



# EmployeeUPDATE

*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

## Gov. Morehead student art on exhibit at Art Museum

Works of art by students at the Governor Morehead School for the Blind and Visually Impaired will be featured in the Education Wing Gallery of the North Carolina Museum of Art beginning in December. Twenty-seven works by students from GMS will be on display through the end of April, 2008.

The exhibit explains how artists who are blind or visually impaired use all information available to them to create works of art. In addition to the artwork itself, information on the teaching methods and learning styles of the visually impaired is shared through photographs and text. All text accompanying the exhibit is also in Braille.

Located on Blue Ridge Road in Raleigh, the N.C. Museum of Art, including the gallery, is open Tuesday through Thursday and Saturday from 9 a.m. to 5 p.m., Friday 9 a.m. to 9 p.m., and Sunday from 10 a.m. to 5 p.m. ■

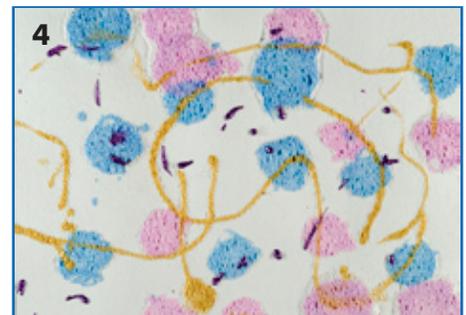
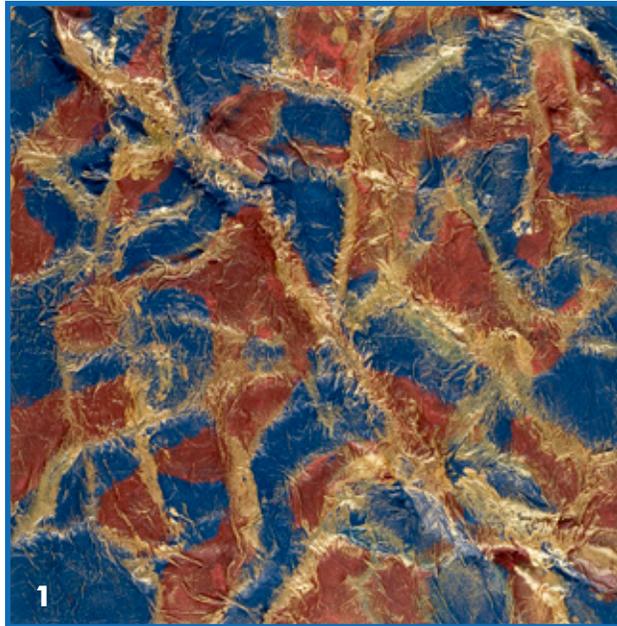


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# North Carolina Special Care Center has new name

Acquiring a new name but holding fast to its core mission, the North Carolina Special Care Center has officially changed its name to the Longleaf Neuro-Medical Treatment Center.

According to Center Director Rusty Benton, the staff at Longleaf will continue to deliver specialized services to patients from the state psychiatric hospitals who have ongoing complex mental and physical health issues, but do not need continued long-term or acute care hospitalization in state or private hospitals.

“We are proud of our new name and remain committed to our core mission,” Benton said. “But this is more than just a name change; there is a lot going

on here at Longleaf that enhances our ability to provide services to the people of eastern North Carolina.”

According to Benton, 100 new staff positions, to be added over the next 18 months, were approved by the General Assembly in the last budget to help with the needs of patients whose complex mental and physical health needs require more care than is available at other types of community care facilities. The newly created positions will allow the Center to serve more patients who need a higher level of care.

Also already under way is a more than \$5.5 million renovation project focusing first on renovating patient’s rooms, and then on new front and ambulance entrances as well as

additional parking capacity for staff. Benton estimates the renovations will be completed by the end of 2008.

Longleaf Neuro-Medical Treatment Center provides specialized services to patients from the state’s four psychiatric hospitals who, due to their complex mental, physical and behavioral needs, are not able to receive services in facilities in their home communities. Longleaf will also continue to provide treatment for patients with Alzheimer’s disease or other forms of dementia if their behavior prohibits these patients from being served in community facilities. These patients may be referred directly from their communities in the eastern region of the state. ■

## Gov. Morehead student art photo captions, from page 1

1. Richard (High School) – Relief sculpture. Basic paper mache and paint over twisted paper toweling creates an intriguing relief based on a map of the student’s home town.
2. Arianna (Elementary School) – Lion. Using yarn, foam sheets, wiggly eyes and puff paint, students create art that is tactile.
3. Lateaya (High School) – Wooden sculpture. Students enjoy putting shapes together to create forms.
4. Noah (Elementary School) – Mixed media painting. Bingo markers used on Quick Draw paper from APH create raised dots accented by puff paint.

## Four sworn for ICCHP service



Four members were sworn to terms on the Interagency Coordinating Council for Homeless Programs by Judge Linda Stephens, center, on Nov. 14. They are, from left, Zack Hamlett, director of the Office of Economic Opportunity; Margrit Bergholz, senior supportive housing development officer for the N.C. Housing Finance Agency; Judge Stephens; Harrison Shannon, executive director of the Durham Public Housing Authority; and Mel Chilton, executive director of the N.C. Council for Women and the Domestic Violence Commission of the Department of Administration.



## Jalil Isa

# *iSalud y Saludos!*

## Linguistic Particularities

The linguistic particularities of different places never cease to intrigue me. You can go to countries around the world where you'd expect to hear one language – and be surprised to hear entirely different languages instead.

Take South America. Many might be surprised to learn that the official language of Suriname, which is the smallest country in South America and is situated in the northern part of the continent, is Dutch. To its east is French Guiana, an overseas department of France and therefore part of the European Union, where French is spoken and the Euro is the official currency! To the west of Suriname is Guyana, the only English-speaking country in South America.

An even more pronounced example is Spain. Most people think of Castilian Spanish as the tongue of all tongues in Spain. Yet, there are no less than four other “co-official” languages – Catalan/Valencian, Basque, Galician, and Aranese. Some of these languages are so strong in their particular region that you can't get a job as a police officer or other public servant unless you speak that language. In these places, this “co-language” is actually the dominant and primary

spoken language. When I visited Barcelona – the second largest city in Spain – a few years back, I was surprised to see how prominent Catalan was in that area. Every sign seemed to include that language. Other, less common, languages are still spoken throughout various parts of Spain.

Recently, I was surprised again by how quickly an area can change from the familiar to the unfamiliar. I paid a visit to Ireland and faced a different foreign language in this mostly English-speaking republic. From a tourist standpoint, it made life a little harder for me as I navigated around the whole of Ireland. When I reached the Gaeltacht regions (the parts of Ireland that are principally Irish-speaking), I was met with street signs that no longer had any English on them. And contrary to lots of other languages, Irish seems to have no resemblance whatsoever to English when it comes to proper names. While ‘Ireland’ is spelled ‘*Irlanda*’ in Spanish and Italian, and ‘*Irland*’ in German, its Irish spelling is Éire. Most other place names have even less similarity to their English counterpart.

Interestingly enough, as I traveled around the country asking people about

their knowledge of Irish Gaelic (as opposed to simply ‘*Gaelic*’ which actually refers to *Scottish Gaelic*), I noted that, at best, only about 20 percent of the population spoke this native language fluently. In fact, the region where it's the primary day-to-day language comprises only about two percent of the country's entire population. Yet, you can't travel anywhere without seeing both languages included in public notices – be that on street signs or even the public health placards in restrooms advising people to wash their hands.

One could perhaps argue this is a lot of trouble to go through to accommodate such a tiny portion of the country's population, but it is widespread nonetheless. It got me thinking about the United States. As the population of Spanish-speaking people here continues to grow, it would be interesting to see how people might react if something similar were to occur here. To those overseas, bilingualism is accepted as a natural – if not desired – part of life. On this side of the pond, I wonder how this facet of our changing American culture will evolve. ■

*Jalil*

## Potter receives ECU alumni award

Carol Potter is among 40 graduates of East Carolina University to be recognized as distinguished alumni, and one of five selected by the university's School of Allied Health Sciences for recognition as part of the school's 40th anniversary celebration. They were honored at an awards ceremony Oct. 27 during the university's homecoming.

"This honor means so much to me," Potter said. "ECU's commitment to quality education for all people, including people with disabilities, gave me a foundation on which to build a career of service to others with disabilities. I am most grateful to ECU and to the faculty of the Department of Rehabilitation Studies for this award and for the impact they have had on my life."

As assistant director of community services in the N.C. Division of Vocational Rehabilitation Services, Potter's responsibilities focus on providing services to people with disabilities. That includes statewide provision of assistive technology



Dr. Carol Potter

services and technical assistance to people of all ages, as well as providing assistance to the N.C. Independent Living Rehabilitation Program. She also oversees publication of the guidebook for travelers with disabilities, ACCESS NC.

Dr. Paul Alston, chair of ECU's Department of Rehabilitation, recommended Potter for the recognition. "Dr. Carol Potter is a person of exceptional achievement, both as a professional and as a person," Alston said. "She

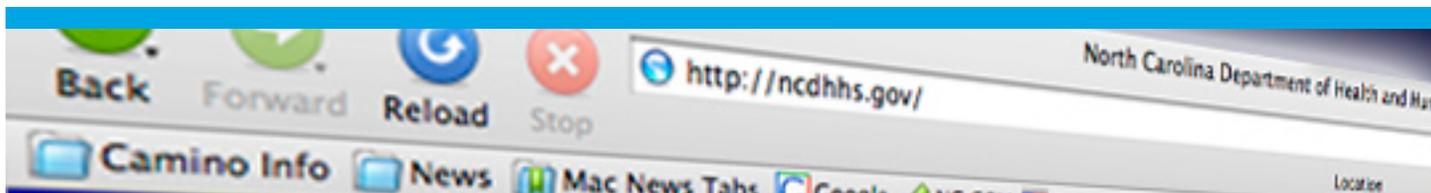
has devoted her professional life to assisting others to have a better life through service, education and now through influencing policy.

"Her personality and positive approach to life and her profession are infectious, and she lifts the mood and motivation of all around her," Alston said. "She is truly an outstanding professional and person, and we are happy to honor her as a distinguished alumna of the Department of Rehabilitation Studies at East Carolina University."

A quick glance at Potter's resume bears evidence of her passion for providing assistance to disabled people. Among her previous positions, she was a disabled persons' advocate in Illinois from 1984 to 1985; instructor for independent living at Baylor College of Medicine from 1988 to 1991; and empowerment and family support coordinator in Georgia from 1996 to 1997. She has held her current position with DVRS since 2003. ■

*Allison Slight*

*DHHS Public Affairs Office intern*



## Info for **YOU** on the DHHS website

Check out the beefed up information for DHHS employees on our website: [www.ncdhhs.gov/government](http://www.ncdhhs.gov/government). Job tools and human resources info are in one place.

What else would you like to see there? If you have a suggestion, email the DHHS webmaster at [dhhswebmaster@ncmail.net](mailto:dhhswebmaster@ncmail.net).

# Program to prevent type 2 diabetes in children expands

On World Diabetes Day, Nov. 14, five local health departments received funding from the N.C. General Assembly to replicate a successful program designed to prevent Type 2 diabetes in children 10 to 18 years old.

The legislation appropriated \$250,000 to DHHS to expand the successful WakeMed ENERGIZE! program. The funds will go to the local health departments in Gaston, Johnston, Nash, Robeson and Wilkes counties.

Obesity and childhood overweight are major risk factors for type 2 diabetes. ENERGIZE! founder Dr. Mark Piehl talked about the program, which involves modules on nutrition, physical activity, and self-esteem for at-risk children and their families. Speaking about how the program got started, he said, "We were seeing kids in our practice with multiple risk factors for type 2 diabetes, and there was nothing in place to help them reduce their risk." ENERGIZE! Is designed to do just that.

Since July 2004, nearly 2,000 children ages 10-18 have been referred into the WakeMed program, 45 percent of whom had pre-diabetes. After the 12-week intensive program, children reduced nearly all of their risk factors, including number of hours of television watched and soda consumption. Most importantly, nearly 80 percent of the children who had



Rep. Linda Coleman (left), a co-sponsor of the legislation authorizing the funds, presents an oversized check to Robeson County Health Director Bill Smith (far right) and program coordinator Monica McVickers (third from right) as N.C. Diabetes Program director Chris Bryant looks on.

elevated glucose reduced their levels to normal after six months; 70 percent were still at normal levels a year later.

The local health departments are partnering with other groups and some non-profits to make sure that each component of WakeMed's ENERGIZE! program can be replicated in their counties. Recruitment and training of physicians begins in December. From March to May, 2008, each funded county will work with the children and their families for one 12-week cycle. WakeMed will provide technical assistance, and the N.C. Diabetes Prevention and Control Branch, which distributes the funds, will provide a formal evaluation of the entire process.

Dr. Dennis Harrington, deputy director of the Division of Public Health, said, "North Carolina is working hard to stem the tide of childhood obesity, and we are pleased that five of our health departments will be leading the way to change health behaviors and thus health status outcomes." ■

# Smoking at DHHS? So “last-year.”

With the start of the New Year, state employees who wish to smoke will have to do so outside of state government facilities.

As of January 1, 2008, smoking will be prohibited in all state government facilities in accordance with G.S. 130A-493. Lawmakers took this step in recognition of studies which found that exposure to second-hand smoke increases the risk of cancer, heart disease and asthma.

Session Law 2007-193 applies to all:

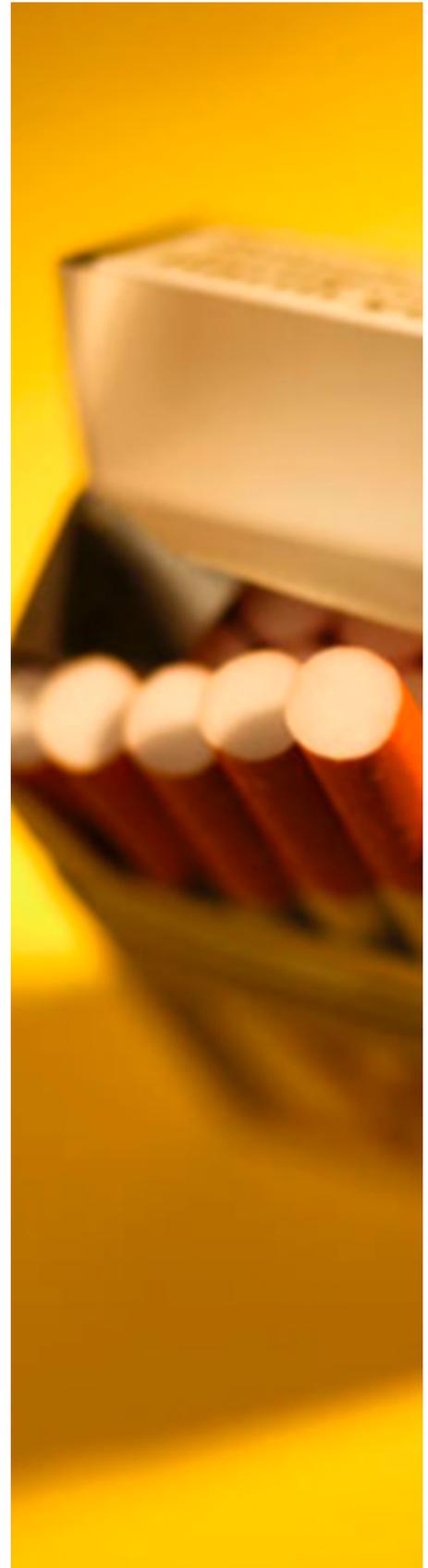
- buildings owned by the state,
- buildings leased by the state as lessor (i.e., landlord), and
- the area of any building leased and occupied by the state as lessee (i.e., tenant).

State legislators considered the findings of both the 2006 Surgeon General’s Report and North Carolina’s Justus-Warren Heart Disease and Stroke Task Force, which found scientific evidence of health risks caused by involuntary exposure to second-hand smoke.

Working in a smoke-free environment provides an opportunity for smokers to quit using tobacco for good. Effective cessation support is available at no cost to state employees and all North Carolina citizens through the N.C. Tobacco Use Quitline. This service is staffed by coaches trained to assist callers through the entire quitting process. Calls are free and confidential, and coaches will call you back, upon request, to monitor progress and answer questions. Call the toll-free service at 1-800-QUIT-NOW (1-800-784-8669) between 8 a.m. and 12 midnight, seven days a week.

Services like the N.C. Tobacco Use Quitline have been shown to significantly improve the chances of quitting. However, some smokers find that using a medication to help control the cravings of nicotine withdrawal significantly increases their chance of breaking their tobacco habit. State employees who participate in the State Health Plan may purchase the nicotine patch or other approved cessation medications for a reduced co-pay.

The combination of the cessation medication and support from the N.C. Tobacco Use Quitline provides the most effective assistance for smokers wanting to quit. For additional information, visit the Tobacco Prevention and Control Branch website at [www.tobaccopreventionandcontrol.ncdhhs.gov](http://www.tobaccopreventionandcontrol.ncdhhs.gov). ■



# Get Real, Get Tested campaign a success in 2006-2007

## Plans under way for 2008

A community outreach by the Division of Public Health provided free statewide testing for HIV and syphilis during 2006 and 2007. The campaign, Get Real, Get Tested, extended services to more than 2,000 people who otherwise may not have been tested.

The campaign initiated a two-pronged effort: to educate citizens state-wide, and to test North Carolinians identified as living in high-risk communities. The strategy was developed by State Health Director Leah Devlin and Evelyn Foust, HIV/STD Prevention and Care Branch head.

“This has been a successful campaign that will continue in 2008,” said Holly Watkins, project coordinator. “It is important to know your HIV status and your partner’s HIV status. HIV is a disease that affects everyone and does not discriminate. If you are sexually active, it is imperative to get tested.”

Thanks to the help of disease intervention specialists, community-based organizations, local health departments, television commercials, and most

importantly, community outreach by the GRGT teams, this testing was able to reach more people than anticipated.

The effort resulted in the identification of 27 people who tested positive for the HIV-1 antibody and 23 people who tested positive for syphilis.

Get Real, Get Tested held its first event in Fayetteville on Dec. 8 and 9, 2006. HIV and syphilis testing were offered in various locations including the Cumberland County Health Department and two small grocery stores.

During 2007, testing sites were operated in Raleigh, then Durham, and later in High Point, Greensboro, Rocky Mount, Wilmington, Goldsboro, Kinston, and in parts of Columbus County. Testing in High Point was the first event for GRGT to offer testing from a mobile unit parked at a Wal-Mart store.

The campaign grew into a much larger success than anyone had imagined, according to Watkins. By recognizing the importance of going into neighborhoods and testing door-

to-door, Get Real, Get Tested was able to reach many residents who were unable to travel to testing locations.

Organizers are optimistic that continuing this outreach in 2008 will yield more positive results due to the responsiveness of health care personnel, community organizations and others during the 2006-2007 campaign. Plans for 2008 include a continued partnership with Raleigh television station WRAZ/Fox 50 as well as entry into the Latino community.

By Nov. 1, there were nearly 5,000 hits on the Get Real, Get Tested Web site. In the past year, commercials for Get Real, Get Tested have reached an estimated three million viewers thanks to the sponsorships from FOX 50, Duke Medicine, University of North Carolina (UNC) Health Care, and the State of North Carolina’s HIV/STD Prevention and Care Branch.

For more information on the Get Real, Get Tested campaign, go to the N.C. HIV/STD Prevention and Care website at [www.epi.state.nc.us/epi/hiv](http://www.epi.state.nc.us/epi/hiv). ■

*Allison Slight  
DHHS Public Affairs Office intern*

**GET REAL.**  
**GET TESTED.**

# DPH celebrates autumn

It wasn't a dark and stormy night but a beautiful, sunny day on the Six Forks campus when Division of Public Health staff donned alter-ego costumes or decorated pumpkins for a fall harvest celebration. More than 75 staff took part in this fun event on Oct. 31. There were lots of healthy snacks to enjoy, laughter at some surprising costumes, and just the perfect chance to de-stress for an hour and meet someone who works just a floor down or the next building over.

Four judges from across the division had their work cut out for them as employees vied for awards. Some of the winners are pictured below. ■



More than 35 creatively costumed employees and talented pumpkin carvers competed for prizes.



**Scariest Costume:** Doug Campbell - "beheaded guy and captor" (Occupational Environmental Epidemiology Branch) and Tina Pinch - "Grim Reaper" (Cancer Branch) tied for this award.



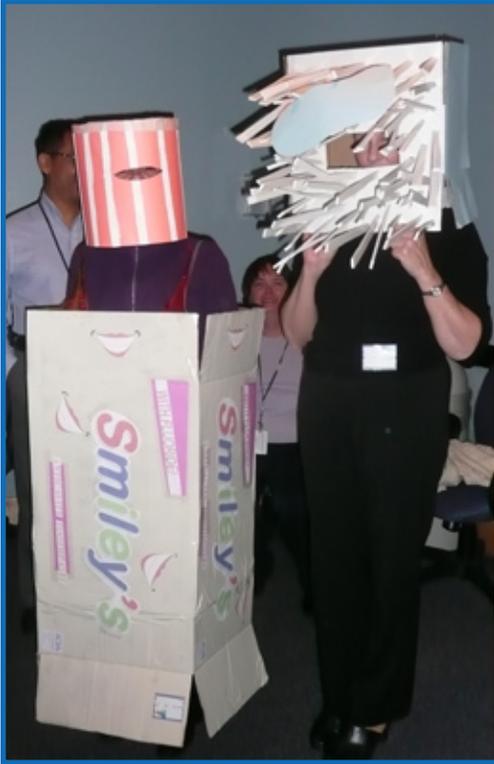
**Most Original:** Jane Miller - Miss Aligned (Injury and Violence Prevention Branch)



**Best Public Health-Related:** The Convicted Racketeer Gang: Big Tobacco - Sally Malek, Jim Martin, Elisabeth Constandy, Phyllis Andrews, Marci Paul, Kiesha Johnson and Leslie Eckhardt (Tobacco Prevention and Control Branch).

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DPH celebrates autumn cont. from page 8



**Best Handcrafted:** Madge Cohen and Kelly Haupt - "Toothbrush and Toothpaste" (Oral Health Section).



**Best Group:** Grant Turinsky and Jeff Hietanen – Ghostbusters (Occupational Environmental Epidemiology Branch)

... and the pumpkins.



**Most Colorful:** Diane Beth – jester (Physical Activity and Nutrition Branch).



# Navigating the Holiday Party

One of the best things about the season is the multitude of cocktail parties, dinners with co-workers, dessert get-togethers with friends, caroling excursions, and family get-togethers. All of this quality time with friends and family helps one to feel truly connected and loved.

But, most of these festivities are centered around food, which can be a challenge for those of us trying to maintain our weight this season. After several weeks of enjoying all of the goodies these parties offer, anyone's pants will seem a bit tighter. But with a few strategies and planning ahead, you can safely navigate your way through the holiday get-togethers without gaining weight.

If you are the host or hostess, help your guests by preparing some lower-fat, lower calorie options. Make sure there are fruits or vegetables on the buffet and stock your bar with diet soft drinks to use as mixers.

You can also help your guests down-size their portions. When setting out foods, use smaller serving pieces or only fill the large ones half-way. People tend to take bigger portions from

larger bowls filled with food. You can always replenish a bowl if it starts to run low. For desserts, cut them into small, bite-sized portions and serve in mini-muffin papers. Your guests will be able to try a couple different desserts without the guilt of eating three full-sized pieces of cake or pie. Lastly, instead of buying the jumbo-sized plates for your guests, choose smaller ones. Studies show that using smaller dishes decreases serving sizes.

When planning your event, plan some fun activities that get people moving. Take your guests out for a walk to see the lighted decorations in your neighborhood, or plan some caroling. Dancing is always a fun party event.

If you are the party guest, exercise and eat a healthy snack before you go. Then take your place at the back of the buffet line. You won't be starving and overload your plate, and some of the heavier items may be gone by the time you get there.

After you have eaten, stand away from the buffet and the bar. If they are out of your sight, you will be less tempted to get an extra helping or another drink. Keep your hands full

by carrying around a low-calorie drink or a camera. Offer to be the party photographer. You won't have a free hand for that extra plate of food.

Lastly, be a good guest. Offer to bring a healthy dish to add to the meal or buffet. Once at the party, go light on the alcohol. Not only will you consume fewer calories, you won't have to worry about your co-worker re-enacting your version of jingle-bell rock at work the next week.

Keeping these strategies will help you get through the holiday festivities while maintaining your weight.

If you would like to receive more tips like these to help you avoid gaining weight this holiday season, sign up for the Eat Smart, Move More... Maintain, don't gain! Holiday Challenge at [www.MyEatSmart-MoveMore.com](http://www.MyEatSmart-MoveMore.com). You will get a weekly newsletter with tips, strategies, recipes and more. Download the food diary, activity log, and weight log to keep track of your progress and read advice from experts and a blog of someone who is doing the Challenge. Participation is free! ■

# Worried the Holidays will weigh you down?



**Avoid Holiday Weight Gain! Register for free at [www.MyEatSmartMoveMore.com](http://www.MyEatSmartMoveMore.com).**

- ▼ Receive a free weekly newsletter full of tips, ideas, and recipes
- ▼ Log on to read experts' advice
- ▼ Download a food diary, activity log and weight log to track your progress

**November 19 through December 31**

## Getting your paycheck on time

We usually like to pay our bills on time, and to do that most of us must receive our paychecks without delay. The best way to get our paychecks promptly is through direct deposit into a bank or credit union account. This will be increasingly important as DHHS changes to state government's new BEACON payroll system in April 2008.

Although the state offers direct deposit for paychecks, many employees have not yet taken advantage of this benefit. Beginning in April 2008, their checks will be mailed to them on payday, taking several extra days to arrive. Even though employee checks should

be correctly addressed, delivery may be delayed by route changes, new carriers and automation breakdowns. Sometimes checks are misrouted or lost in the mail.

Paycheck delays can be prevented if employees enroll in direct deposit through their choice of financial institution. Employees may also choose to have their paychecks automatically deposited into more than one account, for example a checking account and a savings account.

Strongly consider direct deposit. It is safe and convenient. If you are not currently enrolled in direct deposit,

contact your local State Employees' Credit Union or preferred financial institution for assistance. ■

*(Editor's Note: This article was revised on Dec. 7, 2007 to correct an error in the third paragraph.)*



## Right-Size Your Portions

How big are *your* portions? Eating large portions adds extra calories, and extra calories means more pounds on you! Most of us think we eat less than we do. Eat smaller portions of foods and drinks at a leisurely pace to fill you up, not out. So next time, remember to right-size your portions.

To find out how to right-size your portions where you live, learn, earn, play and pray, visit

[www.EatSmartMoveMoreNC.com](http://www.EatSmartMoveMoreNC.com)



# Adoption Profile

## Introducing Marilyn

Marilyn is a quiet, soft-spoken girl with a beautiful face. She loves art, design and fashion and plans to become a fashion designer. Marilyn also enjoys track, gymnastics and going to amusement parks or the beach. As an all-around regular teenage girl, Marilyn is also interested in boys and music.

Marilyn attends regular classes at school, where she makes good grades. She is also beginning an independent living program. She needs to learn that things can't always go the way she wants and to accept that in a mature manner. Talking with her in private regarding actions and consequences yields the best cooperation and results with Marilyn.



Marilyn, b. September 21, 1991

## A Family for Marilyn

This pleasant young lady very much wants a permanent, loving family. She needs structure, stability, consistency and consequences. An adoptive family for Marilyn must be patient, committed and aware of the challenges she presents that are mostly due to not growing up in a family. Marilyn has a sister and brothers being adopted separately with whom she will need to have visits and contact.

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). ■