

Fast, Fair, and Effective: Measuring the Perceived Health and Equity Impact of the University of Ottawa's Volunteer Crisis Response Team

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Background

- University campuses are diverse communities with a high population density of predominantly healthy young adults¹
- University students are at risk of alcohol use and other high-risk behaviours, leading to potentially higher rates of emergency medical services (EMS) use¹⁻³
- Campus emergency response teams (CERTs), made up of student responders, were created to reduce EMS use on campus¹
- There is little research published on the impact of CERTs, especially in Canadian contexts

Volunteer Crisis Response Team (VCRT)

- VCRT, formerly known as the University of Ottawa Student Emergency Response Team, has been running since 2014
- VCRT provides 24/7 coverage for medical and mental health emergencies on campus
- Consists of 50 responders, receiving over 250 calls per year, while also providing educational support alongside the Office of the Chief Risk Officer (OCRO)

Objective

This evaluation is guided by the following aims to determine whether the VCRT program at the University of Ottawa:

- Improves on-campus health outcomes following medical and mental health emergencies
- Reduces preventable EMS calls and emergency department visits
- Ensures equitable access to emergency response and outcomes across diverse groups

Methods

This evaluation combines elements of the CDC's Framework for Program Evaluation in Public Health and RE-AIM framework, using an equity lens.

Quantitative Data: Semi-structured survey was sent to VCRT responders to provide more insight on responders' perceptions of the program as well as challenges. A second survey was sent out to Faculty of Health Science students to learn more about their knowledge of the VCRT program. Questions were mostly closed-ended. Descriptive statistics were used to summarize key findings.

Qualitative data: 6 interviews were conducted with current and past VCRT Directors, and program coordinators with OCRO. Thematic analysis was conducted, structured around the RE-AIM framework.

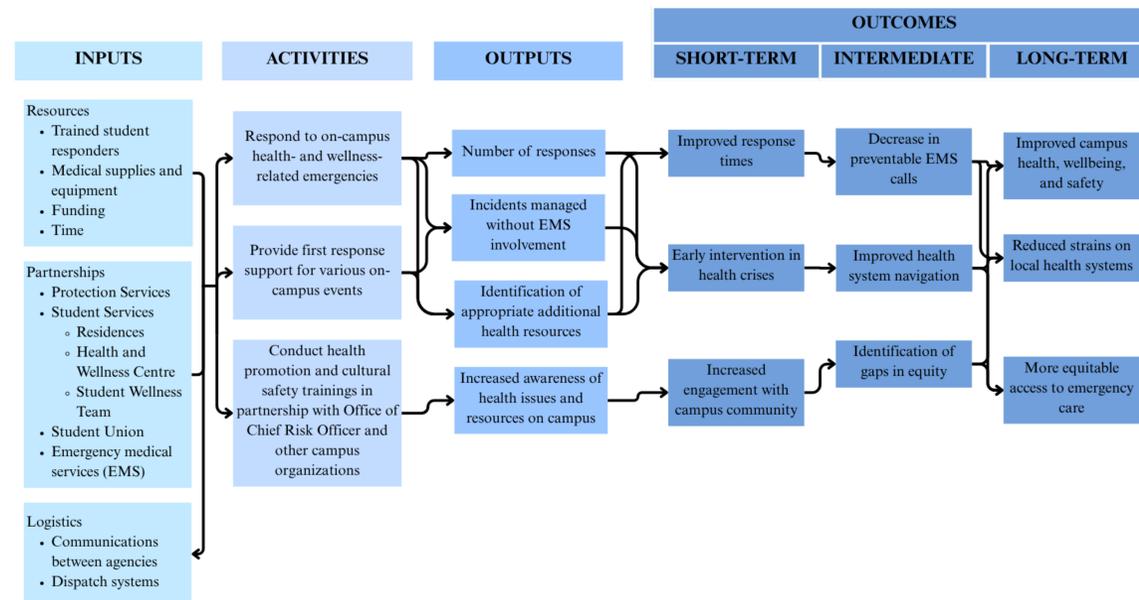


Figure 1. Logic model of the Volunteer Crisis Response Team (VCRT) program.

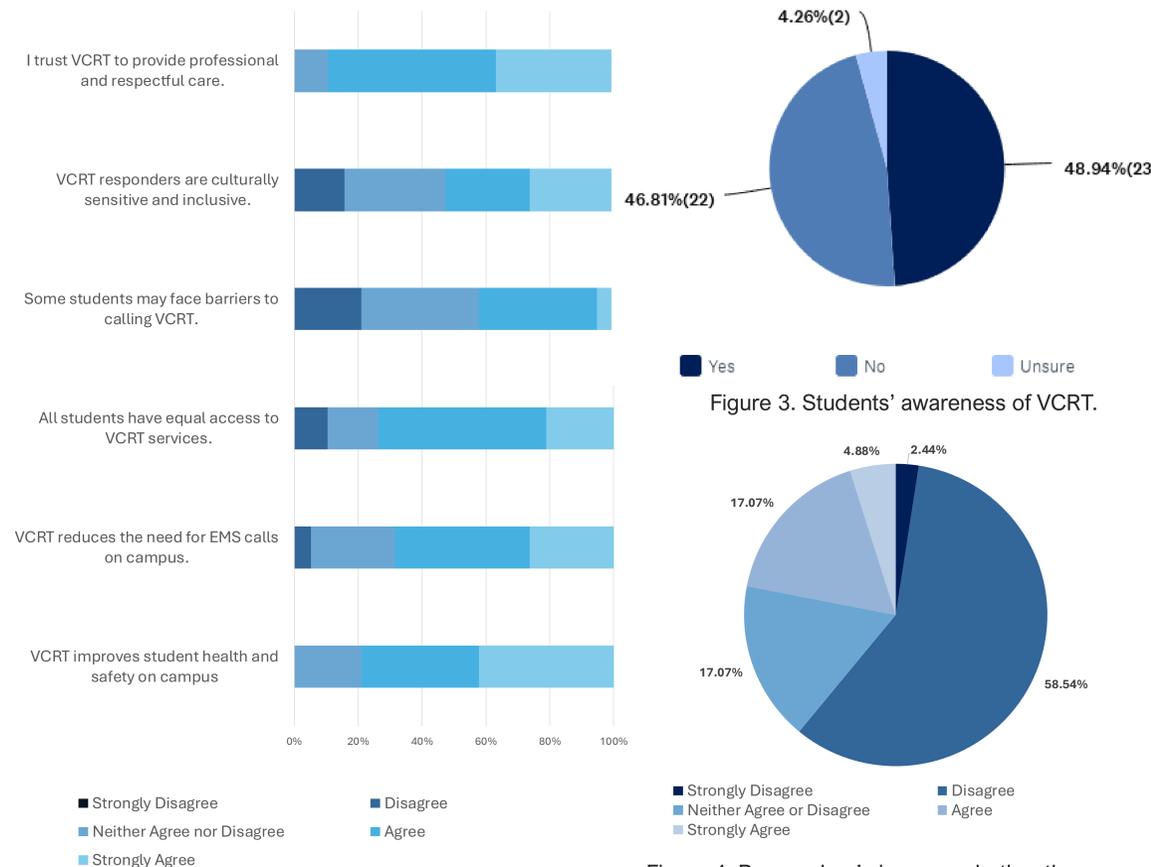


Figure 2. Student perceptions on VCRT.

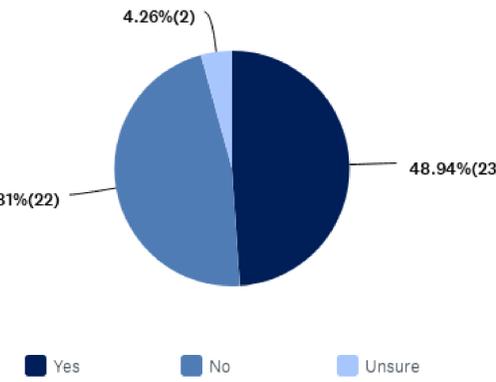


Figure 3. Students' awareness of VCRT.

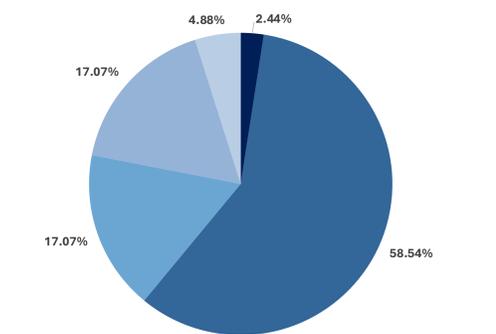


Figure 4. Responders' views on whether the program provides adequate cultural-sensitivity training.

Findings

The following themes were identified through interviews and survey responses:

- REACH:** The awareness of VCRT varies across student groups.
- EFFECTIVENESS:** VCRT is perceived to reduce preventable EMS calls and improve health and safety outcomes, though benefits may differ across populations.
- ADOPTION:** Partnerships and institutional support need to be strengthened to ensure proper adoption of VCRT, particularly across student services and administrative leadership.
- IMPLEMENTATION:** Continuous learning opportunities centered around the campus population and improved communication are needed to improve response abilities.
- MAINTENANCE:** Sustainable funding and administrative practices are needed to continue VCRT's integration into campus life alongside volunteer retention strategies.
- Students continue to feel seen and represented through diverse, student-led programs, which fosters trust and safety with emergency resources.

Recommendations

- Cost analysis to further understand program expenses
- Review of VCRT response records and uOttawa Protection Services dispatch logs to gain further insight into program use and distribution
- Additional engagement with other key interest holders, such as Ottawa Paramedics

Overall, the findings from this preliminary evaluation, and future evaluations, can be used to inform evidence-based university policies supporting CERT programs and optimize emergency preparedness.

References

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