

Employee UPDATE

Our Mission: To serve the people of North Carolina by enabling individuals, families and communities to be healthy and secure, and to achieve social and economic well-being.

A monthly publication for employees of the North Carolina Department of Health and Human Services

Child abuse and neglect cases decline by 9 percent

In 2004, North Carolina charted a 9 percent decline in child abuse cases. This came with a 5 percent increase in the number of cases investigated.

“We gave social workers new tools to help them make better decisions, and they’re working,” said Jo Ann Lamm, chief, Family Support and Child Welfare Services. “Across the state, all county departments of social services follow the same process when deciding whether to investigate an allegation of abuse. When they do investigate, they all have the same decision-making process to determine the risk to the child. I feel confident that these tools are helping children remain at home when that’s the best, safest place for them to be.”

In state fiscal year 2003-2004, 113,557 children were assessed for child abuse and neglect, an increase of 6,400 from 2002-2003. Of those cases, 27,310 children were found to be abused or neglected compared to 30,016 the year before, a decrease of 9 percent.

“It is every North Carolinians’ moral and legal responsibility to report possible abuse and neglect to their county

department of social services. These numbers suggest that more are doing so, and that’s a good thing. The numbers also show that county departments of social services are not being overly aggressive in substantiations. No one should be afraid to call DSS or think that they will intervene without real cause,” said Lamm.



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The statistics include a new measure: “Children in need of services.” They are being identified through the new Multiple Response System (MRS), which gives social workers a friendlier, less adversarial way to interact with families. A finding of in “need of service” means that, while there are safety issues, social workers can immediately start engaging the families in identifying their strengths that can be enhanced to ensure the safety of the child. This approach focuses on a real partnership with parents to ensure the safety of their children. MRS was expanded from 10 to 52 counties during the last state fiscal year.

County statistics can be found at <http://www.dhhs.state.nc.us/dss/stats/cr.htm>

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Fuquay retires, Benton takes helm of DMA

Gary Fuquay, director of the Division of Medical Assistance, is retiring. He has been DMA director since May 2003. Taking the helm in an acting capacity will be Mark Benton, who has been DMA deputy director since 2003.



Gary Fuquay

“I want to take this opportunity to thank everyone at DHHS that I have worked with the past 20 plus years,” Fuquay said. “This Department has been a huge part of my life. I truly care about what we do in DHHS and have learned so much from the work I have been involved in and especially from my fellow coworkers.”

“I wish for all at DHHS success in the future and want to thank everyone for their assistance to me. Together I think we have made a positive difference in this Department and the lives of the clients we serve.”

Fuquay joined DHHS as assistant controller for the Division of Mental Health in 1983. He later served as assistant director for budget and management in the Division of Social Services and assistance controller, before becoming DHHS controller in 2000.

“Gary’s strong, steady management and incisive intellect helped DMA successfully navigate some tricky territory in these last 20 months, including the MMIS contract re-bid, improvements in the Disproportionate Share (DSH) program, and implementing stronger management structure in rate setting procedures,” said Secretary Carmen Hooker Odom. “And I know his employees

appreciate the respect and regard he consistently shows for them, as shown by such actions as the facelift he gave the Kirby Building. We are sad to lose such a devoted public servant. I wish Gary well in his new endeavors.”

Benton also is no stranger to DHHS, with experience in four divisions.

“I am pleased to announce that Mark Benton has agreed to serve as interim director of DMA,” said Hooker Odom. “Mark is a steady manager with broad experience that will serve him well in the upcoming challenges. He has shown himself to be extremely dedicated and competent in whatever task is before him.”



Mark Benton

Benton previously has worked in the Division of Facility Services as assistant director for financial program/chief of budget and planning. In that position he was responsible for managing the division’s administrative, budgetary and health care planning functions. Benton has also worked in the divisions of Budget and Analysis, Child Development and Social Services. Prior to that, he worked at the local level in the Duplin and Craven counties Departments of Social Services. He is a graduate of Mount Olive College and a native of Craven County. ■



Jalil Isa

¡Salud y Saludos!

Mexico visit a cultural eye opener

A couple of months ago I finally managed to do something I'd wanted to do for a long time – visit Mexico! Working with as many Latinos as I do, most of whom are of Mexican descent; you'd think I would have already had the chance to visit their homeland. But up until recently, my only lessons and experiences about Mexican culture were through interacting with them – here. When I finally arranged to see for myself the origins of this culture, I immediately began to marvel at how rich this culture truly is.

In just under a week, I managed to climb to the top of the third tallest pyramid in the world, located about half hour outside the *Distrito Federal*; I visited with a doctor in a rural village several hours away from Mexico City; I met with a folk healer; I visited several schools – both at the university and elementary level; and I even managed to see a bullfight at the world's largest bullfighting ring.

There were plenty of other great experiences involving one of my favorite topics, food. I ate some unique meals that taught me Mexican food in the United States is very different from Mexican food in Mexico ... but just as spicy, if not more so! I also visited some fantastic museums. The National Art Museum had several paintings that caught my eye, as it clearly reflected the indigenous population's plight as it was forcibly conquered by the Spanish. To see the pains the people were put through was quite jolting. My Hispanic roots originate from a country that today has no native indigenous population whatsoever – everyone is either of Spanish or slave descent. If anything, there is a certain pride that many Cubans of Spanish descent hold. Yet, it is

easy to see why many Central Americans would have the opposite view.

From a health standpoint, I learned some things that were new. Yet at other times, my observations in Mexico reaffirmed for me that we're on the right track in some of the things we've put into practice here at DHHS. For example, for a long time, we've been aware of how tough it is to alter attitudes and behavior – especially when talking about views held over an entire lifetime. Preventive medicine falls into this category. Many Hispanics are not accustomed to visiting the doctor until they're showing symptoms for an illness. The idea of going to see a doctor when you feel fine, as in a general or well checkup is foreign to many of them. After discussions with a young doctor in the rural Mexican countryside, I learned this is also an uphill battle for him. He, too, struggles with trying to teach the population he serves about the importance of going in for a checkup even when you feel fine. He does this by gaining the respect and confidence of his clients, and urging them to modify their views, every chance he gets – especially with the women in the village.

That is exactly what we here at DHHS are also doing. In another instance, I saw first-hand just how much importance is placed on the local *curandero*, or folk healer. These individuals often prescribe potions prepared with natural herbs that many swear help cure a host of ailments. Along these lines, if someone opts for more traditional medications instead of natural remedies, they need not go to the doctor for a prescription. Many times, the local pharmacy will supply customers with the necessary prescription-strength medicine, without requiring a prescription. I visited a pharmacy where everything from Prozac to penicillin was available, right then and there. It's little wonder, then, that many of the Mexican immigrants in this country are surprised to see the hoops they must jump through to obtain medications.

In other scenarios, a quick fix is an injection administered by a nurse at one of the local health clinics. This is a common treatment for many medical problems. This has shed some light as to why many Mexicans in this state look for this type of remedy here. The many tests that American doctors run before a full course of treatment is prescribed is a different approach than what you might find in Latin America.

N.C. is national leader in bioterrorism preparedness

North Carolina is a national leader in bioterrorism preparedness. That's according to a study released by the Trust for America's Health, which is a national non-profit, nonpartisan public health organization.

"We're proud of what we have accomplished with our many state and local partners since September 11th," said

State Health Director Dr. Leah Devlin.

"We are pleased that this report reflects the hard work that has occurred across the state. North Carolinians can rest assured that we are doing everything we can to protect them in an event of bioterrorism."

The report examined 10 key indicators to gauge state preparedness and determine America's overall readiness to respond to bioterrorist attacks and other health emergencies. North Carolina was one of two states to score a nine. No state had a perfect score. More than two-thirds

of the states received a score of six or less. Last year, North Carolina scored five points.

The states were given a point for meeting each of 10 measures, which included: spending at least 90 percent of federal bioterrorism funds, maintaining or increasing public health spending overall, local buy-in to the state's bioterrorism preparedness plan, having less than 25 percent of the public health workforce eligible for retirement in five years, having sufficient bio-hazard lab capacity, having enough trained lab scientists to test for plague or anthrax in the event of an outbreak, having legal authority to quarantine, increasing flu vaccine rates for seniors, having a pandemic flu plan, and having an internet-based disease tracking system.

North Carolina's only deficiency was in having the internet-based disease tracking system. "But, we are building that system now," said Dr. Devlin.

Florida was the other state to score nine points. Massachusetts and Alaska scored the lowest, with three points each. The full report is available on the web at <http://healthyamericans.org/reports/bioterror04/>



Jalil, continued from page 3

And finally, let's not forget the role of the authority figure that the local priest has in many of these communities. Doctors are now trying to work with religious heads to collaborate in campaigns to improve health. Women are also being targeted in many of these efforts, as they often steer the family when it comes to healthy behavior.

This was a far more enriching trip than I had expected. And while it provided clues into how we at DHHS may improve our delivery of health information to Latinos in North Carolina, I also took solace in realizing that we're right on target in many of our other efforts.

Most of all, I am ecstatic to have had a more intimate encounter with the Mexican culture – it not only provided me a deeper understanding of this culture, which I hope will go a long way to helping me relate even better to the Mexicans of North Carolina; but it also provided me with a more comprehensive outlook on my own Hispanic culture.

Division of Aging and Adult Services honors award recipients

The Division of Aging and Adult Services has presented the 2004 awards on aging in conjunction with the 2004 Southeastern Association of Area Agencies on Aging and the North Carolina Conference on Aging.

The Ewald W. Busse, George L. Maddox and Ernest B. Messer awards are given to recognize excellence in addressing the needs of older adults in the state.

The 2004 recipient of the Ewald W. Busse Award is state Sen. William R. (Bill) Purcell from Laurinburg in Scotland County. The recipient of the 2004 George L. Maddox Award is the North Carolina Senior Games, Inc. Orange County and the Orange County Department on Aging are the recipients of the 2004 Ernest B. Messer Award. The awards were presented Oct. 19.

Busse Award



Left to right: Kim Dawkins Berry, area agency on aging director, Piedmont Triad Council of Governments; Brad Allen (who nominated Sen. Purcell for the Award), Area Agency on Aging Director, Lumber River Council of Governments; Sen. William Purcell; and Betty Rising, member of the Governor's Advisory Council on Aging from Lumberton.

“As a retired physician, Sen. Purcell has a keen awareness of issues that impact the health status of North Carolinians,” said Karen Gottovi, director of the DAAS. “In his three-plus terms in the N.C. Senate, he has been a relentless advocate for programs and services for our state’s most vulnerable populations.”

Because of his expertise and his reputation as a statesman, humanitarian and advocate, he is on human service advocates’ ‘A List’ for appointments to task forces and committees.

During his tenure in the General Assembly, Purcell has held numerous leadership positions including serving as co-chair of the N.C. Study Commission on Aging. He currently serves as co-chair of the Senate Appropriations Committee for Health and Human Services, the Senate Health and Human Resources Committee, and the Blue Ribbon Commission on Medicaid Reform, and serves as a member of the Senate Committee on Pensions, Retirement and Aging.

Purcell served on several task forces and committees including the Institute of Medicine’s Task Force on Long Term Care, the Committee on Minority Health Disparities, the 2004 Public Health Task Force, the Heart Disease and Stroke Prevention Task Force, and the Osteoporosis Task Force.

“More likely than not, any legislation which relates to health and aging issues that has made its way through the General Assembly in the last eight years has had Senator Purcell’s stamp on it,” Gottovi said. “He has been a champion for funding to expand home- and community-based services and to increase the infrastructure of our state’s aging network service delivery system.”

The Busse Award recognizes an individual who has had a significant impact on enhancing the health status of older North Carolinians through efforts to direct health related policies and/or to provide leadership in developing solutions to health care problems. Dr. Busse, who died in March, was president emeritus of the N.C. Institute of Medicine and the founding director of the Duke University Center for the Study of Aging and Human Development.

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Maddox Award



Left to right: Dr. Beth Wilson, vice-chair, Senior Games Board, Gene Ross, chair of the board, and Margot Raynor, president, N.C. Senior Games, Inc.

The Senior Games program began in 1983 with a vision to create a year-round health promotion and education program for adults 55 and older. Today the program reaches more than 65,000 older people in the state from all socio-economic levels and from the well to the frail. Senior Games, a private non-profit entity, works through a network of 53 local games across the state serving all 100 counties.

“In an era of limited fiscal resources, North Carolina Senior Games has leveraged resources in an impressive fashion by developing partnerships with a broad array of public and private agencies and organizations,” said Gottovi.

Through local games, program participants are able to exercise their minds and bodies in their local communities through many activities, including year-round health promotion events; the Silver Striders walking program; the Silver Arts programs which highlight heritage, visual, performing and literary arts; athletic competition; and informational/educational workshops. Each fall, state final events are held to provide an opportunity for people who qualify from local games to compete with their peers across the state.

This year marks the twentieth anniversary of the state finals. The competition attracted 3,000 older adults in Raleigh and other state finals locations across the state.

More than 5,000 volunteers of all ages are involved in Senior Games programs at the state and local levels.

Dr. Maddox is a noted gerontologist and director of Duke University’s Long Term Care Resource Program. The award is presented to an individual, organization or agency that has excelled in meeting the needs of older citizens in the community.

Messer Award

“In 1980, Orange County established one of the first state public departments on aging at the county level to plan, coordinate, and provide services to county residents,” Gottovi said. “For many years the department has done an outstanding job operating a broad array of programs and services for county residents.”

There are three senior centers in Orange County. In 1999, at the request of the Orange County Advisory



Left to right: Florence Soltys, chair, Orange County Master Aging Plan Task Force; John Link, Orange County Manager; Jack Chestnut, chair, Orange County Advisory Board on Aging; Barry Jacobs, chair, Orange County Board of Commissioners; and Jerry Passmore, director, Orange County Department on Aging.

Board on Aging, the County Board of Commissioners established a task force to develop and implement a master aging plan. The plan provides a comprehensive and coordinated delivery of community services to older adults with varying levels of functional capacity. More than 90 county residents served on this task force, which developed a plan over two years.

The plan was adopted in March of 2001 and embodied 11 major goals and 127 planning objectives. For the last three years, the county Department on Aging along with numerous community partners from the public and private sectors has worked diligently to accomplish plan objectives. Partners include Triangle United Way, Carol Woods Retirement Community, UNC Hospitals, UNC School of Social Work, UNC School of Medicine and the

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UNC Institute on Aging, Significant accomplishments include:

- ▲ renovated and expanded rental space for a new Central Orange Drop-in Senior Center;
- ▲ county residents approved a bond package to construct two new multipurpose senior centers;
- ▲ started the county's first adult day health care program, which is a teaching model for UNC social work and health occupation students;
- ▲ expanded the respite care program, which now provides four options for services;
- ▲ redesigned and expanded the county *Eldercare Community Guide*;
- ▲ began a local weekly cable TV program "In Praise of Aging;"
- ▲ initiated a senior housing assessment project and began to provide supportive services for a HUD 202 senior housing facility;
- ▲ expanded wellness programs in the community and at senior centers, including the initiation of a program to provide twice-weekly in-home monitoring and assessment of frail older adults' medication usage and vital signs by a retired nurse;
- ▲ and, began a long-term care facility roundtable comprised of regulators, advocates, consumers and service providers who will work together to define, address and resolve priority issues related to the long-term care population.

The Ernest B. Messer Award given to a North Carolina community is named for the late North Carolina legislator and director of the Division of Aging in the late 1980's. ■

Chinese Delegation visits DAAS



Delegation gathers on steps of Taylor Hall with DAAS staff

The delegation consisted of 27 government officials from national, provincial, and local levels interested in learning about the aging and long-term care programs in the United States. Their visit to the DAAS marks the delegation's only official contact with a state government during their stay in the United States.

The delegation's other activities include: preliminary training at Peking University; attending workshops at Duke University; visiting long-term care facilities in the Triangle area; and visiting aging and long-term care programs in Washington D.C. and New York City.

China is the most populous nation in the world and is projected to face an explosive growth of its older population in the coming years. The purpose of this visit, according to the delegation, is to "learn from the international (and especially American) experiences in dealing with aging issues to enhance socioeconomic development and improve people's life quality." ■

The North Carolina Division of Aging and Adult Services (DAAS) hosted a Workshop on Aging and Long-Term Care for a visiting Chinese National Delegation on Nov. 16.

Meredith receives Levine Award

State's health directors hear of Florida's hurricane challenges

There were probably more public health workers per square yard in Raleigh Jan. 28 than anywhere else in the state. That might not come as a surprise for anyone attending this year's State Health Director's Conference. Local health directors from all corners of the state made their way to Raleigh to discuss pressing health concerns during the two-day conference.



State Health Director Dr. Leah Devlin presents the Ronald H. Levine Legacy Award to Dr. Jesse Meredith.

contributions to public health, was presented to Dr. Jesse Meredith, a long-time member of the N.C. Commission for Health Services. The life-long physician has had a

distinguished career that includes being the first surgeon in the country to reattach a severed hand.

The conference was packed with workshops and other presentations that touched on a host of health issues that have affected the state during the past year. High on the list were discussions on natural disasters, which made their mark on the state throughout the summer. Although hurricanes also thrashed North Carolina last season, it was Florida that felt the biggest hit from Mother Nature's fury this past year. To learn lessons from their experience, conference organizers invited that state's secretary of health to discuss how Florida coped with the unprecedented rash of hurricanes.

Florida Health Secretary John Agwunobi recounted how health workers were squeezed to their limits trying to keep people safe during the string of storms. A couple of interesting points to come away from his discussion: the greatest number of deaths occurred as a result of people falling off their roofs while making repairs *after* the storms; but the most challenging aspect of the storm was the loss of electricity throughout large portions of the state. This contrasts with our recent experiences when loss of running water in Western North Carolina presented some of the biggest challenges to public health personnel and where the greatest loss of life came as a result of mudslides.

Ten DHHS teachers receive certification

The Office of Education Services (OES) has announced that 10 DHHS teachers were certified during the 2004 certification cycle as National Board Certified Teachers by the National Board for Professional Teaching Standards (NBPTS).

“We have an outstanding group of teachers working in our programs,” said Cyndie Bennett, superintendent of the OES. “This certification validates their commitment to providing a quality education for our students.”



The teachers certified this year teach in programs across the state: Jana Lollis and Heather Carpenter, N.C. School for the Deaf, Morganton; Beth Savage and Marcia Rollings, Governor Morehead Preschool, Raleigh; Treva Randolph, Spring Hill School at Dorothea Dix Hospital, Raleigh; Kamara Reade and Diana Thomas, J. Iverson Riddle Developmental Center, Morganton; Roxanne Dearman and Wendy Wieber, Western Early Intervention Program

for Children who are Deaf or Hard of Hearing, covering 38 counties in western North Carolina; and Nancy McLawhorn, Eastern Early Intervention Program for Children who are Deaf or Hard of Hearing, covering 43 counties in eastern North Carolina.

Teachers in all DHHS educational programs are eligible to participate if they hold a continuing North Carolina teaching license, have been employed by the state for at least three years and are in a state-paid position.

There are 8,280 National Board Certified Teachers in North Carolina, more than any other state. The newly certified teachers bring the DHHS total to 25. Nationally, there are more than 38,000 Board Certified Teachers.

Founded 16 years ago, NBPTS is an independent, nonprofit, nonpartisan, and non-governmental organization dedicated to advancing the quality of teaching and learning. National Board Certification is the highest credential in the teaching profession. A voluntary process established by NBPTS, certification is achieved through a rigorous performance-based assessment that takes between one and three years to complete and measures what accomplished teachers should know and be able to do. ■

Black HIV/AIDS Awareness Day is Feb. 7

Concerned citizens from across the state will converge on Raleigh to observe Black HIV/AIDS Awareness Day on Feb. 7.

HIV/AIDS affects black North Carolinians disproportionately. In North Carolina, the rate of AIDS among blacks is eight times higher than that for whites. In 2003, African Americans accounted for 67 percent of the state's AIDS cases.

HIV/AIDS Awareness Day is designed to focus attention on these disparities and discuss ways to address them. Community-based organizations that fight HIV/AIDS at the local level will participate in the march. Many North Carolina communities will be represented at the march.

Participants and speakers include State Health Director Dr. Leah Devlin and Barbara Pullen-Smith, director,

Office of Minority Health and Health Disparities. Community leaders will also appear, including Ashley Rozier, executive director, Cape Fear Regional Bureau for Community Action; Annette Watson, executive director, Strengthening the Black Family; and Dr. Clifford Jones, senior pastor of Friendship Missionary Baptist Church in Charlotte. Dr. Lorna Harris, who directs the Historically Black Colleges and University's Health Promotion Alliance, will deliver the keynote addresses. Carolyn McAllister, chair, N.C. AIDS Advisory Council, will release this year's legislative priorities.

The march begins at 10 a.m. and runs from Lane Street to Jones Street. It will be followed by a public information program at 11 a.m. in the N.C. Museum of History. ■

Agencies work together to alert Deaf to tornadoes

“It sounded like a big freight train!” “It sounded like a jet plane!” The “it” was a tornado. We’ve all heard people with that vivid description of what it was like to experience a tornado.

Studies have shown that when you can hear the roaring shrill of a tornado a person has two minutes to react.

But what if you cannot hear “IT”?

Soon, a pillow vibrator and a strobe light will alert the deaf and hard of hearing in North Carolina when severe weather conditions or other emergency events threaten.



The Division of Services for the Deaf and the Hard of Hearing (DSDHH) and the Division of Emergency Management (NCEM) recently joined forces to purchase 3,500 specialized NOAA weather radios for statewide distribution through a \$500,000 state and federal grant.

The radios were obtained through HomeSafe of Angier. The company programmed the radios for recipients in each of the state’s 100 counties.

NOAA Weather Radio (NWR) is a nationwide network of radio stations broadcasting continuous weather information direct from a nearby National Weather Service office. NWR broadcasts National Weather Service warnings, watches, forecasts and other hazard information 24 hours a day.

NWR is an “all hazards” radio network, providing comprehensive weather and emergency information. NWR also broadcasts warning and post-event information for all types of hazards – both natural (such

as earthquakes and volcano activity) and environmental (such as chemical releases or oil spills).

The strobe light and pillow vibrator are connected to the radio and will illuminate and vibrate to alert the recipient when the National Weather Service has issued a watch or warning. DSDHH’s seven regional centers have identified residents who need the specialized radios. NCEM’s three regional offices serve as the regional distribution points for each of North Carolina’s 100 county emergency management offices.

“We had the radios. We had to have a delivery system,” said Linda Harrington, director of DSDHH. “That’s when Sertoma stepped up to the plate.”

DSDHH contacted Sertoma and found a group eager to help with the distribution of the radios. John Kelly, an attorney in the N.C. Court of Appeals, is also the International District Governor for Sertoma. His district includes North Carolina, South Carolina, and Virginia. While Sertoma has many projects, the organization focuses on Deaf and Hard of Hearing issues.

“Sertoma Club was a natural choice to partner with as we began to deliver the radios, said Harrington. “We look forward to a close association with them in the future.”

Local emergency management coordinators delivered radios to recipients where there were no Sertoma resources.

DSDHH plans to obtain more weather radios for their Deaf and Hard of Hearing customers. ■

Four receive awards during homeless conference

RALEIGH – The North Carolina Interagency Council for Coordinating Homeless Programs (ICCHP) presented four awards honoring citizens for contributions to the benefit of the state's homeless population.

The awards were presented during the eighth annual N.C. Conference on Homelessness, held in late November at the Jane S. McKimmon Center at N.C. State University in Raleigh.

Part of the conference focused on the importance for the state and its communities to develop 10 Year Plans to End Homelessness. More than 500 people from across the state attended the conference, which offered sessions providing solutions for helping to address the needs of the homeless, while at the same time finding ways to move people out of homelessness.

Linda Povlich, chair of the ICCHP, presented awards during luncheon programs both days of the conference.

- ▲ The Rev. Virginia “Ginny” Niblock Britt of Winston-Salem received the Sandra Wells Peterson Award. She was cited for “dedicating her life to speaking and interceding for those who are seldom heard and whose plight is seldom recognized. . . . An intercessor, a supporter, a defender, an advocate – Reverend Britt has proven herself to be all of these and more over her more than 30 years of service to the poor, the homeless, and the disenfranchised.”
- ▲ Libby G. Stanley, special needs assistance coordinator in the Community Planning Division of the Greensboro office of the U.S. Department of Housing and Urban Development, received special recognition from the council for “exemplary service and enduring commitment to

homeless people in North Carolina and to the organizations and agencies that serve them.” She was cited for years of helpful guidance of the state's homeless assistance programs through the maze of federal assistance programs.



Linda Povlich, ICCHP chair, left, presented awards to (l to r) Preiss, Britt, and Williams.

▲ Jack Preiss of Durham received the council's Lifetime Achievement Award for advocacy that led to the creation of the North Carolina Housing Trust Fund and the Durham Housing Bond Program. He also is a non-profit developer of affordable housing. As president of Development Ventures, a subsidiary of the Durham Housing Authority, and then as president of New Directions of Downtown Inc., he developed a series of award-winning groups of affordable housing

with services projects in Durham for the elderly, disabled and the homeless.

- ▲ Alphonso Williams of Durham received the Personal Achievement Award. Over time he made the transition from fatherless son, drug user and dealer, convict and homeless, relapsed drug user to a member of the work force, a family man, a homeowner and a leader and role model for homeless men. He is vice chair of the N.C. Coalition to End Homelessness.

The ICCHP is an advisory group originally created by executive order in 1992 to advise the governor and the secretary of the N.C. Department of Health and Human Services on issues affecting people who are homeless or at risk of becoming homeless. The council is charged with providing recommendations for joint and cooperative efforts to better meet the needs of the homeless residents of North Carolina. ■

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The ICCHP consists of 28 members who are appointed by the governor and represent non-profit agencies serving the homeless, county and city government, the private sector, the state departments of Administration, Commerce, Correction, Cultural Resources, Health and

Human Services, and Public Instruction, the Community Colleges System, the N.C. Housing Finance Agency and the N.C. General Assembly. A seat on the council is also reserved for a representative of homeless and/or formerly homeless persons.

ICCHP honors Reeves



Former state Sen. Eric Reeves received a plaque honoring his years of support of the Interagency Council for Coordinating Homeless Programs in a ceremony last month at the Department of Health and Human Services in Raleigh. Left to right: Julia Bick, DHHS housing coordinator; Linda Povlich, council chair; Reeves; DHHS Secretary Carmen Hooker Odom; Martha Are, DHHS homeless coordinator; and council member Janet Jacobs McLamb.

Kinston-Lenoir Chamber chooses Mike Moseley as Citizen of the Year

Mike Moseley was tapped as Kinston's 2004 Citizen of the Year on Jan. 6. The Kinston-Lenoir County Chamber



Mike Moseley

Photo used with permission from The Free Press, Kinston, Charles Buchanan, Photographer.

of Commerce recognized Moseley for his years of service and leadership both locally, in his years as director of Caswell Center, and in his current role as director of the Division of Mental Health, Developmental Disabilities and Substance Abuse Services. During his

tenure at Caswell Center, Moseley served as chamber president, the first African-American to do so. "Our lives are not about ourselves. Our lives are about giving to others," he said in accepting the award. Moseley was joined at the ceremony by many of his friends and colleagues from Caswell Center as well as his parents, his wife, Cassandra, and son, Jeremy.

Quote is used with permission from The Free Press, Kinston.

Caswell director is profile in Goldsboro newspaper

Caswell Center Director Beverly Vinson was profiled in a special feature by the Goldsboro News Argus in its Sunday, Jan. 23 edition. In its profile entitled "Following

her heart: Beverly Vinson reaches out to the handicapped," the Caswell director was recognized for her commitment and leadership as the first female director of the 91-year-old Kinston facility that serves approximately 455 developmentally disabled people in the



Beverly Vinson

eastern region of the state. The article traces Vinson's career from her start as a student teacher at the School for the Deaf in Wilson, to the O'Berry Center in Goldsboro and to her 1999 hiring as deputy director of Caswell Center. She was named interim director of the center when former director Mike Moseley was named state director of the Division of Mental Health, Developmental Disabilities and Substance Abuse Services in April 2004 and became permanent director in September 2004.

Adoption Profile

Introducing Amanda and Harley



This brother and sister are both resilient and optimistic. They rely on each other for comfort and camaraderie and it is essential that they be adopted together.

Both children have completed counseling for grief and loss issues and are ready for a loving, forever family.

A Closer Look at Amanda

According to everyone that knows her, Amanda always has a smile on her face and is a joy to have around. She is upbeat, bubbly and loves to talk. She makes friends easily and enjoys spending time with kids her own age. Amanda is very mature emotionally and is a strong support for Harley. She enjoys being active, running track, making crafts and visiting with her aunt and cousins. Amanda really enjoys being in drama and the attention she receives when performing. She is an excellent student whose name is nearly always on the A/B honor roll. Amanda is also a mentor to other students. She hopes to go to college to become a social worker and possibly open a child care.

A Closer Look at Harley

Harley's houseparent says, "Harley is a sweet kid and we wish we could clone him. We just adore him." He is a good boy who always does his chores and sets a good

example for the other children in the home. He may be shy when he meets someone new, but it doesn't take Harley long to warm up. He really enjoys sports, particularly football. Harley loves spending time with his friends, then just as easily be alone playing his favorite Game Boy. He attends mainstream classes at school where his name is also a standard on the A/B honor roll. Harley works hard for his good grades and excels in math and science.



Harley
b. Nov. 11, 1993

Amanda
b. March 24, 1990

A Family for Amanda and Harley

Amanda and Harley need a permanent, loving and supportive family where they will feel safe, wanted and a real part of the family. Although they have completed grief counseling, additional counseling may be necessary for the transition to be smooth and for the children to feel at ease.

Amanda and Harley would like to continue contact and visits with their aunt and cousins. (NC #011-2205) (NC #011-2204)

For more information on these children or adoption and foster care in general, call NC Kids Adoption and Foster Care Network toll free at 1-877-NCKIDS-1 (1-877-625-4371).