

CWRU EMS Organizational Resilience: Maintaining Operations Amid Campus Changes



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Abstract

Collegiate EMS has been a staple for Case Western Reserve University (CWRU) for 20 years, as the primary BLS EMS agency serving campus. Starting in a freshman college dorm with limited service capabilities, CWRU EMS rapidly grew into a flourishing 24/7 service with an expansive base of operations. As the university responded to and emerged from the pandemic, CWRU EMS also had to adapt to changing needs and priorities, primarily resulting from housing instability and base uncertainty. Here, we present our organizational resilience as a standalone program and describe strategies used to promote growth amid campus change. Resiliency programming was rooted in advocacy, organizational programs, effective communication and community-building efforts. Opportunities were provided for personal and professional growth through mentorship, internal policy development programs, and provider wellness programs. CWRU EMS responded to 294 calls in 2023, remaining on par with previous years. While service hours decreased, membership retention remained steady. While these specific challenges were new for CWRU EMS, collegiate EMS agencies across the country are constantly affected by ongoing changes in policy and resource allocation. Our model, rooted in informed advocacy and community-building, can be utilized by other collegiate EMS agencies to withstand and thrive during enormous change.

Introduction

Case Western Reserve University EMS (CWRU EMS) has served the university for nearly 20 years, currently holding 86 members and flourishing as a BLS transport agency. Over the past four years, CWRU EMS has experienced an unprecedented amount of change. Starting with the global COVID-19 pandemic restructuring healthcare institutions nation-wide and disrupting collegiate communities on a micro-scale, CWRU EMS experienced turbulence felt by all collegiate EMS organizations, forced to rebuild from decades of stability.

As COVID-19 transmission rates decreased and policies loosened, CWRU EMS was newly faced with housing instability, losing a 2500 sq. ft. space and moving into a 200 sq. ft. location. Collective strength defined CWRU EMS, as resilience became the priority.

Here, we propose the framework of organizational resilience as a standalone program in collegiate EMS development. We define resilience as coping and adapting to adversity. We define organizational resilience as implemented, adaptable strategies to promote wellness to achieve organizational stability. Organizational resilience is an emerging field focusing on expanding capacity amid strain and mitigating the often debilitating effects of great change.^{1,2}

We compare years of call volume and membership retention data to analyze organizational success as a measure of collective resilience, as a foundational study to drive implementation of further programming.

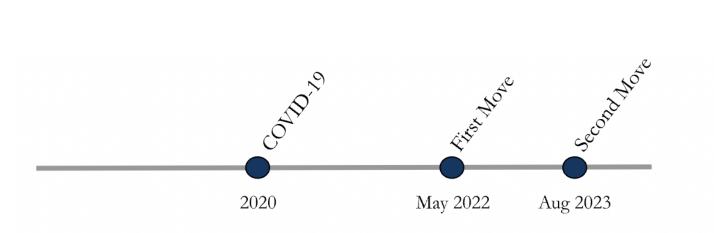


Fig. 1. Changes in the past four years.

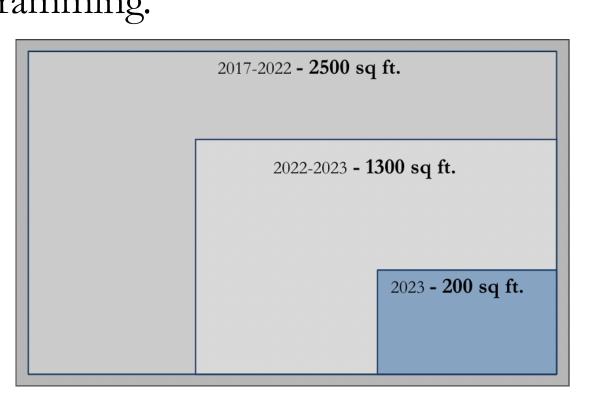


Fig. 2. Schematic of housing instability.

Development/Implementation

Through great change, CWRU EMS implemented several programming initiatives to promote member well-being and define a strong community independent of physical space.

Advocacy:

CWRU EMS advocacy was rooted in empowering clinical members to share their experiences with university leaders that believed in collegiate EMS. CWRU EMS strengthened relationships with the Division of Student Affairs, University Health and Counseling Services, and the Division of Public Safety and sought advocates to champion the needs of collegiate EMS amid campus change. CWRU EMS leadership organized organization-wide town halls to form policies that better supported members during difficult transition periods, including reducing hour requirements, extending promotional deadlines, seeking university support resources, and promoting multiple lines of communication and feedback.

Organization:

Advocacy efforts surrounding organizational needs prompted the development of an inventory system that accounted for all organization-owned equipment. Cataloging all equipment, their dimensions, and their necessity laid the foundation for effective communication with university leaders about meeting CWRU EMS's needs.

Internal Development:

CWRU EMS focused greatly on internal development programming to build a resilient, passionate community of EMTs. Morale boosting initiatives included movie nights, Sunday morning volleyball, BBQs, and winter holiday gifts, among others. Professional development programming included mentor-mentee pairings within the organization along with joining committees focused on CWRU EMS policy development; diversity, equity, and inclusion efforts; community outreach initiatives; greater internal development programs; and clinical research. CWRU EMS also focused on consistently recognizing outstanding members through awards based on hours served and exceptional clinical service in addition to informal, frequent shoutouts to recognize individual and collective growth.

Evaluation

CWRU EMS responded to 294 calls in 2023, remaining on par with previous years. Additionally, membership retention remained steady. Members of CWRU EMS began to depend on each other more than ever, allowing for growth and strength, and through these data, CWRU EMS highlights the tangible effects of resilience on clinical operations.

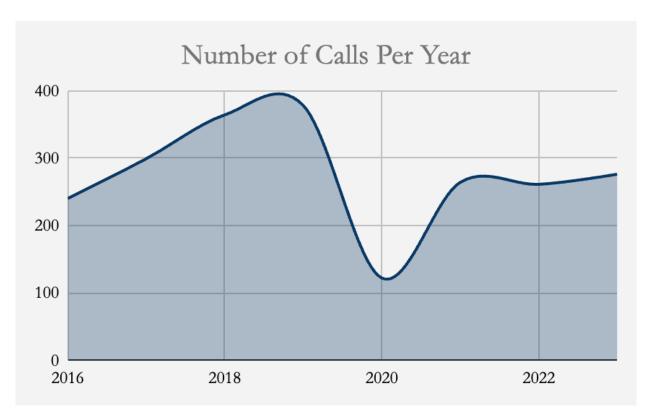


Fig. 3. Call volume from 2016 through 2023. Call volume decreases in 2020 with the emergence of the pandemic, though quickly returns to a near-normal rate.

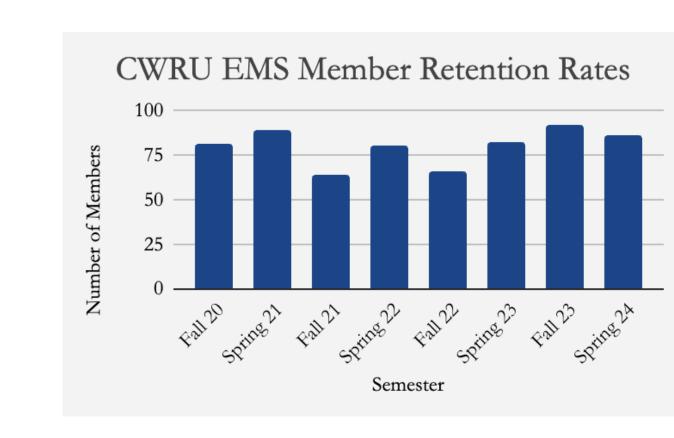


Fig. 4. Member retention rates. Number of members in CWRU EMS has remained steady through the last 4 years, despite enormous change.

Discussion/Conclusion

CWRU EMS was faced with immense new challenges over the past few years, but through a focus on member advocacy and community-building efforts, the organization was able to bounce back and retain its vital components.

With this novel framework of organizational resilience, CWRU EMS prioritizes stability amid change. The call volume data shows CWRU EMS's ability to rapidly adapt amid uncertainty. Call numbers significantly decreased with the emergence of the COVID-19 pandemic, but less than a year later, CWRU EMS's call volume returned to nearly 300 calls per year. Despite ongoing housing instability from 2022 through 2024, call volume remained steady, with the rebuilding initiatives promoting long-term resilience and apparent stability. Furthermore, CWRU EMS highlights an ever-increasing membership base, a testament to the strength of the community built within this organization.

We present our organizational resilience as a standalone program, rooted in advocacy, organization, and internal development. We propose this member-focused model, with morale-boosting initiatives and professional development programming, to serve collegiate EMS providers across the country dedicating their collegiate experience to serving their community.



References

- 1. Hillmann J, Guenther E. Organizational Resilience: A Valuable Construct for Management Research? *International Journal of Management Reviews*. 2020;23(1). https://onlinelibrary.wiley.com/doi/full/10.1111/ijmr.12239
- 2. Vercio C, Loo LK, Green M, Kim DI, Beck Dallaghan GL. Shifting Focus from Burnout and Wellness toward Individual and Organizational Resilience. *Teaching and Learning in Medicine*. Published online February 15, 2021:1-9. doi:https://doi.org/10.1080/10401334.2021.1879651

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