

dhhs 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

N.C. special licensing program rewards long-term care providers who maintain high-quality workforce

North Carolina has created a first-in-the-nation program to help reduce the turnover of nurse aides and other direct care workers who provide hands-on care to hundreds of thousands of the state's elderly and disabled.

The North Carolina New Organizational Vision Award (NC NOVA) is a special licensure designation awarded by the North Carolina Division of Facility Services to nursing homes, adult care homes and home care agencies that meet the new voluntary higher standards for workplace culture.

NC NOVA standards span four major areas: supportive workplaces, training, career development and balanced workloads. The Carolinas Center for Medical Excellence (CCME) will serve as the independent reviewer, deciding

whether the rigorous, comprehensive standards have been met. CCME has been designated by the Centers for Medicare and Medicare Services as the Quality Improvement Organization for North Carolina and South Carolina.

"NC NOVA was created to help long-term care employers improve quality by attracting and keeping quality workers to meet current and future demand," said Susan Harmuth, project manager for the North Carolina Foundation for Advanced Health Programs, the organization that developed the program. "Providers must assure consistent staffing to meet the needs of an aging population."

Legislation that created NC NOVA was sponsored by the legislative Study Commission on Aging. NC NOVA was also endorsed by the House



Susan Harmuth

Select Committee on Healthcare. Other key supporters include consumer groups, direct care workers and supervisors, regulators, researchers, and North Carolina's major long-term-care provider associations.

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Like other states, North Carolina has trouble retaining direct care workers on the job at the very time that demand for their services is growing. In national reports workers have cited burnout, job stress, lack of meaningful career path and a lack of recognition for their contributions as some of the reasons for high turnover. NC NOVA was designed to tackle the problem head-on.

“The NC NOVA license states that this provider meets higher standards to keep a well-trained, effective and satisfied team of quality caregivers,” Harmuth said. “It’s good for consumers when satisfied workers stay on the job longer. Care outcomes are enhanced when there is a consistent care provider.”

NC NOVA was established under a national Better Jobs Better Care (BJBC) grant to the North Carolina Foundation for Advanced Health Program. BJBC is funded by the Robert Wood Johnson Foundation and The Atlantic Philanthropies.

“Direct care worker vacancies and high turnover rates have serious negative consequences for providers, consumers and workers themselves,” said Robyn Stone, national program director of BJBC. “These workers provide the personal interaction that is essential to quality of life and quality of



care for chronically disabled individuals.” Stone is also executive director of the Institute for the Future of Aging Services and senior vice-president for research at the American Association of Homes and Services for the Aging in Washington, D.C.

NC NOVA was developed by a broad-based partner team that included all five of the state’s long-term-care provider associations, workers, consumers, advocates, regulators and educators.

Harmuth said what makes NC NOVA unique is that the state will award a separate, special license to organizations that voluntarily meet the higher workplace standards.

“NC NOVA builds on the relationship between job satisfaction and quality care,” she said. “To develop NC NOVA we brought all the major stakeholders to the same table to create meaningful strategies to improve the recruitment and retention of direct care workers and also improve the quality of care they provide.”

The legislation creating NC NOVA takes effect Jan. 1, 2007.

The Partner Team for NC NOVA includes the Association for Home and Hospice Care of North Carolina; Direct Care Workers Association of North Carolina; Duke University Gerontological Nursing Specialty Program; Friends of Residents in Long Term Care; North Carolina Assisted Living Association; North Carolina Association, Long Term Care Facilities; North Carolina Association of Non Profit Homes for the Aging; North Carolina Department of Health and Human Services; North Carolina Foundation for Advanced Health Programs; North Carolina Health Care Facilities Association; The Carolinas Center for Medical Excellence; and the University of North Carolina at Chapel Hill Institute on Aging, as well as individual consumer and worker representatives. ■

Stewart Appointed Deputy

DHHS has a new deputy secretary. Dan Stewart, who has served as assistant secretary for 16 months, will take on the new duties Sept. 1. In making the appointment, Secretary Carmen Hooker Odom said Stewart has shown that he is a strong leader. “Dan is a perfect fit for this position,” said Hooker Odom. “I am absolutely committed to strong leadership at the helm of this department, and Dan is a very strong leader with a track record for getting the job done.”

Stewart, who has almost 30 years service in state government, said he was pleased with the new position. He said he will continue to focus on three areas – making the department’s operation as seamless as possible, increasing the level of accountability, and increasing efficiency. “That’s my basic philosophy – seamlessness, accountability and efficiency,” he said.

Stewart has enjoyed his time in state government. “I’ve had the opportunity to grow into this position, having worked at all levels of state government,” he said, “so I really do understand employee issues at all levels.” He plans to continue working in state government for several more years.

Stewart is a native North Carolinian who grew up near Four Oaks. He attended N.C. State University, received a BBA from Emory University, and is a certified public accountant. He and his wife Debbie live in southern Wake County with



Dan Stewart

their sons David, 16, and Jonathan, 15. They also have a daughter, Amy, and two grandsons, Brett and Tyler. ■

September is National Recovery Month

For thousands of successfully recovering substance abusers in North Carolina, every day they are clean, straight and sober is not only a victory but also a cause for celebration. September is set aside as *National Alcohol and Drug Addiction Recovery Month*. This year’s theme – “*Join the Voices for Recovery: Build a Stronger, Healthier Community*” – encourages all North Carolinians to learn how they can help strengthen their communities by helping people with substance abuse disorders receive treatment.

According to Mike Moseley, director of the Division of Mental Health, Developmental Disabilities and Substance Abuse Services,

74 percent of Americans say that addiction to alcohol has affected their lives – an 11 percent increase in just two years.

“Stigma and discrimination present obstacles and can be a mark of disgrace to those with substance abuse disorders who need access to treatment facilities,” Moseley says. “In North Carolina, more than 676,000 people have some form of substance abuse disorders and, although treatment and other support services can guide them through recovery from this disease, only 88,897 have tried to take advantage of treatment.”

Flo Stein, MH/DD/SAS division chief of Community Policy, whose office

oversees substance abuse issues, says it is vital to educate everyone about the impact that substance abuse disorders can have on families and children, and that many community-based organizations can develop local educational initiatives to help foster an understanding of substance abuse disorders and the stigma attached to them.

“We need to recognize the achievements of those who seek out treatment services,” she says. “By raising awareness that substance abuse disorders can be treated, just as any chronic disease is treatable, community members will be able to provide a more

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welcoming and supportive environment.”

Moseley’s message is this – breaking down the barriers to treatment will not only begin the journey of recovery for many people, but will also benefit communities as a whole. ■



Panflu Materials Developed

The Division of Public Health has developed materials to help you and those you serve understand pandemic flu. The materials, which were developed using federal grant dollars earmarked for this purpose, will soon be available.

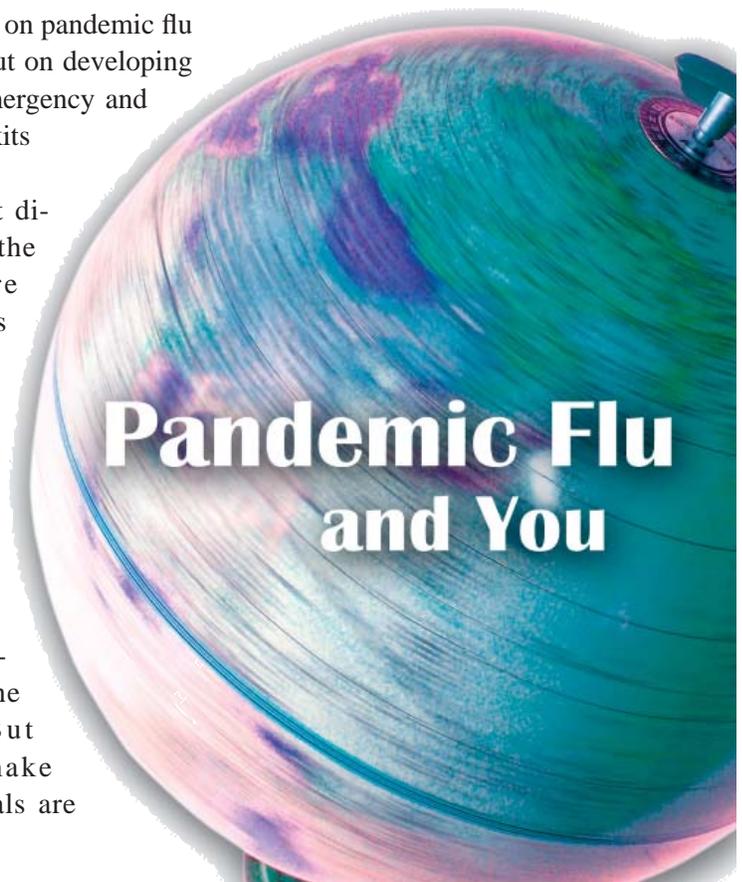
Materials include:

- A general information brochure (in English and Spanish)
- A poster (in English and Spanish)
- A checklist for individuals/families
- A checklist for businesses
- A checklist for faith and community-based organizations
- A primer on pandemic flu
- A handout on developing home emergency and first aid kits

“We realize that divisions across the department are interested in this subject and in conveying information to their clients about pandemic flu,” said Public Affairs Director Debbie Crane, who led the development of the materials. “But we have to make sure the materials are

consistent and that the Division of Public Health has approved all messages on this issue.”

A limited number of brochures and other materials will be available for DHHS divisions. Divisions can also personalize the brochure for their clients. “Although most of the wording of the brochure can’t be changed so the message stays consistent, the back panel can be personalized to include items like a division’s phone number or web site,” Crane added. “If you are interested in getting copies of the materials or personalizing the brochures, please give me a call.” Crane can be reached at (919) 733-9190. ■





Jalil Isa

iSalud y Saludos!

Excessive Natural Heat

In 2004, North Carolina saw four deaths attributed to “exposure to excessive natural heat.” Last year, that number shot up to 14. While the numbers have fluctuated a good deal from year to year, last year’s toll was the highest in the last the ten years. Over the course of the two decades from 1979 to 1999, the Centers for Disease Control and Prevention reports that more than 8,000 people in the United States succumbed to heat’s effects and died as a result. That was more than died from most natural disasters combined. This year’s figures for North Carolina won’t be available for some time, but these numbers clearly show how dangerous hot weather can be—especially for those who work outdoors during the summer.

There’s no question that many of those working outside, year-round, include many of the state’s Latino laborers. They often work in agricultural fields, construction, on road repair crews, and other “hot” jobs such as those found in factories. According to an economic impact study done by UNC’s Kenan Institute, almost half of the state’s Hispanic workforce works in construction. They only make up about a third of the construction force statewide, according to their numbers, but one need not look very hard to see that in urban areas...most of the workers on construction sites are Hispanic.

This is one of the reasons that emphasis has been placed this year on getting the word out on the dangers of heat exhaustion and heat stroke. It’s not uncommon for athletes practicing sports out on a field in a hot summer day to suffer from heat exhaustion if they aren’t careful with their liquid intake. As they say, by the time you’re thirsty, the body is telling you it’s already dehydrated. Hydration is key during hot weather. And North Carolina summers can test even the most heat-accustomed residents.

Each year seems to bring a few days of triple-digit temperatures to many areas around the state. When this occurs, the humidity can make it feel ten or more degrees hotter. At these temperatures, one may first start suffering the effects of heat exhaustion—heavy sweating, muscle cramps, dizziness, nausea. If the situation isn’t quickly remedied by getting the person to a cooler environment, heat stroke may set in—characterized by extremely hot body temperature in excess of 103°F, hot dry skin, and unconsciousness. This can be a life-threatening condition requiring the victim to immediately be cooled down by whatever means necessary. At this point, the victim should actually not be given anything to drink. But medical help should be summoned without delay.

Yet heat-related illnesses are generally preventable. That’s why one should heed the warnings related to hot weather. It only takes a bit of carelessness to cause potentially grave consequences. And considering that prevention just takes some common-sense actions, it’s well worth reiterating the health advice: drink plenty of water or juices, avoid alcohol and caffeine, keep out of direct sun as much as possible, dress in light-colored loose clothing, and watch for signs of heat exhaustion or heat stroke. If you have to work in the heat, use a buddy system—monitor the condition of your co-workers and have someone do that for you.

Unfortunately, many individuals who are most at risk to falling victim to this weather-related illness are the least informed of the risk factors and symptoms. In some cases, workers may be pulling in more hours on the job than what they may be accustomed to. Furthermore, even I—coming from Miami—have been struck by how much hotter the temperature can actually get here in North Carolina. As the summer comes to an end, make sure you keep an eye out for those who may not be as familiar with the environment and its dangers, and speak up on how to stay safe. ■

Jalil

Eastern North Carolina School for the Deaf Director Named

The Eastern North Carolina School for the Deaf (ENCSD) has a new leader. Dr. Reginald Redding is the new ENCSD director.

“Dr. Redding comes to ENCSD with a rich history of leadership in educational programs at the residential school level, the university level, and at the regional, national and international levels,” said Cyndie Bennett, Office of Education Services superintendent.

“Dr. Redding has a strong interest in organizational and staff development. He has served as Dean of the College for Continuing Education at Gallaudet and provided training and consultation to organizations as part of his educational consulting business. He also worked at Rochester Institute of Technology/National Technical Institute for the Deaf as Assistant Vice President of Student Affairs and Director of the Center for Student Resources.

“His national involvement in organizations such as National Black Deaf



Dr. Reginald Redding

Advocates and the Conference of Educational Administrators of Schools and Programs for the Deaf has given him opportunities to stay current in educational practices, while making clear his interest and dedication to his field.”

Redding joined ENCSD on July 1.

“Humbly, I am honored to be part of the ENCSD family in promoting the school’s mission to become a beacon and a national leader providing high quality educational services for our students,” Redding said. “The students and their families deserve the best educational program that we can offer to them. While on campus, the students will gain diverse and valuable learning experiences. Our teachers and staff are very dedicated and committed to challenging our students to achieve at their maximum potential.”

Redding received his Bachelor of Arts in American Studies from Gallaudet University, a Master of Education in Deaf Education from McDaniel College, a Master of Arts in Educational Administration and Supervision from California State University, Northridge and his Ph.D. in Special Education Administration from Gallaudet University.

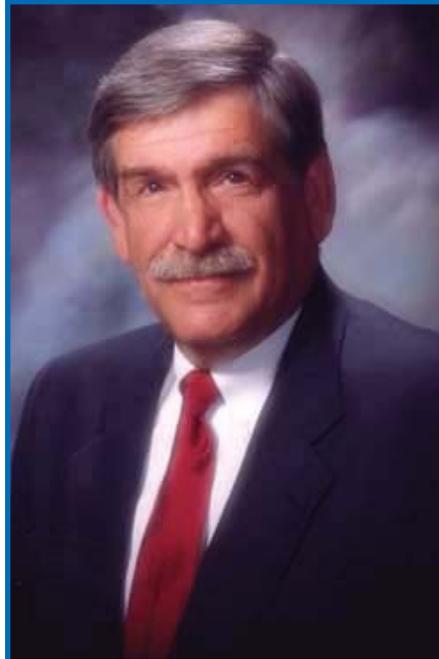
Established in 1964, ENCSD serves children ages five to 21. ■

Robarge Appointed Riddle Center Director

For the first time in its 43-year history, the J. Iverson Riddle Developmental Center has a new director. On Aug. 2, state Mental Health, Developmental Disabilities, and Substance Abuse Services Division Director Mike Moseley announced the appointment of Dr. Art Robarge as the Center's new director. Robarge succeeds founding director J. Iverson Riddle, who retired June 30. Robarge assumed his new duties on Aug. 15.

"We looked for an individual who would carry forward the high standards and exemplary work and dedication to people with developmental disabilities that have always exemplified the Riddle Center. Art Robarge is that leader, and I feel confident that he will guide this institution to even higher levels of service to the people of Western North Carolina," Moseley said.

Most recently, Robarge was the Riddle Center Director of the Consortium for Development of Community Supports for Indi-



Dr. Art Robarge

viduals with Disabilities. From 2000 to 2002, he worked at the state MH/DD/SAS Division in Raleigh, where he served as Deputy Division Director. Robarge also briefly served as Acting Division Director, from January 2001 through February 2002.

In addition, Robarge was Director of Harris Psychiatric Hospital in Anderson, S.C., from 1992 to 2000. From 1986 to 1989, he was Direc-

tor of Broughton Hospital and was the Assistant Director of the Riddle Center – then called the Western Carolina Center – from 1976 to 1986.

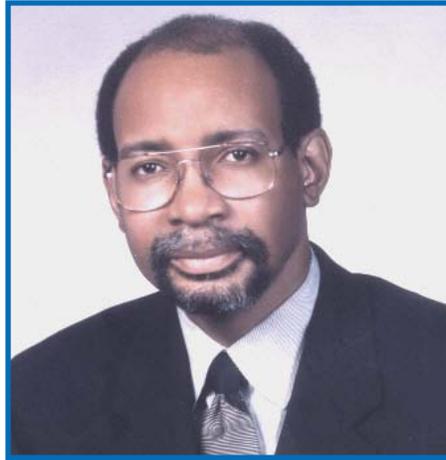
"I am deeply honored and I look forward to working with center staff, my colleagues within the division, the providers, and the families and persons with disabilities throughout the Western Region," Robarge said. "I promise to continue the Riddle Center traditions of excellence in client care; significant contributions to the professional body of knowledge through research, demonstration and innovation; and sharing resources and expertise with others so as to create additional community options and alternatives for persons with disabilities and their families."

The J. Iverson Riddle Developmental Center, located in Morganton, serves individuals with mental retardation who reside within the 35 counties of the Western region of the state. In 2005-2006, the Center served more than 303 residential clients. The Center employs over 954 people. ■

Moseley Named to National Mental Health Board

Mike Moseley, director of the Division of Mental Health, Developmental Disabilities and Substance Abuse Services for the N.C. Department of Health and Human Services, has been appointed to the Board of Directors for the National Association of State Mental Health Program Directors (NASMHPD). Moseley was tapped for the national board post at the group's summer meeting in July.

As state Director, Moseley is responsible for the administrative oversight of the state's MH/DD/SAS system of care. This includes the management of 12,000 employees and a budget of \$2.3 billion, and the provision of services to more than 350,000 individuals served in 15 state facilities as well as through local governmental entities throughout



Mike Moseley

the state. During his 30-year career in state government, Moseley has served as Director of Caswell Center in Kinston, as the Director of the N.C. Special Care Center in Wilson, and as Assistant Director of Cherry Hospital in Goldsboro.

NASMHPD represents the public mental health service delivery system serving 6.1 million people annually in all 50 states, four U.S. territories and the District of Columbia. NASMHPD operates under a cooperative agreement with the National Governors Association and is the only national association to represent state mental health commissioners or directors and their agencies. NASMHPD is also affiliated with the National Association of Consumer/Survivor Mental Health Administrators, an organization that represents the Directors of the Offices of Consumer Affairs within state mental health agencies. ■

Caldwell Honored with "Good for Kids" award



Caldwell receives her award from Dr. Robert P. Schwartz, N.C. Pediatric Society.

Dorothy Caldwell, School Health Unit supervisor with the Division of Public Health, has received a 2006 Good for Kids award from the N.C. Pediatric Society.

The award recognizes individuals and organizations that initiate or promote a community or statewide effort to improve the health and well-being of children of all ages. Caldwell was recognized for her "vision, organizational skills and leadership efforts to find the will and the way to reduce childhood obesity and move the children and youth of North Carolina toward a healthy weight."

Beginning in 2001, Caldwell coordinated a 100-member Healthy Weight Task Force and was the lead author of the task force report, *Moving Our Children Toward a Healthy Weight: Finding the Will and the Way*. She led the writing team for *Eat Smart: North Carolina's Recommended Standards for all Foods Available in School* and was a member of the writing teams for *Move More: North*

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N.C. FAST is Getting Under Way

The Division of Social Services wants to make the most of Information Age technology. NC FAST is showing the way.

The Families Accessing Services through Technology program strives to improve the information-sharing abilities of state and county DSS offices. When NC FAST implements its major project, called Case Management, the results will be greater efficiency and better service statewide.

What prevents automated systems from performing optimally right now is the sheer number of them. State DSS and each county agency use their own computer systems, which may not be entirely compatible with other systems. Case Management will make each county's computer network compatible not only with the state, but also with those of other counties.

That should save a young life about every two months, said Bonnie Knowles, project director. Investigations of child fatalities frequently find that a Child Protective Services caseworker had looked into abuse and neglect reports when the child lived in another county, but when the family moved to another county, the information did not follow. This occurs about five times a year, Knowles said.

The Case Management project will allow all state and local DSS computers to track clients throughout the system, giving caseworkers a complete history of benefits the client has received in the past — from Food Stamps and Work First to Energy Assistance and Medicaid. Standardization should reduce the possibility of fraud and error, as well as ensure clients get all the benefits to which they are entitled.

Case Management will also reduce the number of applications a client fills out. Once the relevant information is in the system, it follows not only from locale to locale but also from program to program.

Knowles anticipates next year NC FAST will issue a request for proposals to design and create the Case Management project. A target date for implementation will not be known until the proposals arrive.

In the meantime, NC FAST has launched a pilot project in New Hanover County, called Service Delivery Interface, or SDI, that went live Aug. 1. Awaiting installation in a handful of other counties, SDI helps caseworkers manage Food Stamps benefits. Besides eliminating multiple entry of client information, SDI quickly processes all Food Stamps transactions — from eligibility determination to terminations.

“It saves the time of the front-line workers, so they have more time to meet with clients,” said Kevin Kelley, interim business manager for NC FAST.

All county DSS offices currently use a powerful efficiency and accuracy tool developed by NC FAST. Online Verification, or OLV, allows one-stop perusal of several state and federal databases to verify information provided by program applicants. “Our research indicates that OLV saves 30 minutes per case from a caseworker not having to log into and out of various systems,” said Mark Barnhart, NC FAST implementation manager. ■

DHHS WELLNESS AT WORK

Suzanna Young, DHHS Wellness Director

Too Much Health Advice?

Have you ever felt overwhelmed by the amount of health information provided in the media and by health professionals? We hear hundreds of recommendations about what to eat and what not to eat. We are told different things about how much exercise is needed and what types of exercise are best. It becomes difficult to remember healthy living recommendations, let alone follow them.

It is no wonder that many people just give up trying to make healthy lifestyle changes after years of hearing complicated and conflicting health messages. How many people gave up eggs for years based on medical recommendations, only to be told later that eggs were fine in moderation? Contradictory health information has caused many to be skeptical of any health advice.

In the midst of all this confusion, we should remember that there are basic health recommendations that have not changed over the years. These simple common-sense guidelines can help us make changes that will have immediate health benefits and that will enable us to continue doing the things we enjoy as we age. The Wellness Councils of America have provided the following five essential rules for living a healthy life:

1. **Assess your health and health risks to identify areas that need improvement.** (N.C. State Health Plan members can take a personal health risk assessment at www.statehealthplan.state.nc.us. Non-members can take their risk assessment at www.fittogethernc.org/HRA.aspx.)
2. **Pay attention to what you eat.** Control portion sizes and caloric intake, eat more fruits and vegetables and less fat. (See www.eatsmartmovemorenc.com.)



3. **Exercise every day.**
4. **Protect your sleep.**
5. **Quit smoking.**

We often have a hard time believing that it is the simple choices that we make in our lives every day that make the most difference to our health. The types and quantities of food we regularly eat, how often we exercise, how much sleep we get, what our stress levels are, and whether we smoke all have the greatest impact on our health.

The DHHS Wellness Initiative works throughout the department to create and sustain work environments that promote and support employee health and wellness.

Wellness committees provide wellness activities and health information for employees in DHHS agencies and facilities. They work toward changes to policies and work environments that provide employees opportunities to:

- Increase their levels of physical activity;
- Have access to healthier snack and meal options;
- Avoid tobacco; and
- Better manage stress.

The committees also address other health concerns such as flu prevention, chronic disease management, injury prevention, and the importance of taking an annual N.C. HealthSmart Health Risk Assessment (HRA).

UNC-W Scholarship Honors VR Counselor

For DeAnne Carroll, the student years at UNC-Wilmington were a struggle. She relied on financial aid, she worked at part-time jobs and at times, she recalls, she barely had enough to eat. But she made it through.

After graduation, she became a counselor with the Division of Vocational Rehabilitation's Wilmington office. There she has helped scores of people with disabilities achieve their career objectives—or in some cases simply keep their jobs after acquiring a disability.

Now, one of those individuals is paying her “forward.”

This summer, Mark Griffis, one of Carroll's former clients, and Wilmington-area businessman David Robertson endowed with a \$30,000 gift the “DeAnne E. Carroll Just Believe Scholarship” to recognize her contributions in the field of vocational rehabilitation counseling.



(L-R) David Robertson, DeAnne Carroll, UNC-W's Marla Rice-Evans, Mark Griffis

The UNC-W scholarship is open to students at Carroll's alma mater, Eastern Wayne High School, who have at least a 3.0 grade point average. It will be worth \$1,000 per year for four years.

The university expects the endowment to grow. The scholarship's namesake, for one, is counting on it.

“One day I hope it will mean a full four-year ride for someone. What a help that money can be!” says Carroll, who just this year added a master's degree in counseling to her own academic credentials—and, at a September 13 luncheon, will get to meet “her” scholarship's first recipient. ■

Caldwell cont. from page 8

Carolina's Recommended Standards for Physical Activity in School and Eat Smart, Move More NC: North Carolina's Plan to Prevent Overweight, Obesity and Related Chronic Diseases. (See Eat Smart, Move More...North Carolina on the web at www.eatsmart-movemorenc.com.)

In 2003, Caldwell became coordinator of the Division of Public Health's School Health Initiatives, designed to raise the priority for school health among other agencies and state and local partners. Her work was honored with a national ASTHO Vision Award in 2005.

A tireless worker for children's well-being, she also coordinated the implementation of the state's School Nurse Funding Initiative, providing 145 new school nurse positions and moving the state toward the recommended school nurse to student ratio of 1:750.

Caldwell, who retired from Public Health on Sept. 1, directed school nutrition programs at the local and state levels in Arkansas and on the federal level at U.S. Department of Agriculture before moving to North Carolina in 2001. She holds a BS degree in home economics from the University of Arkansas and an MS in food systems

administration from the University of Tennessee. She is a registered and licensed dietitian. She says her understanding of good nutrition from the field to the plate and her commitment to pleasurable eating began during childhood on an Eastern Arkansas farm where the growing, preparation and enjoyment of delicious, nutritious food was central to the culture of her family and community. She continues to share that culture with her five children and her fifteen grandchildren—and with the people of North Carolina. ■

Adoption Profile

Introducing Kasey and Kendra

These beautiful young ladies are especially interested in fixing hair and hope to become beauticians so they can open their own salon together.

A Closer Look at Kasey

Kasey may be energetic and bubbly, but she is a very responsible and mature young woman. She is bright, outgoing, and loves to laugh and joke around. Kasey enjoys watching movies, listening to music, taking walks, sleeping late, and having her hair and nails done. She also loves fixing other people's hair. Kasey can be a positive leader when her self-esteem doesn't intrude. She attends regular classes at the campus school where she lives. While she is behind, Kasey wants to make positive changes to her life and understands that she must improve her grades to attain her goal of attending college. Kasey has done very well in this placement where the expectations are crystal clear. She has gained more privileges by following directions and the rules of the program. It is important that she continue her counseling and medication management. Birthday: December 14, 1989



Kasey b. December 14, 1989
Kendra b. June 10, 1991

A Closer Look at Kendra

A good sense of humor goes a long way with Kendra. She loves to laugh and does well when she can enjoy herself. Besides being bubbly, energetic, and outgoing, Kendra is also often quiet. She has such a gentle, caring nature that others love to spend time with her. Kendra enjoys the usual teen things like shopping and talking on the phone with her friends. She also likes to listen to rock and rap music, watch "girlie" or scary movies, and play basketball. Academics are challenging for Kendra and she often becomes frustrated. She struggles with low self-esteem regarding her schoolwork. A modified instruction program allows her to work at a more

appropriate level for her ability and Kendra has worked very hard to raise her grades. It is imperative that Kendra continue her counseling and medication management. Birthday: June 10, 1991

A Family for Kasey and Kendra

Kasey wants a family that will always be there for her and encourage her to do what is right. It means a lot to her to feel that she is cared for and she is further encouraged to do her best. Kendra hopes her family will listen to her and help her with any problems she might encounter. Both girls want an adoptive family that is kind, caring, and supportive of their future plans. They both do best with clearly defined expectations and consequences. Stability, structure, consistency, patience, and a gentle manner and sense of humor will go a long way towards making these girls feel safe, wanted, and loved. (NC #059-2640) (NC #059-2639)

For more information on this child 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). ■