

From Our Offices



Summers are fun in Wilmington, especially in our HOME CARE office. The Wilmington office is providing activities during the "Summer Fun Fest" for our young consumers. Behavioral Technician

Terry Cheeseman, assisted Clinical Supervisor **Kam Dillon** and Clinical Specialist **Karen Gertz** with developing the festival of events. Ms. Cheeseman's experience working with children and young adults includes the development and implementation of educational programs in school and church settings.

Special activities have been scheduled for June 24 through Aug. 7. The program has an exciting theme each week, including fire prevention, summer fun, sea life, dental health, and beach week. The activities are centered around the theme for the week while providing opportunities for clients to work on individual goals.

The first week of events included a visit from the local fire department, which allowed clients to learn more about fire safety and prevention. The children had the opportunity to interact with the firemen, explore the fire trucks, and even wear firefighter suits and equipment. The second week of events focused on sea life and included a visit to the local aquarium to explore sea creatures. The weeks ahead also will be full of activities and fun.

The Wilmington staff expresses its appreciation for Ms. Cheeseman's hard work and dedication, allowing the "Summer Fun Fest" to be a great success. All of us appreciate the creativity shown here and by Technicians and Supervisors throughout the state in developing activities to fill the long summer days with learning and working on goals in a relaxed, fun-filled environment.

Anniversaries

This month we celebrate anniversaries for quite a number of our Behavioral Technicians. **Dionne Gaither** of Statesville and **Wendell Hardie** of Whiteville have each provided outstanding service for eight years. **Shenita Bridges** of Statesville has been with us seven years, **Jackie Wilson** of Charlotte for six, and **Roma Powell** of Lenoir and **Brenda Williams** of Statesville, five years. Quite a number of you have completed four years: **Carol Proctor** of Tarboro; **Jennie Bowen**, **Cathy Cruz**, and **Petra Gary** of Forest City; **Zilphia Collier** of Whiteville; **Mary Graham** of Wilmington; **Thesia Haliam**, **Wayne Harwell**, and **Ray-Shell Thrasher** of Statesville; and **Lisa Overrein** of Boone. We appreciate each of you and the work you do for our consumers.

Management Corporation

News from the Mental Health Division

Employee Spotlight

Our Employee Spotlight this month focuses on **Robert Lang**, better known as "Bob." Bob graduated from Knox College in Illinois with a BA in Economics and Business Administration and has been with HOME CARE since March of 2006. He is married to Ginny (who also works for HOME CARE), has two children and two grandchildren.

Bob is in high demand and usually has all the hours he can manage. He presently has four clients, under several different Supervisors. The great thing about Bob is that he has the inherent personality and ability to work with different populations. He always seems to be the "perfect fit," no matter the client population. He has worked with adults and children on the mental health side and with adults and children on the DD side. His warm and laid-back style contributes considerably to his success as a Behavioral Technician here at HOME CARE. He is extremely dependable, flexible, and organized, as well as fun to be around; you will usually find him kidding about something.

His supervisors have noticed tremendous improvement with the clients assigned to Bob. He understands that clients need to take as much responsibility in their treatment as possible, and he provides the right combination of support and direction without enabling dependence.

When getting permission from Bob to "put him in the spotlight," he initially declined, feeling others would be a better option and even suggesting other co-workers. He stated "I do the best I can with what I have. It is a challenge...if you want a challenge, you got it. There is never a dull moment...I'm never bored."

With this perspective and his personal attributes, one can see why Bob is deserving of the spotlight this month. Thanks for all you do, Bob. Keep up the awesome work!

Client Spotlight

Job Torres came to HOME CARE Management Corp for Early Intervention services in October of 2006. He was nearly one year old and was having difficulty with motor skills. Assessments indicated that his motor development was at about the 6 1/2 month level and he was slightly delayed in his language skills. Job was able to sit independently, but was not yet crawling or standing on his own. CBRS (one-on-one Early Intervention) and physical therapy began and assisted him with strengthening his motor skills. It was not long before Job was crawling, pulling up to stand, and eventually cruising. It took a little longer for him to walk independently, and finally, in May of 2007, Job started to take steps on his own. His mother and service providers were so pleased to see him achieve this major developmental milestone.

While helping Job with his motor development, we were also working on his language skills. In the beginning he was very quiet and would make just a few sounds. He started to babble more as the months went by, but still did not say words. Over time and with the help of his family, a speech therapist, and CBRS, Job began to talk more. He started to babble all the time and began to say some



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Reactive Attachment Disorder

Some of us working in the Mental Health field work with children who have been diagnosed with Reactive Attachment Disorder (RAD). However, other children may not have been diagnosed with RAD because it is relatively new and somewhat controversial. Also, it is often misdiagnosed as Attention Deficit Disorder or Oppositional Defiant Disorder. However, traditional therapy and medications have not been successful in treating the symptoms of RAD.

RAD is found in children who did not form a healthy emotional bond with their primary caregiver and whose basic needs were not met in the first few years of life. They are often DSS involved because of the neglect and abuse they endured. Substance abuse is often a factor also, because their primary caregiver may have been too incapacitated to provide them with basic physical and emotional needs. The many causes of RAD contribute to the difficulties in diagnosis.

Healthy children learn to trust and love through their contact with the primary caregiver. Their needs are met by a parent or other individual who is there to constantly comfort and care for them. RAD children never formed this bond and have learned to see adults as people that cannot be trusted. They do not form consciences and lack empathy for others. As a result, these children have difficulty with forming normal relationships with others.

Symptoms of RAD include: developmental lags, impulsive behavior, destructive behavior to self and others, cruelty to animals, appearing superficially charming, indiscriminately bonding with others, lying, poor peer relationships, failure to hug or touch, hoarding or gorging on food, abnormal speech patterns, demanding, preoccupation with blood and gore, frequent tantrums and rage. If you suspect that a child may have RAD, seek an evaluation by a professional with experience in diagnosing and treating the disorder.

There are many schools of thought when it comes to treatment of RAD, with many being controversial. The more controversial methods are sometimes called re-parenting, re-birthing, or holding treatment, and they often involve physical restraint. Most professionals have denounced those practices that involve binding, holding, and intentionally causing rage in children. HEMOCARE personnel are not permitted to engage in any of these techniques. Traditional therapy usually does not work, because children with RAD often lie and manipulate. In group therapy, they tend to not participate. Many professionals utilize play therapy to help the child express issues related to their neglect and/or abuse. The most important thing is to make sure the child is safe from further harm.

Whatever the means, the purpose is to help the child develop trust and build loving relationships with their caregiver.

As Mental Health professionals, we need to assist our consumers and families with accessing the help they need to meet their individual needs. Several books have been written and some documentaries featuring children with RAD are available. If you are assigned to work with a child who has been diagnosed with RAD, educate yourself and work closely with your Clinical Supervisor. This will enable you to be as helpful as possible.

Opportunities For Learning

- **When Disaster Strikes**, Wilmington, July 23, 5-7 p.m.
- **How Positive Reinforcement Influences Behaviors**, Tarboro, July 24, 3 p.m.
- **Not Just Hanging Out: Therapeutic Interventions and Building Skills**, Statesville, August 2, 10 a.m.-12 p.m.
- **Effective Communication**, Tarboro, August 7, 3 p.m.
- **Linking Clients with Community Resources**, Tarboro, August 8, 10 a.m.
- **Non-Verbal Communication**, The Pines, Sparta, August 12, 3-5 p.m.
- **How to Advocate for your Client or Child**, Lenoir, August 12, 6-8 p.m.
- **Mental Illness 101**, Charlotte, August 27, 2-4 p.m.
- **Serving Clients in Natural Environments**, Boone, September 9, 12-2 p.m.
- **Signs of a Stroke**, Tarboro, September 9, 3-4 p.m.
- **What is Quality Healthcare?**, Tarboro, September 11, 3 p.m.

Please contact your supervisor for more information on these valuable training sessions and additional opportunities for you to obtain required CS training as well as for required re-certification trainings.

We want your feedback

We encourage anyone with questions about or issues with our service to contact HEMOCARE Management Corporation CEO Rankin Whittington at 800-223-2841, rankinwhittington@homecaremgmt.org, or Sara Nolan at 800-718-4599, saragrodenolan@homecaremgmt.org

Correction: Last month's article on Diagnosis contained a typographical error. The middle sentence of the third paragraph should have read, "This is a way to distinguish between life-long, deeply ingrained, characteristic traits of an individual (Axis II) and illnesses which may be of a more finite duration (Axis I)."

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words. Every week his vocabulary grew and now he is using two- and three-word sentences to communicate.

Job continues to make progress with his motor and language development and now we are working more on preschool readiness skills. We expect that Job's success will continue as he enters into the pre-K years and beyond.

PaySchedule

Services Delivered

July 1-15

July 16-31

Checks Mailed

July 21

August 6

Documentation

Documentation for ALL services except Nursing-based PCS, CAP/DA and CAP/C is due the day after you have finished providing services for the week (Sunday-Saturday), and in no case later than the following Monday. CAP/DA, CAP/C and Personal Care must be postmarked or delivered the 16th for services delivered the 1st through the 15th and the 1st for the 16th through the end of the month.