

CONNECTIONS

January 2013 VOLUME 13, ISSUE 1

Bringing Nebraska Department of Health and Human Services employees closer together

LRC's Focus is on the Person

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Using Facebook to Help Find Relatives of State Wards

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"We're going the extra mile to find a happy home for children," Schriener said. "Anything we can do for that to happen makes all the effort worthwhile."

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Panhandle Program Targets Diabetes

People can reduce their risk of type 2 diabetes 58 percent by losing just a little bit of weight. Anew Panhandle program helps them do exactly that.

read more>

"Every good conversation starts with good listening." ~Mike Arauz

Listening for Understanding

*By Richard Mettler,
Human Resources and Development*

A sure way to increase courtesy in the workplace is to listen for understanding. Good communication is essential for an organization to thrive, and 50 percent of effective communication is listening. Poor listening creates barriers between people; good listening builds bridges of mutual understanding.

Being a good listener takes deliberate action. Think of the Golden Rule: We know how to listen to others by considering how we appreciate being listened to.

Benefits of listening for understanding include:

- People feel respected, appreciated.
- Improved relationships.
- Increased trust.
- More understanding, with less confusion and disagreement.
- Improved work processes and work results.

"Listening is not waiting to talk." ~Scott Ginsberg

Listening for understanding is a skill which requires constant practice to prevent us from falling into poor listening habits, such as:

- Allowing distractions to pull our attention away.
- Mentally rehearsing what we will say in response.
- Interrupting, including disagreeing prior to the speaker finishing.
- Listening defensively with the expectation of disagreement—competitive listening.
- Offering solutions before hearing all the speaker has to say.

The following are some specific things you can do to listen for understanding:

- (1) Give full attention to the person speaking—stay in the moment. You can't listen if you're thinking about what you will say in response.
- (2) Be receptive and acknowledging nonverbally through eye contact, posture, nodding your head, and facial expressions—maintain a patient, permissive, and inviting demeanor.
- (3) Listen to the whole message.



- (4) Pay particular attention to the speaker's main ideas—"My point is..." "What I'm really saying is..." "The thing to remember is..."
- (5) Ask questions for clarification like, "I want to make sure I understood you correctly. You're saying...?" or "So, your concern is...?"

Please email me your thoughts, concerns, or suggestions about workplace courtesy and workplace relationships at: Richard.Mettler@nebraska.gov. I will email you a response, and perhaps anonymously feature your thoughts, concerns, or questions in a future column.

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make the connection . . .

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CLS Administrator: Kathie Osterman	Graphics and Layout: Judy Barker
Editor: Dianna Seiffert	

► Readers are invited to submit news, photos & story ideas to the editor via:

Phone: (402) 471-1695 **Fax:** (402) 471-3996

E-mail: dianna.seiffert@nebraska.gov

Interagency mail: Nebraska State Office Bldg. 3rd Floor
 U.S. mail: P.O. Box 95026
 301 Centennial Mall South, Lincoln, Nebraska 68509-5026

[DHHS' Employee Website...](#)

Looking for exclusive information about DHHS? 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.

Homepage Homeruns

Columbus Office Employees Host Successful Food Drive, December 27

Kristin DeWispelare, Children and Family Services Specialist Supervisor, Columbus, writes, "This Christmas season the Columbus DHHS



office held a food drive contest to gather donations for the Platte County Food Pantry. We split up into four teams, decorated "giving boxes" and filled them with food. We counted everything up and delivered it to the local food pantry. Congratulations to our Economic Assistance team (**Stacey Brooks, Betty Nicolas, Marilyn Abrego, Mary Ann Birkel, Melissa Souillere, Janet Mulligan, Kim Kohl, and Joy Loschen**) for bringing in the most and winning our office contest with 85 items! All together our office donated 249 items and \$5 cash!"

Editor's Note: We received many heart-warming Spirit of Giving stories and photos from employees across the state. The DHHS community adopted families in need, donated toys and supplies, and raised a lot of money to help many charitable organizations. A big thank you to all who sent in stories and photos, and a bigger thank you to everyone who participated in charitable events across the state. In case you missed one of these stories, we've put them all in one place on our employee website for easy access. Click [here](#).

Nebraska VFW Donation Benefits Veterans' Home Residents, December 14

The Veterans of Foreign Wars (VFW) donated nearly \$27,000 that helped provide four new vehicles for use at the state's veterans homes.

The vans were delivered in Lincoln and transferred to drivers with the state's veterans' homes in Norfolk, Bellevue and Grand Island. The Nebraska VFW applied for funding to provide four vans meeting Americans With Disabilities Act requirements and provided matching funds needed for the purchase.

The smaller, more efficient vans are equipped to provide safe transportation for seated and wheelchair passengers and any staff needed to accompany veterans for medical appointments and other excursions.



John Hilgert (left) with Lt. Gov. Rick Sheehy

John Hilgert, Director of DHHS' Division of Veterans' Homes said, "These vehicles will help veterans go to doctor's appointments and make trips to the VA hospital. They will also allow them to go on outings and attend events of interest to them."

The Good Life:

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



By Kerry T. Winterer, CEO

Ninety days. That's the length of this legislative session, known as a "long" session compared to the 60-day sessions held in even-numbered years.

During the first three weeks of the session, Gov. Heineman has given his State of the State address and submitted his budget recommendations for the 2013-2015 biennium, all legislative bills have been introduced and legislative committee hearings have begun. I'd like to share a little about how DHHS fits into all of this.

DHHS-related recommendations in the Governor's budget include:

- \$22.4 million to finance improved assessments and payments for services to people with developmental disabilities served in communities.
- \$47 million for a new Veterans' Home in Central Nebraska to replace the aging Grand Island Veterans' Home. This commitment is necessary in order to seek federal funds for the remaining cost of the \$121 million project.
- \$176 million additional general fund appropriations for Medicaid, the Children's Health Insurance Program, and other needs to address increases in service utilization, increased provider rates by 2.25% in each of the two years, and an increase in state general funds to offset a decrease in federal matching funds. Another \$72.3 million is included for new costs to the existing Medicaid program as a result of the Affordable Care Act.

Gov. Heineman said the most significant challenge for this biennial budget will be the financing of the Medicaid program due to current requirements and implications of new federal mandates.

DHHS Legislative Activities:

Bills introduced for DHHS:

- LB 156, introduced by Senator Watermeier, a new senator from

Syracuse, will end the requirements for counties that have a community service program for employable recipients of county general assistance to file reports with DHHS, since DHHS is no longer required to file this information with the Legislature.

- LB 260, introduced by Senator Gloor from Grand Island, eliminates certain requirements of the data and information system for people who receive state-funded behavioral health services and eliminates a quarterly report.
- LB 443, introduced by Senator Cook from Omaha, adopts the Children's Residential Facilities and Placing Licensure Act regarding the licensure of group homes, child caring agencies and child placing agencies to provide consistency with the licensure of other

facilities licensed by the Division of Public Health.

We're also reviewing the impact of an additional 188 bills, about 28 percent of the total bills introduced, which isn't surprising considering DHHS is nearly one third of state government. Many employees are involved in this process, including program, finance and legal staff lending their expertise and support to determine what impact these bills might have on the agency.

The employee website has information about the DHHS legislative process and the bills being tracked. All DHHS testimony is available once it's provided. Click on the "[Legislation](#)" link under Communications and Legislative Services on the left side of the employee homepage. From here you can also get to the Legislature's office website.



Spirit of the Pioneers, North Entrance of Nebraska's Capitol. Throughout the year the employee website will feature the art in and on the Capitol. Photo: Bill Wiley

LRC's Person-centered Care Puts Focus Where it Belongs...on Patients and Staff

By Marla Augustine

“Good morning,” says a Lincoln Regional Center staff member, making eye contact and smiling at a patient. “Is there something I can do for you?”

“I have an idea that might streamline how we do things,” says an LRC employee to her supervisor. “It might help other employees.”

Both of these are examples of using a concept called person-centered care.

It's a way to provide excellent service to the patients at LRC, as well as showing the patients that they matter and staff care. It's also a way to encourage staff members to build win-win relationships, commit to excellence, follow through on problems and communicate well with others.

“Through person-centered care, the dignity and value of every person at LRC are recognized, both of patients and employees,” said **Scot Adams**, director of the Division of Behavioral Health. “It makes work more personal and fulfilling for staff, and makes a stay at LRC more pleasant for patients.”

Implementation of patient-centered care began about three years ago with training workshops offered by Gail

Scott and Associates. LRC employees thought it would be a good idea to apply the principles being introduced in patient-centered care to everyone, so it became person-centered care in order to include all customers, including the behavioral health regions, law enforcement, other divisions and other staff at the regional center. More training is in the works.

The workshops are centered on the acronym WE CARE, which includes worth, empowerment, communication, accountability, relationships and education.

Examples of person-centered behaviors that can make patients and other employees feel welcome are as simple as saying “good morning/afternoon” or “hello.” A staff member can introduce himself to those who do not know him. Or a staff member can look up and smile when people approach her and her work area.

Other behaviors that are person-centered: Employees can focus on the individual, putting other work aside and asking, “What can I do to help you?” To find out what people need or want, staff can ask questions.

Other characteristics of person-centered care: Use a pleasant tone of voice when addressing patients and co-workers.

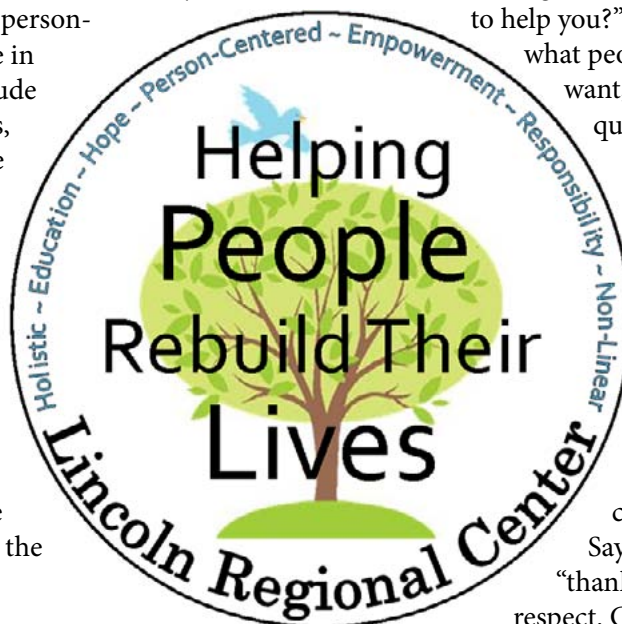
Say “please” and “thank you” to show respect. Challenge negativity and “we can't do it” attitudes. Be aware of negative body language and nonverbal cues. Share ideas and suggestions on ways to make a better work environment.

Person-centered care also includes looking for ways to involve others and help them learn how to do things for themselves, and pointing out things that they are doing right.

“Overall, people like the direction that person-centered care is taking us,” said **Bill Gibson**, administrator of the regional centers. “Patients like being treated with respect, and employees enjoy a friendly and supportive work environment.”

“Person-centered care is a driving force towards being the best that we can be,” Adams said. “It dovetails nicely with the department's goal of providing great customer service. We are changing our culture to one of serving all people—both internal and external—with excellence.”

Better patient care and a safe, enjoyable work environment are the results.



“Through person-centered care, the dignity and value of every person at LRC are recognized, both of patients and employees,”
Scot Adams, director, Behavioral Health

Panhandle Pilot Program Targets Diabetes

By Joshua R. Russo, Diabetes Prevention and Control Program; Tabi Prochazka, Panhandle Public Health Department; and the Diabetes Prevention Program

Type 2 diabetes is preventable. According to a research study called the Diabetes Prevention Program, people can reduce their risk of type 2 diabetes 58 percent by losing just a little bit of weight.

People in the Panhandle have a program that helps them do exactly that.

“The (Nebraska Diabetes Prevention Program) brings the proven success of the Diabetes Prevention Program research study of communities around the country, and we are thrilled to offer classes,” said Tabi Prochazka of Panhandle Public Health Department, which serves Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Sheridan and Sioux counties.

The program is operated through the Panhandle Public Health Department and the Nebraska Department of Health and Human Services’ Division of Public Health. It is a year-long lifestyle change program in which people at risk for type 2 diabetes meet in a group with a trained lifestyle coach. Participants must have a body mass index (BMI) of 24 or higher, have pre-diabetes, have had gestational diabetes or have been told by a doctor that they are at risk for developing type 2 diabetes. They must also be older than 17.

A class started Jan. 17 in Oshkosh, and another will start in February in Alliance. Prochazka said there will be other classes this spring in the Panhandle.

The classes focus on accomplishing two major goals. First, participants must lose 5 to 7 percent of their starting body weight over the course of the program. Second, they must do at least 150 minutes of physical activity each week.

Aside from the two major goals, the program teaches skills and tools to make changes in life. During the program, participants learn ways to incorporate healthy eating and physical activity into their lives. They also learn techniques to handle stress and strategies to overcome barriers to a healthy lifestyle. All programs are led by lifestyle coaches who have been specially trained by the

Diabetes Training and Technical Assistance Center.

Participants meet weekly for 16 weeks, then monthly for the remainder of the year. During the year, participants keep track of their food intake and physical activity and work with the lifestyle coach and the group to overcome barriers to a healthy lifestyle. Group interaction is crucial to the program’s success. With a supportive group to cheer their successes and empathize with their setbacks, participants don’t have to make lifestyle changes alone.

In the year it has been implemented in the Nebraska Panhandle, there is already success. People are losing weight and changing their lives.

“The realistic weight loss goal set by the program and the weekly meetings with the lifestyle coach and group support has kept me accountable and focused,” said a participant of the Nebraska Diabetes Prevention Program. “I have lost 23 pounds, exceeding the 7 percent goal, in eight weeks. I still eat the foods I like, just have the tools and am aware of how portion sizes and exercise affect long-term success. I have been a yo-yo dieter for years, but now, I am in control. I have more energy and the tools to reach my pre-baby weight, after 20 years. I feel



confident because of this program. My kids are also reaping the benefits and enjoying being active with me and eating more balanced.”

You can test your risk for diabetes by completing the risk assessment at www.defendagainstdiabetes.ne.gov, or by taking the assessment at www.pphd.org/DPP.html. You can also go to your doctor and get a blood test for diabetes and pre-diabetes.

For more information about the program, contact Prochazka at (866) 701-7173, ext. 107, or email tprochazka@pphd.org. To learn more about the program at the national level, go to the Centers for Disease Control website at www.cdc.gov/diabetes/prevention.



Facebook is Another Useful Tool to Help Find Relatives of State Wards

By Russ Reno

Once the court orders that a child is a ward of the state, DHHS can find it difficult to identify relatives willing to serve as foster parents, especially if parents don't offer names. However, an experiment with Facebook has opened the doors of kin to some wards.

Debi Schriener, resource developer in Children and Family Services' Southeast Service Area in Lincoln, was challenged by staff to find new ways to locate relatives. She began working with Facebook where she knew people 'friend' family members and identify family in photos.

"It's an unfortunate fact that wards may be moved from one unfamiliar home to another too often," Schriener said. "If we can find a relative willing to take a child while the parents work through their issues, it can be the best situation for children and provide them a sense of normalcy. That's what we want for them."

She said parents sometimes tell caseworkers they have no other relatives because they are cut off from their family or embarrassed about their situation and don't want relatives to find out about it.

"We have wonderful non-relative foster parents who are the core of our system and they do a great job," she said. "However, known relatives are a good placement for wards. They are happiest living with family. Facebook helps us

locate family so we can at least contact them to ask their interest in helping out." Since establishing a site on Facebook, Schriener said she has looked for relatives of about 80 families. She says it's rare when she doesn't find any relatives at all. "I'm usually able to find a large number of relatives for us to contact." Her success is due to her knowledge about Facebook and her growing experience searching the social media site.

Facebook is particularly good to use in identifying the relations of wards, Schriener said. Some people on Facebook are better family historians and describe how they are related. This information even leads her to relatives whose names have changed through marriage, such as aunts and uncles with different surnames than the youth or parents.

Information about the child is confidential and is not posted on Debi's Facebook site. Instead, Debi identifies relatives, confirms their relationship and sends them a confidential message to update them about the situation and gauge their interest in caring for the child.

She said her main focus is children who have been in the system a long time, and reconnecting them with family, even if parental rights are severed. In some cases, relatives' situations have changed and now they are willing to help years later.

"The idea to use Facebook came to

me after our service area resumed case management and I was able to see first-hand the challenges some children faced," Schriener said. "It made me sad to read the referrals of children to new places to live. Some had been placed in several homes. Either their siblings were adopted and they weren't, or adoptive parents would find they weren't able to continue care for them. Each change broke bonds of trust, and they were left with no one."

For these children, reconnecting with any family member is important, she said. She began asking about setting up a Facebook account after reading an article sent her about an extreme recruiting program locating adoptive parents in St. Louis, Mo. for hard-to-place kids.

Occasionally, once the courts or law enforcement deem it unsafe for children to live at home, she looks for relatives of children just entering the system. She begins her search while caseworkers deal with the crisis of children coming into care. Those names are confirmed by the parents or child when the child leaves the home.

Schriener said her most difficult cases are the most rewarding. A 14-year-old



Debi Schriener, Resource Developer, finds Facebook a good source to locate relatives interested in foster parenting state wards. Photo: Bill Wiley

ward had been placed in a high number of non-relative homes. After looking on Facebook, she was able to locate family in Louisiana who agreed to take the young woman.

In another case, a youth had been in out-of-home care for a short while and the third set of foster parents notified the caseworker the child needed to be moved. Schriener said she was able to locate the youth's paternal uncle, cousins, and other relatives on Facebook, which eventually led to another uncle for placement.

"We had an address but no current phone numbers, so we sent him a confidential message on Facebook," she said. "He messaged me back and I was

Continued on page 7

Continued from page 6

able to email him our background check form to fill out and return. The youth was placed there and the plan is for the youth to return home to mother with the aunt and uncle providing informal support.”

She said an even better situation occurred when she intervened at the beginning of a case. She found a girl’s non-custodial father and brothers on Facebook, the businesses where they are employed and sent them a message. This led to placing her with an uncle on the same day, and the girl never experienced “stranger care.”

She’s found that persistent follow-up with relatives yields results. She uses other websites, such as white pages.com, to locate a phone number or current address for family members. Despite the fact many people only use cell phones today, she can usually find a relative to call and begin gathering information.

“It’s just my personality to keep digging,” she said. “I’m committed to finding a family for these kids because I know they’ll be better off.”

Even if family decides not to care for the child, they may volunteer to support the parents while working to get the child back home, Schrinier said.

“We’re going the extra mile to find a happy home for children,” she said, “Anything we can do for that to happen makes all the effort worthwhile.”

DHHS’ [social media policy](#) is on the [employee website](#).

Students Posters Highlight Radon Risks Nebraska’s Winning Entry Places Third in National Contest

By Sara Morgan,
Radon Program Manager

For at least one Nebraska student, the answer to dealing with radon is clear. It could be said that all aspects of radon are clear: it is odorless, colorless, and tasteless. For these reasons, it is fitting that the ribbon for lung cancer awareness is clear; and that is the main focus of the powerful and simple poster created by JoAnn Neel that won DHHS’ Radon Poster Contest.

Every year, DHHS’ Radon Program sponsors a statewide poster contest for students ages 9–14. The winners of the contest receive a certificate and gift card prize, and their entries are also submitted to the National Radon Poster Contest, sponsored by the Environmental Protection Agency.

JoAnn Neel, a student at McCook Junior High School, created the first place poster, which features a clear ribbon and information about radon. Second place was awarded to Sophie Stewart of Russell Middle School in Omaha, and Karissa Dicke of Pope John Central Catholic School in Elgin received third place.

Neel’s poster was also awarded third place in the national contest, and she will receive a \$400 gift card and national recognition for her achievement.

DHHS’ annual poster contest highlights the risks posed by exposure

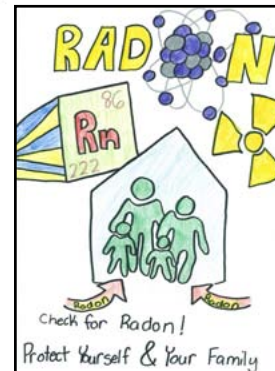
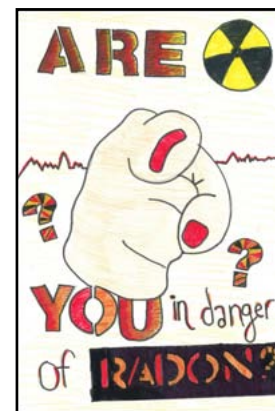
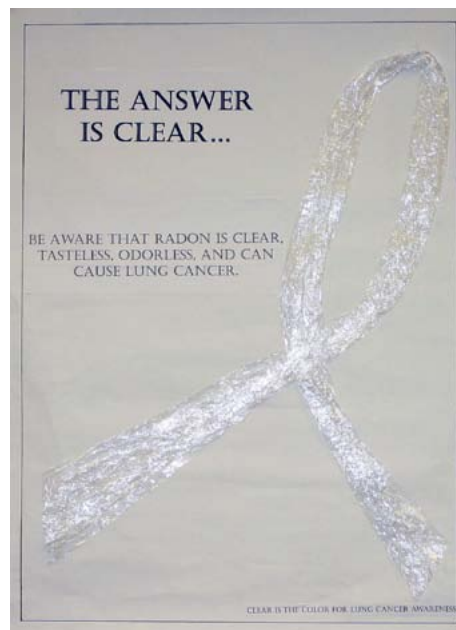
to radon, a radioactive gas that causes thousands of lung cancer deaths in the United States each year. More than 550 students in Nebraska participated in this year’s contest.

Radon is a leading cause of lung cancer, second only to smoking. This contest helps to increase radon awareness among students, teachers, and parents in communities across Nebraska.

While high radon levels (4.0 pCi/L or higher) are common in Nebraska, many people are unaware of the risks. Everyone should test their homes to

determine if they have a high level of radon. Inexpensive radon test kits can be used to measure indoor radon, and there are also ways to reduce high levels of radon in homes.

To learn more about radon, visit www.dhhs.ne.gov/radon or contact DHHS’ Radon Program at 1-888-334-9491.



In Gratitude

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

Terri Nutzman (former Juvenile Services Administrator, Children and Family Services):

I just wanted to write you about an employee whom you supervise. Her name is **Jana Peterson** (Facility Administrator, Youth Rehabilitation and Treatment Center – Kearney). I work for Lincoln Police Department and have been investigating a case. I learned a witness to the case was currently at YRTC. Because of the urgency of building the case against the suspect, I opted not to wait until his release to try to interview him.

Ms. Peterson explained all the needed steps to complete so as to facilitate an interview with the youth. Next, she provided me with the necessary form to ensure the youth was agreeable to the interview and everything was completed according to protocol.

I work third shift, Fridays-Mondays, so my schedule isn't overly conducive to the ideal scenario. But Ms. Peterson was extremely helpful in helping set up the interview for a compromising time. She then came into work early to help facilitate the interview.

I just wanted to take a minute to say thank you and commend Jana Peterson. Her cooperation and assistance helped me secure the case. Her personal sacrifices going above and beyond, her communication skills, and her understanding of the process were very much appreciated. She absolutely streamlined this entire process and I am truly grateful. Ms. Peterson is a tremendous representative of DHHS and the Kearney YRTC.

Investigator, Lincoln Police Department

The Staff at the Youth Rehabilitation and Treatment Center in Kearney:

Thank you, YRTC-K, for helping me with my problems and thinking errors. I got as much as I could out of all the teaching and then some. I will stay away from places like these a lot easier now that I've been taught how to cope with things and others that frustrate and bug me. Once again, thank you for everything.

A Grateful Client

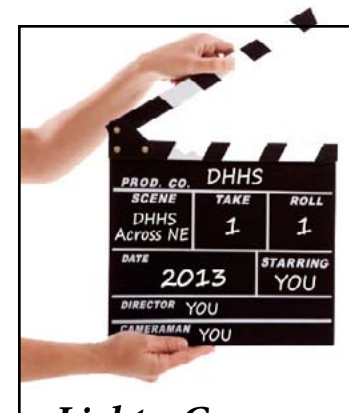
Robert Cummings (Resource Developer Supervisor, Omaha),

I'm the new owner of a childcare center in Bellevue. One of the more difficult administrative tasks when acquiring a new daycare is the authorization changes for Title 20. There are many moving parts involved in the process.

I write all of this as a prelude to a commendation for **Cipriana Robles** (Resource Developer, Omaha). Cipriana was absolutely phenomenal in assisting us through the transition. Any question me or my Director had was answered, all emails were responded to promptly and accurately, phone calls were returned, and she agreed to meet with us to ensure our first billing submission was accurate. And throughout the process she patiently and kindly answered all of the questions this first-time owner could think of (and I guarantee some were nonsensical or well outside of her scope of work).

In the short time we have worked together, I have the utmost respect for Cipriana. Her display of professionalism, great communication, patience, kindness, and willingness to assist was outstanding.

Thankful Client



Lights. Camera. Action.

New Communications Contest Puts You in the Spotlight.

Submit stories, photos and ideas for *Connections*, "Neat to Know," or the "Box" and your name will be entered in a drawing. Every two months one lucky winner will get to choose from a grab bag of popular movies.

First contest deadline: February 28, 2013.

Email your stories, ideas and photos to Dianna.seiffert@nebraska.gov and I'll help share all of the great things that are happening with your coworkers across the state.

The Nebraska Department of Health and Human Services mission:
Helping people live better lives.

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