

CONNECTIONS

June 2012

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Bringing Nebraska Department of Health and Human Services' employees closer together.

For the Birds

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Minority Health Initiatives Help Many Throughout Nebraska

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2012 Olympics in Nebraska Special for these Athletes

Over 1,100 athletes gave it their all and put forth a years' worth of hard work, dedication, and training to compete for the bronze, silver and gold medals at the 2012 Special Olympics Nebraska Summer Games.



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YRTC-K Youth Head to Head Start Program for Important Community Service Project

By Mark Darby, YRTC-K Youth Counselor

The young men of the Youth Rehabilitation and Treatment Center in Kearney's Washington Group 2 along with members of Washington Group 3 completed a community service project at the Head Start program in Kearney on May 18.

There were some low-lying areas on the Head Start playground that needed improving. The Head Start children were having trouble getting on the swing sets. So, the YRTC-K boys moved 5 cubic yards (one dump truck load) of black dirt to build up the low-lying areas of the playground. The boys also moved 30 cubic yards (6 dump truck loads) of cedar chips to replenish the playground's surface.

The boys worked extremely hard. The little children from the Head Start program watched from their windows as the YRTC-K youth rebuilt their playground. This was a feel-good moment for the boys as they could see they were making a difference for children there at the center. For lunch the boys enjoyed a picnic prepared

by the YRTC-K Dining Room Staff. Then it was back to work. They finished in short order but were unable to present the fruits of their labor to the children as it was nap time at the Head Start center. All in all the boys worked four hours and were invited back to help with another project this summer.



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Homepage Homeruns

DHHS Employee Website... A DHHS Employee Exclusive

Looking for information that only DHHS employees can see? Try the [DHHS employee website](#). We add new information and photos every day, things that are relevant to you and the work you do.

Here are some recent posts on the DHHS employee website and the dates they appeared. Like what you're seeing and reading? Then check out the employee homepage every day! Got an idea or a photo you'd like to share for the employee homepage or *Connections*? Send it to Dianna.seiffert@nebraska.gov.

Pony Express Ride Begins Today, May 31, 2012

Hundreds of Nebraskans rode their motorcycles across the state to help raise awareness about children's mental health. This "Pony Express" event brought



attention to the stories kids and others have to tell about their experiences.

Motorcyclists traveled almost 900 miles across and around Nebraska collecting letters about children's mental health from youth, parents, and providers. The letters were received in Lincoln at the Capitol by **Vicki Maca** on behalf of Gov. Dave Heineman. Behavioral Health Division Director **Scot Adams** was one of the motorcycle riders.

Project Everlast Provides Resources to Those Aging Out of Foster Care, June 7, 2012

Young adults who age out of foster care can find life challenging and may not have a family to turn to for help. That's where Project Everlast in Omaha comes in with resources. Funded in part by the Department of Health and Human Services, Project Everlast aims to provide a safety net for youth who will lose state care at 19 years of age.

Pictured is 19-year-old Akeeme Haoliburton with **Kinsey Baker**, Administrator, Children and Family Services. Akeeme spent much of his childhood in foster care. He aged out of



foster care three months ago and credits Project Everlast as a resource to help him succeed. Akeeme is now a youth volunteer with the program, and said he plans to attend college in January.

Celebrating Family Togetherness, June 11, 2012

It was a beautiful day for a celebration and what a celebration it was! Several families, juvenile court personnel, lawyers, social workers, community service providers, state workers and others got together to celebrate success stories of families being reunified after involvement with the child welfare and juvenile justice system. The reunification party took place Saturday, June 2, at Elmwood Park in Omaha. The event featured food, games and fun. **Shaun Satterfield**, Child and Family Outcome Monitor, provided music for the event and **Kendra Jones**, Child and Family Outcome Monitor, dressed in full princess costume for all to see how truly special the event was.



The Good Life:

A reminder of what we all share and hope to provide to our fellow Nebraskans



Meeting with Ukrainian leaders

Photo: Bill Wiley

By Kerry T. Winterer, CEO

I had two experiences earlier this month that made me think about the Department's work in a much broader sense.

Heartland Family Service of Omaha asked me to talk with a group of five Ukrainian leaders who were in Nebraska to learn about non-profit management. I was to meet with them over lunch to talk about how Nebraska manages state health and human services.

These are young people who have significant leadership positions in youth and women's organizations in a somewhat still emerging country. They

were particularly interested in things like how we fund services, the benefits we provide and how we partner with providers.

How could I pass this up? I accepted and quickly offered to host them after lunch at the State Office Building so directors and staff from each of our divisions could be involved in a larger conversation.

It was a good day and a good discussion, thanks in part to the involvement of DHHS staff as well as the services of the visitors' skilled interpreter. I came away with a greater appreciation of the differences in our countries and our perspectives. I also came away appreciating that we have the

organization and structure in place to provide critical services to individuals and families who need them. They are just in the process of building that kind of infrastructure.

Boys and Girls State – Later that week I met with 28 delegates to Boys State who had been “appointed” to specific leadership positions in DHHS. I gave them an overview of “their” agency and the important services DHHS provides.

They were engaged. One asked what might happen to his uncle who has disabilities once his grandparents can't care for him. Another asked about Social Security and how it relates to DHHS. They had good questions, and I enjoyed the opportunity to talk with them about real issues.

We also talked about the importance of their Boys State experience. I, too, was a Boys Stater and know the experience will stay with them. I shared several examples including a story about the day State Senator Mike Gloor of Grand Island told me he had recognized me in a photo from his Boys State days and realized we had been there together.

Their experiences during that week will have given them a better understanding of how government works and the importance of it in daily life.

These recent opportunities caused me to think about the possible impact of the information I shared with these groups. Hopefully what they learned will stay with them – leaders from a different county and possible leaders of tomorrow – as they think about the future and what it holds for them and others.

*Note: I'd like to thank **Jenifer Roberts-Johnson**, deputy director for Public Health's Community Health Section and former Girls State delegate, for meeting with the Girls Staters. Jenifer shared information about DHHS as well as her career path leading to government and DHHS. Delegates had questions specific to health care and health care profession shortages.*

*I'd also like to thank **Bryson Bartels** and **Aishah Witte**, Communications and Legislative Services, for organizing the Boys State and Girls State visits. Aishah was also a Girls State delegate, and Bryson was a delegate to the Nebraska Agricultural Youth Institute.*

Hope Unites Behavioral Health Conference Participants

By Marla Augustine

“Why do we keep going?” asked Pat Deegan, keynote speaker at the second annual Success, Hopes and Dreams behavioral health conference* held May 21-23 in Lincoln. The reason: a sense of hope. “Hope gathers us together today.”

When Pat was a 17-year-old senior in high school, she experienced a psychotic break. She began hearing voices and thought people were trying to hurt her. She was admitted to a mental hospital and diagnosed with schizophrenia. She was told it was like diabetes—she would have to take medications for it for the rest of her life.

Pat was advised to avoid stress and told not to return to high school. Her dream of being a coach was gone. The heavy medications she was on muffled her symptoms. There were still voices but she didn't shout at them any longer. All she did was sit in front of a TV that wasn't even on, smoking, drinking Coke, and staring into space. She was numb, couldn't think at all, couldn't feel. She slept a lot and didn't see friends. She

was basically disabled, not by her illness, but by the meds, not living at all, she said. The only thing she felt was despair.

She called this period her “handicaptivity,” meaning years of life lost in a netherworld. She experienced profound hopelessness, believing she couldn't get well. Life seemed devoid of purpose and meaning. The treatment system did not provide any hope—no pathways to a better life.

“We are not the problem, but part of the solution,” Pat said. “Recovery means changing our lives, not our biology.”

Those with psychiatric disorders can be responsible for their own recovery, she said. Refuse to succumb to despair. Start asking how to create hope.

“They need to stop asking what's wrong with people and start asking how to develop a hope-filled environment.”

Pat got better at managing symptoms and took less medication. She could get up and around, exercise, meditate and pray. These activities had

a cascading effect, leading to a stronger sense of self and personal confidence.

Pat said she used her “personal medicine” to help her cope.



Headphones and music helped drown out the voices. Other personal medicine:

- Family/friends
- Music, TV, movies
- Exercise
- Religion/faith
- Personal philosophy
- Hobbies and games
- Reading
- Meditation

“Personal medicine helps find the pathway to hope,” Pat said.

Pat still hears voices, but can manage them now. She doesn't feel it's a problem. It's just part of her life.

She said that people should make this affirmation: I will pursue my goals today. Goals and dreams must guide the journey to recovery. You shouldn't wait to get well, then pursue your goals. Resolve that “I will live my life, not my diagnosis. I am a person, not an illness.”

People with psychiatric disorders can make good choices, Pat said. Family, friends and providers should remain engaged, no matter what decisions are being made. People should be accorded the dignity of risk and the right to failure. They can grow from their mistakes to fulfill their human potential.

“Help hurts when a person can't make their own decisions,” Pat said. “Choice is an affirmation of human dignity.”

Recovery is real, but it's hard work. Medicine can help open the door, but it takes hope and courage to go over the threshold to a new life.

Those in the audience, she told attendees, are part of a conspiracy of hope.

*The behavioral health conference was sponsored by the Nebraska Department of Health and Human Services and the Mental Health Association of Nebraska.

Patricia Deegan, Ph.D., is an activist in the disability rights movement. She is an adjunct professor at Dartmouth College School of Medicine and at Boston University, Sargent College of Health and Rehabilitation Sciences. She is the creator of CommonGround, a web application to support shared decision-making in psychopharmacology consultation.

For the Birds

By Linda Sparr, Norfolk Veterans Home

Norfolk Veterans Home has been home to many residents—both humans and pets! Early this year we lost “Sweets” a 20-year-old cockatiel that resided on Pod D.

Sweets left behind her beloved companion “Herbie,” who mourned the passing of his mate, long and LOUD! Herbie’s mournful tweets could be heard echoing through the halls of our home. We all shared in his loss, but none more than Marlyn Lowe, a resident on Pod D.

Marlyn and his wife, Betty, wondered how they could help get Herbie some company and approached staff with the idea of them purchasing a new bird to keep Herbie company. After consulting with the home’s Veterinary, Dr. Johnson, the decision was made to not only get one new cockatiel but two. It was the recommendation of Dr. Johnson that we get a young pair of cockatiels that would bring years of pleasure to our home. After checking with various sources, we found a local breeder who hand raises cockatiels and who had

four young birds that were almost ready for adoption.

Marlyn and Betty shared their plan with their children, one of whom suggested possible names. Would we consider naming the birds “Alpha” and “Charlie?” Assuming this had some connection to the military alphabet we thought “perfect.” Therein lies the rest of the story... Marlyn’s father was from a family that gave nicknames—his being Charlie, a take-off of his middle name, Charles. Charlie joined the service, maintaining Charlie for his first name. When Charlie came back from WWI, met and married his young bride, he thought it only fitting that she be given a suitable nickname, thus the name “Alpha.”

Marlyn has wondered how in the world this came to be. He’s thought about Alpha being the Greek letter for “first” but knows that his parents had not much formal education and in all likelihood were not familiar with the Greek alphabet. The suggestion of maybe a military connection brought about a . . . “maybe.” So the origin will remain a mystery, but “Alpha” and “Charlie” are now a part of Norfolk Veterans Home.

The new cockatiel couple have a bright, shiny new cage (donated in Marlyn’s honor from the family of one of his former Pierce County 4-H members) which was placed right next to Herbie’s cage. The original plan was to give the birds time to get to know each other, and see how turf issues played out. Three months later I can report that the two males are not too fond of each other, and we don’t anticipate that changing much.

The now five-month old birds are a huge success, and there are many heart-warming stories attached to them: The member who had not smiled since his wife had passed but was grinning ear to ear with Charlie perched on his head (he now considers the birds “his”); the member who wouldn’t evacuate during a drill until he had a bird perched on his shoulder. The birds are often perched on someone’s shoulder, making the rounds of our home. There are more stories than space.

Whether it’s playing with them, watching their antics or teaching them to “wolf whistle” these birds are “medicine with wings” to many of our members.



Marlyn and Betty Lowe with their new feathered friends at the Norfolk Veterans Home.

Photo: Linda Sparr



Minority Health Initiatives Help Many Throughout Nebraska

By Joshua Russo

In one Nebraska county, a woman attending a health fair discovered she was diabetic. She had none of the classic symptoms – thirst, shaking, and frequent urination. However, she did report low energy and attributed this to not sleeping and getting lazy. Her blood glucose reading was well over normal. She stated that, had she not been made aware of this health information, she would have had no reason to see her doctor. Eight weeks after her visit she reported that her blood glucose was reduced significantly.

In another county, a 49-year-old Hispanic woman came to the clinic to look for answers about her health. She was able to see a doctor who evaluated her condition at a reduced cost. She suffers from high blood pressure, asthma, depression and

obesity. The clinic was able to get asthma inhalers at a reduced cost, representing about \$720 in savings for a three-month supply.

These are just a few examples of how Nebraska’s minorities have been helped by Minority Health Initiative (MHI) projects, offered through DHHS’ Office of Health Disparities and Health Equity.

There are 18 projects currently in the 2011-2013 period. Projects include chronic disease prevention, medical home models, improving physical activity, tobacco prevention, translation and interpretation, improving access to health care, reducing obesity, and many other focus areas. Starting in 2002, after the passage of LB692, the Nebraska Legislature has allocated MHI funds for use in counties in Nebraska’s First and Third Congressional

Districts. Currently, organizations in 44 of Nebraska’s 93 counties qualify for the grants because at least 5% of the total population of each county is minority, as determined by the 2010 U.S. Census. The eligibility of 44 counties was a major change which showed just how fast Nebraska’s minority populations are growing. Only 28 counties were eligible for funds during the 2009-2011 project period. From 2000 to 2010, Nebraska’s total population change was 115,078 people, or 6.7% of the population. The total minority population increased by 109,819 people.

The Office is allocated \$1.58 million a year for the projects, and through a competitive application process, funds are awarded for two-year project periods to organizations to support projects that eliminate health disparities that impact racial/ethnic minority populations in Nebraska. Populations addressed include racial/ethnic minorities, Native Americans, refugees and immigrants. Funds are directed to be distributed on a per capita basis and used to address priority issues of infant mortality, cardiovascular disease, obesity, diabetes and asthma.

Also included in the MHI appropriation is \$1.4 million in annual funding to be distributed equally among federally-qualified health centers in the Second Congressional District, specifically to One World Community Health Center and Charles Drew Health Center in 2011-2013.

For information about the Office’s current projects, and a copy of the annual report for the 2009-2011 project period, go to the Office’s website at www.dhhs.ne.gov/healthdisparities. For more information about the Office of Health Disparities and Health Equity, call (402) 471-0152 or email minority.health@nebraska.gov.

What is a Health Disparity?

A disparity is simply a lack of similarity or equality. Disparities in the United States include those in economics, education, gender, and geography; and in criminal justice, income, ability, or opportunity, among others. A health disparity occurs when one racial/ethnic group, gender, or group sharing a socioeconomic or geographic designation has poorer health outcomes – higher rates of morbidity (occurrence of disease) and mortality (death) – when contrasted with another group.



MHI Project areas

2012 Special Olympics Nebraska – Special for Many Reasons

By Jody Hansen

More than 1,100 athletes gave it their all and put forth a years' worth of hard work, dedication, and training to compete for the bronze, silver and gold medals at the 2012 Special Olympics Nebraska Summer Games. This year marked the 40th anniversary of Special Olympics Nebraska.

Fifty-eight teams from across the state traveled to Omaha, the farthest being the

Chadron Rattlers. The central location for the athletes housing and some events was on the Creighton University campus but many other locations around Omaha were used including high schools and private businesses.

The Opening ceremonies were held May 17 at Omaha's TD Ameritrade Park. Each team was announced as team members paraded onto the upper concourse to their seats. There team members watched the lighting of the Olympic Flame as well as



a presentation of a \$257,075 donation by Nebraska Law Enforcement.

The athletes were then lead in the Special Olympics Oath- *“Let me win, but if I cannot win, let me be brave in the attempt.”* Afterwards they were treated to a fun evening of baseball as the Creighton Bluejays took on the Wichita State Shockers. Fireworks followed the game.

Along with the games, athletes were provided Healthy Athlete screenings which included vision, dentistry, physical therapy, and hearing. This was free of charge for the athletes.

The Special Olympics prides itself on the help of the volunteers, and this year more than 600 dedicated volunteers worked as photographers, timers, scorekeepers, escorts, medical, and police just to name some of the opportunities.



Photos: Jody Hansen

In Gratitude

Letters to DHHS employees who are *helping people live better lives*

Kris Chiles (Section Administrator, Lincoln)

I felt compelled to write this letter of commendation for **Cindy Kelley** (Health Licensing Specialist, Lincoln), who I have had the pleasure of dealing with over the last year and a half. Ms. Kelley has gone above and beyond to advise and update me throughout the process of moving from provisional licensure to full licensure. Despite what I imagine is a very overwhelming amount of applications and questions from applicants, Cindy contacted me promptly to advise in changes on the status of my application and missing documents, and was always available via phone or email to make this a smooth and painless journey. I have been amazed and encouraged by her professionalism and compassion, and wanted to be sure that you are aware of the type of service that she is providing.

A Grateful Client

Robert Kubat (Administrator, Omaha):

This e-mail is in regards to an employee of yours, **Melissa Kratky** (Community Support Specialist, Omaha), who definitely deserves recognition for the job she does for the State of Nebraska.

My daughter attends Westside High School, and will be a senior next year. One graduation requirement is to complete a Senior Project, which includes researching a topic. She chose the EBT card.

The students must find a community consultant, write a project proposal, complete research, an outline, and note cards, write a reaction paper, compile a booklet and give a 10-20 minute presentation.

We set up a meeting with Melissa on 5/2/12, and she provided info to help my daughter get started with her project, as well as how this whole system works, etc. I believe our meeting lasted about 1.5 hours and the professionalism by Melissa was absolutely second to none. One could tell through this meeting Melissa goes above and beyond her call of duty, and truly cares for all her clients.

A Grateful Parent

To Marilyn Kudera (Social Services Supervisor, Norfolk),

Just thought I should let you know what a GREAT support **Charlene Young** (Resource Developer, O'Neill) has been to me and the DD unit with the non-specialized providers program. We have relied on her heavily to sign up people. She also updated us regarding the changes that were happening in the area. She has always been willing to share her expertise. Thank you for that support.

Peg Cole, DD Service Coordinator, O'Neill

Levi Hadley, (Youth Counselor, Youth Rehabilitation and Treatment Center – Kearney), **Curtis Taylor**, (Basic Education Teacher, YRTC-K) and Crew

Thank you so much for all your help with our Volunteer Appreciation Day. Your help made the day special for the seniors and all our volunteers. We had a lot of compliments on your great work.

Peterson Senior Center

Rene Tiedt (Health Section Administer, Lincoln) writes:

In the Licensure Unit, literally thousands of licenses and credentials are issued every year. It is not often that the people who process the applications and issue the licenses or credentials are actually recognized by the public. These folks are not out in the public eye and are often overlooked in their vital role in the licensing process.

Patricia Owens is a Health Licensing Specialist in the Office of Rehabilitation and Community Services. The following thank you note came from a company for whom Patti assisted with licensure of asbestos abatement workers.

Patty,

Just wanted to let you know how much we appreciate all your help this past week. You truly do make a difference.

Thankful Clients