

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

Public Health Division garners two national awards

Two Division of Public Health programs – a school health initiative and an HIV testing program – will receive first- and second-place “Vision” awards, respectively, at the annual conference of the national Association of State and Territorial Health Officials (ASTHO) on July 14 in Boston.

Sponsored by GlaxoSmithKline, the ASTHO Vision Awards are presented each year to honor outstanding, creative programs and initiatives in state health departments.

The \$2,500 first-place cash award will go to the School Health Matrix Team, which was created in summer 2002 by State Health Director Leah Devlin. Now headed by Dorothy Caldwell, the Matrix Team brings together all of the division resources dedicated to the health of students, and includes staff from four different

sections and nine branches and units. The team also works closely with Healthy Schools staff at the

Department of Public Instruction to ensure the effectiveness of their joint efforts to improve children’s health. Public Health’s previous school health efforts were fragmented by a more rigid structure that created barriers to collaboration and communication.

This new, coordinated effort experienced a dramatic success in 2004, when the N.C. General Assembly approved funding appropriations of \$5 million to hire 145 new public school nurses over the next several years.



Dorothy Caldwell

The second place award of \$1,500 will go to the HIV/STD Prevention and Care Branch for its HIV Screening and Tracing Active Transmission (STAT) program. Initiated in 2002 under the leadership of branch head

See HIV page 4

INSIDE TOP FEATURES

Jim Bernstein Dies, Page 2
Salmonella, Page 6
Adoption Story, Page 9

Safe Egg
Handling

➔ Page 6



Hot Cars

➔ Page 8



N.C. loses esteemed rural health care leader

Note: A memorial service will be held at 2 p.m. on July 17 in the Alumni Center at the Carolina Club at the University of North Carolina at Chapel Hill.

Reprinted by permission of *The News & Observer* of Raleigh, North Carolina

By Amy Gardner
Staff Writer

Jim Bernstein, a former assistant secretary with the N.C. Department of Health and Human Services and a national leader in the improvement of rural health care, died Sunday of bladder cancer. He was 62.

Bernstein retired from state government Sept. 30 after working 31 years to improve health care in rural North Carolina. He launched the nation's first state-level office of rural health, devoting himself to attracting doctors, nurses and clinics to isolated communities that needed them.

Today, the impact of Bernstein's work is plain: 83 clinics launched with Bernstein's help continue to operate independently across the state.

"He was the father of rural health nationally. It's not just North Carolina," said Tork Wade, who worked alongside Bernstein for three decades and succeeded him as director of the N.C. Office of Research, Demonstrations and Rural Health Development.

"You cross the state, and there are very few communities where there's not something there, a clinic or a project, that hasn't benefited from all that he's done," Wade said. One of Bernstein's biggest accomplishments was recruiting doctors to rural parts. One of his biggest

rewards was watching the health of rural communities improve. In some communities with new clinics, infant mortality rates fell by half.

Bernstein's goals evolved over the years. Today, the office he launched continues to oversee the rural health centers program, but it also runs a health program for farm workers; a prescription assistance program for the poor; and a program that aims to improve health access for the urban poor.



Jim Bernstein

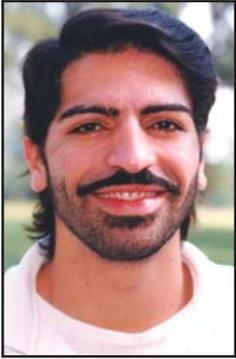
"What was magic about Jim was that he could work with such a wide breadth of people," said Nancy Lane, a health care management consultant. "He encouraged people to tackle the impossible, all the while making it look like lots of fun and an adventure." And Bernstein wasn't done. Though he retired in the fall, he had stayed on, without pay, as an adviser on rural health issues for Health and Human Services Secretary Carmen Hooker Odom. He also planned to continue working for a nonprofit foundation that focuses on rural health.

"We had lots of things we were going to do," Hooker Odom said Monday. "It's just one of the saddest days in my life."

Bernstein lived in Chapel Hill. In his final months, as word of his illness spread, health care providers and local leaders across the state wrote him to offer support and to tell him what he has meant to their communities, family members said.

Bernstein is survived by his wife, Susan; daughters Lori Allen and Donna Bernstein; son Eric; and granddaughter Emilia. ■

Copyright 2005 by The News & Observer Pub. Co.



Jalil Isa

¡Salud y Saludos!

Water safety remains concern for Latinos

The summer season is definitely in full swing as far as *heat* is concerned. It's pretty miserable for me outdoors. Remember, I'm the guy who applied to go to college in Alaska (lack of financing kept me from going). So I'm not a big fan of hot climates. Luckily, compared to Miami where I'm from, North Carolina still has the wonderful benefit of offering a healthy six months out of the year when the car's air conditioner is not crucial.

So why am I talking about the summer and the hot weather? Well, the hot weather is going to bring people like me closer to the water. And many of my fellow Hispanics – and others alike – will be seeking refuge in the cooling waters of the numerous lakes that abound in our wonderful state. Falls Lake, Jordan Lake, Kerr Lake, Lake Wylie, and Lake Norman are just a handful of the many lakes where people will be swimming as the summer heat boils down on us.

Unfortunately, while water is a fundamental requirement for sustaining life, it can just as quickly take it away. For the past few years, we've had several incidents of Latinos who have drowned in lakes around the state. A couple of years ago, the state began installing signs in Spanish and English that at least now explain to lake goers that there may be no lifeguards on duty and that they should exercise precaution.

While some of this information may seem obvious, it's also important to understand that some of the new

residents we have in our state might not have the kind of experience with the sea or lakes that lifelong residents may have. Take me for example...I grew up swimming in pools and the ocean. My first paycheck went towards acquiring my SCUBA diving certification. Yet the first time I can recall seeing the kinds of lakes that exist in North Carolina didn't come until I moved here. While we have plenty of canals and smaller, neighborhood lakes in Miami, there are no lakes like the man-made large bodies that you have here with the beautiful forests that surround them.

This may contribute to the accidental drownings we've seen in disproportionate numbers among Latinos during the past few years. According to our department's mortality statistics, there were six drownings among Latinos in 2002. The following year – the last year for which there are complete numbers – that number went up to 10. In all, there were 83 people who drowned in 2003. This means Hispanic drownings accounted for 12 percent of the total, while Hispanics make up less than a tenth of the state's overall population. Unfortunately – like with so many other health and safety issues – there simply may be a lack of awareness of the dangers that exist. Lakes and rivers can harbor dangers that may be unfamiliar to some of us: underwater drifting logs, rocks, or unexpected currents or drop-offs that may catch a swimmer or wader by surprise.

To combat this, at the start of each summer, we now aggressively stress the importance of heeding water safety precautions. These include the added safety of swimming with a buddy, and taking swimming lessons if you don't know how to swim. It also bears mentioning that large quantities of alcohol have no place near the water – whether you're on a boat or simply going in waist-deep into the sea. The importance of a Coast Guard-approved life vest can't be overstated. But perhaps most important – at least as far as children are concerned – is the critical value of having a responsible adult keeping vigilant watch over children any time they're near water. Having had a cousin drown in the family pool in Orlando two years ago, I am especially sensitive to this life-or-death lesson. ■

Jalil

Paula Bird named Fellow

Dix Director of Nursing Paula Bird is one of 20 nurses in executive leadership roles nationwide selected as 2005 Robert Wood Johnson Executive Nurse Fellows. The prestigious program focuses on redesigning the nation's health care system for the 21st century.

"Nurses must play a pivotal role in leading the redesign and success of health care now and into the future," said Dr. Terry Stelle, Dorothea Dix Hospital director. "The Executive Nurse Fellowship is an intensive opportunity to develop critical leadership skills and work with a nationally recognized team of coaches and instructors from within the health care industry. We're honored and excited that Paula was selected."

As part of the fellowship, Bird will undertake a leadership project with funding from the Robert Wood Johnson Foundation and support from Dorothea Dix Hospital. Bird's project will focus on the impact of fewer and



Paula Bird

fewer qualified RNs choosing to work in psychiatric acute-care hospitals by training other staff to do some of tasks that are currently done by RNs but do not require an RN-level of competency. RNs cannot delegate responsibility, but they can delegate tasks. Her project will develop a program that teaches, fosters and enhances leadership skills in the direct-care RNs and mid-level manager RNs to empower them to more effectively use other personnel such as psychiatric and rehabilitation technicians, medication aides, and phlebotomists.

In addition to her work at Dix, Bird is an adjunct faculty member in the Department of Psychiatry at UNC-Chapel Hill, and is board-certified in Nursing Administration,

Advanced, by the American Nurses Credentialing Center. She has been in nursing for 20 years and has worked in various roles including direct patient care, staff development, management, research, and administration. ■

HIV continued from Page 1

Evelyn Foust, the N.C. STAT program uses innovative nucleic acid amplification testing to identify early (acute) HIV infection, notifies cases and their contacts, and provides immediate clinical care.

STAT has proven to be an efficient, reliable and cost-effective method of identifying acute HIV and has helped shift the focus of HIV testing from treatment to prevention. The cost is small; the new testing program increased the state's overall costs of HIV testing and surveillance by only about 3 percent, or \$3.63 per specimen.



Evelyn Foust

The STAT program has three major advantages over traditional testing programs. First, quick recognition of early HIV infection allows for immediate clinical management. Second, the identification of persons with early HIV infection, when the disease is often most contagious, can help prevent further transmission of the virus. Third, the identification of acute infections can improve HIV surveillance.

Because of their effectiveness and their ability to be replicated, both the STAT Program and the School Health Matrix Team have quickly become national models. ■

Grant to help communities meet housing needs for people with disabilities

North Carolina residents with disabilities may see some improvements in the coming months in the availability of affordable housing.

The needed changes will be due in part to the efforts of a team operating out of the Department of Health and Human Services through a Real Choice Systems Change grant, Integrating Long-Term Supports with Affordable Housing in North Carolina.

“We look forward to reaching out to local communities to support their efforts to create housing that is affordable, and accessible to people with disabilities,” said Tara Peele, leader of the four-member team. “Our goal is to increase the capacity of local communities to access housing resources – capacity that will survive long after the grant funds have run out.”

The grant, which started last September, runs for three years. It is funded through the federal Centers for Medicare and Medicaid Services. It is a partnership among CMS, DHHS and the N.C. Housing Finance Agency. It provides for Peele and three others who each spearhead efforts in assigned geographic areas of the state: Walter Vincent, eastern; Kim Douglass, central; and Kay Johnson, western. They will provide support to local communities to expand their ability to meet their identified needs for affordable housing.

The first goal of the grant is to help implement the DHHS partnership in the Low-Income Housing Tax Credit program. In North Carolina, 10 percent of all low-income housing tax credit units must be set aside for people with disabilities. Since 2002, about 500 tax credit housing units have been funded specifically for people with disabilities.

“We’re trying to make sure they actually get referred into the units, and have access to supportive services,” Peele said.

The grant team will coordinate through agencies that refer people into tax credit units – those who advocate for independent living, local shelters, vocational rehabilitation, local human services agencies. “Then

we’re going to form local housing support committees with consumers, advocates, human services, and staff, to do needs assessments locally. That will increase their knowledge of what is and is not there and hopefully increase their ability to call attention the needs in their communities.”



Left to right: Kim Douglass, Tara Peele, Kay Johnson and Walter Vincent.

Currently the folks who may benefit are living in assisted living facilities, with families, in shelters, or doubled up in shared housing. Many receive SSI, which provides hardly enough to meet their living expenses. The grant’s efforts will support the state’s long-term care plan, which supports people who choose to live in their communities.

For additional information please contact:

Team Leader Tara Peele, 919-733-4534 or Tara.Peele@ncmail.net

Eastern Region Walter Vincent, 910-620-0467 or Walter.Vincent@ncmail.net

Central Region Kim Douglass, 910-303-0069, 919-855-4419 or Kim.F.Douglass@ncmail.net

Western Region Kay Johnson, 704-619-6716 or Kay.R.Johnson@ncmail.net ■

Salmonella illness on rise in North Carolina

Public health officials give tips on prevention

Nearly five times as many cases of the food-borne illness *Salmonella enteritidis* have been detected by the State Laboratory of Public Health so far this year as compared to the first six months in 2004. The Lab has detected more cases of the bacterial infection this year to date than in the past three years put together for the same time period, indicating a troubling rise in *S. enteritidis* cases statewide.

Surrounding states are experiencing similar increases in *Salmonella enteritidis*. North Carolina's divisions of Public Health and Environmental Health are working with other agencies here and in those states, as well as with the U.S. Centers for Disease Control (CDC), to halt the rapid increase of *S. enteritidis*. No common source has yet been identified for the North Carolina outbreak, so health officials are continuing their investigation. However, recent outbreaks of the illness in nearby states have largely been associated with eggs, as have several of North Carolina's previous outbreaks. Beef, poultry, and unpasteurized (raw) milk have also been associated with outbreaks of this type of *Salmonella*.

Salmonella enteritidis causes fever, nausea, abdominal cramps and/or diarrhea usually beginning 12 to 72 hours after eating food or drinking a beverage contaminated with the bacteria. Symptoms can appear as early as six hours after eating contaminated food. Most people become ill enough to see a doctor, and some people must be hospitalized, a few with life-threatening complications.

Eggs can be an important source of nutrition. However, *Salmonella* bacteria can be found inside seemingly normal eggs. When those eggs are eaten raw or undercooked, the bacteria can cause sickness and even death. But, people can do a lot to prevent *Salmonella* infection. Proper handling and storage of eggs help prevent bacterial growth, and thorough cooking destroys the bacteria.

To avoid egg-borne *Salmonella* illness, follow these food-safety rules when buying, storing, preparing, serving and eating eggs.

- **Don't eat raw eggs or foods containing raw eggs**, like cookie dough, blender drinks, homemade mayonnaise, or homemade ice cream (don't even lick the bowl!). Instead, use a

pasteurized liquid egg product or pasteurized in-shell eggs if the food will not be cooked before eating.

- **Buy clean eggs.** Choose Grade A or AA eggs with clean, uncracked shells. Open the carton before you buy and make sure that the eggs are clean, not cracked, and have been refrigerated in the store. Any bacteria present in an egg can multiply quickly at room temperature. Don't wash eggs.
- **Keep eggs refrigerated.** Store eggs in their carton in the coldest part of the refrigerator, not in the door, and use within three to five weeks. The refrigerator should be set at 40°F (5°C) or slightly cooler. Don't leave cooked eggs out of the refrigerator for more than two hours. When baking or cooking, take out the eggs you need and return the rest to the refrigerator. Keep hard-cooked eggs in the refrigerator, not at room temperature, and use them within one week.
- **Freeze eggs for longer storage:** break the eggs, beat the yolks and whites together, and put in a freezer container. Egg whites can be frozen alone. Use frozen eggs within one year.
- **Cook eggs until yolks are firm.** Many cooking methods can be used to cook eggs safely, including poaching, hard cooking, scrambling, frying and baking. If you prefer soft-cooked eggs, use pasteurized in-shell eggs (available in some supermarkets) or a pasteurized liquid egg product. Casseroles and other dishes containing eggs should be cooked to 160°F (71°C) as measured with a food thermometer. Serve cooked eggs and dishes containing eggs immediately after cooking, or place in shallow containers for quick cooling and refrigerate at once for later use. Use within three or four days.
- **Cleanliness is very important.** Wash hands, utensils, equipment and work areas with warm, soapy water before and after contact with eggs and egg-rich foods. Hands should also be thoroughly washed after using the bathroom and after touching pets, especially reptiles, as animals can also carry the bacteria.

See Salmonella page 8

Deaf School Graduates

Schools graduate students

The North Carolina School for the Deaf at Morganton (NCSD) and the Eastern North Carolina School for the Deaf in Wilson (ENCSD) held graduation ceremonies May 24 for the Class of 2005.

Both graduations focused on students' achievements and the bright futures that lie ahead of the graduates, featuring valedictory addresses by Gabe Campbell (NCSD) and Matthew Locklear (ENCSD). Community organizations were represented at both ceremonies as well, presenting scholarships to some of the graduates. All in all, both graduations marked a special night for the schools, with NCSD graduating 10 students and ENCSD graduating six students.

At the Governor Morehead School (GMS) for the Blind in Raleigh, graduation was on May 25. Valedictorian Francisco Chavez spoke, challenging his classmates to go forward and work hard to achieve their dreams. Parents of the nine members of the Class of 2005 celebrated as the tassels were turned and the graduates were presented. As is the tradition at GMS, school songs from the Ashe Avenue and Garner Road campuses were sung and the GMS school bell was rung 13 times, symbolizing the number of grades students had progressed through to get to graduation. ■

NCSD art shown at exhibit

Student art from the North Carolina School for the Deaf in Morganton (NCSD) was displayed in the third floor lobby of the Legislative Office Building last month. The display was made possible through state Sen. Tony Rand's office.

NCSD art teachers Beth Bailey and Kimberly Lajzer selected items for the exhibit from projects students worked on throughout the year. Students created books that chronicled the different projects they had completed; many pieces tied to themes being studied in class, such as aboriginal art and masks from various



Glass mosaic was on display at Legislative Office Building

countries. While many traditional pieces were on display such as drawings of family and friends, paintings of flowers, and self-portraits, other items included a fountain created in a leaf motif, 35mm photographs developed by students, clay pinch pots, and clay coil vases.

The highlight of the show, which ran the week of May 16, was a three-foot by five-foot mosaic of the sun, the moon, and the stars with a three-dimensional sun and moon made of clay hanging on the front. A book of

photographs, completed by a member of the Class of 2005, provided progress on the project. ■

Hot cars, kids a deadly mix

Temperatures ranging from the 80s to the upper 90s with high humidity are not uncommon in North Carolina during the summer. With that in mind, state public health officials are urging parents and other caregivers to not leave children in cars.

“The death of a child in a hot car is a tragedy that doesn’t have to happen,” said State Health Director Leah Devlin. “The temperature inside a car can heat up very quickly and a child left in a car is at great risk for heat-related death. No one should ever leave a child in a parked car – not even for a few minutes.”

On a warm, sunny day, even at temperatures as mild as 60 degrees, a closed vehicle can heat up to dangerous levels in a matter of minutes. During the summer months, the temperature inside a parked car can reach more than 120 degrees in as little as 10 minutes. Direct sunlight and a dark-colored car further speed the process.

Heat exhaustion can occur at temperatures above 90 degrees, and heat stroke can occur when temperatures



rise above 105 degrees. If not treated immediately, heat exhaustion can lead to heat stroke, or hyperthermia.

Since 1999, six North Carolina children have died of hyperthermia after being left by parents or caregivers in hot cars. In May, an 8-year-old in Buncombe County child died after being left in a parked car while his mother worked. His mother has been charged with second-degree murder, voluntary manslaughter and two counts of felony child abuse.

All caregivers should follow these tips concerning children, cars and heat:

- ▲ Never leave your child in an unattended car, even with the windows down.
- ▲ Check to make sure all children leave the vehicle when you reach your destination, particularly when loading and unloading. Don’t overlook sleeping infants.
- ▲ Make sure you check the temperature of the child safety seat surface and safety belt buckles before restraining your children in the car.
- ▲ Make sure that unoccupied cars are locked, so that children don’t accidentally become trapped. ■

Salmonella continued from Page 6

Illness caused by *Salmonella enteritidis* usually lasts four to seven days, and most persons recover without antibiotic treatment. However, the diarrhea can be severe, and some people may become ill enough to require hospitalization. Very young children, the elderly and people with compromised immune systems have an increased risk of developing serious illness, and should visit a health care provider immediately if they develop these symptoms. In these patients, the infection may spread from the intestines to the blood stream and then to other parts of the body, and can cause death unless the person is treated promptly with antibiotics.

For more information on food safety, visit the U.S. Food and Drug Administration’s Food Safety Web site at www.foodsafety.gov/~fsg/eggs.html. To find out more about *Salmonella*, visit the CDC Web site at www.cdc.gov. ■

Adoption Profile

Introducing Jalisa

Jalisa is a fascinating girl. She has a great sense of humor and likes to laugh and have a good time.

Outgoing and vibrant, she can be a leader in many social situations. Jalisa is an intelligent child who is not afraid to voice her opinions. She enjoys having active, involved role models who will listen to her and encourage her. Jalisa has a vast assortment of hobbies that keep her busy, including arts and crafts, knitting, drawing, and playing on the computer. She is also very athletic and enjoys sports. She ran track in the past and was disappointed that her current school does not have a track team. Jalisa likes to stay active and involved.

Jalisa attends mostly regular classes at school, but she does get some extra support. She is an intelligent girl with the ability to do very well academically. Since moving into her current home with a foster mom who listens to her and encourages her to get out and



Jalisa
b. March 7, 1991

experience new things, Jalisa's conduct and attitude have improved dramatically. She still needs to remember to slow down when she's excited and to be respectful, even when she's upset. With the support and love she now receives, these actions have been greatly minimized.

A Family for Jalisa

Jalisa was responsible for herself for some time, so she needs an adoptive family that is experienced with teenagers and will encourage her to be one. She needs parents who can offer guidance and understand her personality and ways of expressing herself. A stable family in a calm environment will be ideal for Jalisa. (NC #092-1977)

For more information on Jalisa 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). ■