

Businesses make contacts, contracts at opportunity day

By Nichole Davis
Sentinel-Voice

Kelvin Sims, an operations manager with Gleem Credit Services, flew in town from St. Louis, Mo. to attend the second annual Minority Business Opportunity Day sponsored by the Nevada Minority Purchasing Council recently.

"We don't have many clients out here," Sims said. "We just want to see what's out here."

"I'm just hoping to meet a few people I'll be able to do business with," he said.

Sims was just one of the more than 300 visitors to the free, all-day business fair. Two workshops and \$25 a plate luncheon were held in conjunction with the event, which organizers billed as the largest gathering of buyers looking to contract with minority vendors in the state.

Caesars Palace, the city of Las Vegas and Coca Cola were just three of the about 50 buyers who lined the temporary walls of the Stardust Hotel Convention Hall Sept. 27th.

Gino Gugino, a buyer for

Caesars Palace, handed out gold-foil wrapped chocolate coins as he talked with prospective vendors.

Because larger casinos, like Caesar's, try to accommodate guests' every need while they vacation "we buy everything," Gugino said. "We buy sheets, blankets, pillow cases, carpets, blinds...."

"I can't think of a single thing that we haven't bought at one time or another," he said.

Larger buyers use events, like the opportunity day, to spread good will and reach out to future bidders, he said. "It's definitely a good way to do business."

Small business owner Earl Douglas, who operates a business development company, agreed. Douglas, who has attended for the last two years, uses the event to advertise his business by word of mouth.

"You have to advertise; otherwise, people won't know you're here," Douglas said.

Event organizer and purchasing council executive director Dianne Fontes said,

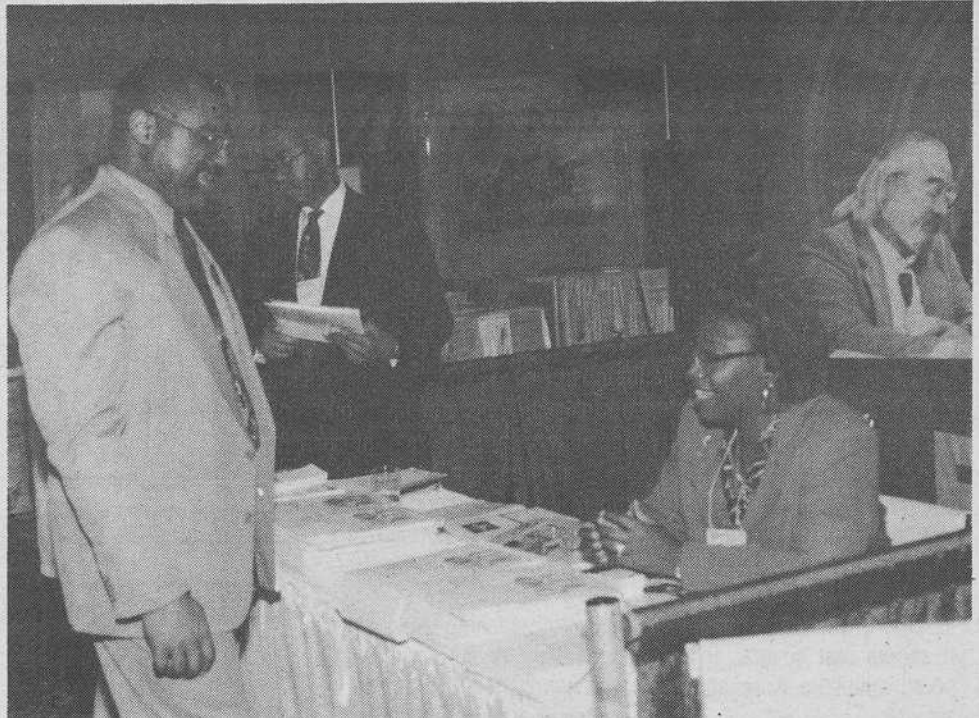
"that's the point that minority business have the opportunity to meet with business decision makers, and they are here today."

"We wanted to give Nevadans an opportunity they would otherwise never get to meet these types of people," she said. And "each year it's growing in the kinds and numbers" of business who participate.

Business and vendors weren't the only ones to take advantage of the event. The U.S. Small Business Administration handed out awards to local business leaders during the luncheon.

Richard Doty, the owner of Quest Intelligence Bureau, was named the small business person of the year. Janis Stevenson, management consultant for the Nevada Small Business Development Center, George Salton, director of contract operations at Nellis Air Force Base and Roger Tokarz, deputy program director of the procurement outreach program, were given special recognition.

For more information about the council, call 678-7998.



Marilyn Seals-Martin, right, of the Federal Deposit Insurance Corporation shares a few laughs with Edward Brown of the US Small Business Administration during Friday's minority business opportunity fair held at the Stardust Hotel.
Photo by Savoy/LVS-Voice

Minorities rarely pre-plan death decisions

Special to the Sentinel-Voice

New research indicates race, culture and social background have a significant impact upon how people plan or don't plan for end-of-life decisions.

Experts say most Americans never get around to formally writing down instructions telling doctors and family members what to do at the end of their lives, in case they're incapacitated and can't say for themselves. But researchers have discovered that certain ethnic groups seem more inclined than others to plan and prepare for these contingencies.

There are a variety of decisions that people can make regarding how they would like the end of life to proceed by way of a living will, a document which formally lays out their wishes for family and doctors, said University of South Carolina researcher Paul Eliezer.

"Some (people) would like to go relatively peacefully - for example, without a lot of aggressive care. Others would like more aggressive care - for example, would want everything done to prolong their life, regardless of what the situation might be," Eliezer said.

Only one-fourth of all Americans leave living wills, and recent research suggests cultural differences may play a strong role in who decides to put

their end-of-life wishes on paper.

Eliezer and the rest of his research team studied nearly 1,200 older patients from around the country and divided them into groups based on their ethnicity.

They found "significant differences across ethnic groups in terms of both the percent who had health-care wishes recorded, and the type of health-care wishes they had," said co-researcher Carlton Hornig.

More than 28 percent of whites, for example, had appointed a durable power of attorney, researchers said.

By far, they were the most likely to give someone the legal right to make final medical decisions, said National Public Radio reporter Wendy Schmeltzer.

"Only two percent of Asians did that, but Asians were the ones most likely to give their physicians end-of-life instructions," Schmeltzer said.

"Asians may be reluctant to sign legal documents, but they place great honor on the spoken word. Ninety-five percent of them relied on their doctors to put their wishes on medical records," she said.

Asians were also more likely to choose a surrogate decision maker, experts said, someone - usually a son - whose wishes were to be followed if the elder

were unable to express them.

"African Americans and Hispanics were less likely to designate a surrogate, but when they did, it was usually a daughter, reflecting the importance women play in these group's family and social life," Schmeltzer said.

On the other hand, "African Americans and Hispanics were more likely to request more aggressive care than Asians or Caucasians," Eliezer said.

Religion and racism may play a large role in blacks' desire for more aggressive healthcare, he said.

"For example, in the South, many of our African-American participants were subjected to the difficulties and horrors surrounding segregation in an oppressive society," Eliezer said. "And many of them may feel that if they don't request that everything's going to be done, that somehow something might be short-changed."

Medical schools are increasingly incorporating medical ethics and end-of-life decision making into the curriculum to address these kinds of needs, Schmeltzer said.

But fewer schools have attempted to address cultural differences, said Joseph Carese of Johns Hopkins Institute of Bio Ethics.

"These findings point to the need (for such programs)," Carese said. "It reinforces the view that we live in a pluralistic society and that how we think about big issues, like life and death, and health and illness, not surprisingly, can vary with our cultural and religious and social background."

Information from the National Public Radio broadcast was used in this report.



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