurance Advisory Board’s 2008 legislative recommendations require any incoming freshmen who are full-time college students not covered under a federal HIPAA creditable coverage health insurance policy to purchase such a policy. They also require all state universities and colleges to offer only HIPAA creditable coverage health insurance policies and to develop a process for a hardship waiver for those students where purchase of such a policy might prevent their attending school.

For school administrators the message is clear. Research and analysis on their student body’s health coverage is an ongoing process. And it doesn’t stop when the Plans are in place. Schools are faced with decisions on insurance requirements that must be evaluated in the short and long term.

This article reprinted from Student Health Perspectives, a publication of Aetna Student Health. If you would like to subscribe to Perspectives, please send your name, school and e-mail address to: pmasterson@aetna.com.
Laughter at ACHA

Joleen M. Nevers, MEd
Coordinator, Health Education  University of Connecticut

At the ACHA Annual Meeting in June, I had the opportunity to attend a Pre-Meeting leadership workshop. The presenter, Dr. Stuart Robertshaw, Professor Emeritus of Psychology and Education at the University of Wisconsin-La Crosse and an attorney is the current President and CEO of the National Association for the Humor Impaired. Otherwise known as Dr. Humor, he brought me to tears. Those of us in attendance were in stitches throughout the session and continued to laugh long after the workshop was over. Dr. Humor talked about the benefits of laughter from a health perspective and the use of laughter for stress management purposes. During the session, we even participated in a “Laughter Club”.

The notion of becoming a facilitator interested me a great deal, so I looked into the process for becoming a certified laughter leader. A training in New Jersey was about to begin and while not sure what to expect, I quickly signed up for the course. Upon my arrival, I was given a manual, a shirt and several “fun” items such as a stickers and a clown nose.

The two day training provided an understanding of what a laughter club is all about, how to facilitate a session, benefits of laughter, and exercises that we can duplicate with our own clubs. I guess I wasn’t too surprised by the nuts and bolts of the two day course. What did surprise me, however was how a group of strangers can quickly become “friends” through laughter. Having the opportunity to learn together was one thing, yet letting down our guards and laughing together was what helped us to get to know one another. We came from very diverse backgrounds yet we all wanted to learn the skills for ourselves and to teach others so that they, too, could benefit from this technique. I gained appreciation for each of the other nineteen folks who participated and have continued communication and encouragement through email.

My second surprise was my own reaction to the training. I felt great (which I guess can be expected from two days off from work!), but I also found my own reactions to stressful situations becoming more positive. For example, driving home in five hours of traffic, I could have chosen to be angry and frustrated. Instead, I had fun listening to music and letting other people who wanted to get ahead of me do so. Not angry or upset, I knew I’d get home eventually and thought that I could use the time more positively to have fun. I even practiced some of the laughter club techniques in traffic!

Since the training, I’ve had opportunities to try the techniques on the Student Affairs administrative staff and a group of college students. Both groups not only participated positively in the activities but I even had people who were interested in learning how to be leaders. I never would have anticipated that one session at ACHA would have a positive ripple affect on so many people and that I’d be the one to provide the activities. What a joy to witness this creation.

For more information please visit: www.worldlaughtertour.com

My name is Mary Masson and I’d like to introduce myself as another new Member-at-Large for the NECHA Board of Directors. I have been practicing as a nurse practitioner in college health for the past ten years at St. Michael’s College, in Colchester, Vermont, just outside of Burlington. Recently, I happily took on the role of Director of Student Health Services here at St. Mike’s, taking over the reigns from long time director, Susan Jacques, who stepped down this past summer.

My role in college health has been a rewarding one over this past decade. I enjoy seeing students come to this setting, initially never having lived on their own nor having had to make decisions regarding their health care. In just a few short years, they grow and mature into young adults who come to advocate for themselves and live independently.

I have had a particular interest in working with students battling eating disorders. I am lucky to be part of a strong support team on campus, consisting of Student Health, Counseling services, and Nutritional support. It is fulfilling to be able to be a part of a team that can impact a young man or woman’s life in a positive way and to assist them in their recovery efforts.

I work closely with the students in many ways on this campus of ~2000. I run monthly health education programs with various themes, such as wellness, alcohol, healthy relationships, cancer screening, smoking cessation, and stress reduction, just to name a few. For example, just before final exams at the end of each semester, we run a stress reduction night in our student center. There is food, live jazz music and local massage therapists on hand to provide students with free fifteen minute chair massages. Needless to say, it is a big hit!!

Working closely with St. Michael’s College Alcohol Task Force, I have been involved in programming that focuses on risk reduction with the goal to end binge drinking on campus. We have many well known speakers coming to campus, especially early in the semester. These programs are combined with weekly events that are alcohol-free and provide an alternative to drinking on campus.

I have truly enjoyed working in college health and look forward to the challenges of my new position as director. We are fortunate that Susan is providing part time clinical services to ease the transition. I am excited to attend, what looks to be, a GREAT meeting in Mystic this October. I hope to see many of you there!
CLINICAL CHECKUP

College health providers are more likely than many other health providers to be faced with concerns about TB infection and TB exposure. The frequency of international students in our academic settings and widespread travel by many other students creates a cohort of young adults with a particularly high probability of TB infection. Testing for TB infection has long been challenging to perform and interpret. Back in 2005, the US FDA approved a blood test to use as an aid in the diagnosis of Mycobacterium tuberculosis infection: the Quantiferon Gold Test, or for short, QTF-Gt. This is a welcome and exciting addition to our clinical tools for assessing possible TB, and is well worth knowing about. But it is not necessarily a quick and simple answer to all our TB concerns, as the test has definite limitations and disadvantages.

QTF-G measures the amount of interferon gamma (INF-gamma) that is released when white blood cells from a patient are incubated with two proteins specific to M. tuberculosis. Patients infected with M. tuberculosis will have high levels of INF-gamma released after incubation, whereas patients who have not been infected should have little to no INF-gamma released. One of the chief advantages of this procedure is that it should not be affected by prior BCG vaccination, as the proteins that trigger the INF-gamma production are not present in BCG or other non-tuberculous mycobacterial infections.

The test provides a more straightforward evaluation that eliminates the technical pitfalls in planting and evaluating the PPD. I suspect the results of this test will also be more meaningful than the TB skin test to our international students who have been taught by their local doctors that if they have a positive PPD, it is due to their BCG immunization. In fact, I hope by using the QTF-G we will learn much more about this common belief.

When considering the use of QTF-G, it is important to keep in mind its limitations and disadvantages. A major disadvantage is availability. The test needs to be run on fresh whole blood that is drawn within several hours of starting the incubation. Only a few labs offer the test at this point—so if you don’t have a lab in your area, you are out of luck for a while. The blood cannot be frozen and it must be transported under controlled climate conditions. It is relatively expensive, costing between $100-300.

Additionally, there is insufficient information on its utility or reliability with use in children or immunocompromised patients.

This is a screening test—not a diagnostic test. Additional testing such as CXR, and sputum examination and culture are needed to confirm a diagnosis. Currently the CDC has approved it for use in screening people at risk for TB, in other words it is an alternative to the PPD. It has not been approved as a follow-up test to a positive PPD, and cannot be used to determine who is at risk for developing active TB disease.

With all these cautions, I’m still excited about the possible utility of this test and look forward to expanding data. The Massachusetts State Lab in Jamaica Plains (near Boston) performs the QTF-G. You need to arrange same day delivery of blood to their lab, but it is moderately priced, and results are available within 24 hours. I know some universities are starting to screen all international students with the QTF-G, instead of a PPD. Admittedly this is a challenging project, and will not necessarily work in most settings.

There is a good fact sheet available at: www.cdc.gov/tb.

Quantiferon Gold—A new blood test for TB

Margaret Higham, MD
Medical Director, Student Health Services
Tufts University

FROM THE TREASURER’S DESK

There has been much discussion during the past few Board meetings about financial investments currently held by NECHA and how these investments could be used to promote the goals of the organization without jeopardizing our financial security. The Board is interested in setting up a specific investment strategy that will maintain sufficient funds to cover current operating obligations in the event that a meeting has unforeseen financial difficulties. In addition, we hope to make use of the gains from our investments to provide grants, Annual Meeting scholarships, or donations to worthy causes.

To explore this option, a number of board members recently held a teleconference with a financial investment consultant from Smith Barney who manages an account for ACHA. Based on NECHA’s relatively small portfolio, the consultant recommended a 35% stock/65% bond investment strategy. Expecting a reasonable average annual return of 4-5%, a predictable amount of money would be available each year to fund grants and programs without spending down our capital. Smith Barney charges a 1.6% consulting and trading fee for their services.

The issue of socially responsible investing created the most dialogue during the teleconference. We were informed that, in reality, a truly socially responsible portfolio is elusive. Most funds are so broad and have so much movement that it is difficult to guarantee a purely “socially responsible” account. In addition, defining what is socially responsible can vary widely.

Although we might all agree that we want to avoid investing in tobacco and alcohol stocks, it may not be so clear when it comes to contraception, abortion or environmental issues. Because we are so small in terms of our investments, it would be too risky to pick only a few companies that meet our philosophical standards. We welcome any feedback from NECHA members who may have thoughts or expertise in this area of investing.

Moving our savings from its current position at UBS Financial Services, Inc. to Smith Barney would improve access to our funds, allow us to piggyback on the expertise available to a larger organization such as ACHA, and help the Board to solidify an investment strategy that reflects our mission and values.

Lynn Wachtel, FNP
Treasurer, NECHA lwachtel@ric.edu

SAVE THE DATE:

The Renfrew Center Foundation presents a FREE Eating Disorder Awareness Webinar for College Health Professionals

October 14, 2008 Noon - 1:00pm
For more info or to register: 1-800-RENFREW, ext. 3246

~2008 ~NECHA ~2008~
Grant Update

The Grant Committee is working hard to determine the winner of the 2008 NECHA Grant Award.
Winner will be determined in the coming days and officially announced at the Annual Meeting.
Check out Page 4 for details on how to apply for a NECHA grant in 2009.
Pine Manor College

NP Position

Title: Nurse Practitioner
Term: 16-20 hrs/9 mo.
Department: Health and Wellness Center
Reports to: Director, Health Services

Qualifications:
- NP with current MA license to practice in expanded role
- National Certification as a FNP or ANP
- Three to five years experience, including GYN and primary care, preferably in college setting
- Must possess strong organizational, interpersonal, and communication skills.

Responsibilities:
- Provide medical triage, diagnostics/treatment of acute and episodic health problems, including GYN care, to a diverse population.
- Provide consultation to nurse colleagues and other members of the health care team.
- Participate in the development, implementation and evaluation of the standards of practice.
- Participate in interdisciplinarty education programs of the Health and Wellness Center and provide clinical precepting for nursing students.
- Attend staff meetings; serve as member of committee as needed.

Hours:
- 16-20 hours per week, Academic Year
- One day per week of early evening hours. (No weekends, no call)
- Occasional early evening hours for in-dorm programming

Salary: commensurate with experience.

Contact Ronnie White: whitever@pmc.edu

Brown University Health Services

Medical Director

Brown University Health Services has an opening for the position of Medical Director. The Medical Director oversees and directs all health services and is responsible for assuring that those services meet the needs of students, the Division of Campus Life, and the University at large. The Director leads Health Services toward its primary goal of providing confidential, high quality primary patient care that is continuously improving. MD, Primary Care Specialty preferred. Seven years experience in a health organization, college or university health services preferred or experience with health issues of a college-age population. Minimum 3 years of proven leadership experience, preferably at senior management level. Demonstrated expertise in leading institution-wide committees, programs, projects. Excellent communication skills. Ability to be highly successful in cross-organizational collaborations. Demonstrated ability to provide strategic direction for complex medical organization while demonstrating successful leadership and direction for medical, mental health, and other operations.

To apply, please visit us online at http://careers.brown.edu, referencing job# E00888. Brown Univ. is an Affirmative Action/EOE.

2008-09 NECHA BOARD OF DIRECTORS NOMINATIONS

The NECHA Board of Directors consists of officers: President, Past-President, President-elect, Secretary, and Treasurer. There are 5 Members-at-Large (MAL), plus a liaison to ACHA (either the Region V Rep or Rep to the Nominating Committee). Generally an officer is selected for nomination following service on the Board as a Member-at-Large.

Once elected as President-elect, that person assumes the role of President the following year. The 2008 Nominating Committee has compiled the following slate of candidates for membership vote at the upcoming Annual Meeting:

President-Elect: Joleen Nevers, MEd
University of CONNECTICUT

Secretary: Gerri Taylor, MS, APRN
Bentley College, MASSACHUSETTS

Treasurer: Lynn Wachtel, FNP
RHODE ISLAND College

MAL: two 2-year terms and one 1-year term open:
John Miner, MD Williams College
MASSACHUSETTS, incumbent

Peter Davis Smith, MD Wesleyan University
CONNECTICUT

Denise McGoldrick MS, CHES
Amherst College, MASSACHUSETTS

Paul Berkner, DO Colby College
MAINE

2008 NECHA AWARD WINNERS

The Nominating Committee is pleased to announce the following recipients:

2008 President’s Award:
Peter Davis Smith, MD
Medical Director, Health Services
Wesleyan University

2008 Louise Gazzara Award:
Kathy Savage, RN
Nurse Manager, Health Services
Tufts University

Dr. Smith and Kathy Savage will receive a free registration at NECHA’s upcoming Annual Meeting. Congratulations!
Reporting to the Director of Student Health Services, the Director of Wellness and AOD Prevention will provide leadership, oversight, management and ongoing evaluation for all department initiatives, primarily in the areas of alcohol, tobacco and other drug prevention efforts as well as nutrition, eating disorders, stress management and sexual health. The successful candidate will be able to provide positive leadership, administration, vision and strategic planning to enhance alcohol and other drug related education, prevention and screening services, and general health and wellness education to students. Through collaborative efforts, the position will provide leadership with a broad array of constituents within and beyond the campus community.

The Department of Wellness and AOD Prevention Services includes professional staff, support staff, graduate assistants, undergraduate students and undergraduate peer educators. The Director is responsible for major personnel decisions involving staff, including staffing levels, hiring, firing, evaluation, promotion and training of employees. This position participates in the formulation of university policy in relation to the promotion of student wellness and alcohol and other drug education and prevention; and is responsible for the overall direction of the department. The Director assures the development, implementation and evaluation of goals and objectives consistent with the mission and objectives of the university. The Director is part of an integrated team that includes Health Education, Nutrition Services, Counseling and Mental Health Services, and Student Health Services. Key campus partners include the offices of Community Standards, Student Activities, Fraternity and Sorority Life, Off-Campus Student Services and the Cultural Centers.

Responsibilities include:

- Provide vision and direction for a comprehensive campus and community approach to health promotion and prevention of high risk behaviors.
- Develop and implement strategies for positive environmental change.
- Provide supervision and direction of professional employees, including health educators, prevention specialists, nutritionists and other health and wellness professionals.
- Chair campus-wide advisory committee to the Office of the President on alcohol- and drug-related issues. Provide ongoing information and advisement to senior administration relative to environmental and policy-related concerns.
- Develop and oversee programming initiatives to educate student body regarding alcohol and drugs.
- Lead effort to communicate university values and expectations to students and their parents.
- Collaborate with all relevant departments to incorporate prevention and health promotion throughout university initiatives.
- Collaborate with the Office of Community Standards in order to provide screening, prevention and education services to students who have violated university policies regarding AOD.
- Train faculty and staff about the behavioral indicators and student norms related to alcohol use and abuse.
- Participate as a member of a behavioral concerns team along with staff from the Dean of Students Office, Counseling and Mental Health, Community Standards, Center for Students with Disabilities, and Residence Education.
- Work collaboratively with programming entities on campus to increase student involvement regarding health promotion and safety and prevention.
- Develop and implement evaluation processes.
- Develop and maintain a comprehensive database on alcohol and other drug use.
- Pursue external funding (federal, state, local, private) to support research, assessment, evaluation, intervention and alternative activities.
- Coordinate appropriate screening and intervention programs.
- Coordinate with Counseling and Mental Health Services substance abuse service coordinator to ensure seamless services between CMHS and ADWS.
- Provide AOD training for residence life staff and service providers.
- Serve as a liaison with local and state law enforcement agencies for prevention initiatives.
- Provide leadership for a community-campus partnership focused on reducing underage drinking and irresponsible behaviors under the influence.

Minimum Qualifications/Skills:

- Master's degree in Student Affairs, Higher Education Administration, Counseling, Public Health, Prevention Specialist or related field required.
- At least two years' post-masters experience in a college or university setting, working with a residential, traditional-age college student population.
- Demonstration of progressively responsible administrative experience, including supervision of professional staff.
- Significant demonstrated professional experience and involvement in the functional area of Alcohol and other Drugs Prevention.
- Significant demonstrated professional experience in a comprehensive health and wellness program on a college campus.
- Commitment to multiculturalism in an academic community and evidence of program design/delivery that enhances a multicultural environment.
- Demonstrated ability to exercise sound judgment in student life and personnel situations.
- Flexibility managing complex roles and processes within a dynamic work environment.
- Demonstrated leadership ability, excellent organizational skills, commitment to a multidimensional team approach.
- Well-developed written and oral communication skills.
- Familiarity with external funding sources, specifically grants, and demonstrated potential to successfully seek such support.

Please send resumes to: Laurie.loehr@uconn.edu

Coordinator of Health Education  Bentley College

Bentley Student Health Services seeks a dynamic, creative, team-oriented health professional to coordinate and promote Health Education (21 hours per week, 52 weeks per year) for the campus community. Candidates should have extensive knowledge about adolescents and current and emerging issues in college health and also effective strategies to address these issues. The Coordinator will be expected to develop a theoretically grounded program based upon an assessment of the needs of the campus community. Candidates must possess excellent oral and written communication skills in order to present effective programs and materials to diverse audiences.

Master’s Degree in health education preferable, but will consider Master’s degrees in other related fields with above required experience. Experience with adolescent population. Innovative program planner. Excellent oral and written communication skills required. Excellent computer skills required – with website experience a plus. Creative approach to education of students and in preparation of promotional materials for students.

Contact:  Gerri Taylor, MS, APRN
          Assistant Dean, Health & Prevention
          Director, Health Services, Bentley College
          781.891.2222    gtaylor@bentley.edu
Aetna Student Health is the nationwide leader in student health insurance. Customized products and an expansive network of providers reinforce the company’s health insurance service model.

Please read our article on Page 2.