

# dhhs 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

## Project Excel New culture for DHHS stresses excellence, service



Secretary Lanier M. Cansler

**Prepared. Positioned.  
Capable. Coordinated.  
Accountable.**

If you have not yet seen or heard these words associated with the new, evolving work culture for DHHS, you will. There are more: results-based, anticipatory, collaborative, customer service-focused, and open and transparent.



**Leaders share ideas at Excel retreat**

DHHS leaders gathered Oct. 28 at a retreat to discuss Project Excel and ways to improve the work culture at DHHS. Seated at a discussion are: Elizabeth Bishop, Division of Vocational Rehabilitation Services; Jack Rogers, Division of Social Services; Rick Ham, Division of Information Resource Management; Curtis Crouch, Office of the Controller; and Laura Wolfe, Division of State Operated Facilities. – Jim Jones photo

The words are part of the culture that Project Excel will help spread throughout the Department of Health and Human Services. It starts with Secretary Lanier M. Cansler and touches on the jobs of each of us. No matter what we do in the Department, we all can strive to not just do our job, but do our job better.

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Cansler is aiming the Department toward the goal of DHHS becoming the best-managed agency in state government. “The better we manage our programs, services and activities, the more we can accomplish for North Carolina and the people we serve,” he said.

The effort is already under way. Cansler is meeting with key leadership staff in retreats where discussions are aimed at breaking down barriers and finding better ways to do business, more ways to collaborate.

In a meeting Oct. 28, Cansler told about 50 top leaders of the Department, “You are here because I have confidence in you, and you need to have confidence in your people.”

DHHS is about serving people. To do our best, we must be prepared to manage our resources in a way that maximizes benefit, instills confidence and trust, and encourages innovation.

This may sound like a business plan for a major corporation that is trying to improve itself. In a way it is. Governor Perdue has clearly established her expectations, and Cansler has expanded and tailored those to match up with DHHS’s unique configuration and needs. This change starts with assuring:

- A government that works for the citizens, and
- Standards of excellence
  1. High expectations
  2. Hands-on leadership
  3. Early disclosure, and
  4. Accountability to the public.

To complement the Governor’s plan, Cansler developed Project Excel as a road map to get DHHS to the goal line.

“What we are doing is key to meeting the Governor’s high expectations,” Cansler said. “My number one priority when I became secretary was to restore confidence and trust in the Department. I’m a true believer in what gets measured gets done.”

The plan starts with leadership and management, and works its way throughout DHHS to include every employee of the Department. No exceptions. It includes me and it includes you.

“I am dedicated to DHHS being recognized as the best managed agency in North Carolina state government,” Cansler said. “I want every employee of the agency to experience great pride in being a part of the DHHS team.

“Project Excel will be a dedicated effort to build a strong team that will accomplish excellence in serving North Carolinians and earn the confidence and trust of the people of the state.”

Goals include increased confidence in DHHS for the public, the legislature, the administration and the media. Being proactive. Openness and honesty – providing all the facts, good and bad.

Project Excel focuses on achieving excellence in five key areas: customer service focused, open and transparent, collaborative, anticipatory and results-based.

“We are going to become a true team that understands that our real success in the eyes of North Carolina is dependent upon all division of DHHS working together cooperatively to achieve our common goals,” Cansler said. “No more silos, no more turf protection.”

Project Excel stresses constant monitoring and review of all programmatic activities. “DHHS Open Window,” a merger of program management databases, contract databases and monitoring databases, is a key to accomplishing that.

Noting that the Department has nearly 30 divisions and a budget of \$12 billion, Cansler said he wants to assure that all of us work together to ensure the success of all our divisions. “This means cooperation and compromise. We must make solid management decisions:

- Not based upon protection of turf, personal beliefs or agenda, but on solid information and data that ensures the greatest benefit from available resources.
- Based on honest data, not by manipulating data to make things turn out as we want.”

Noting that the department answers to multiple stakeholders and the legislature – a 170-member board of directors, the administration, providers, consumers and the media – Cansler said that every decision made is subject to question and criticism. “So, every decision we make must be solid and defensible,” he said. ■

– Jim Jones, DHHS Public Affairs

# LeadershipDHHS graduates Class IV

Twenty-three members of LeadershipDHHS IV presented their final projects and received their graduation certificates Oct. 30 from Secretary Lanier M. Cansler.

Having sponsored a leadership retreat earlier the same week to discuss his vision to make DHHS the best agency in state government, Cansler emphasized to the graduates the critical role of all employees in achieving this vision.

“We need people like you” he said, “to make the extra commitment of time and energy to grow and learn and continually improve your knowledge and skills to become better leaders,” he said. “I appreciate your commitment and commend your managers and directors for encouraging you in these leadership endeavors.”

LeadershipDHHS is a department-sponsored leadership development program that provides opportunities for cross-divisional exchange of information to improve intra-agency knowledge and develop greater collaboration throughout the department.

Individual sessions are structured to be informative yet encourage open dialog and exchange of ideas from all participants. In addition to participating in sessions on a variety of subjects and benefiting from presentations from experts inside and outside DHHS, LeadershipDHHS participants are required to complete a group project as part of their team-building and leadership experience.



2008-2009 LeadershipDHHS graduates

Learning sessions this year included: discussion of personal communications style and how to more successfully interact with those with differing styles; how the DHHS budget is developed according to General Assembly and State Budget and Management requirements; making process improvements in the work place; major challenges being addressed by the Division of Public Health and the Office of Housing & Homelessness; two case studies of major initiatives of two different divisions; among others. Additionally, the group spent one day in Butner and received a tour of the new Central Regional Hospital. They also observed on-site, direct care services at the Murdoch Developmental Disability Center.

Group projects provide an opportunity for participants to cooperate on selection, research and development of a PowerPoint presentation on an issue of importance to the department. Team projects completed by this year's graduates are:

- **TeleWORK:** Rethinking the Office in DHHS
- Disability Awareness Training: Promoting a Culture of Caring
- Employing Individuals With Mental Health and Substance Abuse Needs
- Knowledgeable Employees Market the Great Services of DHHS

Graduates of the class of 2008-2009 and the agencies they represent include: Beth Coberly, Sue Mehl, Beth Mills and Daniel Stevens, all of the Division of Vocational Rehabilitation; Myra Dixon, Office of the Controller; Art Eccleston, Markita Keaton and Jessica Herrmann, all of the Division of Mental Health, Developmental Disabilities and Substance Abuse Services; Mavis Fuller, Lolita Green, Shane Hayes and Greg Neal, all of Cherry Hospital; Geneva Johnson of Disability Determination Services; Carleton Jones, Kim Miller, Vimiller Simmons, and Sharon Stukes, all of the Division of Child Development; Gail Maloney, Division of Health Service Regulation; Sharon Odenwelder and Donna White, Division of Aging and Adult Services; Janet Perez and Annette Ruth, Division of Services for the Blind; and Scott Sain of Broughton Hospital. ■

## Governor's gift ban requires signed statements

Governor Bev Perdue has signed Executive Order 24, extending the state's gift ban to all executive branch state employees. This means all employees of DHHS are now being held to the highest ethical standards.

"These standards mean that gifts and favors will not be accepted from vendors, contractors or subcontractors who are working or seeking work

with this agency," said DHHS Secretary Lanier M. Cansler. "This Executive Order makes it unlawful to willfully receive or accept such."

By now, employees should have reviewed the order and certified in writing that they have been informed of the governor's action. If you have not yet signed a statement, contact your supervisor.

"The governor has emphasized and I completely support the message that the citizens of North Carolina deserve our best to ensure that the state's ethical standards are upheld," Cansler said.

The gift ban order may be reviewed at: [www.governor.state.nc.us/NewsItems/ExecutiveOrderDetail.aspx?newsItemID=665](http://www.governor.state.nc.us/NewsItems/ExecutiveOrderDetail.aspx?newsItemID=665). ■

## Combined Campaign wraps up soon

If you have not already turned in your State Employees Combined Campaign pledge form, it is not too late!

Throughout DHHS, pledge forms will be collected until Nov. 20.

There are charities out there that help many of the same people who receive

our services. They are all hurting from the current economic crisis. Many of the folks who they depend on to carry their budgets are having problems of their own. So now, the charities need our help. They need your help.

Please contribute. Make a difference. Help someone through one of the many agencies that depend on contributions raised through the State Employees Combined Campaign.

Show folks that you care. That you are joining with other state employees to be a Partner in Giving. ■

## Avoid Holiday Weight Gain this year!



Join the Holiday Challenge at [www.MyEatSmartMoveMore.com](http://www.MyEatSmartMoveMore.com).

*Participation is FREE*

**November 23 through December 31**

# THE Cultural Competency CORNER

*By Gloria Sánchez, Latino Public Information Officer*



## **Religious tolerance: Serving populations with different religious beliefs.**

*A key element to serve or work with diverse populations is trying to understand their cultural values and practices as well as to being aware of their religious or spiritual beliefs.*

Religious differences can make relationships uncomfortable. If we take a minute to learn a few things about our clients' religions and how they experience it, it might help us to communicate and serve them better. Here are some things to keep in mind:

1. Don't stereotype people by their religious beliefs or assume that someone belongs to a religion by their racial or ethnic background or nationality. Most religions have substantial racial diversity within their faith and great variations on how they are practiced.
2. Learn about your client's religion. It is okay to ask your clients if there is anything about their religion that you should know to provide them with better service.
3. Be humble. Allow the client to educate you about his or her culture and religion.
4. Acknowledge any cultural and religious differences and ask your client if she or he is comfortable with the discussion or service.
5. Always respect your client's culture and religion. Respect the religious displays or distinctive clothing.
6. Keep your beliefs personal. Small, positive expressions of your faith can make others uncomfortable, and show disrespect to their beliefs and culture.
7. Steer clear of overt religious discussions.

Most Americans in the United States still identify themselves as Christian, but the religious landscape of this country is changing. Religious freedom allows us to have different religious affiliations and believe in whatever we want. Understanding and respecting religious diversity, traditions and practices can help your program to build stronger relationships with our increasingly diverse communities. Tolerance is a good foundation stone upon which to build human relationships. ■

¡Hasta pronto!

Gloria Sanchez

## Wellness race/walk draws a crowd

Employees across DHHS are being encouraged to get healthier through exercise and by making better choices in the food they eat.

On Oct. 29, a DHHS Employee Wellness event offered employees an opportunity to run or walk distances from 1.5 miles to five kilometers on the campus of Dix Hospital.

Similar events have been held on facility grounds across the department. The Murdoch Center held competitive “Walk Off” events four times in October, and Cherry Hospital will be holding its 5K and 1.5-mile walk on Nov. 6. Other DHHS facilities

will be holding their wellness events in the coming months.

The Raleigh event offered physical activities for every level of fitness. After work, employees enjoyed badminton, volleyball, Jazzercise, line dancing, and even hula hoops. A certified massage therapist was on-site to offer neck massages, and the Be Active NC van provided fitness assessments for employees.

“We wanted the event to provide employees an opportunity to be physically active, but also to have an opportunity to learn about the benefits of being more physically active on

a regular basis and to find out about the opportunities such as classes, fitness equipment, and walking clubs available at their worksites to help make daily exercise more convenient,” said Suzanna Young, DHHS wellness coordinator.

In the 5K race on the Dix Hospital campus, Adam Woodrum, who works at the Governor Morehead School, was the first to cross the finish line, at 19:36, and Jenni Albright from Division of Public Health was the first woman to cross the line at 22 minutes. The Dix event raised more than \$2,000. More than 80 runners and walkers participated. ■



Employees get a great workout in the 5K race in Raleigh.



Adam Woodrum



Jenni Albright

# Avoid holiday weight gain



The holiday season is almost here! Sign up now for the fourth annual Eat Smart Move More... Maintain, don't Gain! Holiday Challenge. The free program is designed to help DHHS employees and other North Carolinians maintain their pre-holiday weight while enjoying the season.

The Holiday Challenge is open to everyone – those with a few pounds to lose, those who have already lost weight and are looking to keep it off, and those already at a healthy weight.

Participants will get practical tips, recipes and strategies by e-mail to

help them successfully navigate their way through triggers to holiday weight gain. By recording their activity, meals, snacks and weight, participants can track their progress throughout the six-week program.

To sign up for the Eat Smart Move More...Maintain, don't Gain! Holiday Challenge, go to [www.MyEatSmartMoveMore.com](http://www.MyEatSmartMoveMore.com). It's free – all you need is an e-mail address so you can receive the weekly newsletters with tips and recipes. Other helpful tools, including an activity log, food diary and weight log, are also available to download from the site.

In 2008, more than 5,400 people from all 100 North Carolina counties and 47 other states took part in the Challenge. At the end of the program, 79 percent reported maintaining their weight.

The Eat Smart Move More...Maintain, don't Gain! Holiday Challenge is a part of the Eat Smart, Move More NC movement to increase healthy eating and physical activity opportunities wherever North Carolinians live, learn, earn, play and pray. Find out more at [www.EatSmartMoveMoreNC.com](http://www.EatSmartMoveMoreNC.com). ■

– Carol Schriber, DHHS Public Affairs

## Eat Smart, Move More Health Tip



# 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)



## Senior Tar Heel legislators get word out about Medicare “Extra Help”



DHHS Secretary Lanier Cansler addresses senior legislators



Secretary Lanier Cansler is joined at the Relay for Extra Help event by STHL delegates Trilla Annas from Caldwell County and Harriett Bannou from Catawba County; Mary Mitchell, family caregiver specialist from Region E, Western Piedmont Area Agency on Aging; and Dennis Streets, DAAS director.

The members of the N.C. Senior Tar Heel Legislature joined Insurance Commissioner Wayne Godwin and DHHS Secretary Lanier Cansler to kick off a statewide Medicare enrollment campaign on Oct. 7.

The campaign is for Medicare’s “Extra Help” low-income subsidy and Medicare Savings Programs, which help eligible Medicare recipients pay for their prescription drug coverage and medicines and for other Medicare medical coverage.

Participants pounded the pavement in a relay to get the campaign “Relay for Extra Help” started across the state. The campaign encourages Medicare recipients to help each other by relaying the message to their local

communities that financial assistance is available – even for those who might not typically receive federal assistance. The senior legislators agreed to bring the message back to all 100 counties.

The federal Centers for Medicare and Medicaid Services (CMS) has reported that North Carolina has more than 80,000 Medicare recipients who potentially qualify for the cost saving programs, but have not enrolled.

The Relay for Extra Help campaign’s goal is to find and enroll eligible Medicare recipients in either the federal Low-Income Subsidy program that helps pay for Medicare prescription drug coverage and medicines or the Medicare Savings Program, that helps pay for Medicare Part A and Part B premiums.

The Division of Aging and Adult Services and the Office of Long-Term Services and Supports worked with the Senior Health Insurance Information Program (SHIIP) in the Department of Insurance to secure a grant from CMS and the Administration on Aging (AOA) in 2009 with the intent of completing 7,128 “Extra Help” applications. ■

– Lori Walston, DHHS Public Affairs

# Kanof receives Johnson Award at EMS banquet

Elizabeth Kanof, MD, is the recipient of the Dr. George Johnson Jr. EMS Award for 2009, given for her many contributions over the decades including her service as the N.C. Medical Board member of both the N.C. Emergency Medical Services Advisory Council and the EMS Disciplinary Committee.

“Through her years of efforts, Liz Kanof has greatly advanced the ability of the EMS community to get the job done,” said Drexal Pratt, chief of the N.C. Office of Emergency Medical Services. “That usually translates to delivering services to people in crisis. But most recently, she was also the force behind legislation passed this year that sets up rehabilitation for EMS personnel.” The legislation authorizes creation of an EMS personnel/recovery program that focuses on treating EMS personnel who abuse or become addicted to drugs.

“Dr. Kanof demonstrates the same high level of commitment to improve the quality of emergency medical care and service to the community as Dr. George Johnson,” Pratt said. “The N.C. EMS Advisory Council could not have chosen anyone more deserving to receive the Johnson lifetime achievement award than Dr. Elizabeth Kanof.”

Former OEMS chief Bob W. Bailey presented the Johnson award Oct. 6 on behalf of the N.C. EMS Advisory Council. Dr. Kanof received a standing ovation from the more than 500



Elizabeth Kanof, MD

EMS professionals and guests at the awards banquet, a highlight of the 36<sup>th</sup> annual Emergency Medicine Today conference held in Greensboro.

Johnson chaired the EMS Advisory Council from 1977 until 2006. The Johnson award is presented to the individual that the council deems to have made significant and outstanding long-term contributions to EMS in North Carolina. The award was first presented in 2000.

Kanof also worked to establish a program to assist physicians suffering with chemical dependency and other issues hindering their ability to practice. She played a significant leadership role in establishing the nationally recognized N.C. Physician’s Health Program while serving on the medical board. Kanof also serves as a member of the North Carolina Medical Care Commission and was instrumental in obtaining passage of the recent EMS rule revisions to enhance the statewide

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**Kanof receives Johnson Award cont. from page 9**

EMS data collection efforts, revising the credentialing requirements, and additional enforcement measures for EMS professionals.

While serving as president of the Medical Board in 2001, Kanof supported the vision of adopting the EMS Agenda for the Future for North Carolina and helped to obtain the successful legislative passage of the complete re-write and updating of EMS statutes in North Carolina. Her efforts alone led to the creation of the EMS Disciplinary Committee that moved the disciplinary responsibilities for EMS professionals from the medical board to OEMS.

Since the establishment of the EMS Disciplinary Committee, Kanof has maintained her passion for establishing a chemical dependency rehabilitation option for EMS personnel in lieu of revocation of their EMS credentials. She worked during the 2009 session for passage of the legislation sponsored by EMS Advisory Council member and Speaker Pro-Tem William Wainwright which provides authority for the Department of Health and Human Services to establish such a program.

Kanof, a retired board certified dermatologist, remains active in the Wake County Medical Society, the

N.C. Medical Society and the N.C. Medical Board, and has served as president of all three organizations. Organizations for which she has served as a board member include the N.C. Medical Society Foundation, Interact, N.C. Center for Nursing, N.C. Art Society and N.C. Museum of Art, the Triangle Jewish Federation, Be Active North Carolina. She continues to serve on several N.C. Medical Society committees and serves as the society's appointee to the board of directors of the N.C. Physician's Health Program. ■

*– Jim Jones, DHHS Public Affairs*

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## **Portable operating room on display**

Dr. Lew Stringer, medical advisor for the Mobile Disaster Hospital Project, right, took paramedics on a tour of one of North Carolina's portable operating rooms acquired earlier this year through the Federal Emergency Management Agency. The operating room was on display in a parking lot adjacent to a hotel in Greensboro where the 36<sup>th</sup> annual Emergency Medicine Today Conference was held in early October. Left to right, Seth O'Brien of Rural Hall, Stefanie Culler of King, Kimberly Davidson of Kenansville and Hank Stowe of Lexington hear an explanation about equipment. The OR is part of a larger group of equipment recently acquired by the N.C. Office of Emergency Medical Services that may be used in the event of a man-made or natural disaster that overwhelms local medical responders. ■



*– Story and Photo by Jim Jones,  
DHHS Public Affairs*

## Team from Surry County is tops in the state

Two paramedics from Surry County unseated the three-time defending champion team from Stokes County to become the state's top paramedic team following competition at the 36<sup>th</sup> annual North Carolina Emergency Medicine Today conference.

Barry McMillian and Roger Horton were announced the winners at an awards banquet Oct. 6 in Greensboro. The competition was held Oct. 4.

In claiming the title, the team of McMillian and Horton pushed aside the best efforts of the Stokes team of Fred Lawson and Scott Brown who had won the championship in 2005, 2007 and 2008. They also outscored teams from Mecklenburg EMS Agency #1, Davidson County EMS #2, Eastern Wake EMS and Pasquotank-Camden EMS.

McMillian and Horton and the other teams competed in a graded and timed exercise viewed by about 300 of their peers in a ballroom at the Sheraton at Four Seasons. In the exercise, teams were sequestered and each was called to a mock emergency on a set with two interior rooms of a family home. In one room, an elderly woman suffered heart failure. In another room, a young child in her care had accidentally overdosed on the older woman's medicine. A schizophrenic relative who shows up in the middle of the emergency brings additional stress to the situation.

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Surry County paramedics Roger Horton (left) and Barry McMillian are the top team in North Carolina following competition Oct. 4. Drexel Pratt holds the award plaque.

– Photo by Carl Van Cott, N.C. OEMS.



Julie Williams, seated, plays the role of a heart failure patient while defending champions from Stokes County, Fred Lawson, left, and Scott Brown, work to diagnose and treat her and a child before judges and bleachers full of their peers. – Photo by Jim Jones, DHHS Public Affairs

Team from Surry County cont. from page 11

During the mock response by each team, a hush fell over the crowd as they focused on the performance of each paramedic and a judge calling out vital signs as the team got to work. Responders' voices and the vital signs were amplified for the audience, which also could watch the work of their peers in detail on video projection screens.

"These scenarios are a great teaching tool for the audience of professional responders, as well as a tough challenge for each team that encounters them," said Drexdal Pratt, chief of the N.C. Office of Emergency Medical Services. "We base these on real situations that we know our state's EMS professionals encounter.

"There is no substitute for being there, but having this competition in front of peers, and set up in a way that the audience gets a good look at the action, is a great way to help sharpen everyone's skills. That is a powerful tool for triggering the most effective responses from our state's paramedics when they encounter these types of situations in people's homes." ■

– Jim Jones, DHHS Public Affairs

## Destiny Bus visits Governor Morehead School

Lori Blake's middle school science students had an interesting experience when the Destiny Bus visited Governor Morehead School's campus on Oct. 1. They had the opportunity to visit the mobile science lab and perform a lab exercise called "Code Red." In the lab they identified the substances comprising blood, analyzed the genetic and cellular basis of blood types and tested simulated blood samples to determine safe transfusions.

The Destiny Traveling Science Learning Program is a science education outreach initiative of Morehead Planetarium and Science Center at UNC-Chapel Hill, serving pre-college teachers and students across North Carolina. Destiny develops and delivers a standards-based, hands-on curriculum and teacher professional development with a team of educators and a fleet of vehicles that travel throughout the state. ■

– Lori Walston, DHHS Public Affairs



GMS science teacher Lori Blake, GMS students Nick Hatley, Regis Farrington and Katelyn Moore and Destiny Bus staffer Nick Hoffman stand outside the Destiny Bus after the students completed their science lab.



Nick Hatley looks through the microscope to determine if the blood transfusion experiment resulted in successful coagulation.



GMS student Katelyn Moore tests the blood samples to determine the donor's blood type.



GMS science teacher Lori Blake helps Regis Farrington steady his blood sample droplet during the Code Red experiment.

# Policy changes make Nov. 19 a 'Great Day' to quit tobacco for good

Policy changes are in the works and more help is available than ever before, so there has never been a better time for DHHS employees and their dependants to quit tobacco, especially during the 2009 Great American Smoke-Out on Nov. 19.

Started by the American Cancer Society, the Smoke-Out is a chance for any tobacco user to be tobacco-free for 24 hours. For some, that is the first step in quitting for good.

DHHS employees may participate this year in a Smoke-Out campaign coordinated by the Division of Public Health's Social Marketing Matrix Team, an interdisciplinary team from all sections of the division. The campaign serves as both a way to help fellow DHHS employees quit smoking and as an opportunity for Matrix Team members to work together on an issue important to all.

The timing seems to be right. Beginning July 1, 2010, the new State Health Plan (SHP) smoking policy will restrict smoking members and their dependents to the "Basic" (70/30) health plan versus the "Standard" (80/20) plan, unless members demonstrate they are making an effort to quit.

Another incentive is that, effective Jan. 2, 2010, all North Carolina restaurants and bars and many lodging facilities will go smoke-free under a law passed by the General Assembly and signed by the governor in May.



Many smokers are also feeling the pinch from the federal cigarette tax, which increased to \$1.01 per pack in March. The state added an additional 10-cent-per-pack tax in September.

"There's never been a better time to quit smoking," said Sally Herndon Malek, head of the N.C. Tobacco Prevention and Control Branch (TPCB). "The Smoke-Out is a great time to tackle the addiction and quit for good. There is more support for quitting than ever. With that support, including tested medications and the free, confidential N.C. Tobacco Use Cessation Quitline, your chances of quitting successfully are more than doubled."

The Quitline, which has been proven effective in helping people quit, is available seven days a week from 8 a.m. until 3 a.m. at 1-800-QUIT-NOW (1-800-784-8669). This is a free service, paid for by the N.C. Health and Wellness Trust Fund (HWTF). The State Employee Health Plan will provide free nicotine replacement therapy over-the-counter patches for those who get a prescription from their doctor and then call Quitline NC.

"Quit Coaches are friendly and non-judgmental," Malek said. "Well over 90 percent of our callers are happy with the services Quitline NC provides."

On Nov. 19, the TPCB will offer some brief, free webinars for state employees who would like information on resources available to help quit tobacco. Anyone can register online using these links:

9 a.m.: <https://www2.gotomeeting.com/register/400818867>

11 a.m.: <https://www2.gotomeeting.com/register/548334218>

Noon: <https://www2.gotomeeting.com/register/924305986>

4 p.m.: <https://www2.gotomeeting.com/register/801029130>

Space will be provided in some state agency office buildings for smokers to make their initial call to the Quitline. One such room will be available in Building 3 on the Division of Public Health's Six Forks Campus. Contact Tish Singletary at 919-707-5407 or [Tish.Singletary@dhhs.nc.gov](mailto:Tish.Singletary@dhhs.nc.gov) to reserve space now. ■

— Carol Schriber,  
DHHS Public Affairs

## CDC chief visits Wake Health Department



Thomas R. Frieden, right, director of the federal Centers for Disease Control and Prevention, visited the Wake County Health Department on Oct. 9 to get a first-hand look at early administration of the H1N1 nasal mist vaccine for children. During his visit he held a joint media conference with Dr. Jeff Engel, left, state health director, and local health officials. ■

– Photo by Jim Jones

## GMS preschoolers enjoy sweet rewards while learning



Nine children from the Governor Morehead Preschool stopped long enough for a photo opportunity while trick-or-treating on the school campus last week. Left to right, Sarah Furney, Christian Eischeid, Elijah McCullough, Hannah Jarrett, Jeremiah Bethel, Lance Williams, Anoushka Jain, Anna Furney and Evan Wilkerson. With happy feet and rolling wagons they traipsed across the campus. This year's goodie bags were filled to the top with candy, mugs, chips, play dough, crackers, and other treats. It's as enjoyable for the preschoolers as it is for the adults who greet them at their buildings. The outings also allow the preschoolers to practice their orientation and mobility, visual, communication, and social skills. This was the 21<sup>st</sup> year that the preschoolers have participated in the trick or treat.

# DHHS drive nets thousands of pounds of food

Food banks across North Carolina benefitted from a food drive held late in September DHHS-wide, with donations – measured by weight – in the thousands of pounds.

With the help of food drive coordinators from each of the department’s divisions, DHHS was able to make donations to all the food banks in the state. The drive was held in conjunction with the designation of September as Hunger Action Month, a focus of Feeding America, formerly known as America’s Second Harvest.

In Raleigh, DHHS employees donated about 5,000 pounds – enough food for 4,700 meals. Elsewhere, donations poured in through regional offices from staff in the Divisions of Vocational Rehabilitation Services, Services for the Blind, and Services for the Deaf and Hard of Hearing, as well as through Broughton Hospital, the Riddle Center, Julian Keith ADATC, and Black Mountain Neuro Medical Center. A number of DHHS employees in the field made on-line donations to food banks near their service areas or to other food pantries. ■



Joanne Pendergrass, Volunteer Services Coordinator of Broughton Hospital and Barbara Cuthbertson, Purchasing Department at the J. Iverson Riddle Developmental Center with Secretary Canler.



▲ Part of the DHHS Central Office team that helped with the drive and delivery includes (left to right) Sharnese Ransome and Shemeaiah Wilson, legislative liaisons; Mike Morris and Mike Parker, from the General Trades Shop with Central Regional Maintenance; and Brenda Scott from the Division of Medical Assistance.

◀ Deputy Secretary Allen Feezor gets some help unloading a truck at the Raleigh Food Bank.



## Seven from DHHS complete Certified Public Manager Program

Without strong leadership, few organizations are successful. State government is no exception.

For the last two years, select managers from across North Carolina state government, including a group of seven from the Department of Health and Human Services, have worked to improve their skills and become better leaders through the Certified Public Manager Program (CPM).

The Certified Public Manager Program is intended to increase the quality, efficiency and productivity of state government by improving the leadership abilities of employees in management positions. Improving the skills of managers will carry through to all employees and help state government with serving our clients and the citizens of North Carolina.

To complete this program, the DHHS managers completed 10 courses and a project. Throughout the CPM program, the managers strengthened their ability to operate successfully and to learn systematic ways to solve problems that occur every day in state government.

At a graduation ceremony held Oct. 5 at the N.C. Museum of History, the following DHHS managers were recognized for their completion of the program: Linda Linfors, regional center manager in Charlotte for the Division of Services for the Deaf and Hard of Hearing; Marilyn Long,



CPM graduates from DHHS include (front row, left to right) Kimberly Harrell, Linda Linfors and Tammy Hill (Second row) Marilyn Long, Denise Rogers-Murray and Clothilda Brown.

Human Resources, and Clothilda Brown, administrative services chief for Disability Determination Services, Division of Vocational Rehabilitation Services; Kimberly D. Harrell, central management, Division of Budget and Analysis; Tammy Hill and Denise Rogers-Murray, Nursing Home Licensure and Certification Section, Division of Health Service Regulation; and Kathy Sommese, assistant budget officer, Division of Social Services.

This was the twenty-ninth class to complete the program since it began in 1981. The Certified Public Manager (CPM) program provides in-depth, comprehensive leadership development and training to middle managers and statewide program directors in North Carolina's government agencies and universities. A graduate of the CPM program earns the Certified Public Manager designation, which is recognized by a consortium of more than 30 states and public sector entities.

Each year, 72 participants are selected by their agencies and universities to enroll in the program. They complete the Management Development and Planning Workshop, followed by 8 courses – one every other month – over 18 months. The class work is followed by a final project, which applies and demonstrates the concepts learned to a problem or service improvement opportunity in the participant's work unit. ■

– Jim Jones, DHHS Public Affairs



**Only the turkey  
should be stuffed**



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**November 23 through December 31**



## Grant to promote the health and wellbeing of the state's children

The Division of Public Health has received a five-year, \$4.25-million federal grant to promote the wellness of young children from birth to eight years old by improving coordination among child-serving systems and making services and care more accessible and effective.

The grant comes from the Substance Abuse and Mental Health Services Administration (SAMHSA). SAMHSA awarded a total of \$51 million in grants to 12 state and tribal youth programs, including the one in North Carolina.

This new initiative, called “Project LAUNCH” (Linking Actions for Unmet Needs in Children’s Health), will provide young children with supportive and nurturing environments that promote healthy development and help prevent problems before they occur. Project LAUNCH will begin in North Carolina with a pilot project in Guilford County.

“We are grateful for this new opportunity to improve children’s



Jeffrey P. Engel, M.D., State Health Director

health in North Carolina,” said Dr. Jeff Engel, State Health Director. “SAMHSA’s focus on promoting wellness by addressing all aspects of child development fits right in with the Centers for Disease Control and Prevention’s new strategy for preventing child maltreatment by building safe, stable and nurturing relationships.”

The Division of Public Health will collaborate with local health departments and communities in Project

LAUNCH to develop and provide enhanced supportive services, such as mental health consultation for child-care and early education providers, integration of behavioral health and primary care, developmental assessments for children, family strengthening programs, parenting skills training, and home visitation.

In Guilford County, the Division of Public Health and the Guilford County Department of Health will start Project LAUNCH in North Carolina by offering support for families in general and moving to more intensive services as family need increases.

Best practices identified through the Guilford County pilot program will then be used throughout the state as the program expands into other communities.

For additional information about Project LAUNCH, go to <http://project-launch.promoteprevent.org>. ■

– Carol Schriber,  
DHHS Public Affairs

# Disaster shelter protocols now standardized in North Carolina

During disasters, all emergency shelters across the state will now be using a standard set of protocols to deal with health issues.

The American Red Cross (ARC) requested that DHHS adopt ARC protocols for use in all shelters opened during disasters in North Carolina.

Dr. Joy Reed, head of Public Health Nursing, and Dr. Julie Casani, head of the Office of Preparedness and Response, both of which are in the Division of Public Health, carefully reviewed and revised the ARC protocols to make sure they provided clear guidance, were consistent with public health principles, and were specific to North Carolina laws and systems.

Dr. Engel signed off on the revised protocols in early October. The document was sent back to ARC, which has approved all of the changes made by the N.C.

Public Health team. ARC will send the protocols out to all Red Cross chapters within the state.

Having one set of protocols for use in all emergency shelters in North Carolina, regardless of what agency opens the shelters, should assure both that the protocols are available at each site and that health problems occurring in shelters are addressed in a consistent manner regardless of location. ■

*- Carol Schriber,  
DHHS Public Affairs*

## VR honors its regional 'Superstars'

Eleven employees of the Division of Vocational Rehabilitation Services have received the agency's annual "VR Superstar Award." Employee volunteers manage the awards program, and staff nominate and vote on their co-workers. The award categories and recipients are:

### Leadership:

- Stephanie Vinson, employment services specialist in the agency's state office
- Melinda Fox, case processing supervisor, Disability Determination Services section
- Bret Philbeck, rehabilitation counselor-in-charge, Shelby office

- Carl Thompson, community rehabilitation specialist, Wilmington unit office

### Customer Service:

- Linda Pace, office assistant, Henderson unit office
- Beverly Stevens, processing assistant, Disability Determination Services section
- Diane Freund, office assistant, Morganton regional office
- Janet Loving, business relations representative, Washington unit office

### Creativity

- Ronda Green, business relations representative, Greensboro unit office
- Tamyra Borden, rehabilitation counselor, Albemarle unit office
- Sean Fitz-Simons, rehabilitation engineer, Wilmington unit office

At a Dec. 4 presentation, one individual will be named in each of the three award categories as a state-wide "VR All-Star." DHHS Deputy Secretary Maria Spaulding will present those awards. ■

*- Ed Bristol,  
DVRS Marketing Director*

## DHHS takes steps to limit H1N1 spread at state facilities

With H1N1 flu already declared a worldwide epidemic, the Division of State-Operated Health Facilities has implemented plans to limit the potential spread of H1N1 flu at its facilities as North Carolina enters the usual winter flu season.

Several cases of H1N1 flu have been confirmed in more than one of the 15 state-operated facilities, and preparation and procedures are already in place to limit the potential spread of the flu to unaffected patients, residents and staff.

There are more than 3,400 patients or residents at any given time and more than 12,000 employees in the Division of State-Operated Health Facilities' 15 psychiatric hospitals, residential schools, developmental disability centers, neuro-medical treatment centers, and alcohol and drug treatment centers.

Starting Oct. 23, all DSOHF facilities began screening all staff and visitors to identify people exhibiting signs of respiratory infections. Visitors with flu symptoms are not allowed to visit patients or residents until they are no longer sick. Employees who develop fever or influenza-like symptoms are being instructed not to come to work or, if already on the job, to make arrangements to leave and to avoid contact with other employees and patients/residents.



Luckey Welsh

DSOHF Director Luckey Welsh says that the goal is to stop the disease at the door and, if it does get in, to limit its ability to spread.

“We have established procedures regarding the flu plans and outlined each facility’s duties and responsibilities toward its patients or residents, as well as what steps they need to take to monitor the health of staff. We have posted notices throughout our facilities with common-sense steps

all of us can take to avoid catching or spreading the flu,” Welsh said. “These include thorough washing of hands with soap or alcohol-based hand cleaners, covering coughs and, if required or advised, to wear surgical face masks. So far these procedures have worked extremely well at limiting the spread of H1N1 at our facilities.”

State facilities are particularly vulnerable to a potential H1N1 outbreak because they are closed environments and include patients and residents who are considered high-risk and medically fragile, said Dr. Susan Saik, MH/DD/SAS medical services manager.

“We plan on meeting all current recommendations of the Centers for Disease Control and Prevention (CDC) and the N.C. Division of Public Health for responding to the H1N1 flu,” Saik said. “We plan to match and meet any changes the CDC and our state public health experts recommend.” ■

– Mark Van Sciver,  
DHHS Public Affairs

# N O V E M B E R

IS NATIONAL ALZHEIMER'S DISEASE AWARENESS MONTH  
AND NATIONAL FAMILY CAREGIVER MONTH

*We invite you to attend Candlelight Reflections  
on November 5, 2009*

to honor, hope, and remember

*Candlelight Reflections* will honor all those affected by Alzheimer's disease and related disorders as well as all family caregivers. We invite communities and organizations across the state to participate in and/or host a *Candlelight Reflections* event on Thursday, November 5, 2009.

Families provide at least 80% of all long-term care—an enormous contribution to the long-term care system. More than 40% of North Carolina caregivers take care of someone with a memory disorder like Alzheimer's disease. Their "caregiving career" will last an average of 8 years but may be as long as 20.

Today, every 70 seconds someone in the United States develops Alzheimer's disease. By mid-century, someone will develop Alzheimer's every 33 seconds. Alzheimer's disease is the sixth leading cause of death for people of all ages and the fifth leading cause for adults over age 65 following heart disease, cancer, cerebrovascular disease, and chronic lower respiratory diseases.

In North Carolina alone, more than 170,000 older adults currently have Alzheimer's disease or other types of dementia. Over the next 20 years, this number is expected to increase to 288,000 residents. More than 70% of people with Alzheimer's disease live at home and are cared for by family and friends.

Please join us on November 5, 2009 in support of *Candlelight Reflections*. Our hope is that the flame of each candle will bring to light growing numbers of those living with Alzheimer's and the critical need to support all family caregivers in our communities and across the state.

Please contact your local Alzheimer's Association Chapter, regional Area Agency on Aging and/or the Duke African-American Community Outreach Program for more information on *Candlelight Reflections* and other National Alzheimer's Disease Awareness Month and Family Caregiver Month activities and programs.

Eastern North Carolina Chapter: (800) 228-8378 or [www.alznc.org](http://www.alznc.org)

Western Carolina Chapter: (800) 272-3900 or [www.alz.org/northcarolina](http://www.alz.org/northcarolina)

Duke Bryan Alzheimer's Disease Research Center (ADRC) African-American Community Outreach Program (AACOP): 866-444-2372

A list of regional Area Agency on Aging contacts can be found at  
[www.ncdhhs.gov/aging/aaa.htm](http://www.ncdhhs.gov/aging/aaa.htm)

or call the NC Division of Aging and Adult Services at (919) 733-3983.

## Customer Service aids Medicaid recipients

Medicaid can be complicated – even for insiders. When recipients need guidance, they can turn to the Customer Service Center in the Division of Medical Assistance.

The Customer Service Center is part of DMA’s Managed Care Unit, and plenty of callers have questions about Carolina ACCESS managed care or about the Community Care of North Carolina provider networks.

“A lot of times, when we have someone on the line and we see that they’re not enrolled [in CCNC], we’ll explain the benefits of being enrolled and, if it’s mandatory for them, go ahead and sign them up,” said section chief Betty West.

Caller questions frequently fall outside the managed care arena, from “Does Medicaid cover...?” to “Why did I get a bill for...?”

Answering these questions can mean promising to call back after doing some research. If another DMA office can’t provide an answer, the four-person call staff will contact other divisions, outside agencies, or providers. Their goal is to call back with either a resolution or an explanation within a day.

Between 1,700 and 2,000 recipient calls pour in monthly, most as transfers from the CARE-LINE. The DHHS Office of Citizen Services, which operates CARE-LINE, can answer basic Medicaid questions. The more complicated ones are forwarded to DMA’s Customer Service Center.

“Once they’re here, we try to keep them here,” said call staff supervisor Eika Knight. Callers have already spoken with several people – doctors’ offices, hospitals, county employees or state-level staff. They can be frustrated, even angry, beyond their initial confusion.

“A lot of what we do is just good customer service – listen, get them to calm down and get to the meat of their problem,” West said. “There’s some intuition involved.” ■

– Brad Deen, DHHS Public Affairs

## AT booth wins ribbon at fair

Page Norris-Mikol, a speech language pathologist in the Greensboro office of the N.C. Assistive Technology Program, stands ready to provide information at the Dixie Classic Fair in Winston-Salem, where her fair booth took a silver ribbon. ■



## Three in Women's Health Branch recognized by association

The N.C. Public Health Association honored three staff members of the Women's Health Branch of the Division of Public Health for their accomplishments at the group's fall meeting.

Belinda Pettiford, head of the Perinatal Health and Family Support Unit, received the NCPHA Citation of Merit. The award is conferred upon NCPHA members who have singularly advanced public health in the state.

In addition, Vienna Barger, Baby Love Program manager, received an award for Outstanding Achievement in the field of social work in public health. Regional social work consultant Barbara Stelly received an award for her excellence in leadership. Stelly is the current chair of the Social Work Section of NCPHA.



Belinda Pettiford

Pettiford began her public health career as a health educator at the Harnett County Health Department in 1987. She has worked in the state Women's Health Branch since 1995 to reduce infant mortality, providing leadership in such

North Carolina infant mortality reduction initiatives as Healthy Beginnings, Healthy Start and the Healthy Start Baby Love Plus program.

Named head of the Perinatal Health and Family Support Unit in 2005, Pettiford is also involved in infant mortality reduction efforts on the regional and national levels, functioning as an expert advisor for nationwide and federal efforts, and teaching health workers in other states best practices for empowering communities to reduce infant mortality. ■

– Carol Schriber,  
DHHS Public Affairs

## Medical Society honors state EMS Chief Pratt

Drexdel Pratt, chief of the state Office of Emergency Medical Services, was presented the 2009 John Huske Anderson Award Oct. 31, during the annual meeting of the North Carolina Medical Society in Raleigh.

The award recognizes laypeople who have made an extraordinary and positive impact on the medical profession and the public health.

“Drexdel Pratt, his staff, the 34,664 EMTs in North Carolina, 50 percent of whom are volunteers, provide credentialed and passionate care to our citizens, and to the eight Southeastern states of Region Four when needed,” wrote Raleigh physician Elizabeth Kanof, who nominated Pratt for the award.

“Drexdel is an innovative leader and team builder. He has built an unsurpassed EMS system in North Carolina.”

Pratt is credited with helping to enhance EMS services by developing a statewide trauma registry. Presently, he is working with selected community colleges to devise a plan to make their campuses available for people needing medical attention, but not hospitalization, during a catastrophic event.



Drexdel Pratt

With assistance from Sen. Richard Burr and Rep. David Price, Pratt helped to coordinate efforts to obtain a \$16.5-million mobile field hospital from FEMA to further enhance medical capabilities for the eight Southeastern states, including North Carolina.

Pratt’s career in emergency medical services began after he graduated from the Paramedic Program at Forsyth Technical Community College in 1980. He received further training through the Institute of

Government at UNC-CH, the EMS Management Institute at UNC-Charlotte, and the Certified Public Manager’s Program at N.C. State University. Pratt serves on the Governor’s State Emergency Response Commission, chairs the North Carolina Hospital Preparedness Committee, and is the current principle investigator for the EMS Performance Improvement Project funded by the Duke Endowment.

Pratt and his wife, Sheree, live in Angier and have four adult children.

The N.C. Medical Society is the largest and oldest professional member organization in North Carolina, representing approximately 12,000 physicians and physician assistants who practice in the state. Established in 1849, the Medical Society seeks to promote access to quality health care for all citizens of North Carolina and champions initiatives that seek to improve quality of care and promote patient safety.” ■

– Jim Jones, DHHS Public Affairs

# Adoption Profiles

## A home for Shanice

Shanice, 16, is happiest doing things she loves like shopping, listening to music, reading, writing, and organizing photographs into notebooks. She is an especially talented artist and could succeed in an art or fashion inspired career. Shanice is very conscientious about her appearance and takes special care with her personal things. Shanice loves going to the salon to have her hair brushed and fixed. She plans to become a cosmetologist.

Shanice attends school on the campus where she lives and is being tested to determine her academic abilities. She sometimes has difficulty comprehending things, so having some things repeated helps her be more academically successful. Shanice has gained better control of her feelings and actions and continues to make progress. She needs to understand that self-esteem is more than looking good and find ways of building it in herself.

Through the techniques used and structure provided by her former foster parents, Shanice has learned what actions and conduct are acceptable. She has made very good progress in accepting consequences and new types of discipline, such as time out or going to bed early. Parenting Shanice will require unconditional commitment, a strong support network, a consistent routine, and safe discipline. An adoptive family for Shanice should understand the effects of sibling separation and be willing to support visitation with her brother and sister.

*Editor's note: November is Adoption Month in North Carolina. If you are interested in learning more about North Carolina's children who are waiting to be adopted, go to [www.adoptnckids.org](http://www.adoptnckids.org).*



Shanice



William

## A home for William

William, 14, is extremely respectful and has outstanding moral standards. He always takes responsibility for his actions and is truthful and modest, though at times he can be painfully shy. William enjoys building model cars and would like to have a pet some day. He loves playing the guitar and listening to just about any type of music. William is a quiet, peaceful boy who loves to read or play on the computer, but he also enjoys wrestling and playing sports.

William attends regular classes at school where his personal study plan allows him additional adjustment time for taking tests and getting his work finished. He has made incredible positive changes in his behavior since coming into foster care and there are no issues.

William does not restrict himself to a traditional family as long as they love him, allow him to feel safe, and meet his needs. Like every child, William needs stability, structure, consistency, and lots of attention and nurturing. He is kind, respectful boy who deserves a loving and supportive family. An adoptive family for William should understand how loss and separation affect children in foster care. They should also be supportive of his ongoing contact with his older brother. ■