



EMS DIGEST

EMERGENCY MEDICAL SERVICES PROGRAM

March 2011

Volume 1

In This Issue

(Click Issue Item to Navigate to Article)

- Community Health Paramedic Program Update
- Alcohol and Drug Abuse
- PMD Training
- EMS Medicine as a Subspecialty for Physicians
- Where We Go from Here
- EMS Educational Training Materials Loan Service
- The Trauma System is Moving Forward
- NE EMS Website Updates
- Nebraska EMS for Children Conference
- Nebraska CISM Conference
- Congratulations!
- Lee Vohland – 50 years as a volunteer
- Randy Meininger – 2010 Scottsbluff Citizen of the Year
- Debbie Kuhn – 25 years of service with Nebraska EMS / Trauma Program
- Ashley Newmyer – Health Data Coordinator
- Lei Zhang – Administrator of the Office of Health Statistics
- Yushuan Chen – Health Data Coordinator
- NE EMS Calendar of Events
- EMS Contacts

Community Health Paramedic Program Update

By Dean Cole

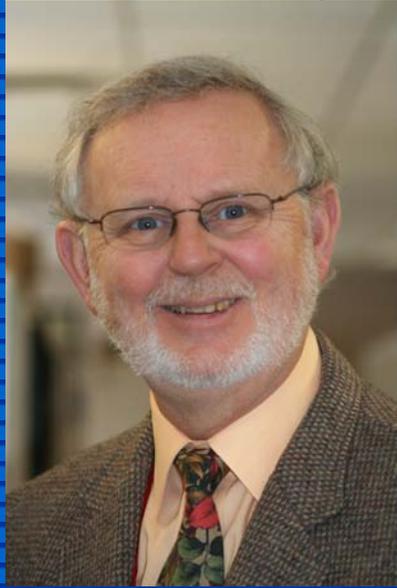
A special review committee has been appointed by the Nebraska Emergency Medical Services (EMS) Board to research the feasibility of implementing the Community Health Paramedicine Program for Nebraska. The committee will review EMS Statutes, rules and regulations, protocols, scope of practice for both basic and advanced life support providers plus the Community Health Paramedic curriculum. A summary report will be provided to the board with recommendations plus opposing comments. Members of the committee represent pre-hospital providers, nurses, a physician, physician assistant, training agency, EMS instructor, consumer and Nebraska EMS board members.

The Community Health Paramedicine Program concept has been discussed nationally since 2004 after the Rural and Frontier EMS Agenda for the Future was introduced. Four-years-ago the National Association of EMS Officials and the National Organization of State offices of Rural Health encouraged state EMS and state offices of rural health to work together in exploring the option once a curriculum was developed. A national curriculum was developed in 2009 and two pilot programs were conducted in Minnesota and Colorado. Nebraska has conducted two public meetings introducing the Community Health Paramedicine Program. The first meeting was in 2009 and the second one in 2010. It was decided at the 2010 public meeting that the Nebraska EMS/Trauma Program should explore the program in more detail and make recommendations to the Nebraska EMS Board. The committee hopes to have a final report to the Nebraska EMS Board in June 2011. Shawn Baumgartner will chair the review committee.

Committee members are:

- Shawn Baumgartner, Chairman
- Linda Jensen, RN, EMS Board/Nurse Representative
- Dale Gibbs, Hospital Representative
- Charlie Gregory, Training Agencies
- Scott Crawford, EMS Instructor
- Don Harmon, PA, EMS Board/Physician Assistant Representative
- Dr. Don Rice, Nebraska EMS Physician Medical Director
- Jane Ford-Witthoff, Director, Public Health Solutions District Health Department
- Kathy Nordby, Director, Elkhorn Valley District Health Department
- Bill Raynovich, Training Agency
- Tom Townsend, Advanced Provider
- Julie Smith, RN, EMT, Network Coordinator, Rural Nebraska Regional Ambulance Network
- Heidi Twohig, RN, Nebraska Nurses Association
- Chad Jay, RN, EMT, Kimball Health Services
- Robert Dunn, EMS Board, Consumer Representative

I want to emphasize that The Community Health Paramedicine includes both basic and advanced life support providers. The term Paramedicine can be misleading in the title of Community Health Paramedicine Program for Nebraskans. Many pre-hospital providers relate the term paramedicine to advanced providers. The word "Paramedicine" in Community Health



Dean Cole

Paramedicine Program means both basic and advanced life support providers. The term paramedicine is the new term nationally and internationally recommended to mean all pre-hospital providers. It is important for all pre-hospital providers to follow the development of this program in Nebraska. I highly recommend that you visit these websites which provide more details about the Community Health Paramedicine Program:

<http://www.nasemso.org/Projects/RuralEMS/documents/CPDiscussionPaper.pdf>

<http://www.ircp.info/>

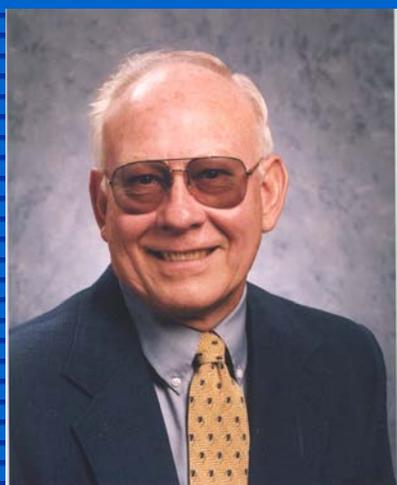
Alcohol and Drug Abuse By Dean Cole

You may notice in the EMS Board minutes that the board must go into executive session to deal with disciplinary issues. These issues can be time consuming, expensive and stressful for all those involved. Many times these issues deal with abuse of alcohol and drugs. Each disciplinary action that is taken including the cost of the investigation is expensive and is money subtracted from the EMS/Trauma Program's budget that could be used for training and technical support for your department.

I highly recommend that each ambulance service have an alcohol and drug abuse personnel policy for its members. If you notice an alcohol or drug abuse problem with one of your providers you should take immediate action. Members of your ambulance service need to be aware of community referral services available to them to treat the problem. It is important that your ambulance service be proactive.

Ignoring the issue may cause harm to a patient, fellow providers, the department and the provider him/herself. Plus community image is an important component for your services recruitment and retention program. Please contact your regional EMS coordinator if you would like to have an alcohol and drug abuse prevention taught at your service.

PMD Training By Garry Steele



Garry Steele

The Nebraska EMS/Trauma Program is presently working on updates to the Physician Medical Director (PMD) Course. There have been requests from Physician Medical Directors and EMS services for the course. To meet these demands the PMD Training will be offered in various sites throughout Nebraska starting in 2011.

To help PMDs understand their roles and responsibilities the course is designed to answer questions and address relevant issues in EMS. The topics covered are "Roles and Responsibilities" that includes a discussion of patient treatment protocols, quality assurance, trauma reporting, disaster management and patient care reports using e-NARSIS. The second major topic discussed is "Rules and Regulations" relating to regulating ambulance services, the emergency care provider, the emergency medical service and the educational institutions approved to provide EMS training.

The dates and location for the training will be advertised and services will be contacted to set up PMD training sessions in your area. When you receive the information on PMD training in your area the EMS/Trauma Program will request your assistance in notifying your service PMD and encouraging them to attend this very valuable training.



[Dr. Don Rice](#)

EMS Medicine as a Subspecialty for Physicians By Dr. Don Rice & Sharon Steele

In August of 2009 the American Board of Emergency Medicine submitted an application to the American Board of Medical Specialties (ABMS) to recognize EMS Medicine as a new subspecialty. Additionally, in June of 2010 the American College of Graduate Medical Education board formally recognized EMS as a subspecialty. Then, in September of 2010, by unanimous vote, ABMS gave final approval of the application. But what is the purpose to this subspecialty? A quote in a presentation by David C. Cone, MD; Jane H. Brice, MD, MPH; and Debra Perina, MD describes the purpose of the EMS subspecialty:

“The purpose of subspecialty certification in EMS is to standardize physician training and qualifications for EMS practice, to improve patient safety and enhance the quality of emergency medical care provided to patients in the pre-hospital environment, and to facilitate further integration of pre-hospital patient treatment into the continuum of patient care.”

The EMS subspecialty is further defined as a clinical specialty, a specialty that includes the care of patients in all environments outside of traditional medical care facilities, including clinics, offices, and hospitals until arrival to a definitive medical care facility. And, it also includes evaluation and treatment of acute injury and illness in all age groups, planning and prevention, monitoring and team oversight.

A writing panel for subspecialty certification test development had their first meeting in February of 2011. The projected first test for the EMS subspecialty is planned for the Fall of 2013. The general requirements to be eligible to sit for certification include being an MD or DO, and having a current active, valid, full, unrestricted, and unqualified license to practice medicine. Furthermore, proposed eligibility to take the exam includes the following options.

Option #1

- Successful completion of an acceptable, unaccredited fellowship in emergency Medical Services, and
- Within 6 years immediately preceding the application a minimum of 24 months EMS practice (at least 400 hours/yr) as:
 - Assistant, Associate, or Medical Director of an EMS agency with patient care responsibility or..
 - Direct provider of pre-hospital emergency care

Option #2

- Within 6 years immediately preceding the application a minimum of 60 months EMS practice (at least 400 hours/yr) as:
 - Assistant, Associate, or Medical Director of an EMS agency with patient care responsibility or..
 - Direct provider of pre-hospital emergency care

Dr. Rice would like to encourage every physician who has been involved in EMS medicine in Nebraska to become familiar with this new specialty and consider sitting for the board exam.



[Carol Jorgensen](#)

Where We Go from Here

By Carol Jorgensen

Winston Churchill said, "To improve is to change; to be perfect is to change often." Some say that EMS changes constantly but others say that some things never change. Which is it?

The Nebraska EMS/Trauma Program has completed two surveys in the last several years to determine the status of Emergency Medical Services in Nebraska. Surveys are time consuming, but it is difficult to know what is going on without collecting the accurate data. From that data, issues and challenges can be identified, opportunities revealed, and perhaps changes made to improve.

The Nebraska Center for Rural Health Research was contracted by the Nebraska Department of Health and Human Services EMS/Trauma Program to analyze data and develop comprehensive reports. The complete results of both the Ambulance Services Needs Assessment and the Workforce Study can be found under EMS Assessments and EMS Reports at:

<http://www.dhhs.ne.gov/ems/emsindex.htm>

In the Ambulance Services Needs Assessment, 410 out of 421 Nebraska ambulance services completed the on-line survey resulting in a 97% response rate. Of the 410 services that responded to the survey, 73 (18%) were advanced life support (ALS) services while 337 (82%) were basic life support (BLS) services. Much of the data is broken down into the seven EMS regions in Nebraska as well as BLS vs. ALS. Results include service background, transport, communication, equipment, training, disaster preparedness and finances.

Some of the many findings in the Needs Assessment report showed that the majority of responding EMS services were fully volunteer services (72%), 11% were staffed by volunteers but received some compensation for emergency and/or inter-facility calls, 4% had a combination of paid and volunteer staff, and 14% had a fully paid staff in which all members were paid hourly or on salary. In addition, 61% of the fully paid services were ALS services while 92% of the fully volunteer services were BLS services. In regards to finances, over two-thirds of respondents (68%) reported that their service billed for the services it provides. Of the EMS services that did not bill for their services, 98% were BLS services.

The Workforce Study had a slightly lower response rate of 359 out of 413 ambulance services surveyed or 87.3%. Of the 359 responding EMS services, 284 (79.1%) were licensed BLS services, while the remaining 75 (20.9%) were licensed ALS services. Again, much of this data is also broken down by EMS region and BLS vs. ALS, but it focuses on areas such as services provided, transport services, staffing, and recruitment and retention.

An example of one finding in the Workforce Study report includes the majority of responding EMS services respond to 911 emergency calls (95.8% BLS and 88.6% ALS), followed by standbys (72.6% BLS and 75.0% ALS), and inter-facility transfers (27.7% BLS and 49.3% ALS).

For a complete analysis of Nebraska EMS from the data gathered, go to EMS Assessments and EMS Reports at: <http://www.dhhs.ne.gov/ems/emsindex.htm>. The results of these two reports may be beneficial in deciding if changes need to be made to continue improving EMS in Nebraska and to determine where we go from here.

EMS Educational Training Materials Loan Service

By Garry Steele

To help Nebraska EMS providers meet their continuing education requirements, the DHHS – EMS/Trauma Program has contracted with various educational material providers to purchase educational training materials that are Continuing Education Coordinating Board of Emergency Medical Services (CECBEMS) approved. The “EMS Educational Training Materials Loan Service” provides VHS tapes or DVD’s along with instructor guides. Two methods of training have been established to help meet continuing education requirements for both Nebraska EMS licensure and National Registry recertification.

In-house Training is training that is conducted as regularly scheduled training. When the videos are used for in-house training, the videos are to be used as a *supplement* to enhance the scheduled training. These videos may be requested by the training officer or the person in charge of training. In order to receive continuing education hours for this method of training, the service representative will need to document the topic, date of training, identify the training as “in-house” training using the video, and the number of clock hours used for the training. The service must maintain an attendance roster as documentation of the in-house training. There is no limit on the number of continuing education hours providers may receive for in-house training during their two year certifying period.

Individual Training videos must be requested and the training administered by the individual’s EMS Service Captain, and this method of training is intended to be used as a last resort for EMS providers to attain continuing education hours. EMS providers are encouraged to attend the continuing education classes and conferences to accumulate their continuing education hours. The Individual training method is considered to be a form of distributive education, and both the Nebraska EMS/Trauma Program and National Registry restrict the number of continuing education hours that may be achieved through distributive education during the certifying period. The EMT, AEMT, and Paramedic may receive 10 hours of their required hours through distributive education, and the EMR only six hours. All distributive education hours used for continuing education hours must be CECBEMS approved. Therefore, when individual training videos are requested, there are CECBEMS requirements that must be met. The captain must complete documentation of attendance, ensure the EMS provider views the video, and administer the test. When the training and testing are completed, the captain must return the documentation, video, and test to the address provided to be scored. If the provider scores an 80% on the test, a certificate will be returned for the personnel records. Each passing test is worth one hour of continuing education.

A list of the topics offered on video may be found by going to <http://www.dhhs.ne.gov/ems/emsedu.htm> and then clicking on “EMS Educational Training Materials Loan Service.” At the end of the policy information, click on “Description of Available DVDs/Videos.” This will display the list of EMS training topics. Most of the videos are available for in-house training, but a select few have been designated for individual training. The video titles listed in blue are available for in-house training, and the video titles listed in green are only available for individual training. If after reading the “EMS Educational Training Materials Loan Service” policy you still have questions, you may contact Connie Hughes at connie.hughes@nebraska.gov or call 402-370-3496.



[Sherri Wren](#)

The Trauma System is Moving Forward

By Sherri Wren

A statewide trauma system makes the delivery of trauma care cost effective, reduces the incidence of inappropriate or inadequate trauma care, prevents unnecessary suffering and reduces the personal and societal burden resulting from trauma. The goals and objectives of a trauma care system include:

- Providing optimal care for the trauma victim;
- Preventing unnecessary death and disability from trauma and emergency illness; and
- Conducting trauma prevention activities to decrease the incidence of trauma

Did you know that the Trauma Program's website can provide you with the following information?

- A current list and map of designated trauma centers
- Statewide Trauma and Regional Trauma Advisory Board vacancies
- A current listing of available trauma-related continuing education courses
- Links to trauma-related web sites, e.g., American College of Surgeons, Nebraska Statewide Telehealth Network
- Dates for Statewide, Regional and Trauma Advisory Board meetings
- Trauma Model Guidelines and Protocols

Current Trauma Program priorities for 2011 include revising statewide Trauma Regulations and hospital designation. We invite you to go to the Trauma Program's website at: <http://www.dhhs.ne.gov/ems/emstrauma.htm> and see what's new.



[Sharon Steele](#)

Nebraska EMS Website Updates

By Sharon Steele

The official website of Nebraska Health and Human Services, EMS/Trauma Program is: <http://www.dhhs.ne.gov/ems/emsindex.htm>.

During the month of January 2011 some changes were made to improve accessibility. One change is to utilize more descriptive terminology to access the Credentialing Divisions page that has information about the EMS/Trauma Program. The link 'EMS – Licensing and Regulatory Affairs' has been changed to: "EMS Licensing & Regulations Index Page".

A second change is that you can subscribe to the EMS Calendar and receive EMS Continuing Education class updates like date changes or class cancellations. To receive updates to the EMS Continuing Education calendar simply click on the link in the upper left hand corner of the page entitled:

 Subscribe to this page. Then complete the subscription process by entering your email address and selecting 'Go'.

The Nebraska EMS/Trauma Program hopes you will find these updates beneficial and that access to current updated NE EMS/Trauma information is quicker and easier.



Julie Smithson

Nebraska EMS for Children Conference

By Julie Smithson



Nebraska EMS for Children Committee (EMSC) is hosting a conference totally committed to improving pediatric care in the pre-hospital setting. The conference will be June 11, 2011, at Norfolk Regional Hospital from 8:00 a.m. to 4:45 p.m. The cost is \$30 which will include lunch and EMS continuing education credits for six hours. The topics that will be discussed at this conference are: Pediatric Triage, Cardiovascular Emergencies, Respiratory Emergencies in the Child with Chronic Lung Disease, and Autism 911. Space is limited.

Nebraska EMSC is also hosting three 2011 BLS PEPP courses this year for the low price of \$30 per person. 8:00 a.m. to 5:00 p.m. June 12 in Norfolk, July 7 in Kearney, and a BLS/ALS on August 5 & 6 in Omaha. Space is limited.

Please watch for more details on the DHHS EMS/Trauma website.
<http://www.dhhs.ne.gov/ems/emsindex.htm>

Nebraska CISM Conference

By Julie Smithson

The Nebraska Critical Incident Stress Management Program trains volunteers to provide crisis support to reduce the harmful effects of critical incident stress for first responders like: law enforcement officers; firefighters; emergency medical services, corrections, hospitals, and emergency management personnel; and dispatchers.



The Nebraska CISM Conference will be August 19 & 20, 2011 at the Midtown Holiday Inn in Grand Island. The conference will provide members with skills to aid them when responding to debriefings and defusings. This conference is also open to the public for education on the stress associated with first responders.

The keynote speaker this year is **Mark Gorkin, MSW, LICSW, "The Stress Doc"**™. Mark is a Licensed Clinical Social Worker, is an acclaimed keynote and kickoff speaker as well as "Motivational Humorist & Team Communication Catalyst" known for his interactive, inspiring and FUN programs for both government agencies and major corporations. Mark will be talking about healing and laughing in the face of stress.

Other top speakers are:

- Eddy Williams – 20 years after Flight 232
- Wes Sime, Ph.D. – Emotional Flexibility Versus Stoicism
- Danielle Sodergren – The Role of First Responders in Preventing Suicide
- Leigh Heithoff – Sleep Deprivation
- John Danderand, LaVista Police – What brought me to CISM
- Shawn Baumgartner, Paramedic – Dealing with employees diagnosed with a serious illness.

Please watch for more details on the DHHS CISM website.
<http://www.dhhs.ne.gov/ems/emscism.htm>

Congratulations!!

- Lee Vohland, Gibbon EMS/Fire, recognized for making over 3,000 ambulance calls during his 50 years of volunteer service. Lee is still an active member of the Gibbon service and makes over 88% of the EMS and fire calls.
- Randy Meininger, Valley Ambulance Service, Scottsbluff/Gering for being selected the 2010 Scottsbluff Star-Herald Citizen of the Year
- Statewide Trauma Board, there are now 43 designated trauma centers in Nebraska.
- Physician Medical Directors who completed the National Physician Medical Director Training
 - Dr. Brian Bahlke, Central City
 - Dr. Anthony Kusek, Albion
 - Dr. Mark Howerter, Columbus
 - Dr. Amy Vertin, Crete
 - Dr. Jennifer Bengston, Ord
 - Dr. Jim Smith, North Platte

Nebraska now has 10 nationally trained PMDs providing medical direction to Nebraska Ambulance Services and Medical Responders.



Lee Vohland

Lee Vohland

Courtesy of the Kearney Hub

By BETSY FRIEDRICH
- Kearney Hub Staff Writer

GIBBON — After 50 years with Gibbon Volunteer Fire and Rescue, Lee Vohland said he still feels an adrenaline rush when he goes out on calls.

Vohland, 69, will celebrate his 50th anniversary as a volunteer in February. This month, he's celebrating another milestone: 3,000 trips to the hospital with the Gibbon Rescue Unit.

"When I was about five years into it, somebody asked me how many times I had been to the hospital in the unit," he said. "I said, 'I don't know.' So I got access to the records and went back and looked at it, and from that point on I've been keeping track for just curiosity's sake, for my own benefit."

Vohland tracks each emergency call he responds to in a little book he keeps in his front pocket.

The fire department also tracks the response of each member. This year, Vohland has had an 88 percent response rate, the highest in the department.

"If there is one thing the department can count on, it's Lee being there," said Rescue Capt. Clint Smith. "I think as far as dedication, he's a big influence on the guys wanting to be as dedicated as he is. This year, he's made about 150 or 160 of the 170 calls we've had. When he's in town, he goes."

Vohland said most of the 3,000 trips with the rescue unit were to Good Samaritan Hospital in Kearney, where he's on a first-name basis with the emergency room workers.

"On the 3,000th call I walked in the ER in Kearney and one of the ladies working said 'Is this it?' I said, 'Is it what?' She asked, 'Is this the 3,000th?'" Vohland said. "Well they knew about it. It was just a typical call. I think it started out as a possible diabetic reaction or something like that."

Vohland said he started with the department because, like many kids, he was fascinated with firefighters and EMS workers. Over the years, he has learned in classrooms and through on-the-job training.

"I answer all calls, even fire calls, but I don't don air packs anymore. I don't go into burning buildings. Like they always say, we're pretty stupid to go up to a burning building where everyone else is running out and we're running in," he said laughing. "But no, at my age and so on, there are younger people who do that now."

"His job he has taken over the last couple of years is our driver," Smith said. "He operates our big pump truck when we have large fires. He's usually an operator of one of the apparatuses now. With his age, he's kind of given up fighting the fires, but he's at the controls of everything we do."

Vohland is retired from the Nebraska Central Telephone Co. He said the company never hesitated to let him respond to fire and emergency calls. "They were very understanding. The owner is a big community supporter," he said.

Vohland said he's noticed an increase in emergency calls each year.

"Every year it seems like our call volume expands. Whether it's an increase in population or the people are getting older, more elderly. I don't know what you would really attribute it to. Maybe people are more reckless than they used to be," he said laughing. "It just seems like every year we do increase our volume of calls."

Vohland said because Gibbon is a small city, the rescue unit volunteers often know the people they are transporting to the hospital, which may help calm them.

"Probably the biggest percentage of the people we transport, we know or know of them. ... I think I see it in their eyes where they realize, 'Oh I know you.' Maybe it helps them out a little bit," he said.

e-mail to:
betsy.friedrich@kearneyhub.com
Betsy Friedrich
Hub Regional Editor
phone: 308-233-9723
fax: 308-233-9745



Randy Meininger

Randy Meininger

Courtesy of the Star Herald

2010 Citizen of the Year

By MAUNETTE LOEKS

Staff Reporter

When Randy Meininger answers the phone, his greeting, "How can I help make your day better," says a lot about one of Scottsbluff's most influential leaders.

From serving as Scottsbluff mayor to missions in Haiti, Meininger has shown that he truly cares about contributing to making everyone's day better; from local citizens to the patients he serves at home and abroad. His helpful and caring demeanor is only one of the reasons the Star-Herald named Randy Meininger as its Citizen of the Year for 2010.

Career ambition

When asked to describe Meininger, many people interviewed for this story described him as an ambitious man, a visionary and a born leader.

If anything demonstrates Meininger's ambition, it would be his career with Valley Ambulance Service, a company he has owned since 1979. While Meininger grew up on a family farm in rural Gering, he decided that he didn't want to pursue it as a career. He became interested in being an emergency medical technician, and later a paramedic, as he worked with air ambulance crews as an employee of Valley Airways. At the time, Meininger had been working to get his pilot certificate.

Fresh out of high school, he admits he was drawn to the career by the "adrenaline rush and excitement" of a career in which every day brings new challenges.

Especially by today's standards, Randy Meininger and his partner, Doug Carrell, were youngsters when they purchased the business, ages 19 and 21, respectively.

The duo's partnership formed quickly, Carrell said. The two men had met during a basic level EMT course, only knowing each other through class for a short time before the ambulance service came up for sale. Their business partnership formed in an impromptu manner - Carrell flagged down Meininger as he drove by, asking him if he would like to partner in purchasing the business. Three short weeks later, they were the new owners and operators of Valley Ambulance.

Carrell describes Meininger as a visionary, but he is not alone. Meininger's wife, Kim, who is also a nurse at Regional West Medical Center, and Shermaine Sterkel, trauma coordinator, also describe Meininger's life in health care with the same term.

"He can just visualize where health care is going and change his business to accommodate that," she said. "He has a vision for growth, a vision to expand. He just has a gift for that."

Sterkel also points to Meininger's vision for health care as an asset. At Regional West Medical Center, Meininger has been involved in a variety of levels, from helping in the hospital's communication needs to his involvement in establishing an Emergency Care Network and other efforts to aid basic level emergency response agencies throughout the Panhandle to build its skills and equipment. Building a tiered response to emergencies helps patient outcomes, especially in trauma situations, Sterkel explained.

"Randy is always thinking of the bigger picture," she said, adding that he is

someone that she will often go to for input. "He has a lot of good vision, wisdom and thinks things through."

Meininger's dedication to growth can be seen firsthand in the business, which began under their leadership as a basic level emergency response service, with six employees and serving about 1,200 patients a year. Valley Ambulance is now an advanced life support service (paramedic), with 24 employees and served about 3,400 patients in 2010.

However, when asked about his business, Meininger didn't point to growth as a measure of success. Instead, he talked about a patient who stopped in at Valley Ambulance to thank the paramedics who assisted him after a heart attack earlier this year and wished them a merry Christmas.

"Some people measure their success financially. Some (measure success) by the number of degrees on the wall," he said. "I measure success by thinking of how many people get to spend time with their families this holiday season, who wouldn't have otherwise. It is very humbling."

Meininger has also contributed to the health community in a multitude of other ways. He taught CPR and other paramedic courses at Western Nebraska Community College and has helped the college build its programs in recent years. He is also a manager of Emergency Response Care in Sidney

His dedication in his career has also garnered many honors. This year, he received the Kenneth Kimball Award, presented by the Nebraska Emergency Medical Services Association. He is also a past winner of the Lloyd M. Westerbuhr Award, an award he received in 2003 from Regional West Medical Center for his continued work in improving the delivery of trauma services in the Panhandle. He currently serves on the state's Region IV Trauma Board and is a member of the steering committee for the Rural Nebraska Regional Ambulance Network. Those are only a few of the many honors bestowed on Meininger as a paramedic and business owner throughout his career.

Father, husband, mayor

Meininger and his wife, Kim, met in the hospital emergency room, and gradually got to know each other before dating and getting married in 1990. He has three boys, Jordan, 24, Kyle, 18, and Kaldon, 14.

Even as young kids, Kim said, the three boys watched Meininger in his career, "riding in daddy's woo-woo," their name for his ambulance. They each had little uniforms, complete with radios. Two of Meininger's children have followed him into the business, with Jordan currently working for Valley Ambulance Service. Kyle has earned his EMT certification, though just a senior in high school, and plans to work in the family business.

Camping, hiking and canoeing are favorite activities enjoyed by Meininger and his three sons, his wife says.

"Randy is very influential in his son's lives," she said. "They always go to him for advice."

Jordan Meininger says his dad has always been supportive and helps guide him in the right direction. Of all people, Jordan Meininger said he would get nervous around in his career; it would be his father because of his high standards.

"He is always a teacher, whether it be in carpentry, yard work or in the ambulance service," he said.

Meininger is also a good example for his sons, Jordan said.

"He just has a personality where he is always trying to help someone, whether it be family, friends or others. He is always there."

Though quite a busy man, Meininger decided to run for and was elected to his

first term on the Scottsbluff City Council in 2006. Meininger said there wasn't one issue that prompted his run, though he has been involved in committees overseeing emergency management, incident management and communications in the area that do tie into his interests in health care.

Mostly, though, he said, "I just felt there were ways that I could contribute to the council. I was excited to work with different business, different entities in the community and see them flourish."

Almost immediately after being sworn in as a council member in 2006, Meininger also became the city's new mayor. He was re-elected to the council this year, and continues to serve as mayor after being re-appointed to the position by the council.

In his career, Meininger speaks often of partnerships. It's also been a reverberating theme to his mayorship.

In 2009, Meininger, joined by his counterparts, then-Gering Mayor Susan Wiedeman, Terrytown Mayor Kent Greenwalt and Scotts Bluff County Committee Chair Mark Masterston, was honored with the Scottsbluff-Gering United Chamber of Commerce's Rising Star Award. The leaders received the award for continuing to push for and look for opportunities for partnership in the communities.

Wiedeman pointed to the growing partnerships between the City of Gering and the City of Scottsbluff as successful connections between the two communities. She said partnership and collaborations was something both leaders advocated when running for office.

"It is better to work together than to go it by yourself," Wiedeman said, adding that she, Greenwalt, Meininger and Masterton all met regularly to share ideas for potential collaboration.

"Randy is not a person who says, 'no, we can't do that.' He is a person who says, 'Let's see what we can do.'"

Calling Meininger "an excellent mayor and a conscientious person," Terrytown Mayor Kent Greenwalt said he looks forward to continuing to work with Scottsbluff and the other communities. While many proposals for collaboration come down to saving taxpayer dollars, he said, "We do have to have a working relationship. And, that drive for partnership trickles down from the top, through the department heads, and we share resources and help each other out of our problems. It's good for all of us."

Mission worker

Meininger is also a devout Christian. He speaks often of his faith, as does his wife.

"He is a godly man," Kim Meininger said. "He strives to make godly decisions in his business and his everyday life. I also think he balances his faith with his politics very well."

Meininger and his wife began serving regular missions to Haiti in 2003. He and a team of health professionals, including Dr. Jeff Holloway of Regional West Medical Center, will head back for another mission on Jan. 21. They serve with the Northwest Haiti Christian Mission.

Though raised in a family that regularly supported missions, he said he had no desire to ever serve a mission. However, Kim had other ideas. She and a friend, Susan Becker, wanted to fulfill a lifelong dream of serving a health mission. With great political unrest in Haiti, he decided to accompany his wife out of concern for her safety.

The couple went on its first mission to Haiti well before a January 2010 earthquake worsened conditions in the already poor country. Poor road

infrastructure makes travel difficult and the lack of sewer and water systems contribute to the spread of illnesses, such as cholera.

Meininger's upcoming mission will be his 15th. He now serves as a team leader, heading up doctors, nurses and planning surgeries and other procedures for patients. He has directed teams as large as 140 people.

Kim Meininger said that lines outside the clinics can be very long.

"There is such a need for medical care in Haiti," she said. "If (a Haitian) breaks a bone, it heals the way the way it broke."

Conditions such as infections and hernias that would be cared for promptly in the United States can result in death in Haiti

"Here, you get an injury, and you clean the wound," Meininger said. "In Haiti, a scratch can get septic really fast and be life-taking."

He explained that many babies suffer from HIV/AIDS. Children will be turned over to orphanages, not because their mothers and fathers do not want them, but because they can't afford to care for them. They are often still involved in their daily lives.

The trips can also be tough and grueling for the group. The diet in Haiti is primarily rice and beans, with "mystery soup" once a week. Volunteers work from sun up to sun down in extreme heat, lacking comforts of home and often sleep.

"It takes a lot out of you," Meininger admits, saying that after a week in Haiti, he often needs another week to recover.

Doctors, nurses and others administer medical care, often without the supplies or medicines that would be accessible here. During one visit, Kim Meininger said, she made an oxygen mask out of a paper cup. They often have to turn away patients or tell patients that they can't help them with conditions that will eventually lead to death. Often times, they are conditions that could easily be treated in the U.S.

While Meininger acknowledges the mission can be tough, both physically and emotionally, "It is rewarding to see (patients) faring better each time we return."

All three of the Meininger children have served missions with the family. Meininger called it a "bonding experience." During Jordan's visit to Haiti, he struggled with illness that left him dehydrated. His son, Kyle, "blossomed" in Haiti and further fueled his own interest in being in health care, his parents said.

The couple's pastor, Willie Coop, has also served missions with the group.

Observing Meininger oversee a team during the one- or two-week missions, "gave me a greater respect for what he does there," Coop said. "I was surprised at what he does."

The Meininger family has also made friends in Haiti. Kim Meininger said they are often waiting for them, when they hear the group is returning.

"The first thing they will say when they greet us is, 'Welcome home,'" she said.

When asked why he returns to Haiti, Meininger said, "I think God put us on the earth for a reason and that is to help people."

In addition to the mission, Meininger is actively involved in Westway Christian Church. He headed a church building committee responsible for turning the former lumberyard into a church in 1993 and an expansion in 2004.

Coop has been Meininger's pastor and friend for 25 years. He says Meininger is gifted in the area of leadership and describes him as a "take-charge kind of guy."

"I don't know that very much grass grows under Randy's feet," Coop said,

outlining many ways Meininger is involved in his church, his family and the community.

Meininger is also a man who Coop says he is proud to have seen mature and grow in his faith.

"One of the things that we teach here is that everyone is a minister. It doesn't matter what you do, you need to be involved in the community and ministry," he said, saying that Meininger strives every day to live a life filled with integrity and godliness.

"What you see with Randy is what you get."



[Debbie Kuhn](#)

[Debbie Kuhn](#)

Debbie Kuhn, Metro Regional Emergency Medical Services coordinator celebrated 25 years of service with the Nebraska EMS/Trauma Program. Before her employment with the state she served one year as Executive Director of Southeast Nebraska EMS Council which served 17 counties. Debbie has been a licensed Emergency Medical Technician since 1985. She is a former member of Ceresco and Malcolm Volunteer Rescue Squads. In addition to her regional duties, Debbie serves as Statewide Emergency Medical Services for Children Coordinator and Statewide Critical Incident Stress Management Coordinator.

The biggest challenge she sees in the future for EMS is the recruitment of young people to be willing to volunteer their time to serve others. "This younger generation has their priorities what is the best for them and their families. They have to be convinced why it is important to volunteer their time and how much that will impact them and their families."

[Ashley Newmyer](#)

Ashley Newmyer has accepted the position of Health Data Coordinator/Trauma Registrar with Department of Health and Human Services (DHHS). She replaced Lei Zhang who was promoted to Administrator of the Office Health Statistics for DHHS.

Ashley is a native of Cairo, Nebraska and her father Terry Robertson was a former member of Cairo Medical First Responders. She is a 2010 graduate of the University Of Nebraska Medical Center with a master degree in Public Health/Biostatistics. Ashley received her bachelor degree in Psychology from University of Nebraska-Lincoln. She worked at Madonna Rehabilitation Hospital for five years as a Certified Nurse Assistant plus has experience as a medical chart reviewer at Indian Health Services Hospital.

As health data coordinator, Ashley will be responsible for managing the state trauma registry database plus other public health databases such as state traumatic brain injury registry, Emergency Medical Service information system, and the hospital discharge databases at the office of Health Statistics. She will be working closely with the Statewide Trauma Program, EMS Program, Injury Prevention, Office of Epidemiology and 43 certified trauma centers in Nebraska. Her office is located at 220 South 17th Street, Lincoln. Ashley can be contacted at 402-471-1370 or ashley.newmyer@nebraska.gov



[Ashley Newmyer](#)



[Lei Zhang](#)

[Lei Zhang](#)

Lei Zhang has been promoted Administrator of the Office of Health Statistics for Department of Health and Human Services. Lei is a graduate of the University of Nebraska-Lincoln. He has two master degrees, Computer Science and Statistics. His undergraduate degree is in Applied Meteorology.

The Office of Health Statistics supervises the following registries: Statewide Trauma, Parkinson Disease, Vita Statistics, Cancer, Birth Defects, Brain Injury and Pre-hospital data (Nebraska Ambulance Rescue Service Information System) plus nine employees. Before accepting the new position, Lei was the Statewide Trauma Registrar for seven years. His office is located at 220 South 17th St., Lincoln. Lei can be contacted at 402-471-0147 or

lei.zhang@nebraska.gov

[Yushiuan Chen](#)



[Yushiuan Chen](#)

Yushiuan Chen has joined the staff of the Office of Health Statistics as a Health Data Coordinator to assist the Emergency Medical Services/Trauma Program in the collection and analysis of patient data.

As health data coordinator, Yushiuan is responsible for managing various public health databases in the Office of Health Statistics. Those include the state cancer registry, hospital patient discharge and outpatient surgery databases. She will coordinate public health data requests, produce annual reports and publications plus review health data systems for improvement and data quality assurance.

Yushiuan has a passion for public health which includes working as a research associate and epidemiologist utilizing several kinds of datasets and software. She has an undergraduate degree in Public Health from Kaohsiung Medical University in Taiwan and a master degree in Environmental and Radiological Health Sciences from Colorado State University. Yushiuan is pursuing a PhD in Public Health from the University Of Nebraska Medical Center. Her office will be located at the Nebraska State Office Building, Lincoln. She can be contacted at 402-471-7753 or yushiuan.chen@nebraska.gov .



Wally Wallace



Doug Fuller

Nebraska EMS Calendar of Events

March 12 & 13, 2011 EMS Leadership Training	Harms Technology Center 2620 College Park Scottsbluff, Ne	Sat. Time – TBA Sun. Time – TBA
March 17, 2011 NIS Pre-Conference Instructor Workshop	New World Inn 265 33 rd Ave. Columbus, NE	8:30am – 5pm
March 18, 19, 20, 2011 2011 NEMSA Spring Conference	New World Inn 265 33 rd Ave. Columbus, NE	Friday 8am – 5pm Saturday 8am – 5pm Sunday 8am - Noon
April 14, 2011 Statewide Trauma Advisory Board Meeting Telehealth is available for this meeting. Contact Carol Brandl at 402-481-8406 for Telehealth information	BryanLGH Medical Center Conference Center, Rm. C 2300 South 16 th St. Lincoln, NE	10:30am – 2pm CST
June 11, 2011 Emergency Medicine for Children Conference	Faith Regional Center 2700 W. Norfolk Ave. Norfolk, NE	8am – 4:45pm CST
June 12, 2011 BLS PEPP Course	Norfolk, NE	8am – 5pm CST
July 7, 2011 BLS PEPP Course	Holiday Inn Kearney, NE	8am – 5pm CST
July 8, 9, 10, 2011 Statewide EMS Conference	Younes Conference Center 416 Talmadge Rd. Kearney, NE	Friday and Saturday 8:30am – 4:30pm Sunday 8:30am - Noon
August 5 & 6, 2011 BLS PEPP Course	Omaha, NE	8am – 5pm CST
August 19 & 20, 2011 Nebraska Statewide CISM Conference	Mid-Town Holiday Inn 2503 S. Locust St. Grand Island, NE	Time – TBA
September 10, 2011 North Central EMS Workshop	Ord Fire Hall 240 S. 16 th St. Ord, NE	8:30am – 5pm CST

[Carrie Crawford](#) (No
picture at this publishing)

Nebraska Health and Human Services EMS/Trauma Program Contacts

EMS Program Administrator Dean Cole
402-471-0124 • dean.cole@nebraska.gov
EMS Education and Training Garry Steele
402-224-3298 • garry.steele@nebraska.gov
Trauma System Sherri Wren
402-471-0539 • sherri.wren@nebraska.gov
State Physician Medical Director Dr. Don Rice
402-488-4321 • don@ucclincoln.com

EMS Specialists

Metro Region Debbie Kuhn
402-471-0119 • debbie.kuhn@nebraska.gov
Southeast Region Doug Fuller
402-471-3578 • doug.fuller@nebraska.gov
Northeast Region Carrie Crawford
402-664-2346 • caroline.crawford@nebraska.gov
North Central Region Carol Jorgensen
308-865-5629 • carol.jorgensen@nebraska.gov
South Central Region Julie Smithson
308-946-3409 • julie.smithson@nebraska.gov
Western Region Sharon Steele
308-535-8095 • sharon.steele@nebraska.gov
Panhandle Region L.D. "Wally" Wallace
308-436-6950 • larry.wallace@nebraska.gov

Health Statistics Administrator Lei Zhang
402-471-0147 • lei.zhang@nebraska.gov
Health Data Coordinator Ashley Newmyer
402-471-1370 • ashley.newmyer@nebraska.gov
Health Data Coordinator Yushiuan Chen
402-471-7753 • yushiuan.chen@nebraska.gov

Editor of EMS DIGEST Sharon Steele - sharon.steele@nebraska.gov

Co-Editor of EMS DIGEST Gary Miller – gary.miller@nebraska.gov