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## **DCBS Staff Input Sought on Agency Reorganization**

*By Anya Armes Weber*

The Department for Community Based Services' Commissioner's Office is seeking staff input on a previously announced plan to reorganize the agency to reduce caseloads and equalize resources.

"Staff has the knowledge to help us build this plan," said DCBS Commissioner Tom Emberton Jr. "We are eager and interested to solicit input from throughout the state."

Staff learned about the plan earlier this month, and now they can voice their concerns and influence the process.

In each region, Emberton has formed at least one workgroup made up of staff and supervisors to make recommendations on the plan. Gathering that input will take a few weeks. Then commission staff will discuss the suggestions with the regional administrators before taking a revised plan back to all staff.

An intranet site - <http://chfsnet.ky.gov/cfs/dcbs/reorg/> - gives staff another venue for submitting comments or asking questions about the reorganization. Staff memos are also posted at the site.

The plan calls for more frontline staff, supervisors and clinical support in the family support and protection and permanency offices. It also would consolidate the department's 16 regions.

Emberton said the goal of the reorganization remains the same, but administrators are ready to modify the plan with comments from the field.

"We know we have to strengthen the frontlines of both family support and protection and

permanency, but we are flexible about the details of how it's done," he said. "Caseloads for both areas have become unmanageable, and there are great inequities from region to region in terms of casework and resources."

Central office staff already has traveled to several regions to listen to ideas from the field, Emberton said.

"We value our staff," Emberton said. "Those who are working directly with our clients know best what they need in terms of support and organization. We are using their suggestions to refine our plans."

Emberton said while there will be more direct supervisors in each county, he also wants to ensure that regional management is accessible.

"We're not going on the assumption that if a regional administrator is in the central county, all the regional associates will be housed there too," he said. "We may have three or four associates in counties across the region."

Emberton said the proposal should be finalized by June 16, as planned.

"We are working within that timeframe, but we can be accommodating to new concepts. We won't rush the process."

## **Employees Recognized for Blood Donation**

The Central Kentucky Blood Center has recognized the donations of CHFS staff who took time recently to give blood.

"I would like to thank you for taking the time to host the successful blood drive at the Cabinet for Health and Family Services," wrote Lora Vliet, donor recruitment specialist in a letter to the Cabinet. "Due to your commitment to the public through the blood program, you have helped

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save lives in your local and regional community.”

During the drive the CKBC registered 57 donors and collected from 49, surpassing its goal for the drive.

Vliet said up to 147 patients will benefit from the units of blood that were donated during the blood drive. She extended thanks to all those who participated in the blood drive, which will benefit community hospitals.

### **Eating Disorders: Not Just a Teenage Phase**

*By Cindy Sullivan M.S., R.D., L.D., D.P.H.,  
Nutrition Services Branch*

Eating disorders affect an estimated 7 million women and 1 million men and have the highest mortality rate of all psychological diseases.

Eating disorders strike individuals of all ages, races and socio-economic levels. The most common eating disorders are anorexia nervosa, bulimia nervosa and compulsive overeating. Eating disorders tend to appear at an early age, usually during the preteen or teen years (41 percent of high school students suffer from eating disorders), and may be triggered by a life-altering event such as a relationship breakup, being teased about one's weight or the loss of a friend or family member.

Eating disorders also occur frequently among athletes, especially those who compete in sports that require strict weight maintenance or focus on body image, such as wrestling and gymnastics.

Whatever the cause, eating disorders are serious, potentially life-threatening health risks. Bona fide eating disorders shouldn't be ignored or waved off as a phase that a teen or young adult will outgrow. The most successful treatment for eating disorders involves psychological or psychiatric therapy and dietary intervention. In

the most serious cases, inpatient treatment is required.

Anorexia nervosa is distinguished by self-starvation and refusal to consume food adequate to maintain normal body weight. Sufferers often develop an irrational fear of being or becoming fat and tend to have poor self-esteem and an unrealistic self image. Many also suffer from depression and avoid social and family interaction.

Common characteristics of the disorder also include food rituals, preoccupation with one's weight and food avoidance, cessation of or irregular menstrual cycles, compulsive exercising, hair loss, sensitivity to cold, poor concentration and denial of any unusual eating behaviors.

In serious cases, lanugo, light, peach fuzz-like hair, appears on the face and forearms as a result of inadequate protein in the diet. Anorexics quickly develop iron deficiency, decreased heart rate, a depressed immune system and dehydration. Low blood potassium causes irregular heartbeat and is the most common cause of death from anorexia.

Bulimia nervosa involves binge eating and purging by self-induced vomiting, abuse of laxatives or diuretics or fasting as a way to lose weight and avoid weight gain.

Binging and purging are usually done secretly. Bulimics often suffer depression and low self-esteem, compulsively seek approval from others, realize they have a problem and, as a result, feel shame and guilt and withdraw from social interactions.

People suffering from bulimia tend to be normal weight or slightly heavier. Repeated bingeing and purging often leads to ulcers, stomach ruptures, tears in the esophagus, and potentially fatal heart, kidney or liver disease.

Compulsive overeating is characterized by eating in response to emotional triggers. Individuals who compulsively overeat use food as a coping mechanism, much like alcoholics and drug addicts. Individuals with this disorder usually have low self-esteem and poor coping skills, suffer from depression, feel ashamed and guilty about their eating behaviors and often have a difficult time setting personal boundaries.

Many compulsive overeaters have tried and failed to lose weight by dieting and sometimes have tried drastic weight-loss methods such as gastric stapling or having their jaws wired shut. Compulsive overeaters tend to eat in secret, have a preoccupation with food, realize they have a problem and feel a lack of control. They are more likely to suffer from chronic diseases such as diabetes, heart disease and hypertension.

If you or someone you know is suffering from an eating disorder, help is available. The following resources offer treatment and referrals for those with eating disorders and families and others seeking help for loved ones suffering eating disorders:

- Kentucky Center for Eating and Weight Disorders (859) 219-8953, [www.kcewd.com](http://www.kcewd.com)
- Ridge Behavioral Health Systems (800) 753-4673
- Integrative Psychiatry (502) 327-7701
- Saint Joseph Behavioral Medicine Network (800) 455-5579

### Focus on Wellness

*The CHFS Wellness Committee has put together several articles about eating healthy in recognition of March as National Nutrition Month. The weekly articles will focus on a food group and offer helpful hints about how to incorporate healthier foods into your diet. This week, the committee toasts good health with a few words on whole grains.*

### Don't Go Against the Grain

*By Willa Thomas, Division of Aging Services*

Whole-grain foods gained a new level of respect when MyPyramid ([www.mypyramid.gov](http://www.mypyramid.gov)) and the new Dietary Guidelines were released. Whole grains have been linked to protecting people from numerous chronic diseases, including cardiovascular disease, cancer and diabetes.

The recommendation is to eat more whole-grain foods by substituting whole-grain foods for refined grains. Whole grains contain the entire grain kernel – the bran, germ and endosperm. Vitamins, minerals, fiber, phytoestrogens, lignans and antioxidants are naturally found in whole grains.

Refining grains removes the bran and the germ along with many of the nutrients and creates a finer textured product. Then, if the refined product is enriched, only the B vitamins and iron that were lost in the refining are added back.

It's easy to include more whole grains in your diet. Start the day with a whole-grain cereal, either hot or cold. Use whole-grain breads for lunchtime sandwiches. Experiment at dinner with brown rice or bulgur. Or consider trying whole-wheat pasta, which is increasingly available.

Here are a few simple rules to follow when looking for whole-grain products.

- The *first* item of the ingredient list should be whole-grain (not enriched): brown rice, whole-grain corn, whole oats, whole wheat, wild rice, bulgur.
- Use the Nutrition Fact labels to identify product foods with a higher percent Daily Value of fiber. The percentage of fiber is a clue to identifying whole grains.

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- Brown bread is not necessary whole-grain. Color can be added. Be sure to check the ingredient label.
- Multi-grain, bran, 100 percent wheat, stone-ground, and cracked wheat do not necessarily indicate a whole-grain food. Again, make sure you check the label.

### Wellness Ambassador: Steve Davis

**Name: Steve Davis**

**Age range: 35-44**

**Deputy Inspector General**

**Married, family includes several adopted and special needs cats and dogs**

**Health objective: Lose weight, increase physical activity level, modify diet by replacing unhealthy excess with nutritious moderation**

Steve Davis already enjoys all the basic elements of a healthy lifestyle – a diet of primarily Mediterranean and vegetarian fare, exercise and regular medical check-ups. Still, he admits to having developed some bad habits over the years that tend to render moot some of those good habits.



Steve Davis already enjoys many of the basic elements of a healthy lifestyle. He regularly eats Mediterranean fare as part of a “flexitarian” or part-time vegetarian diet featuring lots of fruits and vegetables and some lean meat, exercises and gets regular medical check-ups. Still, he admits to having developed some bad habits over the years that tend to render moot some of those good habits.

Ultimately, he hopes to lose about one-third of his current body weight, increase his level of physical activity and follow a heart healthy diet. He also hopes these important lifestyle changes

will help lower his cholesterol level, stabilize his blood pressure and improve his overall fitness and physical features.

“My unhealthy behaviors have taken a toll on my physical appearance and conditioning,” he said. “Gone are the high cheekbones, narrow jaw line and elastic skin.”

But don’t think Davis’ health objectives are simply a matter of vanity. While his motivation for signing on as a Wellness Ambassador was, in part, to “look good and fit into my clothing,” he said, “more importantly, I want to address and control the negative cholesterol genes that failed to skip my generation. I believe a healthy appearance reflects self-discipline and has an impact on overall mental, physical and emotional well-being.”

Davis has always enjoyed being active and he plans to wisely use his free time to significantly raise his level of physical activity. He said he is undertaking this health improvement campaign in earnest after having “reached rock bottom and continuing to burrow.”

He said he thrives on challenge and expects being a Wellness Ambassador to be a fun and exciting venture. Stress and temptation are among the barriers Davis identified as potential stumbling blocks.

“I think the motto ‘coming up short or coming up smaller’ will help keep the pressure off of the experience,” he said. “And, during this experience, no cakes, candies or cookies, please.”

### Employee News in Brief

#### Walking Track Work Suspended

The painting and ceiling replacement project for the CHR walking track has been suspended without having been completed. The ceiling grid work was more cumbersome than expected and now workers have to begin working on

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Derby. As a result, the remainder of the project (west end) will not be completed until a later date.

### Take the CHFS Web Site User Satisfaction Survey

CHFS employees are encouraged to participate in an online Web Site User Satisfaction Survey to help us assess the Web site's effectiveness as a communication and information resource.

The survey is posted at <http://chfs.ky.gov/chfs/survey/SurveyPage.aspx> and takes about five minutes to complete. Responses will help identify Web site strengths and weaknesses and provide valuable user feedback to guide continuous quality improvement.

### CHFS Health Tip of the Week: Evaluate Your Child's Safety Seat

By Anne Parr, R.N.

Motor vehicle crashes are the leading cause of death for children younger than 14. But many of those deaths could be prevented if children were properly restrained. In a car crash at just 25 miles per hour, an unrestrained child can slam into a dashboard or windshield at a force equal to a fall from a three-story building.

Follow these tips to make sure your children are strapped into your vehicle properly:

- A child seat should be rear-facing until the child is at least 1 year old *and* weighs 20 pounds.
- In rear-facing seats, the harness straps should be in the lowest slot.
- In forward-facing seats, the harness straps should be in the highest slot.
- The harness retainer clip should be at armpit level.
- No more than one finger should fit between the child's shoulder and the harness strap.

- Booster seats are intended to lift the child up from the vehicle seat to improve the fit of the adult lap and shoulder seatbelt. The lap portion of the belt should fit low on the hips or high on the thighs and the shoulder portion of the belt should be snug across the collarbone. An improper fit of the adult safety belt can cause the lap belt to ride up over the stomach and the shoulder belt to cut across the neck, potentially exposing the child to serious abdominal or neck injury.
- The child safety seat should not move more than one inch side-to-side or back-and-forth at the base once it is secured in the car.
- Seat belts are designed for people who are at least 4 feet, 5 inches tall and weigh 80 pounds. Children less than these parameters should be in a child safety seat.
- If child safety seats are installed correctly, they are 71 percent effective in reducing infant deaths, 54 percent effective in reducing toddler deaths, and 67 percent effective in reducing the need for hospitalization. (Source: NHTSA)
- If your child safety seat has been involved in a crash, replace the seat.

### Employee Enrichment

By Anya Armes Weber

*Employee Enrichment is a weekly feature for CHFS staff. These tips for making work better focus on team building, customer service and personal development.*



American Heart Month is coming to an end, but making time for physical activity should be a priority year-round. The American Heart Association has several suggestions for fitting in exercise at work, particularly if you are deskbound most of the day.

- Brainstorm project ideas with a co-worker while taking a walk. Use lunches or break times to walk around your building.

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- Walk down the hall to speak with someone rather than using the telephone or e-mail.
- Take the stairs instead of the elevator. Or compromise by getting off one or two floors early and taking the stairs the rest of the way.
- Schedule exercise time on your business calendar and treat it as any other important appointment.
- Stand while talking on the telephone to increase your circulation and ease your back.
- Park your vehicle farther from your building.

Look for more healthy heart tips at

[www.americanheart.org](http://www.americanheart.org).